

Medical Coverage Policy

Post-partum Hospital Stays Mandate

☐ Device/Equipment ☐ Drug ☐ Medical ☐ Surgery ☐ Test ☐ Other			
Effective Date:	9/1/1996	Policy Last Updated:	1/17/2012
□ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.			
□ Prospective review is not required.			

Description:

This is an administrative policy to document Rhode Island General Law (RIGL) 27-20-17.1, Insurance Coverage for Post-partum Hospital Stays.

§ 27-20-17.1 Insurance coverage for post-partum hospital stays. – (a) Every individual or group hospital or medical services plan contract delivered, issued for delivery, or renewed in this state shall provide coverage for a forty-eight (48) hour time period in a hospital after a vaginal birth and ninety-six (96) hours after a Cesarean section for a mother and her newly born child. Any decision to shorten these minimum coverages shall be made by the attending health care provider in consultation with the mother. The decision shall be made in accordance with the standards for guidelines for perinatal care published by the American College of Obstetrics and Gynecology and the American Academy of Pediatrics. The standards shall be relative to early discharge, defined as less than forth-eight (48) hours for a vaginal delivery and ninety-six (96) for a Cesarean delivery. In the case of early discharge, post-delivery care shall include home visits, parent education, assistance and training in breast or bottle feeding and the performance of any necessary and appropriate clinical tests or any other tests or services consistent with the guidelines provided in this subsection.

- (b) For the purposes of this section, "attending health care provider" includes the attending obstetrician, pediatrician, family practitioner, general practitioner or certified nurse midwife attending the mother and newly born child.
- (c) Any subscriber who is aggrieved by a denial of benefits to be provided under this section may appeal the denial in accordance with regulations of the department of health, which have been promulgated pursuant to chapter 17.12 of title 23. No policy or plan covered under this chapter shall terminate the services, reduce capitation payment, or penalize an attending physician or other health care provider who orders care consistent with the provisions of this section.

Note: The Rhode Island mandate mirrors the federal mandate, Newborns' and Mothers' Health Protection Act of 1996 (Newborn's Act), signed into law on September 26, 1996.

Medical Criteria:

Not applicable. This is a reimbursement policy documenting RIGL Mandate 27-20-17.1.

Policy:

Benefits for any hospital length of stay in connection with childbirth for the mother or newborn child may not be reduced to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending

provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable).

Coverage:

Benefits may vary between groups/contracts. Please refer to the Evidence of Coverage, Subscriber Agreement, or Benefit Booklet for applicable benefits/coverage.

Rhode Island mandated benefits generally do not apply to Plan 65, FEHBP, and Medicare Advantage Plans.

Published:

Policy Update, March 2006 Policy Update, March 2007 Provider Update, March 2008 Provider Update, April 2009 Provider Update, March 2010 Provider Update, March 2011 Provider Update, April 2012

References:

United States Department of Labor Newborns' and Mothers' Health Protection Act Fact Sheet. Accessed on 1/3/12: http://www.dol.gov/ebsa/newsroom/fsnmhafs.html#.

Rhode Island General Law § 27-20-17.1 Insurance coverage for post-partum hospital stays. Accessed on 1/3/12: http://www.rilin.state.ri.us/Statutes/TITLE27/27-20/27-20-17.1.HTM.

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