HOUSE FILE 334 BY BERGAN

A BILL FOR

- l An Act relating to coverage for the CenteringPregnancy model of
- 2 group prenatal care under the Medicaid program.
- 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

H.F. 334

Section 1. MEDICAID GROUP PRENATAL CARE —
 2 CENTERINGPREGNANCY MODEL.

3 1. The general assembly finds all of the following:

4 a. CenteringPregnancy is an evidence-based model of group
5 prenatal care that has been shown to improve birth outcomes for
6 both mothers and babies.

b. Research indicates that the benefits of
8 CenteringPregnancy include increased birth weights, increased
9 rates of breastfeeding, reduced risk of pre-term pregnancies,
10 and reduced risk of gestational diabetes.

11 c. Across studies, CenteringPregnancy reduces the odds 12 of premature birth, the single largest contributor to infant 13 mortality, by between thirty-three and forty-seven percent.

14 d. CenteringPregnancy provides even greater benefits 15 to certain high-risk populations and can be effective at 16 reducing health disparities related to race, ethnicity, and 17 socioeconomic status.

e. By reducing the rate of negative birth outcomes,
CenteringPregnancy prevents high-cost medical interventions and
reduces overall costs of care.

f. Expanding patient access to CenteringPregnancy within 22 Iowa's Medicaid program will simultaneously improve population 23 health outcomes and reduce overall costs of health care 24 delivery.

25 2. The department of health and human services shall submit 26 any state plan amendment or waiver to the centers for Medicare 27 and Medicaid services of the United States department of 28 health and human services as necessary for approval to include 29 group prenatal care based on the CenteringPregnancy model as a 30 covered service under the Medicaid program.

31 3. Expenses of a provider for group prenatal care shall be 32 reimbursed provided that all of the following criteria are met: 33 a. The provider, including but not limited to a federally 34 qualified health center or a community health center, is a site 35 accredited by the centering healthcare institute or is a site

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LSB 2134YH (3) 90 pf/rh 1 engaged in an active implementation contract with the centering 2 healthcare institute, that utilizes the CenteringPregnancy 3 model.

b. The provider incorporates the applicable information
outlined in any best practices manual for prenatal and
postpartum maternal care developed by the department of health
and human services into the curriculum for each group prenatal
visit.

9 c. The provider ensures that each group prenatal care visit
10 is at least one and one-half hours in duration with a minimum
11 of two women and a maximum of twenty women participating.
12 d. The provider provides that no more than ten group
13 prenatal care visits occur per pregnancy.

14 4. As used in this section, "group prenatal care services" 15 means a series of prenatal care visits provided in a group 16 setting which are based upon the CenteringPregnancy model 17 developed by the centering healthcare institute and which 18 include health assessments, social and clinical support, and 19 educational activities.

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EXPLANATION

The inclusion of this explanation does not constitute agreement with the explanation's substance by the members of the general assembly.

This bill requires the department of health and human services (HHS) to receive federal approval to include group prenatal care based on the CenteringPregnancy model as a covered service under the Medicaid program. Reimbursement r is contingent upon the provider of group prenatal care, including but not limited to a federally qualified health center or a community health center, being a site accredited by the centering healthcare institute or a site engaged in an active implementation contract with the centering healthcare institute, that utilizes the CenteringPregnancy model; incorporating the applicable information outlined in any best developed by HHS into the curriculum for each group prenatal

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1 visit; ensuring that each group prenatal care visit is at least 2 1.5 hours in duration with a minimum of two women and a maximum 3 of 20 women participating; and providing that no more than 4 10 group prenatal care visits occur per pregnancy. The bill 5 defines "group prenatal care services" as a series of prenatal 6 care visits provided in a group setting which are based 7 upon the CenteringPregnancy model developed by the centering 8 healthcare institute and which include health assessments, 9 social and clinical support, and educational activities.

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