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HOSPITAL MATERNITY STAYS

House Bill 5109

Sponsor: Rep. Sandra Hill Committee: Insurance

Complete to 10-6-95

A SUMMARY OF HOUSE BILL 5109 AS INTRODUCED 9-21-95

The bill would amend the HMO Act within the Public Health Code to require that group and individual health maintenance organization contracts that provide maternity benefits provide coverage for a mother and her newly born child of a minimum of 48 hours of in-patient hospital services following a vaginal delivery and a minimum of 96 hours of in-patient hospital services following a cesarean section.

The requirement would not apply to an HMO contract providing services for post-delivery care to a mother and newly born child in the home unless the in-patient services were requested by the mother or were determined medically necessary by the obstetrician, pediatrician, or other attending physician. Post-delivery care would have to consist of a minimum of three home visits, in accordance with accepted maternal and neonatal physical assessments, by a registered nurse with at least three years' experience in community maternal and child health nursing. Services provided by the nurse would include parent education, assistance and training in breast or bottle feeding, and the performance of necessary and appropriate clinical tests. The home visits would have to be conducted within 24 hours, within 25 to 48 hours, and within 96 to 120 hours following the discharge of the mother and child.

An HMO would be required to provide prominent written notice to its enrollees about the required coverage in the first mailing to the enrollee after the effective date of the bill or by January 1, 1997, whichever was earliest.

MCL 333.21054u