
By: Senators Bromwell, Hoffman, Hollinger, Dorman, Blount, Currie, Miller, Sfikas, Collins, Ferguson, Madden, Stone, Kelley, Young, Forehand, Roesser, Pica, Astle, Hafer, Boozer, Haines, Derr, Green, Trotter, Della, and Van Hollen

Introduced and read first time: February 1, 1996

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 Health Insurance - Postpartum Mothers and Infants - Hospital Stays and Home Visits

3 FOR the purpose of requiring health insurers and health maintenance organizations to
4 provide inpatient hospitalization coverage for a mother and newborn for a certain
5 minimum length of time under certain circumstances; providing certain exceptions;
6 requiring certain home visits under certain circumstances; prohibiting certain
7 actions by health insurers, health maintenance organizations, and private review
8 agents; requiring health insurers and health maintenance organizations to provide
9 certain notice to certain individuals; requiring certain private review agents and
10 health maintenance organizations to authorize inpatient hospitalization coverage
11 for a mother and newborn for a certain minimum length of time under certain
12 circumstances; defining a certain term; and generally relating to the provision of
13 inpatient hospitalization coverage for a mother and newborn.

14 BY adding to

15 Article 48A - Insurance Code
16 Section 490FF
17 Annotated Code of Maryland
18 (1994 Replacement Volume and 1995 Supplement)

19 BY repealing and reenacting, with amendments,

20 Article - Health - General
21 Section 19-706(i) and 19-1305.4
22 Annotated Code of Maryland
23 (1990 Replacement Volume and 1995 Supplement)

24 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
25 MARYLAND, That the Laws of Maryland read as follows:

2

1 **Article 48A - Insurance Code**

2 490FF.

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

6 (B) AN INSURER OR NONPROFIT HEALTH SERVICE PLAN THAT PROVIDES
7 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS FOR ISSUANCE OR DELIVERY IN THE
8 STATE TO ANY GROUP OR INDIVIDUAL ON AN EXPENSE-INCURRED BASIS,
9 INCLUDING A HEALTH MAINTENANCE ORGANIZATION, SHALL PROVIDE COVERAGE
10 FOR A MINIMUM OF:

11 (1) 48 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING AN
12 UNCOMPLICATED VAGINAL DELIVERY; AND

13 (2) 96 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING AN
14 UNCOMPLICATED CESAREAN SECTION.

15 (C) (1) A MOTHER MAY AGREE TO A SHORTER LENGTH OF STAY THAN
16 THAT PROVIDED IN SUBSECTION (B) OF THIS SECTION IF SHE DECIDES, IN
17 CONSULTATION WITH HER ATTENDING PROVIDER, THAT LESS TIME IS NEEDED FOR
18 RECOVERY.

19 (2) FOR A MOTHER AND NEWBORN CHILD, WHO HAVE A HOSPITAL
20 STAY SHORTER IN LENGTH THAN THAT PROVIDED UNDER SUBSECTION (B) OF THIS
21 SECTION, THE INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH
22 MAINTENANCE ORGANIZATION SHALL PROVIDE COVERAGE FOR A MINIMUM OF 3
23 HOME VISITS:

24 (I) IN ACCORDANCE WITH GENERALLY ACCEPTED STANDARDS
25 OF NURSING PRACTICE FOR HOME CARE OF A MOTHER AND NEWBORN CHILD; AND

26 (II) BY A REGISTERED NURSE WITH AT LEAST 1 YEAR OF
27 EXPERIENCE IN MATERNAL AND CHILD HEALTH NURSING OR IN COMMUNITY
28 HEALTH NURSING WITH AN EMPHASIS ON MATERNAL AND CHILD HEALTH.

29 (3) THE SERVICES PROVIDED UNDER PARAGRAPH (2) OF THIS
30 SUBSECTION SHALL INCLUDE:

31 (I) MATERNAL AND NEONATAL PHYSICAL ASSESSMENTS;

32 (II) PARENT EDUCATION;

33 (III) ASSISTANCE AND TRAINING IN BREAST AND BOTTLE FEEDING;

34 (IV) THE COLLECTION, WHEN INDICATED, OF AN ADEQUATE
35 SAMPLE FOR HEREDITARY AND METABOLIC SCREENING OF THE NEWBORN CHILD;
36 AND

37 (V) THE PERFORMANCE OF ANY OTHER NECESSARY AND
38 APPROPRIATE TESTS AND SERVICES.

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1 (4) OF THE HOME VISITS REQUIRED UNDER PARAGRAPH (2) OF THIS
2 SUBSECTION:

3 (I) THE FIRST SHALL OCCUR WITHIN 24 HOURS OF THE
4 DISCHARGE OF THE MOTHER AND THE NEWBORN CHILD;

5 (II) THE SECOND SHALL OCCUR AT LEAST 24 HOURS, BUT NO MORE
6 THAN 48 HOURS, AFTER THE DISCHARGE; AND

7 (III) THE THIRD SHALL OCCUR AT LEAST 96 HOURS, BUT NO MORE
8 THAN 120 HOURS, AFTER THE DISCHARGE.

9 (D) THE INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH
10 MAINTENANCE ORGANIZATION MAY NOT:

11 (1) IMPOSE A COPAYMENT REQUIREMENT OR A DEDUCTIBLE FOR THE
12 COVERAGE REQUIRED UNDER SUBSECTION (C)(2) OF THIS SECTION; OR

13 (2) DESELECT, TERMINATE THE SERVICES OF, REQUIRE ADDITIONAL
14 DOCUMENTATION FROM, REQUIRE ADDITIONAL UTILIZATION REVIEW OF, REDUCE
15 PAYMENTS TO, OR OTHERWISE PROVIDE FINANCIAL DISINCENTIVES FOR AN
16 ATTENDING PROVIDER WHO ORDERS CARE CONSISTENT WITH THE TERMS OF THIS
17 SECTION.

18 (E) (1) THE INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH
19 MAINTENANCE ORGANIZATION SHALL PROVIDE NOTICE TO INSURED AND
20 ENROLLEES REGARDING THE COVERAGE PROVIDED BY THIS SECTION.

21 (2) THE NOTICE REQUIRED UNDER PARAGRAPH (1) OF THIS
22 SUBSECTION SHALL BE SENT ON AN ANNUAL BASIS.

23 **Article - Health - General**

24 19-706.

25 (i) The provisions of Article 48A, §§ 490U, 490AA, 490CC, [and 490DD] 490DD,
26 AND 490FF of the Code shall apply to health maintenance organizations.

27 19-1305.4.

28 (A) IN THIS SECTION, "ATTENDING PROVIDER" MEANS AN OBSTETRICIAN,
29 PEDIATRICIAN, OR OTHER PHYSICIAN ATTENDING THE MOTHER OR NEWBORN
30 CHILD.

31 [(a)] (B) Except as provided in [subsection (b)] SUBSECTIONS (C) AND(D) of
32 this section, the criteria and standards used by a private review agent or health
33 maintenance organization in performing utilization review of hospital services related to
34 maternity and newborn care, including length of stay, shall be in accordance with the
35 medical criteria outlined in the most current version of the "Guidelines for Perinatal
36 Care" prepared by the American Academy of Pediatrics and the American College of
37 Obstetricians and Gynecologists.

38 [(b) A private review agent or health maintenance organization may authorize a
39 shorter length of hospital stay for services related to maternity and newborn care

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1 provided the newborn meets the criteria for medical stability in the "Guidelines for
2 Perinatal Care" and the private review agent or health maintenance organization
3 authorizes for the mother and child an initial postpartum home visit which would include
4 the collection of an adequate sample for the hereditary and metabolic newborn screening,
5 when indicated.]

6 (C) EXCEPT AS PROVIDED UNDER SUBSECTION (D) OF THIS SECTION, A
7 PRIVATE REVIEW AGENT OR HEALTH MAINTENANCE ORGANIZATION PERFORMING
8 UTILIZATION REVIEW OF HOSPITAL SERVICES RELATED TO MATERNITY AND
9 NEWBORN CARE SHALL AUTHORIZE A MINIMUM OF:

10 (1) 48 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING AN
11 UNCOMPLICATED VAGINAL DELIVERY; AND

12 (2) 96 HOURS OF INPATIENT HOSPITALIZATION CARE FOLLOWING AN
13 UNCOMPLICATED CESAREAN SECTION.

14 (D) (1) THE PRIVATE REVIEW AGENT OR HEALTH MAINTENANCE
15 ORGANIZATION MAY AUTHORIZE A SHORTER LENGTH OF STAY THAN THAT
16 PROVIDED IN SUBSECTION (C) OF THIS SECTION IF THE MOTHER, IN CONSULTATION
17 WITH HER ATTENDING PROVIDER, DECIDES THAT LESS TIME IS NEEDED FOR
18 RECOVERY.

19 (2) FOR A MOTHER AND NEWBORN CHILD WHO HAVE A HOSPITAL STAY
20 SHORTER IN LENGTH THAN THAT PROVIDED UNDER SUBSECTION (C) OF THIS
21 SECTION, THE PRIVATE REVIEW AGENT OR HEALTH MAINTENANCE ORGANIZATION
22 PERFORMING UTILIZATION REVIEW SHALL AUTHORIZE A MINIMUM OF 3 HOME
23 VISITS:

24 (I) IN ACCORDANCE WITH GENERALLY ACCEPTED STANDARDS
25 OF NURSING PRACTICE FOR HOME CARE OF A MOTHER AND NEWBORN CHILD; AND

26 (II) BY A REGISTERED NURSE WITH AT LEAST 1 YEAR OF
27 EXPERIENCE IN MATERNAL AND CHILD HEALTH NURSING OR IN COMMUNITY
28 HEALTH NURSING WITH AN EMPHASIS ON MATERNAL AND CHILD HEALTH.

29 (3) SERVICES PROVIDED UNDER PARAGRAPH (2) OF THIS SUBSECTION
30 SHALL INCLUDE:

31 (I) MATERNAL AND NEONATAL PHYSICAL ASSESSMENTS;

32 (II) PARENT EDUCATION;

33 (III) ASSISTANCE AND TRAINING IN BREAST AND BOTTLE FEEDING;

34 (IV) THE COLLECTION, WHEN INDICATED, OF AN ADEQUATE
35 SAMPLE FOR HEREDITARY AND METABOLIC SCREENING OF THE NEWBORN CHILD;
36 AND

37 (V) THE PERFORMANCE OF ANY OTHER NECESSARY AND
38 APPROPRIATE TESTS AND SERVICES.

5

1 (4) OF THE HOME VISITS REQUIRED UNDER PARAGRAPH (2) OF THIS
2 SUBSECTION:

3 (I) THE FIRST SHALL OCCUR WITHIN 24 HOURS OF THE
4 DISCHARGE OF THE MOTHER AND THE NEWBORN CHILD;

5 (II) THE SECOND SHALL OCCUR AT LEAST 24 HOURS, BUT NO MORE
6 THAN 48 HOURS, AFTER THE DISCHARGE; AND

7 (III) THE THIRD SHALL OCCUR AT LEAST 48 HOURS, BUT NO MORE
8 THAN 96 HOURS, AFTER THE DISCHARGE.

9 (E) THE PRIVATE REVIEW AGENT OR HEALTH MAINTENANCE
10 ORGANIZATION MAY NOT REQUIRE ADDITIONAL DOCUMENTATION FROM,
11 REQUIRE ADDITIONAL UTILIZATION REVIEW OF, OR OTHERWISE PROVIDE
12 FINANCIAL DISINCENTIVES FOR AN ATTENDING PROVIDER WHO ORDERS CARE
13 CONSISTENT WITH THE TERMS OF THIS SECTION.

14 SECTION 2. AND BE IT FURTHER ENACTED, That, in addition to the
15 requirements of Article 48A, § 490FF(e)(2) of the Code as enacted by this Act, an
16 insurer, nonprofit health service plan, or health maintenance organization subject to the
17 requirements of Article 48A, § 490FF(e) shall send to insureds or enrollees the notice
18 required under Article 48A, § 490FF(e)(1) of the Code as enacted by this Act by January
19 1, 1997.

20 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
21 July 1, 1996.