Legislative Analysis



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MATERNAL MENTAL HEALTH SCREENINGS AND RESOURCES

House Bill 5169 as introduced Sponsor: Rep. Rachel Hood

House Bill 5170 as introduced Sponsor: Rep. Brenda Carter

House Bill 5171 as introduced Sponsor: Rep. Kristian C. Grant

Committee: Health Policy Complete to 10-19-23

SUMMARY:

House Bills 5169, 5170, and 5171 would require mental health screenings to be offered to mothers during the postpartum period and require coverage for the screenings.

House Bill 5169 would amend the Public Health Code to require a pediatrician to offer a mother during the postpartum period (after giving birth) a mental health screening that is developed or approved by the Department of Health and Human Services (DHHS). The screening would have to be offered, at intervals determined by DHHS, until the child is 18 months old.

A pediatrician also would have to provide a mother, within one month after giving birth, with mental health resources that are developed or approved by DHHS. The resources would have to include information on all of the following:

- A list of postpartum mental health conditions and their symptoms.
- Treatment options for postpartum mental health conditions.
- Support systems for individuals experiencing postpartum mental health conditions.

Proposed MCL 333.9137

<u>House Bill 5170</u> would amend the Insurance Code to require an insurer that delivers, issues for delivery, or renews a health insurance policy in Michigan to provide coverage for mental health screenings during the postpartum period.

Proposed MCL 500.3406z

<u>House Bill 5171</u> would amend the Social Welfare Act to require Medicaid to cover mental health screenings during the postpartum period for Medicaid recipients.

MCL 400.109

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FISCAL IMPACT:

House Bill 5169 would increase state expenditures to the Department of Health and Human Services and local units of government by an indeterminate amount. The fiscal impact on state expenditures would be dependent on the cost of developing and/or implementing a mental health screening tool for new mothers. The fiscal impact on local units of government would be dependent on any additional administrative or training costs associated with the implementation of the mental health screening tool.

House Bill 5170 would not have a fiscal impact on the Department of Insurance and Financial Services or on other units of state or local government.

House Bill 5171 would incur an upper-bound, estimated cost of \$2.3 million Gross (\$788,700 GF/GP)¹ per year for the Michigan Medicaid program, assuming every eligible recipient receives a Medicaid-provided blood pressure monitor. Median national reimbursements for Medicaid-provided for "other psychiatric diagnostic procedures, psychotherapy services and procedures" were \$57.45² per encounter, as of 2022. The number of births financed by Medicaid in 2021 totaled 39,585 individuals,³ and was used as a proxy variable for the number of pregnant women that would be eligible for the Medicaid-provided mental health screenings during the postpartum period.

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[■] This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.

¹ Assuming a federal medical assistance percentage (FMAP) of 65.32.

² https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10125036/

³ https://www.kff.org/medicaid/state-indicator/births-financed-by-medicaid/