1	н. в. 2735
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3 4	(By Delegates Perdue, Perry, Border, Fleischauer, Marshall, Moore and Staggers)
5	[Introduced February 26, 2013; referred to the
6	Committee on Health and Human Resources then the Judiciary.]
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10	A BILL to amend the Code of West Virginia, 1931, as amended, by
11	adding thereto a new section, designated §9-2-13, relating to
12	elective or nonmedically indicated induced deliveries or
13	cesarean sections performed at a hospital on a medical
14	assistance recipient before the thirty-ninth week of
15	gestation; achieving cost savings by implementing certain
16	quality initiatives; requiring the Department of Health and
17	Human Resources to coordinate with certain entities to collect
18	information regarding induced deliveries and cesarean
19	sections; requiring certain hospitals to work with physicians
20	to reduce the number of certain induced deliveries and
21	cesarean sections before the thirty-ninth week of gestation;
22	requiring the Department of Health and Human Resources to
23	perform a study and submit a written report; and requiring

waivers or authorizations to be requested from federal

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- 1 agencies in certain instances.
- 2 Be it enacted by the Legislature of West Virginia:
- 3 That the Code of West Virginia, 1931, as amended, be amended
- 4 by adding thereto a new section, designated §9-2-13, to read as
- 5 follows:
- 6 ARTICLE 2. COMMISSIONER OF HUMAN SERVICES; POWERS, DUTIES AND
- 7 RESPONSIBILITIES GENERALLY.
- 8 §9-2-13. Deliveries before the thirty-ninth week.
- 9 (a) The department shall achieve cost savings with improved
- 10 outcomes by adopting and implementing quality initiatives that are
- 11 evidence-based, tested and fully consistent with established
- 12 standards of clinical care and that are designed to reduce the
- 13 number of elective or nonmedically indicated induced deliveries or
- 14 cesarean sections performed at a hospital on a medical assistance
- 15 recipient before the thirty-ninth week of gestation.
- 16 (b) The department shall coordinate with physicians,
- 17 hospitals, managed care organizations, and the department's billing
- 18 contractor for the medical assistance program to develop a process
- 19 for collecting information regarding the number of induced
- 20 deliveries and cesarean sections described in subsection (a) of
- 21 this section that occur during prescribed periods.
- 22 (c) A hospital that provides obstetrical services shall
- 23 collaborate with physicians providing services at the hospital to

- 1 develop quality initiatives to reduce the number of elective or
- 2 nonmedically indicated induced deliveries or cesarean sections
- 3 performed at the hospital on a woman before the thirty-ninth week
- 4 of gestation.
- 5 (d) The department shall conduct a study to assess the effects
- 6 of the quality initiatives adopted under this section on infant
- 7 health and frequency of infant admissions to neonatal intensive
- 8 care units and hospital readmissions for mothers and infants.
- 9 (e) The department shall submit a written report containing
- 10 the findings of the study conducted under this section together
- 11 with its recommendations to the Legislative Oversight Committee on
- 12 Health and Human Resources Accountability.
- 13 (f) If before implementing any provision of this section a
- 14 state agency determines that a waiver or authorization from a
- 15 federal agency is necessary for implementation of that provision,
- 16 the agency affected by the provision shall request the waiver or
- 17 authorization and may delay implementing that provision until the
- 18 waiver or authorization is granted.

NOTE: The purpose of this bill is to reduce the number of elective or nonmedically indicated induced deliveries or cesarean sections performed at a hospital on a medical assistance recipient before the thirty-ninth week of gestation. The bill achieves cost savings by implementing certain quality initiatives. The bill requires the Department of Health and Human Resources to coordinate with certain entities to collect information regarding induced deliveries and cesarean sections. The bill requires certain hospitals to work with physicians to reduce the number of certain

induced deliveries and cesarean sections before the thirty-ninth week of gestation. The bill requires the Department of Health and Human Resources to perform a study and submit a written report. The bill requires waivers or authorizations to be requested from federal agencies if it is necessary for implementation of any of the bill's provisions.

This section is new; therefore, it has been completely underscored.