

BERMUDA STATUTORY INSTRUMENT

SR&O 20/1971

**HEALTH INSURANCE (MATERNITY BENEFIT) REGULATIONS
1971**

*[made under section 40 of the Health Insurance Act 1970 [title 18 item 9]
and brought into operation on 1 April 1971]*

ARRANGEMENT OF REGULATIONS

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[NB Formerly the Hospital Insurance (Maternity Benefit) Regulations 1971. Title amended, and references to "hospital insurance", "Hospital Insurance Fund" and "Commission" substituted by "health insurance", "Health Insurance Fund" and "Council" by 2004:22 s.19 & Sch para 2 effective 1 January 2006. These amendments are not individually noted]

Interpretation

- 1 In these Regulations —

"the Act" means the Health Insurance Act 1970 [title 18 item 9];

"maternity treatment" means treatment in a hospital arising out of pregnancy.

[Regulation 1 amended by 2004:22 effective 1 January 2006]

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Construction of contracts of health insurance

2 Where a contract of health insurance provides standard hospital benefit, such contract shall, in relation to any benefit payable thereunder in respect of expenses for maternity treatment, be construed subject to the following provisions of these Regulations.

[Regulation 2 amended by 2004:22 effective 1 January 2006]

Suspension of cover for maternity treatment

3 (1) Benefit shall not be payable in respect of expenses for maternity treatment incurred by an insured person within ten months after the effective date of the contract.

(2) *[omitted as transitional]*

Continuation of cover for maternity treatment

4 (1) In relation to contracts of health insurance effected under Part III of the Act, benefit shall continue to be payable in respect of expenses for maternity treatment incurred by an insured person within ten months after the date on which the contract otherwise ceases to have effect in relation to that person.

(2) No premium shall be payable in respect of the continuation of cover under paragraph (1).

[Regulation 4 amended by 2004:22 effective 1 January 2006]

Contracts of insurance under Part IV

5 In relation to contracts of health insurance effected under Part IV of the Act, benefit shall continue to be payable in respect of expenses for maternity treatment incurred by an insured person for ten months after the date on which the contract of insurance ceases to have effect if the contract had subsisted for a period of not less than twelve months prior to its cessation.

[Regulation 5 amended by 2004:22 effective 1 January 2006]

[Amended by:

BR 22/1984

2004 : 22]