

REPRINTED

FEB 27 1996  
Place On Calendar

HOUSE FILE 2369  
BY COMMITTEE ON COMMERCE AND  
REGULATION

(SUCCESSOR TO HF 2057)

Passed House, <sup>(P. 908)</sup> Date 3/21/96 Passed Senate, Date 4/2/96 <sup>(P. 1191)</sup>  
Vote: Ayes 90 Nays 8 Vote: Ayes 50 Nays 0  
Approved May 30, 1996

A BILL FOR

1 An Act relating to the postdelivery care requirements for mothers  
2 and newborns and providing for an exception of follow-up care  
3 outside of the hospital setting.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

5  
6  
7  
8

HOUSE FILE 2369

H-5212

- 1 Amend House File 2369 as follows:
- 2 1. Page 1, line 22, by inserting after the word
- 3 "providing" the following: "inpatient services".
- 4 2. Page 1, line 26, by inserting after the word
- 5 "provided" the following: "by a certified home health
- 6 care service selected by the mother and the services
- 7 shall be provided".

*Last* 3/21/96 (P. 908)

By DODERER of Johnson  
MARTIN of Scott

H-5212 FILED MARCH 6, 1996

HF 2369

18  
19  
20  
21  
22

1 Section 1. NEW SECTION. 514C.11 MINIMUM POSTDELIVERY  
2 CARE REQUIREMENTS.

3 1. Notwithstanding section 514C.6, an individual or group  
4 policy of accident or health insurance or individual or group  
5 hospital or health care service contract issued pursuant to  
6 chapter 509, 514, or 514A or an individual or group health  
7 maintenance organization contract issued and regulated under  
8 chapter 514B, which is delivered, amended, or renewed on or  
9 after July 1, 1996, and which provides maternity benefits,  
10 shall provide coverage for a minimum of forty-eight hours of  
11 inpatient care following a vaginal delivery and a minimum of  
12 ninety-six hours of inpatient care following a cesarean  
13 section for the insured mother and newly born child in a  
14 hospital licensed pursuant to chapter 135B.

15 2. a. A mother and newly born child shall only be  
16 discharged prior to the minimum inpatient length of care  
17 prescribed under subsection 1, if the attending provider  
18 determines that the minimum inpatient stay is not necessary,  
19 following consultation with the mother.

20 b. If the mother and newly born child are discharged,  
21 pursuant to paragraph "a", prior to the required minimum  
22 inpatient length of care, the entity providing coverage, as  
23 described in subsection 1, shall provide coverage for two  
24 postdischarge visits for the mother and newly born child, the  
25 first of which shall be provided within forty-eight hours of  
26 the discharge. The postdischarge visits shall be provided by  
27 a registered nurse with experience in maternal and child  
28 health nursing. Services provided during the visits shall  
29 include but are not limited to a physical assessment of the  
30 newly born child, parent education, assistance and training in  
31 breast or bottle feeding, and the performance of any medically  
32 necessary and appropriate clinical tests. The services shall  
33 be consistent with protocols and guidelines developed by  
34 national pediatric, obstetric, and nursing professional  
35 organizations for these services.

1 3. An entity providing coverage, as described in  
2 subsection 1, shall not deselect, terminate services to,  
3 require additional utilization review of, reduce payments to,  
4 or in any other manner provide disincentives to an attending  
5 provider who complies with the provisions of this section.

6 4. The commissioner of insurance shall adopt rules to  
7 implement this section and the department of inspections and  
8 appeals shall inform each licensed hospital of the  
9 requirements of this section, in writing.

10 5. For the purposes of this section, "attending provider"  
11 means a pediatrician or other licensed physician attending the  
12 newly born child, or an obstetrician, certified nurse-midwife,  
13 or other physician attending the mother.

14 EXPLANATION

15 This bill requires that an individual or group policy of  
16 accident or health insurance, an individual or group hospital  
17 or health care service contract, or an individual or group  
18 health maintenance organization contract, which is delivered,  
19 amended, or renewed on or after July 1, 1996, and which  
20 provides maternity benefits, is to provide a minimum of 48  
21 hours of inpatient care following a vaginal delivery and a  
22 minimum of 96 hours of inpatient care following a cesarean  
23 section for an insured mother and the newly born child, in a  
24 licensed hospital. The bill also provides that if the  
25 attending provider determines, following consultation with the  
26 mother, that the minimum inpatient stay is not necessary, the  
27 mother and newly born child may be discharged prior to  
28 completion of the minimum stay. If the mother and newly born  
29 child are discharged prior to completion of the minimum stay,  
30 the entity providing coverage for the postdelivery stay is to  
31 provide coverage for two postdischarge visits. The bill  
32 specifies the type of postdelivery services which must be  
33 provided, the time frame requirements for provision of  
34 services, and specifies that the services must be provided by  
35 a registered nurse with experience in maternal and child

1 health nursing. The bill prohibits an entity providing  
2 coverage from deselecting, terminating services to, requiring  
3 additional utilization review of, reducing payment to, or in  
4 any other manner providing disincentives to an attending  
5 provider who complies with the provisions of the bill. The  
6 bill directs the commissioner of insurance to adopt rules to  
7 implement the bill and the department of inspections and  
8 appeals to inform licensed hospitals of the requirements of  
9 the bill.

10 The bill defines "attending provider" for the purposes of  
11 the bill.

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

## HOUSE FILE 2369

H-5470

1 Amend House File 2369 as follows:

2 1. Page 1, by inserting before line 1 the  
3 following:

4 "Section 1. NEW SECTION. 135.23 GROUP B  
5 STREPTOCOCCUS TESTING.

6 1. A physician providing prenatal care shall  
7 routinely furnish pregnant patients with concise  
8 written information, to be developed by the  
9 department, regarding group B streptococcus disease  
10 incidence, risks, prevention strategies, diagnosis,  
11 and treatment. If a patient requests to be tested for  
12 the presence of group B streptococcus, the physician  
13 may perform a screening culture between the thirty-  
14 fifth and thirty-seventh weeks of pregnancy.

15 2. The physician shall inform a patient who has  
16 been tested of the test result. If a patient has  
17 tested positive for group B streptococcus, the  
18 physician or a designated member of the physician's  
19 staff shall report this status to the hospital or  
20 birth facility to which the patient is to be admitted.  
21 This information shall be entered upon the patient's  
22 medical records by a physician or designated hospital  
23 or birth facility staff member prior to or at the time  
24 of delivery.

25 3. As used in this section, "physician" means a  
26 physician licensed to practice medicine and surgery or  
27 osteopathic medicine and surgery.

28 4. If the centers for disease control and  
29 prevention of the United States department of health  
30 and human services, with the concurrence of the  
31 American academy of pediatrics and the American  
32 college of obstetrics and gynecology, determines that  
33 culture screenings of pregnant women to identify those  
34 who may have a positive screening result as a strategy  
35 to prevent the onset of group B streptococcus disease  
36 in newborns is no longer the most appropriate  
37 strategy, is no longer indicated, or is replaced by a  
38 treatment modality which renders the screening  
39 unnecessary, the director shall adopt rules pursuant  
40 to section 17A.4, subsection 2, and section 17A.5,  
41 subsection 2, paragraph "b", to reflect the  
42 determination.

43 Sec. 2. The director of public health shall adopt  
44 rules pursuant to section 17A.4, subsection 2, and  
45 section 17A.5, subsection 2, paragraph "b", necessary  
46 to administer this section, and the rules shall become  
47 effective July 1, 1996."

48 2. Title page, line 1, by inserting after the  
49 word "the" the words "prenatal and".

50 3. By renumbering as necessary.

By BLODGETT of Cerro Gordo

H-5470 FILED MARCH 19, 1996

WITHDRAWN  
3/21/96 (p. 907)

## HOUSE FILE 2369

H-5498

- 1 Amend the amendment, H-5470, to House File 2369 as  
2 follows:  
3 1. Page 1, by inserting after line 42 the  
4 following:  
5 "5. In addition to providing group B streptococcus  
6 information and testing, the following additional  
7 tests shall be routinely performed during pregnancy:  
8 a. During an initial patient visit with a  
9 physician providing prenatal care:  
10 (1) Blood typing, including rh factor.  
11 (2) Antibody screen  
12 (3) Complete blood count.  
13 (4) Urine test, protein and sugar.  
14 (5) Hepatitis B antigen.  
15 (6) Syphilis test.  
16 (7) Gonorrhea and chlamydia, where indicated.  
17 (8) German measles immunity.  
18 b. At fifteen weeks' gestation, serum alpha-  
19 fetoprotein test.  
20 c. At twenty-six weeks' gestation:  
21 (1) Glucose challenge screening for diabetes.  
22 (2) Syphilis and diabetes recheck, when indicated.  
23 d. At a point during pregnancy determined  
24 appropriate by the physician providing prenatal care:  
25 (1) Amniocentesis.  
26 (2) Chorionic villus sampling.  
27 (3) Pap smear.  
28 (4) Herpes culture.  
29 (5) Tay Sach's screening.  
30 (6) Sickle cell screening.  
31 (7) Tuberculosis screening.  
32 (8) Hemoglobin-electrophoresis.  
33 (9) Protine.  
34 (10) Partial thromboplastintime prothrombintime.  
35 (11) General chemistry screening.  
36 (12) HIV screening.  
37 (13) Glycohemoglobin.  
38 (14) Serum iron.  
39 (15) Stool screening.  
40 (16) Thyroid function studies.  
41 (17) TORCH battery.  
42 (18) Toxoplasmosis titers.  
43 (19) Varicella titers.  
44 (20) Ferritin."

By MILLAGE of Scott

H-5498 FILED MARCH 20, 1996

*Out of Order*  
*3/21/96*

*(p. 906)*

3/21/96 smv  
S-3/21/96 Amended/Askin  
w/55496

HOUSE FILE 2369  
BY COMMITTEE ON COMMERCE AND  
REGULATION

(SUCCESSOR TO HF 2057)

(As Amended and Passed by the House, March 21, 1996)

Passed House, <sup>(p.2150)</sup> Date 5/1/96 Passed Senate, Date 4/2/96 (p.1190)  
Vote: Ayes 96 Nays 0 Vote: Ayes 50 Nays 0  
Approved \_\_\_\_\_

*Repassed 5-1-96  
Vote 49-0 (P.159)*

A BILL FOR

- 1 An Act relating to the postdelivery care requirements for mothers
- 2 and newborns and providing for an exception of follow-up care
- 3 outside of the hospital setting.
- 4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
- 5
- 6
- 7 House Amendments \_\_\_\_\_
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19

1 Section 1. NEW SECTION. 514C.11 MINIMUM POSTDELIVERY  
2 CARE REQUIREMENTS.

3 1. Notwithstanding section 514C.6, an individual or group  
4 policy of accident or health insurance or individual or group  
5 hospital or health care service contract issued pursuant to  
6 chapter 509, 514, or 514A or an individual or group health  
7 maintenance organization contract issued and regulated under  
8 chapter 514B, which is delivered, amended, or renewed on or  
9 after July 1, 1996, and which provides maternity benefits,  
10 shall provide coverage for a minimum of forty-eight hours of  
11 inpatient care following a vaginal delivery and a minimum of  
12 ninety-six hours of inpatient care following a cesarean  
13 section for the insured mother and newly born child in a  
14 hospital licensed pursuant to chapter 135B.

15 2. a. A mother and newly born child shall only be  
16 discharged prior to the minimum inpatient length of care  
17 prescribed under subsection 1, if the attending provider  
18 determines that the minimum inpatient stay is not necessary,  
19 following consultation with the mother.

20 b. If the mother and newly born child are discharged,  
21 pursuant to paragraph "a", prior to the required minimum  
22 inpatient length of care, the entity providing inpatient  
23 services coverage, as described in subsection 1, shall provide  
24 coverage for two postdischarge visits for the mother and newly  
25 born child, the first of which shall be provided within forty-  
26 eight hours of the discharge. The postdischarge visits shall  
27 be provided by a certified home health care service selected  
28 by the mother and the services shall be provided by a  
29 registered nurse with experience in maternal and child health  
30 nursing. Services provided during the visits shall include  
31 but are not limited to a physical assessment of the newly born  
32 child, parent education, assistance and training in breast or  
33 bottle feeding, and the performance of any medically necessary  
34 and appropriate clinical tests. The services shall be  
35 consistent with protocols and guidelines developed by national

1 pediatric, obstetric, and nursing professional organizations  
2 for these services.

3 3. An entity providing coverage, as described in  
4 subsection 1, shall not deselect, terminate services to,  
5 require additional utilization review of, reduce payments to,  
6 or in any other manner provide disincentives to an attending  
7 provider who complies with the provisions of this section.

8 4. The commissioner of insurance shall adopt rules to  
9 implement this section and the department of inspections and  
10 appeals shall inform each licensed hospital of the  
11 requirements of this section, in writing.

12 5. For the purposes of this section, "attending provider"  
13 means a pediatrician or other licensed physician attending the  
14 newly born child, or an obstetrician, certified nurse-midwife,  
15 or other physician attending the mother.

16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35

HOUSE FILE 2369

S-5496

1 Amend House File 2369, as amended, passed, and  
2 reprinted by the House, as follows:

3 1. By striking everything after the enacting  
4 clause and inserting the following:

5 "Section 1. NEW SECTION. 514C.11 POSTDELIVERY  
6 BENEFITS AND CARE.

7 1. Notwithstanding section 514C.6, a person who  
8 provides an individual or group policy of accident or  
9 health insurance or individual or group hospital or  
10 health care service contract issued pursuant to  
11 chapter 509, 514, or 514A or an individual or group  
12 health maintenance organization contract issued and  
13 regulated under chapter 514B, which is delivered,  
14 amended, or renewed on or after July 1, 1996, and  
15 which provides maternity benefits or newborn care  
16 benefits, shall not terminate inpatient benefits or  
17 require discharge of a mother or the newborn from a  
18 hospital following delivery earlier than determined to  
19 be medically appropriate by the attending physician  
20 after consultation with the mother and in accordance  
21 with the most recent guidelines for perinatal care  
22 established by the American academy of pediatrics and  
23 the American college of obstetricians and  
24 gynecologists.

25 2. When performing utilization review of inpatient  
26 hospital services related to maternity and newborn  
27 care, including but not limited to length of  
28 postdelivery stay, any person who provides an  
29 individual or group policy of accident or health  
30 insurance or individual or group hospital or health  
31 care service contract issued pursuant to chapter 509,  
32 514, or 514A, or an individual or group health  
33 maintenance organization contract issued and regulated  
34 under chapter 514B, shall use the most recent  
35 guidelines for perinatal care established by the  
36 American academy of pediatrics and the American  
37 college of obstetricians and gynecologists."

38 2. Title page, by striking lines 2 and 3 and  
39 inserting the following: "and newborns."

By COMMITTEE ON COMMERCE  
PATRICK J. DELUHERY

S-5496 FILED MARCH 21, 1996

*Adopted as amended 4/2/96 (p. 1191)*

HOUSE FILE 2369

S-5591

1 Amend the amendment, S-5496, to House File 2369, as  
2 amended, passed, and reprinted by the House, as  
3 follows:

4 1. Page 1, line 15, by inserting after the word  
5 "benefits" the following: ", which are not limited to  
6 complications of pregnancy,".

By MICHAEL E. GRONSTAL

S-5591 FILED MARCH 28, 1996

*Adopted 4/2/96 (p. 1190)*

HOUSE FILE 2369

S-5619

1 Amend the amendment, S-5496, to House File 2369, as  
2 amended, passed, and reprinted by the House, as  
3 follows:

4 1. Page 1, line 21, by striking the words "the  
5 most recent" and inserting the following: "guidelines  
6 adopted by rule by the commissioner. The guidelines  
7 adopted by rule shall be consistent with or may adopt  
8 by reference the".

By MICHAEL E. GRONSTAL

S-5619 FILED APRIL 2, 1996

ADOPTED (p. 191)

## SENATE AMENDMENT TO HOUSE FILE 2369

H-5821

1 Amend House File 2369, as amended, passed, and  
2 reprinted by the House, as follows:

3 1. By striking everything after the enacting  
4 clause and inserting the following:

5 "Section 1. NEW SECTION. 514C.11 POSTDELIVERY  
6 BENEFITS AND CARE.

7 1. Notwithstanding section 514C.6, a person who  
8 provides an individual or group policy of accident or  
9 health insurance or individual or group hospital or  
10 health care service contract issued pursuant to  
11 chapter 509, 514, or 514A or an individual or group  
12 health maintenance organization contract issued and  
13 regulated under chapter 514B, which is delivered,  
14 amended, or renewed on or after July 1, 1996, and  
15 which provides maternity benefits, which are not  
16 limited to complications of pregnancy, or newborn care  
17 benefits, shall not terminate inpatient benefits or  
18 require discharge of a mother or the newborn from a  
19 hospital following delivery earlier than determined to  
20 be medically appropriate by the attending physician  
21 after consultation with the mother and in accordance  
22 with guidelines adopted by rule by the commissioner.  
23 The guidelines adopted by rule shall be consistent  
24 with or may adopt by reference the guidelines for  
25 perinatal care established by the American academy of  
26 pediatrics and the American college of obstetricians  
27 and gynecologists.

28 2. When performing utilization review of inpatient  
29 hospital services related to maternity and newborn  
30 care, including but not limited to length of  
31 postdelivery stay, any person who provides an  
32 individual or group policy of accident or health  
33 insurance or individual or group hospital or health  
34 care service contract issued pursuant to chapter 509,  
35 514, or 514A, or an individual or group health  
36 maintenance organization contract issued and regulated  
37 under chapter 514B, shall use the most recent  
38 guidelines for perinatal care established by the  
39 American academy of pediatrics and the American  
40 college of obstetricians and gynecologists."

41 2. Title page, by striking lines 2 and 3 and  
42 inserting the following: "and newborns."

RECEIVED FROM THE SENATE

H-5821 FILED APRIL 2, 1996

*House Concurred*  
*5/1/96 (P. 2150)*

## HOUSE FILE 2369

H-5867

1 Amend the Senate amendment, H-5821, to House File  
2 2369, as amended, passed, and reprinted by the House,  
3 as follows:

4 1. Page 1, by striking lines 5 through 42 and  
5 inserting the following:

6 "Sec. \_\_\_\_ . NEW SECTION. 514C.11 MINIMUM  
7 POSTDELIVERY CARE REQUIREMENTS.

8 1. Notwithstanding section 514C.6, an individual  
9 or group policy of accident or health insurance or  
10 individual or group hospital or health care service  
11 contract issued pursuant to chapter 509, 514, or 514A  
12 or an individual or group health maintenance  
13 organization contract issued and regulated under  
14 chapter 514B, which is delivered, amended, or renewed  
15 on or after July 1, 1996, and which provides maternity  
16 benefits, shall provide coverage for a minimum of  
17 forty-eight hours of inpatient care following a  
18 vaginal delivery and a minimum of ninety-six hours of  
19 inpatient care following a cesarean section for the  
20 insured mother and newly born child in a hospital  
21 licensed pursuant to chapter 135B.

22 2. a. A mother and newly born child shall only be  
23 discharged prior to the minimum inpatient length of  
24 care prescribed under subsection 1, if the attending  
25 provider determines that the minimum inpatient stay is  
26 not necessary, following consultation with the mother.

27 b. If the mother and newly born child are  
28 discharged, pursuant to paragraph "a", prior to the  
29 required minimum inpatient length of care, the entity  
30 providing inpatient services coverage, as described in  
31 subsection 1, shall provide coverage for two  
32 postdischarge visits for the mother and newly born  
33 child, the first of which shall be provided within  
34 forty-eight hours of the discharge. The postdischarge  
35 visits shall be provided by a certified home health  
36 care service selected by the mother and the services  
37 shall be provided by a registered nurse with  
38 experience in maternal and child health nursing.  
39 Services provided during the visits shall include but  
40 are not limited to a physical assessment of the newly  
41 born child, parent education, assistance and training  
42 in breast or bottle feeding, and the performance of  
43 any medically necessary and appropriate clinical  
44 tests. The services shall be consistent with  
45 protocols and guidelines developed by national  
46 pediatric, obstetric, and nursing professional  
47 organizations for these services.

48 3. An entity providing coverage, as described in  
49 subsection 1, shall not deselect, terminate services  
50 to, require additional utilization review of, reduce

H-5867

H-5867

Page 2

1 payments to, or in any other manner provide  
2 disincentives to an attending provider who complies  
3 with the provisions of this section.

4 4. The commissioner of insurance shall adopt rules  
5 to implement this section and the department of  
6 inspections and appeals shall inform each licensed  
7 hospital of the requirements of this section, in  
8 writing.

9 5. For the purposes of this section, "attending  
10 provider" means a pediatrician or other licensed  
11 physician attending the newly born child, or an  
12 obstetrician, certified nurse-midwife, or other  
13 physician attending the mother."

By MARTIN of Scott  
DODERER of Johnson  
GARMAN of Story  
JOCHUM of Dubuque  
HARRISON of Scott  
BRAUNS of Muscatine  
BODDICKER of Cedar

MCCOY of Polk  
BRANSTAD of Winnebago  
FALLON of Polk  
HOLVECK of Polk  
O'BRIEN of Boone  
BOGGESS of Taylor

H-5867 FILED APRIL 8, 1996

WITHDRAWN

5/1/96  
(P. 2150)

HOUSE AMENDMENT TO SENATE AMENDMENT TO  
HOUSE FILE 2369

S-5888

1 Amend the Senate amendment, H-5821, to House File  
2 2369, as amended, passed, and reprinted by the House,  
3 as follows:

4 1. Page 1, line 11, by inserting after the figure  
5 "509," the following: "509A,".

6 2. Page 1, line 27, by striking the word  
7 "gynecologists." and inserting the following:  
8 "gynecologists which provide that when complications  
9 are not present, the postpartum hospital stay ranges  
10 from a minimum of forty-eight hours for a vaginal  
11 delivery to a minimum of ninety-six hours for a  
12 cesarean birth, excluding the day of delivery. The  
13 guidelines adopted by rule by the commissioner shall  
14 also provide that in the event of a discharge from the  
15 hospital prior to the minimum stay established in the  
16 guidelines, a postdischarge follow-up visit shall be  
17 provided to the mother and newborn by providers  
18 competent in postpartum care and newborn assessment if  
19 determined medically appropriate as directed by the  
20 attending physician, in accordance with the  
21 guidelines."

22 3. Page 1, line 31, by inserting after the word  
23 "stay" the following: "and postdischarge follow-up  
24 care".

25 4. Page 1, line 34, by inserting after the figure  
26 "509," the following: "509A,".

27 5. Page 1, by striking lines 37 through 40 and  
28 inserting the following: "under chapter 514B, shall  
29 use the guidelines adopted by rule by the  
30 commissioner, and shall not deselect, require  
31 additional documentation, require additional  
32 utilization review, terminate services to, reduce  
33 payment to, or in any manner provide a disincentive to  
34 an attending physician solely on the basis that the  
35 attending physician provided or directed the provision  
36 of services in compliance with the guidelines adopted  
37 by rule."

38 6. Page 1, by inserting before line 41 the  
39 following:  
40 "3. Preauthorization or precertification for a  
41 hospital stay or for a postdischarge follow-up visit  
42 in accordance with the guidelines adopted by rule by  
43 the commissioner shall not be required."

RECEIVED FROM THE HOUSE

S-5888 FILED MAY 1, 1996

CONCURRED

(p.1591)

H-6087

1 Amend the Senate amendment, H-5821, to House File  
2 2369, as amended, passed, and reprinted by the House,  
3 as follows:

4 1. Page 1, line 11, by inserting after the figure  
5 "509," the following: "509A,".

6 2. Page 1, line 27, by striking the word  
7 "gynecologists." and inserting the following:  
8 "gynecologists which provide that when complications  
9 are not present, the postpartum hospital stay ranges  
10 from a minimum of forty-eight hours for a vaginal  
11 delivery to a minimum of ninety-six hours for a  
12 cesarean birth, excluding the day of delivery. The  
13 guidelines adopted by rule by the commissioner shall  
14 also provide that in the event of a discharge from the  
15 hospital prior to the minimum stay established in the  
16 guidelines, a postdischarge follow-up visit shall be  
17 provided to the mother and newborn by providers  
18 competent in postpartum care and newborn assessment if  
19 determined medically appropriate as directed by the  
20 attending physician, in accordance with the  
21 guidelines."

22 3. Page 1, line 31, by inserting after the word  
23 "stay" the following: "and postdischarge follow-up  
24 care".

25 4. Page 1, line 34, by inserting after the figure  
26 "509," the following: "509A,".

27 5. Page 1, by striking lines 37 through 40 and  
28 inserting the following: "under chapter 514B, shall  
29 use the guidelines adopted by rule by the  
30 commissioner, and shall not deselect, require  
31 additional documentation, require additional  
32 utilization review, terminate services to, reduce  
33 payment to, or in any manner provide a disincentive to  
34 an attending physician solely on the basis that the  
35 attending physician provided or directed the provision  
36 of services in compliance with the guidelines adopted  
37 by rule."

38 6. Page 1, by inserting before line 41 the  
39 following:

40 "3. Preauthorization or precertification for a  
41 hospital stay or for a postdischarge follow-up visit  
42 in accordance with the guidelines adopted by rule by  
43 the commissioner shall not be required."

By METCALF of Polk  
MARTIN of Scott  
DODERER of Johnson

H-6087 FILED MAY 1, 1996

*adapted 5/1/96*

*(p. 2150)*

HOUSE FILE 2369

AN ACT

RELATING TO THE POSTDELIVERY CARE REQUIREMENTS FOR MOTHERS AND NEWBORNS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. NEW SECTION. 514C.11 POSTDELIVERY BENEFITS AND CARE.

1. Notwithstanding section 514C.6, a person who provides an individual or group policy of accident or health insurance or individual or group hospital or health care service contract issued pursuant to chapter 509, 509A, 514, or 514A or an individual or group health maintenance organization contract issued and regulated under chapter 514B, which is delivered, amended, or renewed on or after July 1, 1996, and which provides maternity benefits, which are not limited to complications of pregnancy, or newborn care benefits, shall not terminate inpatient benefits or require discharge of a mother or the newborn from a hospital following delivery earlier than determined to be medically appropriate by the

attending physician after consultation with the mother and in accordance with guidelines adopted by rule by the commissioner. The guidelines adopted by rule shall be consistent with or may adopt by reference the guidelines for perinatal care established by the American academy of pediatrics and the American college of obstetricians and gynecologists which provide that when complications are not present, the postpartum hospital stay ranges from a minimum of forty-eight hours for a vaginal delivery to a minimum of ninety-six hours for a cesarean birth, excluding the day of delivery. The guidelines adopted by rule by the commissioner shall also provide that in the event of a discharge from the hospital prior to the minimum stay established in the guidelines, a postdischarge follow-up visit shall be provided to the mother and newborn by providers competent in postpartum care and newborn assessment if determined medically appropriate as directed by the attending physician, in accordance with the guidelines.

2. When performing utilization review of inpatient hospital services related to maternity and newborn care, including but not limited to length of postdelivery stay and postdischarge follow-up care, any person who provides an individual or group policy of accident or health insurance or individual or group hospital or health care service contract issued pursuant to chapter 509, 509A, 514, or 514A, or an individual or group health maintenance organization contract issued and regulated under chapter 514B, shall use the guidelines adopted by rule by the commissioner, and shall not deselect, require additional documentation, require additional utilization review, terminate services to, reduce payment to, or in any manner provide a disincentive to an attending physician solely on the basis that the attending physician provided or directed the provision of services in compliance with the guidelines adopted by rule.

3. Preauthorization or precertification for a hospital stay or for a postdischarge follow-up visit in accordance with the guidelines adopted by rule by the commissioner shall not be required.

---

RON J. CORBETT  
Speaker of the House

---

LEONARD L. BOSWELL  
President of the Senate

I hereby certify that this bill originated in the House and is known as House File 2369, Seventy-sixth General Assembly.

---

ELIZABETH ISAACSON  
Chief Clerk of the House

Approved *J May 30*, 1996

---

TERRY E. BRANSTAD  
Governor