

**Local Government Mandate Statement
Kentucky Legislative Research Commission
2024 Regular Session**

Part I: Measure Information

Bill Request #: 442

Bill #: HB 10 HCS 1

Document ID #: 5096

Bill Title: AN ACT relating to maternal and child health.

Sponsor: Representative Kimberly Poore Moser

Unit of Government: City County Urban-County
Unified Local
 Charter County Consolidated Local Government

Office(s) Impacted: All local governments that offer health insurance for their employees

Requirement: Mandatory Optional

Effect on
Powers & Duties: Modifies Existing Adds New Eliminates Existing

Part II: Bill Provisions and the Estimated Fiscal Impact Relating to Local Government

HB 10 HCS 1 would apply to all insurers offering a health benefit plan and any health benefit plan exchange operating in Kentucky.

Section 4 of the bill would define “exchange” as a governmental agency or nonprofit entity that makes qualified health plans available to qualified individuals or qualified employers and include in the definition an exchange serving the individual market and small business health options program serving the small group market. It would expand the definition of “health benefit plan” to include short-term limited-duration coverage and student health insurance offered by a Kentucky-licensed insurer under contract with a university or college to insure its students. **Section 4** would require, to the extent permitted by federal law, a special enrollment period for pregnant women and individuals eligible for coverage because of a relationship to the pregnant woman. The bill is not to be construed to imply the insured is not responsible for payment of premiums.

Section 5 of the bill would establish that maternity health care coverage is mandatory; would expand required coverage to include dependents of those covered, regardless of age. Such care would include maternity care associated with pregnancy, childbirth, and postpartum care, labor and delivery, and breastfeeding services and supplies as required by federal law. **Section 5** would define in-home program, for purposes of that section, to mean one offered by a health care facility or a health care professional for treatment of substance use disorder, accessed through telehealth or digital health services. Section 5 would require health benefit plans cover an in-home program for maternity care to pregnant and postpartum women, and cover telehealth or digital health services related to maternity care. Telehealth or digital health would have the same meaning as in KRS 211.332, i.e. “a mode of delivering health care services through telecommunication technologies, remote patient monitoring technology, and audio-only encounters by a health care provider.”

Section 6 would require all insurers that offer group health plans to offer the expanded coverage in Section 4.

Section 7 would amend KRS 18A.225 to require any fully insured health benefit plan or self-insured plan issued or renewed to public employees comply with Sections 4 and 5 of HB 10 HCS 1.

HB 10 HCS 1 Sections 4 to 9 would apply to plans issued or renewed on or after January 1, 2025.

HB 10 HCS 1 Sections 4, 5, 6, 7, 8, 9 and 17 take effect January 1, 2025.

HB 10 HCS 1 would have a negative fiscal impact on local governments. The health benefit mandate statement of HB 10, as introduced, prepared for the Kentucky Department of Insurance (DOI) concludes that, due to increased health care costs attributable to the bill, health insurance plan premiums will increase approximately 0.0% to 0.2%, or approximately \$0.0 to \$6.3 million for all fully insured policies in Kentucky, excluding Medicaid and the Kentucky Employees Health Plan (KEHP). The analysis did not include impact to KEHP; however, if health care costs rise then it is likely that the cost of health care premiums, including for local government employers, will increase too.

Data Source(s): Department of Insurance; LRC staff

Preparer: Mary Stephens (BL) **Reviewer:** KHC **Date:** 2/20/24