

114TH CONGRESS  
1ST SESSION

# H. R. 2866

To amend title XXVII of the Public Health Service Act to provide for a special enrollment period for pregnant women, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 23, 2015

Mrs. WATSON COLEMAN (for herself, Ms. ADAMS, Ms. BASS, Mrs. BEATTY, Mr. BECERRA, Mr. BLUMENAUER, Ms. BROWN of Florida, Mr. BUTTERFIELD, Mrs. CAPPS, Mr. CÁRDENAS, Mr. CARSON of Indiana, Ms. CASTOR of Florida, Ms. JUDY CHU of California, Ms. CLARK of Massachusetts, Mr. CLEAVER, Mr. CLYBURN, Mr. COHEN, Mr. CONNOLLY, Mr. CONYERS, Mr. CROWLEY, Mr. DANNY K. DAVIS of Illinois, Mr. DELANEY, Ms. DELAURO, Mr. DESAULNIER, Mrs. DINGELL, Ms. EDWARDS, Mr. ELLISON, Mr. FARR, Mr. FOSTER, Ms. FUDGE, Mr. GARAMENDI, Mr. GRIJALVA, Mr. GUTIÉRREZ, Mr. HASTINGS, Mr. HONDA, Mr. ISRAEL, Ms. JACKSON LEE, Ms. EDDIE BERNICE JOHNSON of Texas, Ms. KAPTUR, Ms. KELLY of Illinois, Mrs. KIRKPATRICK, Ms. KUSTER, Mr. LANGEVIN, Mrs. LAWRENCE, Ms. LEE, Mr. LEVIN, Mr. LEWIS, Mr. TED LIEU of California, Mrs. CAROLYN B. MALONEY of New York, Mr. SEAN PATRICK MALONEY of New York, Ms. MCCOLLUM, Mr. McDERMOTT, Mr. MEEKS, Ms. MOORE, Mr. MOULTON, Mr. NADLER, Mrs. NAPOLITANO, Mr. NORCROSS, Ms. NORTON, Mr. O’ROURKE, Mr. PASCRELL, Mr. PAYNE, Mr. RICHMOND, Mr. RUSH, Ms. LINDA T. SÁNCHEZ of California, Mr. DAVID SCOTT of Georgia, Mr. SIRES, Ms. SPEIER, Mr. THOMPSON of Mississippi, Mr. TONKO, Mrs. TORRES, Mr. VAN HOLLEN, Mr. VARGAS, Mr. VELA, Ms. MAXINE WATERS of California, Ms. WILSON of Florida, Mr. MCGOVERN, Ms. BONAMICI, Mr. BRENDAN F. BOYLE of Pennsylvania, Mr. PETERS, and Ms. CLARKE of New York) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means and Oversight and Government Reform, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

# A BILL

To amend title XXVII of the Public Health Service Act to provide for a special enrollment period for pregnant women, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Healthy Maternity and  
5       Obstetric Medicine Act” or the “Healthy MOM Act”.

6       **SEC. 2. FINDINGS AND PURPOSE.**

7       (a) FINDINGS.—Congress finds the following:

8               (1) Pregnancy is a significant life event for mil-  
9       lions of women in the United States each year.

10              (2) For more than 30 years, our Nation,  
11       through the Medicaid program, has recognized that  
12       pregnant women need immediate access to afford-  
13       able care, and has allowed women who meet income-  
14       eligibility requirements to enroll in Medicaid cov-  
15       erage when they become pregnant.

16              (3) Congress recognized the central importance  
17       of maternity coverage by classifying maternity and  
18       newborn care as one of the ten essential health bene-  
19       fits that must now be covered on most individual  
20       and small group health insurance plans under sec-

1        tion 1302(b)(1) of the Patient Protection and Af-  
2        fordable Care Act (42 U.S.C. 18022(b)(1)).

3            (4) Access to comprehensive maternity coverage  
4        allows women to access important pregnancy-related  
5        care, which is demonstrated to improve health out-  
6        comes for women and newborns and reduce financial  
7        costs for both consumers and insurers.

8            (5) Uninsured women, women with grand-  
9        fathered and transitional health plans, self-funded  
10       student health plans, and catastrophic and high-de-  
11       ductible health plans may lack access to comprehen-  
12       sive and affordable maternity coverage.

13           (6) A special enrollment period is especially im-  
14       portant for young adults, who are at high risk for  
15       unintended pregnancies, yet young adults are fre-  
16       quently enrolled in catastrophic coverage, which  
17       often has fewer benefits, more restrictions, and high-  
18       er deductibles.

19           (7) Timely maternity care improves the health  
20       of pregnant women, as well as birth outcomes and  
21       the health of babies throughout their lifetimes. Preg-  
22       nancy-related maternal mortality is three to four  
23       times higher among women who receive no maternity  
24       care compared to women who do. Regular maternity  
25       care can detect or mitigate serious pregnancy-related

1 health complications, including preeclampsia, pla-  
2 cental abruption, complications from diabetes, com-  
3 plications from heart disease, and Graves' disease,  
4 all of which can result in morbidity or mortality for  
5 the mother or newborn.

6 (8) Regular maternity care can reduce preterm  
7 births and the health complications associated with  
8 preterm births.

9 (9) Timely maternity care can reduce short-  
10 and long-term health care costs. If a woman does  
11 not have access to affordable maternity care during  
12 her pregnancy, and she or her newborn experiences  
13 pregnancy complications that result in health prob-  
14 lems after birth, their insurer may end up paying  
15 much higher costs than if the insurer had covered  
16 the woman's maternity care during her pregnancy.  
17 Intensive maternity care can reduce hospital and  
18 neonatal intensive care unit admissions among in-  
19 fants, resulting in cost savings of \$1,768 to \$5,560  
20 per birth. For women with high-risk pregnancies, in-  
21 tensive maternity care saves \$1.37 for every \$1 in-  
22 vested in maternity care.

23 (b) PURPOSE.—The purpose of this Act is to protect  
24 the health of women and newborns by ensuring that all  
25 women eligible for coverage through the Exchanges estab-

1 lished under title I of the Patient Protection and Afford-  
 2 able Care Act (Public Law 111–148) can access affordable  
 3 health coverage during their pregnancy.

4 **SEC. 3. PROVIDING FOR A SPECIAL ENROLLMENT PERIOD**  
 5 **FOR PREGNANT WOMEN.**

6 (a) PUBLIC HEALTH SERVICE ACT.—Section  
 7 2702(b)(2) of the Public Health Service Act (42 U.S.C.  
 8 300gg–1(b)(2)) is amended by inserting “including a spe-  
 9 cial enrollment period for pregnant women, beginning on  
 10 the date on which the pregnancy is reported to the health  
 11 insurance issuer” before the period at the end.

12 (b) PATIENT PROTECTION AND AFFORDABLE CARE  
 13 ACT.—Section 1311(c)(6) of the Patient Protection and  
 14 Affordable Care Act (42 U.S.C. 18031(c)(6)) is amend-  
 15 ed—

16 (1) in subparagraph (C), by striking “and” at  
 17 the end;

18 (2) by redesignating subparagraph (D) as sub-  
 19 paragraph (E); and

20 (3) by inserting after subparagraph (C) the fol-  
 21 lowing new subparagraph:

22 “(D) a special enrollment period for preg-  
 23 nant women, beginning on the date on which  
 24 the pregnancy is reported to the Exchange;  
 25 and”.

1       (c) SPECIAL ENROLLMENT PERIODS.—Section  
2 9801(f) of the Internal Revenue Code of 1986 (26 U.S.C.  
3 9801(f)) is amended by adding at the end the following  
4 new paragraph:

5           “(4) FOR PREGNANT WOMEN.—

6           “(A) A group health plan shall permit an  
7 employee who is eligible, but not enrolled, for  
8 coverage under the terms of the plan (or a de-  
9 pendent of such an employee if the dependent  
10 is eligible, but not enrolled, for coverage under  
11 such terms) to enroll for coverage under the  
12 terms of the plan upon pregnancy, with the spe-  
13 cial enrollment period beginning on the date on  
14 which the pregnancy is reported to the group  
15 health plan.

16           “(B) The Secretary shall promulgate regu-  
17 lations with respect to the special enrollment  
18 period under subparagraph (A), including es-  
19 tablishing a time period for pregnant women to  
20 enroll in coverage and effective date of such  
21 coverage.”.

22       (d) EFFECTIVE DATE.—The amendments made by  
23 this section shall apply with respect to plan years begin-  
24 ning after the 2016 plan year.

1 **SEC. 4. FEDERAL EMPLOYEE HEALTH BENEFIT PLANS.**

2 (a) IN GENERAL.—The Director of the Office of Per-  
3 sonnel Management shall issue such regulations as are  
4 necessary to ensure that pregnancy is considered a change  
5 in family status and a qualifying life event for an indi-  
6 vidual who is eligible to enroll, but is not enrolled, in a  
7 health benefit plan under chapter 89 title 5, United States  
8 Code.

9 (b) EFFECTIVE DATE.—The requirement in sub-  
10 section (a) shall apply with respect to any contract entered  
11 into under section 8902 of such title beginning 12 months  
12 after the date of enactment of this Act.

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