

Senate File 196 - Introduced

SENATE FILE 196

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A BILL FOR

1 An Act relating to prenatal and postpartum care.

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

1 Section 1. NEW SECTION. 135.131A Prenatal ultrasound.

2 1. The department shall adopt guidelines that require
3 attending health care providers to offer each pregnant woman
4 as part of the woman's prenatal care the option of undergoing
5 a minimum of two ultrasounds when medically indicated to
6 maximize the possibility of assessing the risk factors for
7 and preventing premature birth, stillbirth, or other delivery
8 complications. The guidelines adopted shall be consistent
9 with or may adopt by reference the practice guidelines for the
10 performance of obstetric ultrasound examinations as approved
11 and published by the American institute of ultrasound in
12 medicine in conjunction with the American college of radiology
13 and the American college of obstetricians and gynecologists.

14 2. The attending health care provider shall provide the
15 following information to the pregnant woman regarding the
16 ultrasounds:

17 a. That the ultrasounds are voluntary at the discretion of
18 the pregnant woman.

19 b. Upon request of the pregnant woman, the complete results
20 of the ultrasound, including any risks associated with the
21 findings to determine the most effective way to manage the
22 pregnancy, labor, and delivery.

23 c. That health care coverage is provided in accordance with
24 section 514C.30 and through the medical assistance program.

25 3. The attending health care provider shall document the
26 pregnant woman's declining of an ultrasound in the pregnant
27 woman's medical record.

28 4. This section shall not be interpreted to limit the number
29 of ultrasounds provided to a woman during pregnancy or to hold
30 a health care provider liable for not providing an ultrasound
31 as specified in this section if the pregnant woman does not
32 seek prenatal care.

33 5. For the purposes of this section "*attending health care*
34 *provider*" means a licensed physician, nurse practitioner,
35 certified nurse midwife, physician assistant, or other health

1 care provider who has the primary responsibility for the
2 treatment and care of a pregnant woman.

3 Sec. 2. NEW SECTION. 135.131B **Fetal movement education.**

4 An attending health care provider, as defined in section
5 135.131A, shall provide to a pregnant woman prior to the
6 third trimester of the pregnancy, educational materials
7 regarding, and an explanation of the procedure to monitor,
8 fetal movement to reduce the risk of fetal death. The center
9 for congenital and inherited disorders shall make the fetal
10 movement educational materials available to attending health
11 care providers upon request.

12 Sec. 3. NEW SECTION. 136A.5A **Newborn pulse oximetry
13 screening tests.**

14 1. Each newborn born in this state shall receive a pulse
15 oximetry screening test in conjunction with the metabolic
16 screening required pursuant to section 136A.5 in accordance
17 with rules adopted by the department.

18 2. An attending health care provider, as defined in section
19 135.131A, shall ensure that every newborn under the provider's
20 care receives the pulse oximetry screening test in accordance
21 with rules adopted by the department.

22 3. This section does not apply if a parent objects to
23 the screening. If a parent objects to the screening of a
24 newborn, the attending health care provider shall document the
25 refusal in the newborn's medical record and shall obtain a
26 written refusal from the parent and report the refusal to the
27 department as provided by rule of the department.

28 4. The results of each newborn's pulse oximetry screening
29 test shall be reported in a manner consistent with the
30 reporting of the results of metabolic screenings pursuant to
31 section 136A.5, and in accordance with rules adopted by the
32 center for congenital and inherited disorders in collaboration
33 with the department.

34 Sec. 4. NEW SECTION. 514C.30 **Prenatal care — ultrasounds.**

35 1. a. Notwithstanding the uniformity of treatment

1 requirements of section 514C.6, a policy, contract, or plan
2 providing for third-party payment or prepayment of health or
3 medical expenses shall provide minimum ultrasound benefits
4 coverage for insured pregnant women. The provisions of this
5 section apply to the following classes of third-party payment
6 provider contracts, policies, or plans delivered, issued for
7 delivery, continued, or renewed in this state on or after July
8 1, 2013.

9 (1) Individual or group accident and sickness insurance
10 providing coverage on an expense-incurred basis.

11 (2) An individual or group hospital or medical service
12 contract issued pursuant to chapter 509, 514, or 514A.

13 (3) An individual or group health maintenance organization
14 contract regulated under chapter 514B.

15 (4) A plan established pursuant to chapter 509A for public
16 employees.

17 (5) A plan established by any other entity engaged in the
18 business of insurance, risk transfer, or risk retention, which
19 is subject to the jurisdiction of the commissioner.

20 b. This section shall not apply to accident-only,
21 specified disease, short-term hospital or medical, hospital
22 confinement indemnity, credit, dental, vision, Medicare
23 supplement, long-term care, basic hospital and medical-surgical
24 expense coverage as defined by the commissioner, disability
25 income insurance coverage, coverage issued as a supplement
26 to liability insurance, workers' compensation or similar
27 insurance, or automobile medical payment insurance.

28 2. As used in this section, "*minimum ultrasound benefits*
29 *coverage*" means coverage for benefits which are equal to or
30 greater than a minimum of two ultrasounds as part of a woman's
31 prenatal care offered at times when medically indicated to
32 maximize the possibility of assessing the risk factors for
33 and preventing premature birth, stillbirth, or other delivery
34 complications as specified under the guidelines adopted by the
35 department of public health pursuant to section 135.131A.

1 3. Notice of availability of the coverage shall be provided
2 to the insured in a summary of benefits and coverage issued to
3 the insured at the time of delivery, continuation, or renewal
4 of the coverage, policy, or plan. The coverage shall provide
5 that the ultrasounds shall be offered to but are voluntary on
6 the part of the pregnant woman.

7 4. This section shall not be interpreted to limit the
8 number of ultrasounds provided to a woman during pregnancy or
9 to hold a health care provider liable for not providing an
10 ultrasound covered under this section if the insured does not
11 seek prenatal care.

12 5. The commissioner of insurance shall adopt rules under
13 chapter 17A necessary to implement this section.

14 Sec. 5. NEW SECTION. 514C.31 **Newborn pulse oximetry**
15 **screening.**

16 1. *a.* Notwithstanding the uniformity of treatment
17 requirements of section 514C.6, a policy, contract, or plan
18 providing for third-party payment or prepayment of health or
19 medical expenses shall provide coverage to an insured for
20 newborn pulse oximetry screening as required to be administered
21 pursuant to section 136A.5A. The provisions of this section
22 apply to the following classes of third-party payment provider
23 contracts, policies, or plans delivered, issued for delivery,
24 continued, or renewed in this state on or after July 1, 2013.

25 (1) Individual or group accident and sickness insurance
26 providing coverage on an expense-incurred basis.

27 (2) An individual or group hospital or medical service
28 contract issued pursuant to chapter 509, 514, or 514A.

29 (3) An individual or group health maintenance organization
30 contract regulated under chapter 514B.

31 (4) A plan established pursuant to chapter 509A for public
32 employees.

33 (5) A plan established by any other entity engaged in the
34 business of insurance, risk transfer, or risk retention, which
35 is subject to the jurisdiction of the commissioner.

1 The guidelines adopted are to be consistent with the practice
2 guidelines approved and published by the American institute of
3 ultrasound in medicine in conjunction with the American college
4 of radiology and the American college of obstetricians and
5 gynecologists.

6 The bill specifies the information to be provided to the
7 pregnant woman regarding the ultrasound upon request of the
8 pregnant woman, and requires the attending health care provider
9 to document the pregnant woman's declining of an ultrasound in
10 the pregnant woman's medical record. The bill provides that
11 the provision is not to be interpreted to limit the number of
12 ultrasounds provided to a woman during pregnancy or to hold a
13 provider liable for not providing an ultrasound as specified
14 under the provision if the pregnant woman does not seek
15 prenatal care.

16 The bill directs an attending health care provider to
17 provide to a pregnant woman prior to the third trimester of the
18 pregnancy, educational materials regarding, and an explanation
19 of the procedure to monitor, fetal movement to reduce the
20 risk of fetal death. The bill specifies that the center for
21 congenital and inherited disorders shall make the educational
22 materials available to attending health care providers upon
23 request.

24 The bill adds to Code chapter 136A (center for congenital
25 and inherited disorders) a requirement that each newborn born
26 in this state receive a pulse oximetry screening test in
27 conjunction with the metabolic screening required under the
28 Code chapter. An attending health care provider is required to
29 ensure that every newborn under the provider's care receives
30 the pulse oximetry screening test. However, the requirement
31 does not apply if a parent objects to the screening. If a
32 parent objects to the screening, the attending health care
33 provider is required to document the refusal in the newborn's
34 medical record and to obtain a written refusal from the parent
35 and report the refusal to the department of public health.

1 The results of the screening are to be reported in a manner
2 consistent with the reporting of the results of metabolic
3 screenings and in accordance with rules adopted by the center
4 for congenital and inherited disorders in collaboration with
5 DPH.

6 The bill requires that a policy, contract, or plan providing
7 for third-party payment or prepayment of health or medical
8 expenses provide minimum ultrasound benefits coverage on
9 or after July 1, 2013. The bill specifies the classes of
10 third-party payment provider contracts or policies subject and
11 not subject to the requirement; defines "minimum ultrasound
12 benefits coverage"; and requires that notice of availability
13 and the voluntary nature of the coverage be provided to the
14 insured. The bill provides that the provision is not to be
15 interpreted to limit the number of ultrasounds provided to a
16 woman during pregnancy or to hold a provider liable for not
17 providing an ultrasound covered under the bill if the insured
18 does not seek prenatal care. The bill directs the commissioner
19 of insurance to adopt rules under Code chapter 17A necessary to
20 implement the provision.

21 The bill requires that a policy, contract, or plan providing
22 for third-party payment or prepayment of health or medical
23 expenses provide coverage for the newborn pulse oximetry
24 screening as specified in Code section 136A.5A as enacted
25 in the bill. The bill specifies the classes of third-party
26 payment provider contracts, policies, or plans subject and
27 not subject to the requirement, and requires that notice of
28 availability of the coverage be provided to the insured. The
29 bill directs the commissioner of insurance to adopt rules under
30 Code chapter 17A necessary to implement the provision.

31 The bill also directs the department of human services (DHS)
32 to include as covered benefits under the medical assistance
33 program the prenatal ultrasounds as specified pursuant to Code
34 section 135.131A and the newborn pulse oximetry screening
35 tests as specified pursuant to Code section 136A.5A. The bill

S.F. 196

1 directs DHS to amend the Medicaid state plan as necessary to
2 implement the provision.

3 The bill includes a Code editor directive to create a new
4 division in Code chapter 135 (department of public health) to
5 include the Code sections relating to prenatal ultrasounds and
6 fetal movement education.