

Introduced by Senator Smallwood-CuevasFebruary 20, 2025

An act to amend Sections 1367.625 and 123640 of the Health and Safety Code, and to amend Section 10123.867 of the Insurance Code, relating to maternal health.

LEGISLATIVE COUNSEL'S DIGEST

SB 626, as introduced, Smallwood-Cuevas. Maternal health screenings and treatment.

Existing law requires a licensed health care practitioner who provides prenatal, postpartum, or interpregnancy care for a patient to offer to screen or appropriately screen a mother for maternal mental health conditions.

This bill would require a licensed health care practitioner who provides perinatal care for a patient to screen, diagnose, and treat the patient for a maternal mental health condition according to the clinical guidelines from the American College of Obstetricians and Gynecologists.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan or health insurer to develop a maternal mental health program designed to promote quality and cost-effective outcomes, as specified.

This bill would require a health care service plan or health insurer to provide case management and care coordination for an enrollee or insured during the perinatal period. The bill would require a plan or

insurers to annually report the utilization and outcomes of case management services to the appropriate department and to post that reported information to its internet website. The bill would require a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2026, to provide coverage for at least one medication and one digital therapeutic for maternal mental health, as specified. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1367.625 of the Health and Safety Code
2 is amended to read:
3 1367.625. (a) A health care service plan shall ~~develop~~ *do all*
4 *of the following:*
5 (1) *Develop* a maternal mental health program designed to
6 promote quality and cost-effective outcomes. The program shall
7 consist of at least one maternal mental health screening to be
8 conducted during pregnancy, at least one additional screening to
9 be conducted during the first six weeks of the postpartum period,
10 and additional postpartum screenings, if determined to be medically
11 necessary and clinically appropriate in the judgment of the treating
12 provider. The program shall be developed consistent with sound
13 clinical principles and processes, and shall include quality measures
14 to encourage screening, diagnosis, treatment, and referral. The
15 program guidelines and criteria shall be provided to relevant
16 medical providers, including all contracting obstetric providers.
17 As part of a maternal mental health program the health care service
18 plan is encouraged to improve screening, treatment, and referral
19 to maternal mental health services, include coverage for doulas,
20 incentivize training opportunities for contracting obstetric
21 providers, and educate enrollees about the program.

1 (2) *Provide case management and care coordination for an*
2 *enrollee during the perinatal period.*

3 (3) *Annually report to the department on the utilization and*
4 *outcomes of case management services.*

5 (4) *Publicly post the information reported pursuant to paragraph*
6 *(3) on the plan’s internet website.*

7 (b) *A health care service plan contract issued, amended, or*
8 *renewed on or after January 1, 2026, shall provide coverage for*
9 *at least one medication approved by the United States Food and*
10 *Drug Administration (FDA) for maternal mental health and for*
11 *at least one FDA-approved digital therapeutic for maternal mental*
12 *health.*

13 ~~(b)~~

14 (c) *For the purposes of this section:*

15 (1) *“Contracting obstetric provider” means an individual who*
16 *is certified or licensed pursuant to Division 2 (commencing with*
17 *Section 500) of the Business and Professions Code, or an initiative*
18 *act referred to in that division, and who is contracted with the*
19 *enrollee’s health care service plan to provide services under the*
20 *enrollee’s plan contract.*

21 (2) *“Health care service plan” includes Medi-Cal managed*
22 *care plans that contract with the State Department of Health Care*
23 *Services pursuant to Chapter 7 (commencing with Section 14000)*
24 *and Chapter 8 (commencing with Section 14200) of Part 3 of*
25 *Division 9 of the Welfare and Institutions Code. The State*
26 *Department of Health Care Services shall seek any federal*
27 *approvals it deems necessary to implement this section. This section*
28 *applies to Medi-Cal managed care plan contracts only to the extent*
29 *that the State Department of Health Care Services obtains any*
30 *necessary federal approvals, and federal financial participation*
31 *under the Medi-Cal program is available and not otherwise*
32 *jeopardized.*

33 ~~(2)~~

34 (3) *“Maternal mental health” means a mental health condition*
35 *that occurs during pregnancy or during the postpartum period and*
36 *includes, but is not limited to, postpartum depression.*

37 ~~(e)~~

38 (d) *This section does not apply to specialized health care service*
39 *plans, except specialized behavioral health-only plans offering*
40 *professional mental health services.*

1 ~~(d) For purposes of this section, “health care service plan”~~
 2 ~~includes Medi-Cal managed care plans that contract with the State~~
 3 ~~Department of Health Care Services pursuant to Chapter 7~~
 4 ~~(commencing with Section 14000) and Chapter 8 (commencing~~
 5 ~~with Section 14200) of Part 3 of Division 9 of the Welfare and~~
 6 ~~Institutions Code. The State Department of Health Care Services~~
 7 ~~shall seek any federal approvals it deems necessary to implement~~
 8 ~~this section. This section applies to Medi-Cal managed care plan~~
 9 ~~contracts only to the extent that the State Department of Health~~
 10 ~~Care Services obtains any necessary federal approvals, and federal~~
 11 ~~financial participation under the Medi-Cal program is available~~
 12 ~~and not otherwise jeopardized.~~

13 (e) Notwithstanding subdivision (a), a Medi-Cal managed care
 14 plan shall continue to comply with any quality measures required
 15 or adopted by the State Department of Health Care Services.
 16 Quality measures included in a Medi-Cal managed care plan’s
 17 maternal mental health program shall not be inconsistent with
 18 quality measures required or adopted by the State Department of
 19 Health Care Services.

20 SEC. 2. Section 123640 of the Health and Safety Code is
 21 amended to read:

22 123640. (a) A licensed health care practitioner who provides
 23 prenatal, postpartum, or interpregnancy care for a patient shall
 24 ensure that the mother is offered screening or is appropriately
 25 screened for maternal mental health conditions.

26 *(b) A licensed health care practitioner who provides perinatal*
 27 *care for a patient shall screen, diagnose, and treat the patient for*
 28 *a maternal mental health condition according to the clinical*
 29 *guidelines from the American College of Obstetricians and*
 30 *Gynecologists.*

31 ~~(b)~~

32 (c) This section shall not apply to a licensed health care
 33 practitioner when providing emergency services or care, as defined
 34 in Section 1317.1.

35 ~~(c)~~

36 (d) This section does not preclude any licensed or certified
 37 provider acting within their scope of practice from screening for
 38 maternal mental health conditions.

39 ~~(d)~~

40 (e) For purposes of this section, the following definitions apply:

1 (1) “Health care practitioner” means a physician and surgeon,
2 naturopathic doctor, nurse practitioner, physician assistant, nurse
3 midwife, or a midwife licensed pursuant to Division 2
4 (commencing with Section 500) of the Business and Professions
5 Code or an initiative act referred to in that division and who is
6 acting within their scope of practice.

7 (2) “Maternal mental health condition” means a mental health
8 condition that occurs during pregnancy, the postpartum period, or
9 interpregnancy and includes, but is not limited to, postpartum
10 depression.

11 SEC. 3. Section 10123.867 of the Insurance Code is amended
12 to read:

13 10123.867. (a) A health insurer shall ~~develop~~ *do all of the*
14 *following:*

15 (1) *Develop* a maternal mental health program designed to
16 promote quality and cost-effective outcomes. The program shall
17 consist of at least one maternal mental health screening to be
18 conducted during pregnancy, at least one additional screening to
19 be conducted during the first six weeks of the postpartum period,
20 and additional postpartum screenings, if determined to be medically
21 necessary and clinically appropriate in the judgment of the treating
22 provider. The program shall be developed consistent with sound
23 clinical principles and processes, and shall include quality measures
24 to encourage screening, diagnosis, treatment, and referral. The
25 program guidelines and criteria shall be provided to relevant
26 medical providers, including all contracting obstetric providers.
27 As part of the maternal mental health program, a health insurer is
28 encouraged to improve screening, treatment, and referral to
29 maternal mental health services, include coverage for doulas,
30 incentivize training opportunities for contracting obstetric
31 providers, and educate insureds about the program.

32 (2) *Provide case management and care coordination for an*
33 *insured during the perinatal period.*

34 (3) *Annually report to the department on the utilization and*
35 *outcomes of case management services.*

36 (4) *Publicly post the information reported pursuant to paragraph*
37 *(3) on the insurer’s internet website.*

38 (b) *A health insurance policy issued, amended, or renewed on*
39 *or after January 1, 2026, shall provide coverage for at least one*
40 *medication approved by the United States Food and Drug*

1 *Administration (FDA) for maternal mental health and for at least*
2 *one FDA-approved digital therapeutic for maternal mental health.*

3 ~~(b)~~

4 (c) For the purposes of this section:

5 (1) “Contracting obstetric provider” means an individual who
6 is certified or licensed pursuant to Division 2 (commencing with
7 Section 500) of the Business and Professions Code, or an initiative
8 act referred to in that division, and who is contracted with the
9 insured’s health insurer to provide services under the insured’s
10 health insurance policy.

11 (2) “Maternal mental health” means a mental health condition
12 that occurs during pregnancy or during the postpartum period and
13 includes, but is not limited to, postpartum depression.

14 ~~(e)~~

15 (d) This section does not apply to specialized health insurers,
16 except behavioral health-only insurers that provide coverage for
17 professional mental health services.

18 SEC. 4. No reimbursement is required by this act pursuant to
19 Section 6 of Article XIII B of the California Constitution because
20 the only costs that may be incurred by a local agency or school
21 district will be incurred because this act creates a new crime or
22 infraction, eliminates a crime or infraction, or changes the penalty
23 for a crime or infraction, within the meaning of Section 17556 of
24 the Government Code, or changes the definition of a crime within
25 the meaning of Section 6 of Article XIII B of the California
26 Constitution.