

Healthy MOM Act Section-by-Section Summary

SECTION 1: SHORT TITLE

Defines the act as the *Healthy Maternity and Obstetric Medicine Act* or “Healthy MOM Act.”

SECTION 2: FINDINGS AND PURPOSE

Access to quality prenatal and maternity care is essential for the well-being of women and infants. Timely maternity care improves the health of pregnant women, as well as birth outcomes and the health of babies throughout their lifetimes. In fact, maternal mortality rates are three to four times higher for women who do not receive prenatal care compared to those who do, and babies of mothers who do not receive prenatal care are five times more likely to die and three times as likely to be born prematurely compared to mothers who receive adequate care.

The Act’s purpose is to protect the health of women and newborns by ensuring that all women eligible for coverage through the Affordable Care Act’s (ACA) insurance marketplaces, as well as women eligible for other individual or group health plans, can access affordable health coverage during their pregnancy.

SECTION 3: PROVIDING FOR A SPECIAL ENROLLMENT PERIOD FOR PREGNANT WOMEN

Provides for the establishment of a special enrollment period (SEP) for pregnant individuals eligible for coverage through the Exchanges established under the ACA beginning after the 2016 plan year. Requires the Secretary of the U.S. Department of Health and Human Services (HHS) to promulgate regulations to clarify the time period of the SEP and other related details.

SECTION 4: COVERAGE OF MATERNITY CARE FOR DEPENDENT CHILDREN

Amends the Public Health Service Act (PHSA) to require employer-sponsored insurance to cover maternity care for all beneficiaries – including dependent children. Plans must include coverage for all beneficiaries for maternity care associated with pregnancy, childbirth, and postpartum care.

SECTION 5: FEDERAL EMPLOYEE HEALTH BENEFIT PLANS

Directs the Director of the Office of Personnel Management (OPM) to establish an SEP for pregnancy for those eligible to receive coverage, but who do not currently receive coverage, through the Federal Employees Health Benefits Program.

SECTION 6: CONTINUATION OF MEDICAID INCOME ELIGIBILITY FOR PREGNANT WOMEN & INFANTS

Maintains existing Medicaid state income eligibility levels for pregnant women and infants to ensure continued coverage for individuals and future potential Medicaid-eligible pregnant women.

SECTION 7: RELATIONSHIP TO OTHER LAWS

Clarifies that this legislation shall not be construed to limit alternative state or local laws that provide greater protection for enrollees.