Unofficial Copy C3 1996 Regular Session 6lr2658

By: Delegate Donoghue Introduced and read first time: February 15, 1996 Assigned to: Economic Matters

A BILL ENTITLED

1 AN ACT concerning

2 Health Insurance - Mothers and Newborns - Minimum Length of Stay and Utilization 3 Review

4 FOR the purpose of requiring certain health insurers, nonprofit health service plans, and

- 5 health maintenance organizations to provide inpatient hospitalization coverage for
- 6 a mother and newborn child for a certain minimum length of time under certain
- 7 circumstances; providing a certain exception; prohibiting a health insurer, nonprofit
- 8 health service plan, and health maintenance organization from impairing the
- 9 participation of certain physicians in providing health care services under certain
- 10 circumstances; requiring private review agents and health maintenance
- 11 organizations to authorize a certain minimum length of inpatient hospitalization for
- 12 a mother and newborn child under certain circumstances; requiring a private review
- 13 agent or health maintenance organization to provide an appeal of a certain adverse
- 14 decision on an expedited basis under certain circumstances; specifying the manner
- 15 of the expedited appeal; defining a certain term; and generally relating to requiring
- 16 certain health insurers, nonprofit health service plans, and health maintenance
- 17 organizations to provide a certain minimum length of inpatient hospitalization for a
- 18 mother and newborn child and requiring private review agents and health
- 19 maintenance organizations to authorize a certain minimum length of inpatient
- 20 hospitalization for a mother and newborn child under certain circumstances.

21 BY adding to

- 22 Article 48A Insurance Code
- 23 Section 490FF
- 24 Annotated Code of Maryland
- 25 (1994 Replacement Volume and 1995 Supplement)

26 BY repealing and reenacting, with amendments,

- 27 Article Health General
- 28 Section 19-706(i) and 19-1305.4
- 29 Annotated Code of Maryland
- 30 (1990 Replacement Volume and 1995 Supplement)
- 31 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF

32 MARYLAND, That the Laws of Maryland read as follows:

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Article 48A - Insurance Code

2 490FF.

3 (A) IN THIS SECTION, "ATTENDING PHYSICIAN" MEANS AN OBSTETRICIAN,
4 PEDIATRICIAN, OR OTHER PHYSICIAN ATTENDING THE MOTHER OR NEWBORN
5 CHILD.

6 (B) AN INSURER OR NONPROFIT HEALTH SERVICE PLAN THAT PROVIDES
7 INPATIENT HOSPITALIZATION COVERAGE TO ANY GROUP OR INDIVIDUAL ON AN
8 EXPENSE-INCURRED BASIS UNDER A HEALTH INSURANCE CONTRACT OR POLICY
9 ISSUED OR DELIVERED IN THE STATE, INCLUDING A HEALTH MAINTENANCE
10 ORGANIZATION, SHALL PROVIDE COVERAGE FOR THE COST OF INPATIENT
11 HOSPITALIZATION SERVICES FOR A MOTHER AND NEWBORN CHILD FOR A
12 MINIMUM OF:

13 (1) 48 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING A14 VAGINAL DELIVERY; AND

15 (2) 96 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING A16 CESAREAN SECTION.

(C) AN INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH
 MAINTENANCE ORGANIZATION THAT PROVIDES COVERAGE FOR POST-DELIVERY
 CARE FOR A MOTHER AND NEWBORN CHILD IS NOT REQUIRED TO PROVIDE THE
 MINIMUM COVERAGE REQUIRED UNDER SUBSECTION (B) OF THIS SECTION UNLESS
 THE ATTENDING PHYSICIAN, CONSISTENT WITH THE CRITERIA OUTLINED IN THE
 MOST CURRENT VERSION OF THE "GUIDELINES FOR PERINATAL CARE" PREPARED
 BY THE AMERICAN ACADEMY OF PEDIATRICS AND THE AMERICAN COLLEGE OF
 OBSTETRICIANS AND GYNECOLOGISTS, DETERMINES THAT THE INPATIENT
 HOSPITALIZATION COVERAGE REQUIRED UNDER SUBSECTION (B) OF THIS SECTION
 IS NECESSARY.

(D) AN INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH
MAINTENANCE ORGANIZATION MAY NOT DENY, LIMIT, OR OTHERWISE IMPAIR THE
PARTICIPATION OF AN ATTENDING PHYSICIAN UNDER CONTRACT WITH THE
INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH MAINTENANCE
ORGANIZATION IN PROVIDING HEALTH CARE SERVICES TO ENROLLEES OR
INSUREDS FOR:

(1) ADVOCATING THE INTEREST OF A MOTHER AND NEWBORN CHILD
THROUGH THE INSURER'S, NONPROFIT HEALTH SERVICE PLAN'S OR HEALTH
MAINTENANCE ORGANIZATION'S UTILIZATION REVIEW OR APPEALS SYSTEM; OR

36 (2) THE PHYSICIAN'S INPATIENT HOSPITALIZATION OF MOTHERS AND37 NEWBORNS IN ACCORDANCE WITH THIS SECTION.

38 Article - Health - General

39 19-706.

40 (i) The provisions of Article 48A, §§ 490U, 490AA, 490CC, [and] 490DD, AND 41 490FF of the Code shall apply to health maintenance organizations. 1 19-1305.4.

2 (A) IN THIS SECTION, "ATTENDING PHYSICIAN" MEANS AN OBSTETRICIAN,
3 PEDIATRICIAN, OR OTHER PHYSICIAN ATTENDING THE MOTHER OR NEWBORN
4 CHILD.

5 [(a)] (B) Except as provided in [subsection (b)] SUBSECTIONS (C) AND(D) of 6 this section, the criteria and standards used by a private review agentor health 7 maintenance organization in performing utilization review of hospital services related to 8 maternity and newborn care, including length of stay, shall be in accordance with the 9 medical criteria outlined in the most current version of the "Guidelines for Perinatal 10 Care" prepared by the American Academy of Pediatrics and the American College of 11 Obstetricians and Gynecologists.

(C) SUBJECT TO THE PROVISIONS OF SUBSECTION (D) OF THIS SECTION, A
 PRIVATE REVIEW AGENT OR HEALTH MAINTENANCE ORGANIZATION PERFORMING
 UTILIZATION REVIEW OF HOSPITAL SERVICES RELATED TO MATERNITY AND
 NEWBORN CARE SHALL AUTHORIZE A MINIMUM COVERAGE OF:

16 (1) 48 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING A17 VAGINAL DELIVERY; AND

18 (2) 96 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING A19 CESAREAN SECTION.

[(b)] (D) A private review agent or health maintenance organization may
authorize a shorter length of hospital stay for services related to maternity and newborn
care REQUIRED UNDER SUBSECTION (C) OF THIS SECTION [provided the newborn
meets the criteria for medical stability in the "Guidelines for Perinatal Care" and] IF the
private review agent or health maintenance organization authorizes for the mother and
child an initial postpartum home visit which would include the collection of an adequate
sample for the hereditary and metabolic newborn screening, when indicated, UNLESS
THE ATTENDING PHYSICIAN, CONSISTENT WITH THE CRITERIA OUTLINED IN THE
MOST CURRENT VERSION OF THE "GUIDELINES FOR PERINATAL CARE",
DETERMINES THAT THE INPATIENT HOSPITALIZATION LENGTH OF STAY REQUIRED
UNDER SUBSECTION (C) OF THIS SECTION IS NECESSARY.

(E) (1) IF A PRIVATE REVIEW AGENT OR HEALTH MAINTENANCE
ORGANIZATION RENDERS AN ADVERSE DECISION AND THE ATTENDING PHYSICIAN
BELIEVES THAT THE DECISION WARRANTS AN IMMEDIATE APPEAL, THE
ATTENDING PHYSICIAN SHALL HAVE THE OPPORTUNITY TO APPEAL THE ADVERSE
DECISION BY TELEPHONE ON AN EXPEDITED BASIS.

36 (2) AN EXPEDITED APPEAL SHALL CONSIST OF AN IMMEDIATE AND
37 TIMELY REVIEW BETWEEN THE ATTENDING PHYSICIAN AND THE PRIVATE REVIEW
38 AGENT OR THE MEDICAL DIRECTOR OF THE HEALTH MAINTENANCE
39 ORGANIZATION OR A PHYSICIAN AUTHORIZED TO ACT ON BEHALF OF THE HEALTH
40 MAINTENANCE ORGANIZATION IN THE ABSENCE OF THE MEDICAL DIRECTOR.

41 (3) IF A DECISION REGARDING THE EXPEDITED APPEAL IS NOT
42 RENDERED IN SUFFICIENT TIME TO ALLOW THE MOTHER AND THE NEWBORN
43 CHILD THE BENEFITS UNDER SUBSECTION (C) OF THIS SECTION, THE PRIVATE

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1 REVIEW AGENT OR THE HEALTH MAINTENANCE ORGANIZATION MAY NOT RENDER 2 AN ADVERSE DECISION.

3 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect4 October 1, 1996.