

By: Senator(s) Boyd

To: Public Health and
Welfare; Insurance

SENATE BILL NO. 2151

1 AN ACT TO REQUIRE HEALTH CARE PROFESSIONALS TO SCREEN BIRTH
2 MOTHERS FOR DEPRESSION AT THE TIME OF BIRTH; TO REQUIRE HEALTH
3 INSURANCE ISSUERS TO COVER SUCH SCREENING; TO PROVIDE EXEMPTIONS
4 TO HEALTH INSURANCE ISSUERS THAT ARE REQUIRED TO COVER SUCH
5 SCREENING; AND FOR RELATED PURPOSES.

6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

7 **SECTION 1.** For purposes of this act, the following terms
8 shall have the meanings ascribed herein:

9 (a) "Birth mother" means the biological mother of a
10 child.

11 (b) "Depression" means a mental illness classified as a
12 mood disorder that causes a persistent feeling of sadness and a
13 loss of interest.

14 (c) "Health benefit plan" means:

15 (i) Services consisting of medical care, provided
16 directly, through insurance or reimbursement, or otherwise, and
17 including items and services paid for as medical care under any
18 hospital or medical service policy or certificate, hospital or
19 medical service plan contract, preferred provider organization, or



20 health maintenance organization contract offered by a health
21 insurance issuer;

22 (ii) The Medicaid fee-for-service program and any
23 managed care program, coordinated care program, coordinated care
24 organization program or health maintenance organization program
25 implemented by the Division of Medicaid.

26 A health benefit plan does not include the following:
27 disability income plans, credit insurance plans, insurance
28 coverage issued as a supplement to liability insurance, a medical
29 payment under automobile or homeowner's insurance plans, health
30 care provided pursuant to the Mississippi Workers' Compensation
31 Act, a plan that provides only indemnity for hospital confinement,
32 an accident-only plan, a long-term care only plan, a dental-only
33 plan or a vision-only plan.

34 (d) "Health insurance issuer" means any entity that
35 offers health insurance coverage through a health benefit plan,
36 policy or certificate of insurance subject to state law that
37 regulates the business of insurance. "Health insurance issuer"
38 also includes a health maintenance organization, as defined and
39 regulated under Section 83-41-301 et seq., and includes the
40 Division of Medicaid for the services provided by fee-for-service
41 and through any managed care program, coordinated care program,
42 coordinated care organization program or health maintenance
43 organization program implemented by the division.



44 (e) "Health care professional" means a person who is
45 licensed, certified or otherwise authorized by the laws of this
46 state to administer health care in the ordinary course of the
47 practice of his or her profession.

48 **SECTION 2.** (1) A physician or health care provider who is
49 attending a birth in this state or a licensed health care provider
50 who is attending or providing medical treatment to a birth mother
51 in this state shall facilitate a health care provider to screen
52 the birth mother for depression within the first six (6) weeks of
53 birth.

54 (2) If the birth mother declines to be screened for
55 depression within the first six (6) weeks of having given birth,
56 the physician or health care provider shall record in the
57 patient's medical records that the birth mother was not screened
58 for depression based upon the refusal of the patient. The record
59 of a patient refusal relieves the physician and the health care
60 provider of liability under this section.

61 (3) Records, reports, data or other information collected or
62 maintained under this section that identifies or could be used to
63 identify an individual patient, health care provider or
64 institution shall be confidential and considered Protected Health
65 Information and be subject to all state confidentiality standards
66 and the Health Insurance Portability and Accountability Act
67 (HIPAA).



68 **SECTION 3.** (1) A health care insurer that offers, issues or
69 renews a health benefit plan in this state shall provide coverage
70 for screening for depression of the birth mother by a healthcare
71 professional within the first six (6) weeks of the birth mother's
72 having given birth on or after January 1, 2025.

73 (2) The coverage for screening for depression of the birth
74 mother under this section (a) is not subject to policy deductibles
75 or copayment requirements; and (b) does not diminish or limit
76 benefits otherwise allowable under a health benefit plan.

77 **SECTION 4.** This act shall take effect and be in force from
78 and after July 1, 2024.

