SECOND REGULAR SESSION

HOUSE BILL NO. 1063

97TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE GRISAMORE.

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D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To repeal sections 210.278 and 210.950, RSMo, and to enact in lieu thereof three new sections relating to children and families.

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

Section A. Sections 210.278 and 210.950, RSMo, are repealed and three new sections enacted in lieu thereof, to be known as sections 208.662, 210.278, and 210.950, to read as follows:

208.662. 1. There is hereby established within the department of social services the "Show-Me Healthy Babies Program" as a separate children's health insurance program (CHIP) for any low-income unborn child. The program shall be established under the authority of Title XXI of the federal Social Security Act, the State Children's Health Insurance Program, as amended, and 42 CFR 457.1.

2. For an unborn child to be enrolled in the show-me healthy babies program, his or her mother shall not be eligible for coverage under Title XIX of the federal Social Security Act, the Medicaid program, as it is administered by the state, and shall not have access to affordable employer-subsidized health care insurance or other affordable health 10 care coverage that includes coverage for the unborn child. In addition, the unborn child shall be in a family with income eligibility of no more than three hundred percent of the federal poverty level, or the equivalent modified adjusted gross income, unless the income eligibility is set lower by the general assembly through appropriations. In calculating family size as it relates to income eligibility, the family shall include, in addition to other family members, the unborn child, or in the case of a mother with a multiple pregnancy, all unborn children.

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- 3. Coverage for an unborn child enrolled in the show-me healthy babies program shall include all prenatal care and pregnancy-related services that benefit the health of the unborn child and that promote healthy labor, delivery, and birth. Coverage need not 20 include services that are solely for the benefit of the pregnant mother, that are unrelated 21 to maintaining or promoting a healthy pregnancy, and that provide no benefit to the 22 unborn child. However, the department may include pregnancy-related assistance as defined in 42 U.S.C. 1397ll.
 - 4. There shall be no waiting period before an unborn child may be enrolled in the show-me healthy babies program. In accordance with the definition of child in 42 CFR 457.10, coverage shall include the period from conception to birth. The department shall develop a presumptive eligibility procedure for enrolling an unborn child. There shall be verification of the pregnancy.
 - 5. Coverage for the child shall continue for up to one year after birth, unless otherwise prohibited by law or unless otherwise limited by the general assembly through appropriations.
 - 6. Pregnancy-related and postpartum coverage for the mother shall begin on the day the pregnancy ends and extend through the last day of the month that includes the sixtieth day after the pregnancy ends, unless otherwise prohibited by law or unless otherwise limited by the general assembly through appropriations. The department may include pregnancy-related assistance as defined in 42 U.S.C. 1397ll.
 - 7. The department may provide coverage for an unborn child enrolled in the showme healthy babies program through:
 - (1) Direct coverage whereby the state pays health care providers directly or by contracting with a managed care organization or with a group or individual health insurance provider;
 - (2) A premium assistance program whereby the state assists in payment of the premiums, co-payments, coinsurance, or deductibles for a person who is eligible for health coverage through an employer, former employer, labor union, credit union, church, spouse, other organizations, other individuals, or through an individual health insurance policy that includes coverage for the unborn child, when such person needs assistance in paying such premiums, co-payments, coinsurance, or deductibles;
 - (3) A combination of direct coverage, such as when the unborn child is first enrolled, and premium assistance, such as after the child is born; or
 - (4) Any other similar arrangement whereby there:
 - (a) Are lower program costs without sacrificing health care coverage for the unborn child or the child up to one year after birth;

(b) Are greater covered services for the unborn child or the child up to one year after birth;

- (c) Is also coverage for siblings or other family members, including the unborn child's mother, such as by providing pregnancy-related assistance under 42 U.S.C. 1397ll, relating to coverage of targeted low-income pregnant women through the children's health insurance program (CHIP); or
- (d) Will be an ability for the child to transition more easily to non-government or less government-subsidized group or individual health insurance coverage after the child is no longer enrolled in the show-me healthy babies program.
- 8. The department shall provide information about the show-me healthy babies program to maternity homes as defined in section 135.600, pregnancy resource centers as defined in section 135.630, and other similar agencies and programs in the state that assist unborn children and their mothers. The department shall consider allowing such agencies and programs to assist in the enrollment of unborn children in the program, and in making determinations about presumptive eligibility and verification of the pregnancy.
- 9. Within sixty days after the effective date of this section, the department shall submit a state plan amendment or seek any necessary waivers from the federal Department of Health and Human Services requesting approval for the show-me healthy babies program.
- 10. At least annually, the department shall prepare and submit a report to the governor, the speaker of the house of representatives, and the president pro tempore of the senate analyzing and projecting the cost savings and benefits, if any, to the state, counties, local communities, school districts, law enforcement agencies, correctional centers, health care providers, employers, other public and private entities, and persons by enrolling unborn children in the show-me healthy babies program. The analysis and projection of cost savings and benefits, if any, may include but need not be limited to:
- (1) The higher federal matching rate for having an unborn child enrolled in the show-me healthy babies program versus the lower federal matching rate for a pregnant woman being enrolled in MO HealthNet or other federal programs;
- (2) The efficacy in providing services to unborn children through managed care organizations, group or individual health insurance providers or premium assistance, or through other nontraditional arrangements of providing health care;
- (3) The change in the proportion of unborn children who receive care in the first trimester of pregnancy due to a lack of waiting periods, by allowing presumptive eligibility, or by removal of other barriers, and any resulting or projected decrease in health problems

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and other problems for unborn children and women throughout pregnancy; at labor, delivery, and birth; and during infancy and childhood;

- (4) The change in healthy behaviors by pregnant women, such as the cessation of the use of tobacco, alcohol, illicit drugs, or other harmful practices, and any resulting or projected short-term and long-term decrease in birth defects; poor motor skills; vision, speech, and hearing problems; breathing and respiratory problems; feeding and digestive problems; and other physical, mental, educational, and behavioral problems; and
- (5) The change in infant and maternal mortality, pre-term births and low birth weight babies and any resulting or projected decrease in short-term and long-term medical and other interventions.
- 11. The show-me healthy babies program shall not be deemed an entitlement program, but instead shall be subject to a federal allotment or other federal appropriations and matching state appropriations.
- 12. Nothing in this section shall be construed as obligating the state to continue the show-me healthy babies program if the allotment or payments from the federal government end or are not sufficient for the program to operate, or if the general assembly does not appropriate funds for the program.
- 105 13. Nothing in this section shall be construed as expanding MO HealthNet or 106 fulfilling a mandate imposed by the federal government on the state.
 - 210.278. Neighborhood youth development programs shall be exempt from the child care licensing provisions under this chapter so long as the program meets the following requirements:
 - (1) The program is affiliated and in good standing with [a] either:
 - 5 **(a)** A national congressionally chartered organization's standards under Title 36, Public 6 Law 105-225; **or**
 - (b) A nationally federated organization's purposes, procedures, voluntary standards, and mandatory requirements that provide research-based curricula, delivered by trained professionals in a positive all-female environment;
 - 10 (2) The program provides activities designed for recreational, educational, and character building purposes for children six to seventeen years of age;
 - 12 (3) The governing body of the program adopts standards for care that at a minimum include staff ratios, staff training, health and safety standards, and mechanisms for assessing and enforcing the program's compliance with the standards;
 - 15 (4) The program does not collect compensation for its services except for one-time 16 annual membership dues not to exceed fifty dollars per year or program service fees for special

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activities such as field trips or sports leagues, except for current exemptions as written in section 210.211:

- 19 (5) The program informs each parent that the operation of the program is not regulated 20 by licensing requirements;
 - (6) The program provides a process to receive and resolve parental complaints; and
- 22 (7) The program conducts national criminal background checks for all employees and volunteers who work with children, as well as screening under the family care safety registry as 24 provided in sections 210.900 to 210.936.
- 210.950. 1. This section shall be known and may be cited as the "Safe Place for Newborns Act of 2002". The purpose of this section is to protect newborn children from injury and death caused by abandonment by a parent, and to provide safe and secure alternatives to such abandonment.
- 5 2. As used in this section, the following terms mean:
 - (1) "Hospital", as defined in section 197.020;
- 7 (2) "Maternity home", the same meaning as such term is defined in section 135.600;
- 8 (3) "Nonrelinquishing parent", the biological parent who does not leave a newborn infant 9 with any person listed in subsection 3 of this section in accordance with this section;
- 10 (4) "Pregnancy resource center", the same meaning as such term is defined in section 11 135.630;
- 12 (5) "Relinquishing parent", the biological parent or person acting on such parent's behalf 13 who leaves a newborn infant with any person listed in subsection 3 of this section in accordance 14 with this section.
 - 3. A parent shall not be prosecuted for a violation of section 568.030, 568.032, 568.045 or 568.050 for actions related to the voluntary relinquishment of a child up to forty-five days old pursuant to this section if:
- 18 (1) Expressing intent not to return for the child, the parent voluntarily delivered the child safely to the physical custody of any of the following persons:
- 20 (a) An employee, agent, or member of the staff of any hospital, maternity home, or 21 pregnancy resource center in a health care provider position or on duty in a nonmedical paid or 22 volunteer position;
- 23 (b) A firefighter or emergency medical technician on duty in a paid position or on duty 24 in a volunteer position; or
 - (c) A law enforcement officer;
- 26 (2) The child was no more than forty-five days old when delivered by the parent to any person listed in subdivision (1) of this subsection; and

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28 (3) The child has not been abused or neglected by the parent prior to such voluntary 29 delivery.

- 4. A parent voluntarily relinquishing a child under this section shall not be required to provide any identifying information about the child or the parent. No person shall induce or coerce, or attempt to induce or coerce, a parent into revealing his or her identity. No officer, employee, or agent of this state or any political subdivision of this state shall attempt to locate or determine the identity of such parent. In addition, any person who obtains information on the relinquishing parent shall not disclose such information except to the following:
- 36 (1) A birth parent who has waived anonymity or the child's adoptive parent;
 - (2) The staff of the department of health and senior services, the department of social services, or any county health or social services agency or licensed child welfare agency that provides services to the child;
 - (3) A person performing juvenile court intake or dispositional services;
 - (4) The attending physician;

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- 42 (5) The child's foster parent or any other person who has physical custody of the child;
 - (6) A juvenile court or other court of competent jurisdiction conducting proceedings relating to the child;
- (7) The attorney representing the interests of the public in proceedings relating to the 46 child; and
 - (8) The attorney representing the interests of the child.
 - 5. A person listed in subdivision (1) of subsection 3 of this section shall, without a court order, take physical custody of a child the person reasonably believes to be no more than forty-five days old and is delivered in accordance with this section by a person purporting to be the child's parent. If delivery of a newborn is made pursuant to this section in any place other than a hospital, the person taking physical custody of the child shall arrange for the immediate transportation of the child to the nearest hospital licensed pursuant to chapter 197.
 - 6. The hospital, its employees, agents and medical staff shall perform treatment in accordance with the prevailing standard of care as necessary to protect the physical health or safety of the child. The hospital shall notify the **children's** division [of family services] and the local juvenile officer upon receipt of a child pursuant to this section. The local juvenile officer shall immediately begin protective custody proceedings and request the child be made a ward of the court during the child's stay in the medical facility. Upon discharge of the child from the medical facility and pursuant to a protective custody order ordering custody of the child to the division, the children's division shall take physical custody of the child. The parent's voluntary delivery of the child in accordance with this section shall constitute the parent's implied consent to any such act and a voluntary relinquishment of such parent's parental rights.

7. In any termination of parental rights proceeding initiated after the relinquishment of a child pursuant to this section, the juvenile officer shall make public notice that a child has been relinquished, including the sex of the child, and the date and location of such relinquishment. Within thirty days of such public notice, the parent wishing to establish parental rights shall identify himself or herself to the court and state his or her intentions regarding the child. The court shall initiate proceedings to establish paternity, or if no person identifies himself as the father within thirty days, maternity. The juvenile officer shall make examination of the putative father registry established in section 192.016 to determine whether attempts have previously been made to preserve parental rights to the child. If such attempts have been made, the juvenile officer shall make reasonable efforts to provide notice of the abandonment of the child to such putative father.

- 8. (1) If a relinquishing parent of a child relinquishes custody of the child to any person listed in subsection 3 of this section in accordance with this section and to preserve the parental rights of the nonrelinquishing parent, the nonrelinquishing parent shall take such steps necessary to establish parentage within thirty days after the public notice or specific notice provided in subsection 7 of this section.
- (2) If either parent fails to take steps to establish parentage within the thirty-day period specified in subdivision (1) of this subsection, either parent may have all of his or her rights terminated with respect to the child.
- (3) When either parent inquires at a hospital regarding a child whose custody was relinquished pursuant to this section, such facility shall refer such parent to the children's division and the juvenile court exercising jurisdiction over the child.
- 9. The persons listed in subdivision (1) of subsection 3 of this section shall be immune from civil, criminal, and administrative liability for accepting physical custody of a child pursuant to this section if such persons accept custody in good faith. Such immunity shall not extend to any acts or omissions, including negligent or intentional acts or omissions, occurring after the acceptance of such child.
 - 10. The children's division shall:
- (1) Provide information and answer questions about the process established by this section on the statewide, toll-free telephone number maintained pursuant to section 210.145;
- (2) Provide information to the public by way of pamphlets, brochures, or by other ways to deliver information about the process established by this section.
- 11. It shall be an affirmative defense to prosecution for a violation of sections 568.030, 568.032, 568.045, and 568.050 that a parent who is a defendant voluntarily relinquished a child no more than one year old under this section.
 - 12. Nothing in this section shall be construed as conflicting with section 210.125.