

ISSUE BRIEF | Senate Bills 21-009, 21-025, 21-193, and 21-194

Access to Perinatal and Family Planning Care

Background

Multiple bills passed this session aimed at increasing access to perinatal and family planning care and services. CHA was heavily involved in conversations with proponents and sponsors of Senate Bills (SB) 21-193 and 21-194, aimed at improving pregnancy and childbirth outcomes. CHA also monitored two bills, SB 21-009 and SB 21-025, that will expand access to certain family planning and perinatal services for specific populations through Colorado's Medicaid Program and Children's Basic Health Plan.

SB 21-193: Protection of Pregnant People in Perinatal Period

SB 21-193 makes changes to statute concerning care for pregnant persons, which addresses medical malpractice insurance coverage, policies for health facilities that provide labor and delivery services, and the treatment of pregnant persons in correctional facilities.

What You Need to Know

This bill makes several significant changes to:

- Health Facilities requiring the Colorado Department of Public Health and Environment's (CDPHE) Health Facilities Division to ensure health facilities have policies in place by Jan. 1, 2022, that:
 - o Allow a birthing person to have a companion in addition to their partner;
 - Allow newborns to remain with their families;
 - o Not exclude persons who are giving physiologic birth from receiving care; and
 - Accept transfers of pregnant persons from their home or birthing center without discriminating against them based on their protected class or planned place of birth.
- Medical Malpractice requiring every insurer that offers a policy of medical malpractice to cover care during the entire course of a person's vaginal birth after a previous caesarian birth.
- Colorado Civil Rights Commission (CCRC) authorizing the CCRC to receive reports alleging that proper maternity care is not being provided to pregnant persons.

There are also several new requirements related to correctional facilities and health facilities that provide labor and childbirth services to a person who is in custody, including requirements for CDPHE to ensure similar policies as those listed above and trainings and policy creation for incarcerated birthing persons.

Additional Resources

SB 21-193 and Fiscal Note

Continued



SB 21-194: Maternal Health Providers

SB 21-194 places new requirements on certain health care providers, health benefit plans, and Colorado's Medicaid program related to pregnant persons, and requires CDPHE to conduct research and make recommendations related to perinatal health in Colorado.

What You Need to Know

The bill makes several statutory changes related to:

- Required coverage and services insurers offering health benefit plans in Colorado, including the
 Department of Health Care Policy and Financing (HCPF), to reimburse participating providers for health
 care services related to labor and delivery in a manner that promotes high-quality, cost-effective care and
 prevents risk in subsequent pregnancies; and does not discriminate based on the type of provider or
 facility.
- Medicaid and Children's Health Plan (CHP+) Postpartum Coverage a person who was eligible for all
 pregnancy related and postpartum services under Medicaid and CHP+ for 60 days following pregnancy will
 remain continuously eligible for all services under Medicaid and CHP+ for the 12-month postpartum
 period if permissible under federal law. HCPF must seek federal authorization, including any state plan
 amendments, so that such coverage is extended no later than July 1, 2022.
- Colorado Maternal Mortality Review Committee (CMMRC) CMMRC will submit recommendations on reducing maternal mortality and improving maternal health equity on July 1, 2023, and every three years after, and is allowed to distribute committee reports to health facilities and the Health Equity Commission. The CMMRC is also required to make recommendations to improve the collection and public reporting of maternal health data from hospitals, health systems, midwifery practices, and birthing centers.

Additional Resources

SB 21-194 and Fiscal Note

SB 21-009: Reproductive Health Care Program

SB 21-009 directs HCPF to administer a reproductive health care program to individuals who are not eligible for coverage under Medicaid because of their citizenship or immigration status, beginning on Jan. 1, 2022. The program allows eligible individuals to receive various reproductive health services upon request and at no cost.

What You Need to Know

Beginning on Jan. 1, 2022, the following services may be delivered through the reproductive health care program:

- Any contraceptive drug, device, or product approved by the Food and Drug Administration (FDA);
- Services related to the administration and monitoring of such products, including management of side effects;
- Counseling services for continued adherence to a prescribed regiment;
- Device insertion and removal; and,

Continued



What You Need to Know (continued)

 Any other contraceptive method and counseling services identified by the Department of Health and Human Services or the Women's Preventive Services Guidelines.

The bill also specifies that family planning services provided under Medicaid include a 12-month supply of any FDA-approved contraceptive drug, device, or product, or an alternative if indicated by a health care provider.

Additional Resources

- SB 21-009
- Women's Preventive Services Guidelines (Dec. 17, 2019)

SB 21-025: Family Planning Services for Eligible Individuals

SB 21-025 requires HCPF to seek federal approval by Jan. 31, 2022, to expand family planning services to individuals earning up to 260 percent of the federal poverty level (FPL).

What You Need to Know

If HCPF obtains federal approval, the family planning services that must be covered include:

- Medically necessary evaluations or preventive services, such as tobacco utilization screening, counseling, testing, and cessation services;
- Contraception, including a one-year supply unless requested otherwise;
- Health care or counseling services focused on preventing, delaying, or planning for a pregnancy;
- Sterilization services;
- Cervical cancer screening and prevention;
- Basic fertility services; and,
- Sexually transmitted infection (STI) diagnosis and treatment.

HCPF is also required to collaborate with Connect for Health Colorado and interested stakeholders to encourage enrollment in all health insurance options for eligible individuals.

Additional Resources

• SB 21-025 and Fiscal Note

