

House \_\_\_\_\_ Amendment NO. \_\_\_\_\_

Offered By

1 AMEND House Committee Substitute for Senate Substitute No. 2 for Senate Bill No. 79, Page 13, Section  
2 191.648, Line 43, by inserting after said section and line the following:

3  
4 "191.708. 1. The chief medical officer or chief medical director of the department of health and  
5 senior services, the department of mental health, or the MO HealthNet division of the department of social  
6 services, or any licensed physician acting with the express written consent of the director of any such  
7 department or division, may, within his or her scope of practice, issue:

8 (1) Nonspecific recommendations for doula services;

9 (2) A medical standing order for prenatal vitamins; or

10 (3) A medical standing order for any other purpose, other than for controlled substances, that is  
11 promulgated by rule in compliance with chapter 536.

12 2. Any standing order issued under this section shall:

13 (1) Be made available on the relevant department's website while in effect;

14 (2) Terminate upon removal of the issuing medical professional's authority under this section by  
15 vacancy of his or her position or otherwise; and

16 (3) If not terminated sooner under subdivision (2) of this subsection, expire within one year of  
17 issuance unless renewed.

18 3. The chief medical officer, chief medical director, or other authorized and licensed physician  
19 described in subsection 1 of this section shall be immune from criminal prosecution, disciplinary action from  
20 his or her professional licensing board, and civil liability for issuing a medical standing order or  
21 recommendation in accordance with this section, including for any outcome related to the standing order or  
22 recommendation."; and

23  
24 Further amend said bill, Page 24, Section 208.152, Line 216, by inserting after the number "(26)" the  
25 following:

26  
27 "Doula services in accordance with sections 208.1400 to 208.1425;

28 (27) Childbirth education classes for pregnant women and a support person;

29 (28)"; and

30  
31 Further amend said bill and section, Page 27, Line 347, by inserting after said line the following:

Action Taken \_\_\_\_\_ Date \_\_\_\_\_

1       "16. The department of social services shall study the impact that the childbirth education classes  
2 provided under subdivision (27) of subsection 1 of this section have on infant and maternal mortality among  
3 pregnant women. The department of social services shall submit a report to the general assembly with the  
4 results of the study before January 1, 2028.

5       208.662. 1. There is hereby established within the department of social services the "Show-Me  
6 Healthy Babies Program" as a separate children's health insurance program (CHIP) for any low-income  
7 unborn child. The program shall be established under the authority of Title XXI of the federal Social Security  
8 Act, the State Children's Health Insurance Program, as amended, and 42 CFR 457.1.

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

18       3. Coverage for an unborn child enrolled in the show-me healthy babies program shall include all  
19 prenatal care and pregnancy-related services that benefit the health of the unborn child and that promote  
20 healthy labor, delivery, and birth, including childbirth education classes. Coverage need not include services  
21 that are solely for the benefit of the pregnant mother, that are unrelated to maintaining or promoting a healthy  
22 pregnancy, and that provide no benefit to the unborn child. However, the department may include pregnancy-  
23 related assistance as defined in 42 U.S.C. Section 1397II.

24       4. There shall be no waiting period before an unborn child may be enrolled in the show-me healthy  
25 babies program. In accordance with the definition of child in 42 CFR 457.10, coverage shall include the  
26 period from conception to birth. The department shall develop a presumptive eligibility procedure for  
27 enrolling an unborn child. There shall be verification of the pregnancy.

28       5. Coverage for the child shall continue for up to one year after birth, unless otherwise prohibited by  
29 law or unless otherwise limited by the general assembly through appropriations.

30       6. (1) Pregnancy-related and postpartum coverage for the mother shall begin on the day the  
31 pregnancy ends and extend through the last day of the month that includes the sixtieth day after the  
32 pregnancy ends, unless otherwise prohibited by law or unless otherwise limited by the general assembly  
33 through appropriations. The department may include pregnancy-related assistance as defined in 42 U.S.C.  
34 Section 1397II.

35       (2) (a) Subject to approval of any necessary state plan amendments or waivers, beginning on July 6,  
36 2023, mothers eligible to receive coverage under this section shall receive medical assistance benefits during  
37 the pregnancy and during the twelve-month period that begins on the last day of the woman's pregnancy and  
38 ends on the last day of the month in which such twelve-month period ends, consistent with the provisions of  
39 42 U.S.C. Section 1397gg(e)(1)(J). The department shall seek any necessary state plan amendments or

1   waivers to implement the provisions of this subdivision when the number of ineligible MO HealthNet  
2   participants removed from the program in 2023 pursuant to section 208.239 exceeds the projected number of  
3   beneficiaries likely to enroll in benefits in 2023 under this subdivision and subdivision (28) of subsection 1 of  
4   section 208.151, as determined by the department, by at least one hundred individuals.

5       (b) The provisions of this subdivision shall remain in effect for any period of time during which the  
6   federal authority under 42 U.S.C. Section 1397gg(e)(1)(J), as amended, or any successor statutes or  
7   implementing regulations, is in effect.

8       7. The department shall provide coverage for an unborn child enrolled in the show-me healthy babies  
9   program in the same manner in which the department provides coverage for the children's health insurance  
10   program (CHIP) in the county of the primary residence of the mother.

11       8. The department shall provide information about the show-me healthy babies program to maternity  
12   homes as defined in section 135.600, pregnancy resource centers as defined in section 135.630, and other  
13   similar agencies and programs in the state that assist unborn children and their mothers. The department shall  
14   consider allowing such agencies and programs to assist in the enrollment of unborn children in the program,  
15   and in making determinations about presumptive eligibility and verification of the pregnancy.

16       9. Within sixty days after August 28, 2014, the department shall submit a state plan amendment or  
17   seek any necessary waivers from the federal Department of Health and Human Services requesting approval  
18   for the show-me healthy babies program.

19       10. At least annually, the department shall prepare and submit a report to the governor, the speaker of  
20   the house of representatives, and the president pro tempore of the senate analyzing and projecting the cost  
21   savings and benefits, if any, to the state, counties, local communities, school districts, law enforcement  
22   agencies, correctional centers, health care providers, employers, other public and private entities, and persons  
23   by enrolling unborn children in the show-me healthy babies program. The analysis and projection of cost  
24   savings and benefits, if any, may include but need not be limited to:

25       (1) The higher federal matching rate for having an unborn child enrolled in the show-me healthy  
26   babies program versus the lower federal matching rate for a pregnant woman being enrolled in MO  
27   HealthNet or other federal programs;

28       (2) The efficacy in providing services to unborn children through managed care organizations, group  
29   or individual health insurance providers or premium assistance, or through other nontraditional arrangements  
30   of providing health care;

31       (3) The change in the proportion of unborn children who receive care in the first trimester of  
32   pregnancy due to a lack of waiting periods, by allowing presumptive eligibility, or by removal of other  
33   barriers, and any resulting or projected decrease in health problems and other problems for unborn children  
34   and women throughout pregnancy; at labor, delivery, and birth; and during infancy and childhood;

35       (4) The change in healthy behaviors by pregnant women, such as the cessation of the use of tobacco,  
36   alcohol, illicit drugs, or other harmful practices, and any resulting or projected short-term and long-term  
37   decrease in birth defects; poor motor skills; vision, speech, and hearing problems; breathing and respiratory  
38   problems; feeding and digestive problems; and other physical, mental, educational, and behavioral problems;  
39   and

(5) The change in infant and maternal mortality, preterm 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.

13. Nothing in this section shall be construed as expanding MO HealthNet or fulfilling a mandate imposed by the federal government on the state.

208.1400. Sections 208.1400 to 208.1425 shall be known and may be cited as the "Missouri Doula Reimbursement Act".

208.1405. For purposes of sections 208.1400 to 208.1425, the following terms mean:

(1) "Community-based network", a network that is representative of a community or significant segments of a community and engaged in meeting that community's needs in the area of social, human, or health services;

(2) "Community navigation services", services that connect pregnant individuals and their families with available resources using a community-based approach including, but not limited to, an approach that understands the services and supports available to pregnant and postpartum individuals receiving MO HealthNet benefits and facilitates access to those resources based upon an assessment of social service needs;

(3) "Doula", a trained professional providing continuous physical, emotional, and informational support to a pregnant individual, from the prenatal, the intrapartum, and up to the first twelve months of the postpartum periods. Doulas also provide assistance by referring pregnant individuals to community-based networks and certified and licensed perinatal professionals in multiple disciplines;

(4) "Doula services", services provided by a doula;

(5) "Fee-for-service", a payment model where services are unbundled and paid for separately;

(6) "Intrapartum", the period of pregnancy during labor and delivery or childbirth. Services provided during this period are rendered to the pregnant individual;

(7) "Managed care", the delivery of Medicaid health benefits and additional services through contracted arrangements between state Medicaid agencies and managed care organizations that accept a set per member per month (capitation) payment for these services;

(8) "Postpartum", the one-year period after a pregnancy ends;

(9) "Prenatal", the period of pregnancy before labor or childbirth. Services provided during this period are rendered to the pregnant individual.

208.1410. The following doula services shall be covered by the MO HealthNet program:

(1) A combined total of six prenatal and postpartum support sessions;

(2) One birth attendance;

(3) Up to two visits for general consultation on lactation at any time during the prenatal and postpartum periods; and

1           (4) Community navigation services, except that any community navigation services provided outside  
2 any visit or session billed under subdivisions (1) to (3) of this section shall be billed only up to ten times total  
3 over the course of the pregnancy and postpartum period.

4           208.1415. A doula shall be eligible for participation as a provider of doula services covered by the  
5 MO HealthNet program only if the doula:

6           (1) Is enrolled as a MO HealthNet provider;

7           (2) Is eighteen years of age or older;

8           (3) Holds liability insurance as an individual or through a supervising organization; and

9           (4) Either:

10           (a) Possesses a current certificate issued by a national or Missouri-based doula training organization  
11 whose curriculum meets guidelines established by the MO HealthNet division by rule; or

12           (b) Received training from a source not described in paragraph (a) of this subdivision, or from  
13 multiple sources, whose curriculum meets the guidelines established under paragraph (a) of this subdivision  
14 as verified by a public roster maintained by a statewide organization composed of doula trainers from three or  
15 more independent, well-established doula training organizations located in Missouri whose purpose includes  
16 the validation of core competencies of training.

17           208.1420. 1. Once enrolled as a MO HealthNet provider, a doula shall be eligible to enroll as a  
18 provider with fee-for-service and managed care payers affiliated with the MO HealthNet program.

19           2. Doula services shall be reimbursed on a fee-for-service schedule.

20           208.1425. The MO HealthNet division shall promulgate all necessary rules and regulations for the  
21 administration of sections 208.1400 to 208.1425. Any rule or portion of a rule, as that term is defined in  
22 section 536.010, that is created under the authority delegated in this section shall become effective only if it  
23 complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This  
24 section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant  
25 to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held  
26 unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28,  
27 2025, shall be invalid and void."; and

28  
29 Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.