

119TH CONGRESS
1ST SESSION

S. _____

To prevent cost-sharing requirements for prenatal, childbirth, neonatal,
perinatal, or postpartum health care.

IN THE SENATE OF THE UNITED STATES

Mrs. HYDE-SMITH (for herself, Mr. KAINE, Mr. HAWLEY, and Mrs. GILLI-
BRAND) introduced the following bill; which was read twice and referred
to the Committee on _____

A BILL

To prevent cost-sharing requirements for prenatal, childbirth,
neonatal, perinatal, or postpartum health care.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Supporting Healthy
5 Moms and Babies Act”.

1 **SEC. 2. ESSENTIAL HEALTH BENEFITS TO INCLUDE PRE-**
2 **NATAL, CHILDBIRTH, NEONATAL, PERINATAL,**
3 **AND POSTPARTUM HEALTH CARE.**

4 (a) IN GENERAL.—Section 1302(b) of the Patient
5 Protection and Affordable Care Act (42 U.S.C. 18022(b))
6 is amended—

7 (1) by redesignating paragraph (5) as para-
8 graph (6); and

9 (2) by inserting after paragraph (4) the fol-
10 lowing:

11 “(5) MATERNITY AND NEWBORN CARE RE-
12 QUIREMENTS.—

13 “(A) IN GENERAL.—The benefits referred
14 to in paragraph (1)(D) shall include com-
15 prehensive prenatal, labor and delivery, neo-
16 natal, perinatal, and postpartum care and
17 screenings.

18 “(B) REQUIREMENT.—At a minimum, the
19 care and screenings described in subparagraph
20 (A) shall include—

21 “(i) ultrasounds by a licensed pro-
22 vider;

23 “(ii) services caring for the individual
24 relating to spontaneous pregnancy loss or
25 spontaneous miscarriage;

1 “(iii) delivery services, including serv-
2 ices rendered during delivery, such as an-
3 esthesiology, fetal monitoring, consulta-
4 tions with specialists, and services relating
5 to postpartum health;

6 “(iv) the services required to be cov-
7 ered under section 2725 of the Public
8 Health Service Act, section 711 of the Em-
9 ployee Retirement Income Security Act of
10 1974, and section 9811 of the Internal
11 Revenue Code of 1986;

12 “(v) postpartum care services that are
13 not preventive, including behavioral health
14 services, for conditions that may have been
15 exacerbated by pregnancy or conditions as
16 a result of pregnancy, such as diabetes, hy-
17 pertension, and obesity; and

18 “(vi) for legal parents of a new child
19 who do not physically give birth to the
20 child, behavioral health services relating to
21 new parenthood for the 1-year period be-
22 ginning on the day of the birth of the
23 child.

24 “(C) DEFINITION OF POSTPARTUM.—In
25 this paragraph, the term ‘postpartum’ means

1 the 1-year period beginning immediately after
2 the pregnancy ends.”.

3 (b) APPLICATION.—The amendment made by sub-
4 section (a) shall be considered as if included in the enact-
5 ment of the Patient Protection and Affordable Care Act
6 (Public Law 111–148).

7 (c) PLAN YEARS.—The amendment made by sub-
8 section (a) shall apply with respect to plan years beginning
9 on or after the date of enactment of this Act.

10 **SEC. 3. NO COST-SHARING FOR PRENATAL, CHILDBIRTH,**
11 **NEONATAL, PERINATAL, OR POSTPARTUM**
12 **HEALTH CARE.**

13 (a) IN GENERAL.—Part D of title XXVII of the Pub-
14 lic Health Service Act (42 U.S.C. 300gg–111 et seq.) is
15 amended by adding at the end the following:

16 **“SEC. 2799A-11. NO COST-SHARING FOR PRENATAL, CHILD-**
17 **BIRTH, NEONATAL, PERINATAL, OR**
18 **POSTPARTUM HEALTH CARE.**

19 “(a) IN GENERAL.—For plan years beginning on or
20 after the date of enactment of the Supporting Healthy
21 Moms and Babies Act, a group health plan and a health
22 insurance issuer offering group or individual health insur-
23 ance coverage shall provide coverage for the benefits de-
24 scribed in section 1302(b)(1)(D) of the Patient Protection
25 and Affordable Care Act, to the same extent that qualified

1 health plans (as defined in section 1301 of such Act) are
2 required to provide coverage for such benefits, and shall
3 not impose any cost-sharing requirements for such bene-
4 fits.

5 “(b) DEFINITION OF COST-SHARING.—In this sec-
6 tion, the term ‘cost-sharing’ has the meaning given the
7 term in section 1302(c)(3) of the Patient Protection and
8 Affordable Care Act.”.

9 (b) ERISA.—

10 (1) IN GENERAL.—Subpart B of part 7 of sub-
11 title B of title I of the Employee Retirement Income
12 Security Act of 1974 (29 U.S.C. 1185 et seq.) is
13 amended by adding at the end the following:

14 **“SEC. 726. NO COST-SHARING FOR PRENATAL, CHILDBIRTH,**
15 **NEONATAL, PERINATAL, OR POSTPARTUM**
16 **HEALTH CARE.**

17 “(a) IN GENERAL.—For plan years beginning on or
18 after the date of enactment of the Supporting Healthy
19 Moms and Babies Act, a group health plan and a health
20 insurance issuer offering group health insurance coverage
21 shall provide coverage for the benefits described in section
22 1302(b)(1)(D) of the Patient Protection and Affordable
23 Care Act, to the same extent that qualified health plans
24 (as defined in section 1301 of such Act) are required to

1 provide coverage for such benefits, and shall not impose
2 any cost-sharing requirements for such benefits.

3 “(b) DEFINITION OF COST-SHARING.—In this sec-
4 tion, the term ‘cost-sharing’ has the meaning given the
5 term in section 1302(c)(3) of the Patient Protection and
6 Affordable Care Act.”.

7 (2) CLERICAL AMENDMENT.—The table of con-
8 tents in section 1 of the Employee Retirement In-
9 come Security Act of 1974 (29 U.S.C. 1001 et seq.)
10 is amended by inserting after the item relating to
11 section 725 the following:

“Sec. 726. No cost-sharing for prenatal, childbirth, neonatal, perinatal, or
postpartum health care.”.

12 (c) INTERNAL REVENUE CODE OF 1986.—

13 (1) IN GENERAL.—Subchapter B of chapter
14 100 of the Internal Revenue Code of 1986 is amend-
15 ed by adding at the end the following:

16 **“SEC. 9826. NO COST-SHARING FOR PRENATAL, CHILD-**
17 **BIRTH, NEONATAL, PERINATAL, OR**
18 **POSTPARTUM HEALTH CARE.**

19 “(a) IN GENERAL.—For plan years beginning on or
20 after the date of enactment of the Supporting Healthy
21 Moms and Babies Act, a group health plan shall provide
22 coverage for the benefits described in section
23 1302(b)(1)(D) of the Patient Protection and Affordable
24 Care Act, to the same extent that qualified health plans

1 (as defined in section 1301 of such Act) are required to
2 provide coverage for such benefits, and shall not impose
3 any cost-sharing requirements for such benefits.

4 “(b) DEFINITION OF COST-SHARING.—In this sec-
5 tion, the term ‘cost-sharing’ has the meaning given the
6 term in section 1302(c)(3) of the Patient Protection and
7 Affordable Care Act.”.

8 (2) CLERICAL AMENDMENT.—The table of sec-
9 tions for subchapter B of chapter 100 of the Inter-
10 nal Revenue Code of 1986 is amended by adding at
11 the end the following new item:

“Sec. 9826. No cost-sharing for prenatal, childbirth, neonatal, perinatal, or
postpartum health care.”.

12 (d) APPLICATION.—This section shall be considered
13 as if included in the enactment of the Patient Protection
14 and Affordable Care Act (Public Law 111–148).