

HOUSE BILL 1315

J5, J1

5lr2486

By: **Delegates Guzzone, Pena–Melnyk, Barnes, Crutchfield, Cullison, Embry, Fair, Forbes, Harris, Hill, Kaiser, R. Lewis, Lopez, Martinez, Palakovich Carr, Pruski, Ruff, Schindler, Smith, Stewart, Terrasa, Williams, and Woorman**

Introduced and read first time: February 7, 2025

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance – Coverage for Child Wellness Services – Immunizations**

3 FOR the purpose of altering the vaccinations included in the minimum package of child
4 wellness services for which certain health insurers and nonprofit health service
5 plans are required to provide coverage; and generally relating to health insurance
6 coverage for child wellness services.

7 BY repealing and reenacting, without amendments,

8 Article – Insurance

9 Section 15–817(a), (b), and (f)

10 Annotated Code of Maryland

11 (2017 Replacement Volume and 2024 Supplement)

12 BY repealing and reenacting, with amendments,

13 Article – Insurance

14 Section 15–817(c)

15 Annotated Code of Maryland

16 (2017 Replacement Volume and 2024 Supplement)

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

18 That the Laws of Maryland read as follows:

19 **Article – Insurance**

20 15–817.

21 (a) In this section, “child wellness services” means preventive activities designed
22 to protect children from morbidity and mortality and promote child development.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (b) This section applies to each individual hospital or major medical insurance
2 policy, group or blanket health insurance policy, and nonprofit health service plan that:

- 3 (1) is delivered or issued for delivery in the State;
- 4 (2) is written on an expense-incurred basis; and
- 5 (3) provides coverage for a family member of the insured.

6 (c) (1) A policy or plan subject to this section shall include under the family
7 member coverage a minimum package of child wellness services that are consistent with:

- 8 (i) public health policy;
- 9 (ii) professional standards; and
- 10 (iii) scientific evidence of effectiveness.

11 (2) The minimum package of child wellness services shall cover at least:

12 (i) all visits for and costs of childhood and adolescent
13 immunizations:

14 1. recommended by the Advisory Committee on
15 Immunization Practices of the Centers for Disease Control and Prevention; **OR**

16 2. **RECOMMENDED BY THE AMERICAN ACADEMY OF**
17 **PEDIATRICS IN ITS CHILD AND ADOLESCENT IMMUNIZATION SCHEDULE BY AGE;**

18 (ii) visits for the collection of adequate samples, the first of which is
19 to be collected before 2 weeks of age, for hereditary and metabolic newborn screening and
20 follow-up between birth and 4 weeks of age;

21 (iii) universal hearing screening of newborns provided by a hospital
22 before discharge;

23 (iv) all visits for and costs of age-appropriate screening tests for
24 tuberculosis, anemia, lead toxicity, hearing, and vision as determined by the American
25 Academy of Pediatrics;

26 (v) all visits for obesity evaluation and management;

27 (vi) all visits for and costs of developmental screening as
28 recommended by the American Academy of Pediatrics;

1 (vii) a physical examination, developmental assessment, and
2 parental anticipatory guidance services at each of the visits required under items (i), (ii),
3 (iv), (v), and (vi) of this paragraph; and

4 (viii) any laboratory tests considered necessary by the physician as
5 indicated by the services provided under items (i), (ii), (iv), (v), (vi), or (vii) of this paragraph.

6 (f) (1) A policy or plan subject to this section may not impose a deductible on
7 the coverage required under this section.

8 (2) Each health insurance policy and certificate shall contain a notice of the
9 prohibition established by paragraph (1) of this subsection in a form approved by the
10 Commissioner.

11 SECTION 2. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall
12 apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the
13 State on or after January 1, 2026.

14 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
15 January 1, 2026.