

FIRST REGULAR SESSION

SENATE BILL NO. 40

97TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SIFTON.

Pre-filed December 1, 2012, and ordered printed.

TERRY L. SPIELER, Secretary.

0240S.011

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Section A. Section 376.1210, RSMo, is repealed and one new section
2 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
2 policies providing coverage on an expense-incurred basis, individual and group
3 service or indemnity type contracts issued by a nonprofit corporation, individual
4 and group service contracts issued by a health maintenance organization, all
5 self-insured group arrangements to the extent not preempted by federal law, and
6 all managed health care delivery entities of any type or description, that are
7 delivered, issued for delivery, continued or renewed in this state on or after
8 January 1, 1997, and providing for maternity benefits, shall provide coverage for
9 a minimum of forty-eight hours of inpatient care following a vaginal delivery and
10 a minimum of ninety-six hours of inpatient care following a cesarean section for
11 a mother and her newly born child in a hospital as defined in section 197.020 or
12 any other health care facility licensed to provide obstetrical care under the
13 provisions of chapter 197.

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

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

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

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

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

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

52 5. Each entity offering individual and group health insurance policies
53 providing coverage on an expense-incurred basis, individual and group service or
54 indemnity type contracts issued by a nonprofit corporation, individual and group
55 service contracts issued by a health maintenance organization, all self-insured
56 group arrangements to the extent not preempted by federal law and all managed

57 health care delivery entities of any type or description shall provide notice to
58 policyholders, insured persons and participants regarding the coverage required
59 by this section. Such notice shall be in writing and prominently positioned in the
60 policy, certificate of coverage or summary plan description.

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

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

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

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

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