WEST VIRGINIA LEGISLATURE

2020 REGULAR SESSION

Committee Substitute

for

Senate Bill 716

SENATORS TAKUBO AND STOLLINGS, original sponsors

[Originating in the Committee on Health and Human

Resources; reported on February 12, 2020]

A BILL to amend and reenact §9-5-12 of the Code of West Virginia, 1931, as amended, relating
 to requiring Department of Health and Human Resources to make payment for tubal
 ligation without requiring at least 30 days between the date of informed consent and date
 of the tubal ligation procedure.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

§9-5-12. Medicaid program; maternity and infant care.

1 (a) The Legislature finds that high rates of infant mortality and morbidity are costly to the 2 state in terms of human suffering and of expenditures for long-term institutionalization, special 3 education, and medical care. It is well documented that appropriate care during pregnancy and 4 delivery can prevent many of the expensive, disabling problems our children experience. There 5 exists a crisis in this state relating to the availability of obstetrical services, particularly to patients 6 in rural areas, and to the cost patients must pay for obstetrical services. The availability of 7 obstetrical service for Medicaid patients enables these patients to receive quality medical care 8 and to give birth to healthier babies and, consequently, improve the health status of the next 9 generation.

10 The Legislature further recognizes that public and private insurance mechanisms remain 11 inadequate, and poor and middle-income women and children are among the most likely to be 12 without insurance. Generally, low-income, uninsured children receive half as much health care as 13 their insured counterparts. The state is now investing millions to care for sick infants whose deaths 14 and disabilities could have been avoided.

15 It is the intent of the Legislature that the Department of Health and Human Resources 16 participate in the Medicaid program for indigent children and pregnant women established by 17 Congress under the Consolidated Omnibus Budget Reconciliation Act (COBRA), Public Law 99-18 272, the Sixth Omnibus Budget Reconciliation Act (SOBRA), Public Law 99-504, and the 19 Omnibus Budget Reconciliation Act (OBRA), Public Law 100-203.

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20 (b) The department shall:

(1) Extend Medicaid coverage to pregnant women and their newborn infants to 185
percent of the federal poverty level and to provide coverage up to 60 days postpartum care,
effective July 1, 2019, or as soon as federal approval has occurred.

(2) As provided under COBRA, SOBRA, and OBRA, effective July 1, 1988, infants shall
be included under Medicaid coverage with all children eligible for Medicaid coverage born after
October 1, 1983, whose family incomes are at or below 100 percent of the federal poverty level
and continuing until such children reach the age of eight years.

(3) Elect the federal options provided under COBRA, SOBRA, and OBRA impacting
pregnant women and children below the poverty level: *Provided*, That no provision in this article
shall restrict the department in exercising new options provided by or to be in compliance with
new federal legislation that further expands eligibility for children and pregnant women.

32 (4) The department shall be <u>is</u> responsible for the implementation and program design for 33 a maternal and infant health care system to reduce infant mortality in West Virginia. The health 34 system design shall include quality assurance measures, case management, and patient 35 outreach activities. The department shall assume responsibility for claims processing in 36 accordance with established fee schedules and financial aspects of the program necessary to 37 receive available federal dollars and to meet federal rules and regulations.

(5) Beginning July 1, 1988, the department shall increase to no less than \$600 the
 reimbursement rates under the Medicaid program for prenatal care, delivery, and post-partum
 care.

(c) In order to be in compliance with the provisions of OBRA through rules and regulations,
the department shall ensure that pregnant women and children whose incomes are above the Aid
to Families and Dependent Children (AFDC) payment level are not required to apply for
entitlements under the AFDC program as a condition of eligibility for Medicaid coverage. Further,
the department shall develop a short, simplified pregnancy/pediatric application of no more than

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- 46 three pages, paralleling the simplified OBRA standards.
- 47 (d) Any woman who establishes eligibility under this section shall continue to be treated
- 48 as an eligible individual without regard to any change in income of the family of which she is a
- 49 member until the end of the 60-day period beginning on the last day of her pregnancy.
- 50 (e) No later than July 1, 2016, the department shall seek a waiver of the requirements that
- 51 all women seek 30-day approval from the federal Center for Medicare and Medicaid Services
- 52 prior to receiving a tubal ligation The department shall make payment for tubal ligation without
- 53 requiring at least 30 days between the date of informed consent and the date of the tubal ligation
- 54 procedure.

NOTE: The purpose of this bill is to allow the Department of Health and Human Resources to pay for tubal ligation without requiring at least 30 days between the date of informed consent and the date of the tubal ligation procedure so that tubal ligation can be performed at the time of delivery.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.