
HOUSE BILL 2639

State of Washington

54th Legislature

1996 Regular Session

By Representatives Lambert and Thompson

Read first time 01/16/96. Referred to Committee on Health Care.

1 AN ACT Relating to quality assurance health insurance coverage;
2 adding new sections to chapter 48.43 RCW; adding a new section to Title
3 18 RCW; and creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** A new section is added to chapter 48.43 RCW
6 to read as follows:

7 The legislature finds that controlling the cost of health care
8 services is of great importance; however, unless quality assurance
9 standards are maintained, cost control strategies may fail. Further,
10 cost control efforts should not impede the patient's prudent choice of
11 health care provider or the provider's clinical sovereignty regarding
12 appropriate patient care. The legislature further finds that although
13 the appropriate response to the concerns regarding quality assurance
14 should be ultimately addressed through uniform standards of care, the
15 present concern regarding appropriate health care services for mothers
16 and their newly born children is of paramount importance and requires
17 immediate attention. It is the intent of the legislature to establish
18 immediate provisional remedies to the problems of appropriate mother
19 and newborn care, while providing a framework for a more comprehensive

1 solution to concerns of provider choice, clinical sovereignty, quality
2 assurance, and cost-effectiveness for all health care services.

3 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.43 RCW
4 to read as follows:

5 Unless otherwise specifically provided, the definitions in this
6 section apply throughout sections 3 and 4 of this act.

7 (1) "Attending provider" means a provider who has clinical hospital
8 privileges consistent with RCW 70.43.020 and is a physician licensed
9 under chapter 18.57 or 18.71 RCW, a certified nurse midwife or another
10 advanced registered nurse practitioner licensed under chapter 18.79
11 RCW, or a midwife licensed under chapter 18.50 RCW.

12 (2) "Health carrier" or "carrier" means disability insurers
13 regulated under chapter 48.20 or 48.21 RCW, health care services
14 contractors regulated under chapter 48.44 RCW, health maintenance
15 organizations regulated under chapter 48.46 RCW, plans operating under
16 the health care authority under chapter 41.05 RCW, the state health
17 insurance pool operating under chapter 48.41 RCW, and insuring entities
18 regulated under this chapter.

19 (3) "Postbirth care" means services that include, but are not
20 limited to, physical and emotional assessment of the mother and newly
21 born child, parent education, assistance and training in breast or
22 bottle feeding, follow-up lactation care, assessment of the home
23 support system, and the performance of any medically necessary and
24 appropriate clinical tests. Effective January 1, 1997, such services
25 must be consistent with protocols and guidelines adopted by the state
26 department of health after consideration of national pediatric,
27 obstetric, and nursing professional organizations' guidelines for these
28 services.

29 (4) "Postbirth care provider" means an attending provider or a
30 registered nurse as defined by RCW 18.79.020 who has received specific
31 training in the delivery of postbirth care.

32 NEW SECTION. **Sec. 3.** A new section is added to chapter 48.43 RCW
33 to read as follows:

34 (1) Effective January 1, 1997, health carriers that provide
35 coverage for maternity care services shall comply with the following
36 requirements:

1 (a) Coverage for the newly born child must be no less than the
2 coverage of the child's mother for no less than three weeks, even if
3 there are separate hospital admissions.

4 (b) Coverage for inpatient maternity and postbirth care to a mother
5 and her newly born child must be as follows:

6 (i) For vaginal deliveries without medical complications, no less
7 than twenty-four hours from the time of birth;

8 (ii) For deliveries by cesarean section without medical
9 complications, no less than ninety-six hours from the time of birth;

10 (iii) For labor and deliveries with medical complications, a period
11 of time as determined by the attending provider, consistent with
12 protocols and guidelines recommended by national pediatric and
13 obstetric professional organizations.

14 (c) Decisions to shorten the length of inpatient stay to less than
15 that provided under (b)(i) and (ii) of this subsection may be made only
16 by the attending providers with the agreement of the mother.

17 (d) Mothers and newly born children who are discharged pursuant to
18 (b) of this subsection must be covered for no less than one postbirth
19 care visit to be made by a postbirth care provider on the third or
20 fourth day after birth. Mothers and newly born children who are
21 discharged pursuant to (c) of this subsection must be covered for no
22 less than three postbirth care visits within fourteen days of
23 discharge, however, the first visit must be made by a postbirth care
24 provider on the third or fourth day after birth. All newly born
25 children covered under this section must receive a postbirth care visit
26 made by a pediatrician or family practitioner licensed under chapter
27 18.57 or 18.71 RCW prior to the thirty-fifth day of birth. Postbirth
28 care visits may be made in a provider's office, clinic, hospital, or
29 other appropriate alternative site.

30 (e) Deselection, termination of the coverage, requirements of
31 additional documentation or utilization review, reduction in
32 appropriate payment, or the imposition of financial disincentives to
33 attending providers, postbirth care providers, or health care
34 facilities who order care consistent with the provisions of this
35 section is unlawful.

36 (2) Notice in writing regarding the availability of maternity and
37 postbirth care coverage as set forth in sections 2 through 4 of this
38 act must be transmitted at the earliest opportunity to all
39 policyholders, but in no case later than January 1, 1997.

1 NEW SECTION. **Sec. 4.** A new section is added to chapter 48.43 RCW
2 to read as follows:

3 Effective January 1, 1997, health carriers that provide coverage
4 for maternity and postbirth shall provide identical coverage to an
5 enrolled beneficiary's dependent child and her newly born child if the
6 beneficiary's dependent child: Is nineteen years of age or younger or
7 between the ages of twenty and twenty-three and registered and
8 attending an accredited secondary school or institution of higher
9 education; is the natural, step, or legally adopted child of the
10 beneficiary; and qualifies as a dependent under the United States
11 internal revenue code and is covered under the beneficiary policy.
12 Coverage for the newly born child must be for a period of time no less
13 than the period of time the beneficiary's dependent child is covered.

14 NEW SECTION. **Sec. 5.** A new section is added to Title 18 RCW to
15 read as follows:

16 (1) Any quality assurance commission, professional regulatory
17 board, committee, or professional association for professions subject
18 to the secretary's authority under RCW 18.130.040 may recommend to the
19 secretary the adoption of rules providing for standards of patient care
20 with respect to the terms and conditions of a contract or agreement
21 between a licensee and a payer of health services. The secretary shall
22 consider recommendations only if the proposed rule would promote
23 appropriate clinical sovereignty and foster compliance with standards
24 of patient care, professional conduct, and scopes of practice; promote
25 quality medical and health practice to improve the public's health
26 status; prevent unreasonable interference with patient access to needed
27 health services; or protect the public health and safety.

28 (2) The secretary is authorized to adopt rules based upon
29 recommendations made in accordance with subsection (1) of this section.
30 When practical and appropriate and with the approval of the appropriate
31 commission, board, or committee, the secretary shall apply the rules to
32 all licensees to promote consistent standards for the contracting
33 process between licensees and payers of health services.

34 (3) Beginning one year after the promulgation of standards of
35 patient care under subsection (1) of this section, the secretary may
36 impose such standards of patient care as a condition of licensure,
37 certification, or registration. Entering into a contract with a health

1 carrier or other purchaser of health care services that does not meet
2 such standards constitutes a violation of practice requirements.

3 NEW SECTION. **Sec. 6.** The insurance commissioner shall adopt rules
4 to implement sections 1 through 4 of this act.

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