LC003867

2020 -- H 7618

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2020

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RELATING TO STATE AFFAIRS AND GOVERNMENT - EQUALITY IN ABORTION COVERAGE

Introduced By: Representatives Cassar, Lyle, Craven, Ajello, and Knight Date Introduced: February 14, 2020

Referred To: House Finance

It is enacted by the General Assembly as follows:

1	SECTION 1. Legislative findings. The general assembly hereby finds and declares that:
2	1. In enacting the Reproductive Privacy Act in 2019, the general assembly recognized the
3	importance of protecting a person's right to reproductive health care. However, exercising that
4	right can be illusory for people of limited financial means.
5	2. Funding restrictions on abortion coverage interfere with an individual's personal
6	decision-making, with their health and well-being, and with their constitutionally protected right
7	to a safe and legal medical procedure.
8	3. Restrictions on abortion coverage have a disproportionate impact on low-income
9	residents, immigrants, people of color, and young people who are already disadvantaged in their
10	access to the resources, information, and services necessary to prevent an unintended pregnancy
11	or to carry a health pregnancy to term.
12	4. Numerous other states provide abortion coverage in their Medicaid programs and in
13	their state employee insurance plans.
14	5. The purpose of this legislation is to promote equity in access to reproductive health
15	care.
16	SECTION 2. Section 36-12-2.1 of the General Laws in Chapter 36-12 entitled "Insurance
17	Benefits" is hereby repealed.

18 <u>36-12-2.1. Health insurance benefits -- Coverage for abortions excluded.</u>

- (a) The state of Rhode Island shall not include in any health insurance contracts, plans, or
 policies covering employees, any provision which shall provide coverage for induced abortions
 (except where the life of the mother would be endangered if the fetus were carried to term, or
 where the pregnancy resulted from rape or incest). This section shall be applicable to all
 contracts, plans or policies of:
 (1) All health insurers subject to title 27;
- 7 (2) All group and blanket health insurers subject to title 27;
- 8 (3) All nonprofit hospital, medical, surgical, dental, and health service corporations;
- 9 (4) All health maintenance organizations; and
- 10 (5) Any provision of medical, hospital, surgical, and funeral benefits and of coverage
 against accidental death or injury when the benefits or coverage are incidental to or part of other
- 12 insurance authorized by the statutes of this state.
- (b) Provided, however, that the provisions of this section shall not apply to benefits
 provided under existing collective bargaining agreements entered into prior to June 30, 1982.
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- (c) Nothing contained herein shall be construed to pertain to insurance coverage for complications as the result of an abortion.
- SECTION 3. Section 42-12.3-3 of the General Laws in Chapter 42-12.3 entitled "Health
 Care for Children and Pregnant Women" is hereby amended to read as follows:
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42-12.3-3. Medical assistance expansion for pregnant women/RIte Start.

20 (a) The director of the department of human services is authorized to amend its title XIX 21 state plan pursuant to title XIX of the Social Security Act to provide Medicaid coverage and to 22 amend its title XXI state plan pursuant to Title XXI of the Social Security Act to provide medical 23 assistance coverage through expanded family income disregards for pregnant women persons 24 whose family income levels are between one hundred eighty-five percent (185%) and two 25 hundred fifty percent (250%) of the federal poverty level. The department is further authorized to 26 promulgate any regulations necessary and in accord with title XIX [42 U.S.C. § 1396 et seq.] and 27 title XXI [42 U.S.C. § 1397 et seq.] of the Social Security Act necessary in order to implement 28 said state plan amendment. The services provided shall be in accord with title XIX [42 U.S.C. § 29 1396 et seq.] and title XXI [42 U.S.C. § 1397 et seq.] of the Social Security Act.

30 (b) The director of the department of human services is authorized and directed to 31 establish a payor of last resort program to cover prenatal, delivery and postpartum care. The 32 program shall cover the cost of maternity care for any woman person who lacks health insurance 33 coverage for maternity care and who is not eligible for medical assistance under title XIX [42 34 U.S.C. § 1396 et seq.] and title XXI [42 U.S.C. § 1397 et seq.] of the Social Security Act

including, but not limited to, a non-citizen pregnant woman person lawfully admitted for 1 2 permanent residence on or after August 22, 1996, without regard to the availability of federal 3 financial participation, provided such pregnant woman person satisfies all other eligibility 4 requirements. The director shall promulgate regulations to implement this program. Such 5 regulations shall include specific eligibility criteria; the scope of services to be covered; procedures for administration and service delivery; referrals for non-covered services; outreach; 6 7 and public education. Excluded services under this paragraph will include, but not be limited to, 8 induced abortion except in cases of rape or incest or to save the life of the pregnant individual.

9 (c) The department of human services may enter into cooperative agreements with the 10 department of health and/or other state agencies to provide services to individuals eligible for

11 services under subsections (a) and (b) above.

12 (d) The following services shall be provided through the program:

- 13 (1) Ante-partum and postpartum care;
- 14 (2) Delivery;
- 15 (3) Cesarean section;
- 16 (4) Newborn hospital care;

17 (5) Inpatient transportation from one hospital to another when authorized by a medical18 provider;

19 (6) Prescription medications and laboratory tests;

20 (e) The department of human services shall provide enhanced services, as appropriate, to 21 pregnant women persons as defined in subsections (a) and (b), as well as to other pregnant 22 women persons eligible for medical assistance. These services shall include: care coordination, 23 nutrition and social service counseling, high risk obstetrical care, childbirth and parenting 24 preparation programs, smoking cessation programs, outpatient counseling for drug-alcohol use, 25 interpreter services, mental health services, and home visitation. The provision of enhanced 26 services is subject to available appropriations. In the event that appropriations are not adequate 27 for the provision of these services, the department has the authority to limit the amount, scope and 28 duration of these enhanced services.

(f) The department of human services shall provide for extended family planning services
for up to twenty-four (24) months postpartum. These services shall be available to women
persons who have been determined eligible for RIte Start or for medical assistance under title
XIX [42 U.S.C. § 1396 et seq.] or title XXI [42 U.S.C. § 1397 et seq.] of the Social Security Act.
(g) Any person eligible for services under subsections (a) and (b) of this section, or

34 otherwise eligible for medical assistance under title XIX [42 U.S.C. § 1396 et seq.] and title XXI

- 1 [42 U.S.C. § 1397 et seq.] of the Social Security Act, shall also be entitled to services for any
- 2 termination of pregnancy permitted under § 23-4.13-2; provided, however, that no federal funds
- 3 <u>shall be used to pay for such services, except as authorized under federal law.</u>
 - SECTION 4. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

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RELATING TO STATE AFFAIRS AND GOVERNMENT - EQUALITY IN ABORTION COVERAGE

1 This act would provide for abortion coverage in the Medicaid program and repeal the

2 abortion coverage exclusion for state employee insurance plans.

3 This act would take effect upon passage.

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