

FIRST REGULAR SESSION

HOUSE BILL NO. 305

100TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE WALKER.

0722H.011

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To amend chapter 192, RSMo, by adding thereto one new section relating to maternal care.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 192, RSMo, is amended by adding thereto one new section, to be known as section 192.330, to read as follows:

192.330. 1. The provisions of this section shall be known and may be cited as the "Maternal CARE Act". For purposes of this section, "pregnancy medical home", means a non-residential facility located in this state that offers obstetrical care.

2. The department of health and senior services shall develop a pregnancy medical home program, which shall work to end preventable morbidity and mortality in maternity care by using evidence-based quality improvement to protect the health of mothers during pregnancy and childbirth and in the postpartum period, to reduce neonatal and infant mortality, and to eliminate racial disparities in maternal health outcomes.

3. The department shall work with relevant stakeholders to develop and carry out the program, including:

(a) State and local agencies responsible for MO HealthNet, public health, social services, mental health, and substance abuse treatment and support;

(b) Health care providers who serve pregnant women, including doctors, nurses, and midwives;

(c) Community-based health workers, including perinatal health workers, doulas, and home visitors; and

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

19 **(d) Community-based organizations and individuals representing the communities**
20 **with the highest overall rates of maternal mortality and morbidity and the greatest racial**
21 **disparities in rates of maternal mortality and morbidity.**

22 **4. The department shall require pregnancy medical homes who participate in the**
23 **program to follow evidence-based practices for maternity care.**

24 **5. The department shall require each obstetric provider performing duties at a**
25 **pregnancy home to complete training on how to provide culturally and linguistically**
26 **competent care.**

27 **6. The department shall require each pregnancy medical home participating in the**
28 **program to conduct a standardized medical, obstetric, and psychological risk assessment**
29 **for every pregnant patient at the patient's first prenatal appointment.**

30 **7. The department shall assign a care manager to each pregnancy medical home**
31 **participating in the program. The care manager shall coordinate care, including**
32 **coordinating resources and referrals for health care and social services that are not**
33 **available from the pregnancy medical home, for each patient of the pregnancy medical**
34 **home who is eligible for services under the program.**

35 **8. The department shall prioritize care of pregnant and postpartum women who**
36 **are enrolled in MO HealthNet.**

37 **9. The department may promulgate all necessary rules and regulations for the**
38 **administration of this section. Any rule or portion of a rule, as that term is defined in**
39 **section 536.010, that is created under the authority delegated in this section shall become**
40 **effective only if it complies with and is subject to all of the provisions of chapter 536 and,**
41 **if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any**
42 **of the powers vested with the general assembly pursuant to chapter 536 to review, to delay**
43 **the effective date, or to disapprove and annul a rule are subsequently held**
44 **unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted**
45 **after August 28, 2019, shall be invalid and void.**

✓