

FIRST REGULAR SESSION

HOUSE BILL NO. 426

96TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE SIFTON.

0536L.011

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To repeal section 376.1210, RSMo, and to enact in lieu thereof one new section relating to maternity health insurance coverage.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 376.1210, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 376.1210, to read as follows:

376.1210. 1. Each entity offering individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service or indemnity type contracts issued by a nonprofit corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law, and all managed health care delivery entities of any type or description, that are delivered, issued for delivery, continued or renewed in this state on or after January 1, 1997, and providing for maternity benefits, shall provide coverage for a minimum of forty-eight hours of inpatient care following a vaginal delivery and a minimum of ninety-six hours of inpatient care following a cesarean section for a mother and her newly born child in a hospital as defined in section 197.020 or any other health care facility licensed to provide obstetrical care under the provisions of chapter 197.

2. Notwithstanding the provisions of subsection 1 of this section, any entity offering individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service or indemnity type contracts issued by a nonprofit corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law, and all managed health care delivery entities of any type or description that are delivered, issued for delivery,

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 continued or renewed in this state on or after January 1, 1997, and providing for maternity
19 benefits, may authorize a shorter length of hospital stay for services related to maternity and
20 newborn care if:

21 (1) A shorter hospital stay meets with the approval of the attending physician after
22 consulting with the mother. The physician's approval to discharge shall be made in accordance
23 with the most current version of the "Guidelines for Perinatal Care" prepared by the American
24 Academy of Pediatrics and the American College of Obstetricians and Gynecologists, or similar
25 guidelines prepared by another nationally recognized medical organization; and

26 (2) The entity providing the individual or group health insurance policy provides
27 coverage for post-discharge care to the mother and her newborn.

28 3. Post-discharge care shall consist of a minimum of two visits at least one of which shall
29 be in the home, in accordance with accepted maternal and neonatal physical assessments, by a
30 registered professional nurse with experience in maternal and child health nursing or a physician.
31 The location and schedule of the post-discharge visits shall be determined by the attending
32 physician. Services provided by the registered professional nurse or physician shall include, but
33 not be limited to, physical assessment of the newborn and mother, parent education, assistance
34 and training in breast or bottle feeding, education and services for complete childhood
35 immunizations, the performance of any necessary and appropriate clinical tests and submission
36 of a metabolic specimen satisfactory to the state laboratory. Such services shall be in accordance
37 with the medical criteria outlined in the most current version of the "Guidelines for Perinatal
38 Care" prepared by the American Academy of Pediatrics and the American College of
39 Obstetricians and Gynecologists, or similar guidelines prepared by another nationally recognized
40 medical organization. Any abnormality, in the condition of the mother or the child, observed by
41 the nurse shall be reported to the attending physician as medically appropriate.

42 4. For the purposes of this section, "attending physician" shall include the attending
43 obstetrician, pediatrician, or other physician attending the mother or newly born child.

44 5. Each entity offering individual and group health insurance policies providing coverage
45 on an expense-incurred basis, individual and group service or indemnity type contracts issued
46 by a nonprofit corporation, individual and group service contracts issued by a health maintenance
47 organization, all self-insured group arrangements to the extent not preempted by federal law and
48 all managed health care delivery entities of any type or description shall provide notice to
49 policyholders, insured persons and participants regarding the coverage required by this section.
50 Such notice shall be in writing and prominently positioned in the policy, certificate of coverage
51 or summary plan description.

52 6. Such health care service shall not be subject to any greater deductible or co-payment
53 than other similar health care services provided by the policy, contract or plan.

54 7. No insurer may provide financial disincentives to, or deselect, terminate the services
55 of, require additional documentation from, require additional utilization review, or reduce
56 payments to, or otherwise penalize the attending physician in retaliation solely for ordering care
57 consistent with the provisions of this section.

58 8. **No insurer shall require any waiting period after the effective date of the policy**
59 **or plan before coverage under this section shall be available. Coverage under this section**
60 **shall be available immediately from the effective date of the plan or policy.**

61 9. The department of insurance, financial institutions and professional registration shall
62 adopt rules and regulations to implement and enforce the provisions of this section. No rule or
63 portion of a rule promulgated pursuant to this section shall become effective unless it has been
64 promulgated pursuant to the provisions of section 536.024.