

WEST VIRGINIA LEGISLATURE

2020 REGULAR SESSION

Introduced

Senate Bill 716

FISCAL
NOTE

BY SENATORS TAKUBO AND STOLLINGS

[Introduced February 6, 2020; referred
to the Committee on Health and Human Resources;
and then to the Committee on Finance]

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

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.

20 (b) The department shall:

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

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

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

32 (4) The department shall be is 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.

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

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

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 sterilization.

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 sterilization 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.