2021 SENATE BILL 668

November 2, 2021 - Introduced by Senators JOHNSON, AGARD, ROYS, BEWLEY, ERPENBACH, LARSON, RINGHAND, SMITH, WIRCH and CARPENTER, cosponsored by Representatives STUBBS, CARRERA, HONG, BALDEH, ANDERSON, ANDRACA, BOWEN, BROSTOFF, CONLEY, CONSIDINE, EMERSON, HAYWOOD, HEBL, HESSELBEIN, B. MEYERS, NEUBAUER, OHNSTAD, POPE, SHANKLAND, SHELTON, SINICKI, SNODGRASS, SPREITZER, SUBECK, VINING and VRUWINK. Referred to Committee on Health.

AN ACT to create 49.45 (30y), 49.46 (2) (b) 12e., 609.803 and 632.895 (15r) of the statutes; relating to: reimbursement of maternal mental health screenings under the Medical Assistance program and coverage of maternal mental health screenings by health policies and plans.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services to request any necessary waiver of federal Medicaid law, amendment to the state Medical Assistance plan, or other federal approval to allow Medical Assistance reimbursement for maternal mental health screenings. The bill directs DHS to develop standards and best practices for maternal mental health screenings in consultation with organizations that work to improve maternal mental health and that are led by Black persons, Indigenous persons, or people of color. The Medical Assistance program is a joint state and federal program that provides health services to individuals who have limited financial resources. Additionally, the bill requires health insurance policies and self-insured governmental health plans to provide coverage of a maternal mental health screening as described in the bill for each pregnancy.

This proposal may contain a health insurance mandate requiring a social and financial impact report under s. 601.423, stats.
For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 49.45 (30y) of the statutes is created to read:

49.45 (30y) MATERNAL MENTAL HEALTH SCREENINGS. (a) A maternal mental health screening under s. 49.46 (2) (b) 12e. that adheres to the standards in par. (b) provided to an individual is reimbursable under the Medical Assistance program.

(b) The department, in consultation with organizations that work to improve maternal mental health and that are led by Black persons, Indigenous persons, or people of color, shall develop standards and best practices for maternal mental health screenings.

(c) If the department determines that it is unable to implement this subsection without a state plan amendment or waiver of federal law, the department shall submit to the federal department of health and human services any state plan amendment or waiver of federal law necessary to implement this subsection. If the federal government disapproves the amendment or waiver request, the department is not required to implement this subsection.

SECTION 2. 49.46 (2) (b) 12e. of the statutes is created to read:

49.46 (2) (b) 12e. Subject to the requirements under s. 49.45 (30y), maternal mental health screenings.

SECTION 3. 609.803 of the statutes is created to read:

609.803 MATERNAL MENTAL HEALTH SCREENINGS. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.895 (15r).
SECTION 4. 632.895 (15r) of the statutes is created to read:

632.895 (15r) MATERNAL MENTAL HEALTH SCREENING. Every disability insurance
policy and self-insured health plan of the state or a county, city, village, town, or
school district that provides maternity coverage shall cover a maternal mental
health screening for each pregnancy as described in s. 49.46 (2) (b) 12e.

SECTION 5. Initial applicability.

(1) For policies and plans containing provisions inconsistent with s. 632.895
(15r), the treatment of s. 632.895 (15r) first applies to policy or plan years beginning
on the effective date of this subsection, except as provided in sub. (2).

(2) For policies and plans that are affected by a collective bargaining agreement
containing provisions inconsistent with s. 632.895 (15r), the treatment of s. 632.895
(15r) first applies to policy or plan years beginning on the effective date of this
subsection or on the day on which the collective bargaining agreement is newly
established, extended, modified, or renewed, whichever is later.

(END)