

2026 -- H 7275

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S T A T E O F R H O D E I S L A N D

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2026

A N A C T

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives Stewart, Donovan, Boylan, Cotter, Caldwell, Fogarty, Cruz, Giraldo, Place, and Kislak

Date Introduced: January 23, 2026

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness Insurance
2 Policies" is hereby amended by adding thereto the following section:

3 **27-18-96. Certified professional midwife.**

4 (a) As used in this section, "certified professional midwife" or "CPM" means a trained
5 professional who has successfully completed an accredited educational program in midwifery,
6 holds a current certification as a certified professional midwife by the North American Registry of
7 Midwives (hereinafter referred to in this section as "NARM"), and is licensed to practice midwifery
8 in accordance with § 23-13-9.

9 (b) Every individual or group health insurance contract, or every individual or group
10 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
11 or renewed in this state on or after January 1, 2027, shall provide coverage for the services of a
12 certified professional midwife in accordance with each health insurers' respective principles and
13 mechanisms of reimbursement, credentialing, and contracting, if the services are within the
14 certified professional midwife's area of professional competence as defined by the standard
15 developed and maintained by the Midwives Alliance of North America (hereinafter referred to in
16 this section as "MANA") in collaboration with the department of health, and are currently
17 reimbursed when rendered by any other healthcare provider. No insurer or hospital or medical
18 service corporation may require supervision, signature, or referral by any other healthcare provider
19 as a condition of reimbursement, except when those requirements are also applicable to other

1 categories of healthcare providers. No insurer or hospital or medical service corporation or patient
2 shall be required to pay for duplicate services actually rendered by both a licensed certified
3 professional midwife and any other healthcare provider.

4 (c) Every individual or group health insurance contract, or every individual or group
5 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
6 or renewed in this state that is required to cover certified professional midwife services defined in
7 subsections (a) and (b) of this section, shall report utilization and cost information related to
8 licensed certified professional midwife's services to the office of the health insurance
9 commissioner on or before July 1, 2027 and each July 1 thereafter. The office of the health
10 insurance commissioner shall define the utilization and cost information required to be reported.

11 (d) This section shall not apply to insurance coverage providing benefits for:

12 (1) Hospital confinement indemnity;
13 (2) Disability income;
14 (3) Accident only;
15 (4) Long-term care;
16 (5) Medicare supplement;
17 (6) Limited benefit health;
18 (7) Specified disease indemnity;
19 (8) Sickness or bodily injury or death by accident or both; and
20 (9) Other limited benefit policies.

21 (e) Notwithstanding any general or special law to the contrary, unless otherwise specified,
22 the provisions of this chapter shall supersede and shall control over any conflicting or inconsistent
23 laws, including general laws, special laws, or local laws, or any rule or regulation of the state
24 including, but not limited to, §§ 23-13-9, 27-41-2(21), 27-41-36 or any other state rule or
25 regulation.

26 SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service
27 Corporations" is hereby amended by adding thereto the following section:

28 **27-19-88. Certified professional midwife.**

29 (a) As used in this section, "certified professional midwife" or "CPM" means a trained
30 professional who has successfully completed an accredited educational program in midwifery,
31 holds a current certification as a certified professional midwife by the North American Registry of
32 Midwives (hereinafter referred to in this section as "NARM"), and is licensed to practice midwifery
33 in accordance with § 23-13-9.

34 (b) Every individual or group health insurance contract, or every individual or group

1 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
2 or renewed in this state on or after January 1, 2027, shall provide coverage for the services of a
3 certified professional midwife in accordance with each health insurers' respective principles and
4 mechanisms of reimbursement, credentialing, and contracting, if the services are within the
5 certified professional midwife's area of professional competence as defined by the standard
6 developed and maintained by the Midwives Alliance of North America (hereinafter referred to in
7 this section as "MANA") in collaboration with the department of health, and are currently
8 reimbursed when rendered by any other healthcare provider. No insurer or hospital or medical
9 service corporation may require supervision, signature, or referral by any other healthcare provider
10 as a condition of reimbursement, except when those requirements are also applicable to other
11 categories of healthcare providers. No insurer or hospital or medical service corporation or patient
12 shall be required to pay for duplicate services actually rendered by both a licensed certified
13 professional midwife and any other healthcare provider.

14 (c) Every individual or group health insurance contract, or every individual or group
15 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
16 or renewed in this state that is required to cover certified professional midwife services defined in
17 subsections (a) and (b) of this section, shall report utilization and cost information related to
18 licensed certified professional midwife's services to the office of the health insurance
19 commissioner on or before July 1, 2027 and each July 1 thereafter. The office of the health
20 insurance commissioner shall define the utilization and cost information required to be reported.

21 (d) This section shall not apply to insurance coverage providing benefits for:

22 (1) Hospital confinement indemnity;
23 (2) Disability income;
24 (3) Accident only;
25 (4) Long-term care;
26 (5) Medicare supplement;
27 (6) Limited benefit health;
28 (7) Specified disease indemnity;
29 (8) Sickness or bodily injury or death by accident or both; and
30 (9) Other limited benefit policies.

31 (e) Notwithstanding any general or special law to the contrary, unless otherwise specified,
32 the provisions of this chapter shall supersede and shall control over any conflicting or inconsistent
33 laws, including general laws, special laws, or local laws, or any rule or regulation of the state
34 including, but not limited, to §§ 23-13-9, 27-41-2(21), 27-41-36 or any other state rule or

1 regulation.

2 SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service
3 Corporations" is hereby amended by adding thereto the following section:

4 **27-20-84. Certified professional midwife.**

5 (a) As used in this section, "certified professional midwife" or "CPM" means a trained
6 professional who has successfully completed an accredited educational program in midwifery,
7 holds a current certification as a certified professional midwife by the North American Registry of
8 Midwives (hereinafter referred to in this section as "NARM"), and is licensed to practice midwifery
9 in accordance with § 23-13-9.

10 (b) Every individual or group health insurance contract, or every individual or group
11 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
12 or renewed in this state on or after January 1, 2027, shall provide coverage for the services of a
13 certified professional midwife in accordance with each health insurers' respective principles and
14 mechanisms of reimbursement, credentialing, and contracting, if the services are within the
15 certified professional midwife's area of professional competence as defined by the standard
16 developed and maintained by the Midwives Alliance of North America (hereinafter referred to in
17 this section as "MANA") in collaboration with the department of health, and are currently
18 reimbursed when rendered by any other healthcare provider. No insurer or hospital or medical
19 service corporation may require supervision, signature, or referral by any other healthcare provider
20 as a condition of reimbursement, except when those requirements are also applicable to other
21 categories of healthcare providers. No insurer or hospital or medical service corporation or patient
22 shall be required to pay for duplicate services actually rendered by both a licensed certified
23 professional midwife and any other healthcare provider.

24 (c) Every individual or group health insurance contract, or every individual or group
25 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
26 or renewed in this state that is required to cover certified professional midwife services defined in
27 subsections (a) and (b) of this section, shall report utilization and cost information related to
28 licensed certified professional midwife's services to the office of the health insurance
29 commissioner on or before July 1, 2027 and each July 1 thereafter. The office of the health
30 insurance commissioner shall define the utilization and cost information required to be reported.

31 (d) This section shall not apply to insurance coverage providing benefits for:

32 (1) Hospital confinement indemnity;

33 (2) Disability income;

34 (3) Accident only;

- 1 (4) Long-term care;
- 2 (5) Medicare supplement;
- 3 (6) Limited benefit health;
- 4 (7) Specified disease indemnity;
- 5 (8) Sickness or bodily injury or death by accident or both; and
- 6 (9) Other limited benefit policies.

7 (e) Notwithstanding any general or special law to the contrary, unless otherwise specified,

8 the provisions of this chapter shall supersede and shall control over any conflicting or inconsistent

9 laws, including general laws, special laws, or local laws, or any rule or regulation of the state

10 including, but not limited, to §§ 23-13-9, 27-41-2(21), 27-41-36 or any other state rule or

11 regulation.

12 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance
13 Organizations" is hereby amended by adding thereto the following section:

27-41-101. Certified professional midwife.

15 (a) As used in this section, “certified professional midwife” or “CPM” means a trained
16 professional who has successfully completed an accredited educational program in midwifery,
17 holds a current certification as a certified professional midwife by the North American Registry of
18 Midwives (hereinafter referred to in this section as “NARM”), and is licensed to practice midwifery
19 in accordance with § 23-13-9.

(b) Every individual or group health insurance contract, or every individual or group hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after January 1, 2027, shall provide coverage for the services of a certified professional midwife in accordance with each health insurers' respective principles and mechanisms of reimbursement, credentialing, and contracting, if the services are within the certified professional midwife's area of professional competence as defined by the standard developed and maintained by the Midwives Alliance of North America (hereinafter referred to in this section as "MANA") in collaboration with the department of health, and are currently reimbursed when rendered by any other healthcare provider. No insurer or hospital or medical service corporation may require supervision, signature, or referral by any other healthcare provider as a condition of reimbursement, except when those requirements are also applicable to other categories of healthcare providers. No insurer or hospital or medical service corporation or patient shall be required to pay for duplicate services actually rendered by both a licensed certified professional midwife and any other healthcare provider.

34 (c) Every individual or group health insurance contract, or every individual or group

1 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,
2 or renewed in this state that is required to cover certified professional midwife services defined in
3 subsections (a) and (b) of this section, shall report utilization and cost information related to
4 licensed certified professional midwife's services to the office of the health insurance
5 commissioner on or before July 1, 2027 and each July 1 thereafter. The office of the health
6 insurance commissioner shall define the utilization and cost information required to be reported.

7 (d) This section shall not apply to insurance coverage providing benefits for:
8 (1) Hospital confinement indemnity;
9 (2) Disability income;
10 (3) Accident only;
11 (4) Long-term care;
12 (5) Medicare supplement;
13 (6) Limited benefit health;
14 (7) Specified disease indemnity;
15 (8) Sickness or bodily injury or death by accident or both; and
16 (9) Other limited benefit policies.

17 (e) Notwithstanding any general or special law to the contrary, the provisions of this
18 chapter shall supersede and shall control over any conflicting or inconsistent laws, including
19 general laws, special laws, or local laws, or any rule or regulation of the state including, but not
20 limited, to §§ 23-13-9, 27-41-2(21), 27-41-36 or any other state rule or regulation.

21 SECTION 5. This act shall take effect on January 1, 2027.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

A N A C T

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

- 1 This bill would require health insurance plans to cover services provided by licensed
- 2 certified professional midwives. Insurers would be required to report utilization and cost data
- 3 annually and certain limited benefit policies would be exempt.
- 4 This act would take effect on January 1, 2027.

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