

§2325-C. Coverage for prostate cancer screening

1. Definition. As used in this section, "services for the early detection of prostate cancer" means the following procedures provided to a man for the purpose of early detection of prostate cancer:

A. A digital rectal examination; and [PL 1997, c. 754, §1 (NEW).]

B. A prostate-specific antigen test. [PL 1997, c. 754, §1 (NEW).]
[PL 1997, c. 754, §1 (NEW).]

2. Required coverage for prostate cancer screening. All individual and group nonprofit hospital and medical services plan contracts must provide coverage for services for the early detection of prostate cancer. The contracts must reimburse for services for the early detection of prostate cancer, if recommended by a physician, at least once a year for men 50 years of age or older until a man reaches the age of 72.

[PL 1997, c. 754, §1 (NEW).]

3. Application. The requirements of this section apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after September 1, 1998. For purposes of this section, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

[PL 1997, c. 754, §1 (NEW).]

SECTION HISTORY

PL 1997, c. 754, §1 (NEW).

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