§2834-D. Maternity and postpartum care

An insurer that issues group contracts providing maternity benefits shall provide coverage for 12 months following childbirth for postpartum care services and support necessary to transition a patient to a healthy and stable condition that meets the recommendations of the American College of Obstetricians and Gynecologists outlined in the "Optimizing Postpartum Care" opinion published May 2018. The postpartum care services and support provided in accordance with this section must include coverage for development of a postpartum care plan; contact with the patient within 3 weeks of the end of pregnancy; a comprehensive postpartum visit, including a full assessment of the patient's physical, social and psychological well-being; treatment of complications of pregnancy and childbirth, including pelvic floor disorders and postpartum depression; assessment of risk factors for cardiovascular disease; and care related to pregnancy loss. [PL 2021, c. 691, §2 (NEW); PL 2021, c. 691, §5 (AFF).]

SECTION HISTORY

PL 2021, c. 691, §2 (NEW). PL 2021, c. 691, §5 (AFF).

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