

HOUSE

AMENDMENT NO. _____

Offered by

of

1 AMEND House Committee Substitute for Senate Substitute for Senate
2 Bill No. 749, Page 8, Section 376.1199, Line 97, by inserting
3 after all of said line the following:

4 "376.1210. 1. Each entity offering individual and group
5 health insurance policies providing coverage on an
6 expense-incurred basis, individual and group service or indemnity
7 type contracts issued by a nonprofit corporation, individual and
8 group service contracts issued by a health maintenance
9 organization, all self-insured group arrangements to the extent
10 not preempted by federal law, and all managed health care
11 delivery entities of any type or description, that are delivered,
12 issued for delivery, continued or renewed in this state on or
13 after January 1, 1997, and providing for maternity benefits,
14 shall provide coverage for a minimum of forty-eight hours of
15 inpatient care following a vaginal delivery and a minimum of
16 ninety-six hours of inpatient care following a cesarean section
17 for a mother and her newly born child in a hospital as defined in
18 section 197.020 or any other health care facility licensed to
19 provide obstetrical care under the provisions of chapter 197.

20 2. Notwithstanding the provisions of subsection 1 of this
21 section, any entity offering individual and group health
22 insurance policies providing coverage on an expense-incurred
23 basis, individual and group service or indemnity type contracts
24 issued by a nonprofit corporation, individual and group service
25 contracts issued by a health maintenance organization, all
26 self-insured group arrangements to the extent not preempted by
27 federal law, and all managed health care delivery entities of any
28 type or description that are delivered, issued for delivery,
29 continued or renewed in this state on or after January 1, 1997,

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1 and providing for maternity benefits, may authorize a shorter
2 length of hospital stay for services related to maternity and
3 newborn care if:

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

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

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

37 4. For the purposes of this section, "attending physician"

1 shall include the attending obstetrician, pediatrician, or other
2 physician attending the mother or newly born child.

3 5. Each entity offering individual and group health
4 insurance policies providing coverage on an expense-incurred
5 basis, individual and group service or indemnity type contracts
6 issued by a nonprofit corporation, individual and group service
7 contracts issued by a health maintenance organization, all
8 self-insured group arrangements to the extent not preempted by
9 federal law and all managed health care delivery entities of any
10 type or description shall provide notice to policyholders,
11 insured persons and participants regarding the coverage required
12 by this section. Such notice shall be in writing and prominently
13 positioned in the policy, certificate of coverage or summary plan
14 description.

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

18 7. No insurer may provide financial disincentives to, or
19 deselect, terminate the services of, require additional
20 documentation from, require additional utilization review, or
21 reduce payments to, or otherwise penalize the attending physician
22 in retaliation solely for ordering care consistent with the
23 provisions of this section.

24 8. No insurer shall require any waiting period after the
25 effective date of the policy or plan before coverage under this
26 section shall be available. Coverage under this section shall be
27 available immediately from the effective date of the plan or
28 policy.

29 9. The department of insurance, financial institutions and
30 professional registration shall adopt rules and regulations to
31 implement and enforce the provisions of this section. No rule or
32 portion of a rule promulgated pursuant to this section shall
33 become effective unless it has been promulgated pursuant to the
34 provisions of section 536.024."; and

35 Further amend said title, enacting clause and intersectional
36 references accordingly.