



At a Glance

Background Context



Perinatal care is health care for pregnant persons from prenatal through postpartum. It allows practitioners an opportunity to detect, monitor, and address **health conditions** and **behaviors** that can impact pregnancy, maternal health, and newborn/infant health outcomes.



California's **Comprehensive Perinatal Services Program** (CPSP) is a benefit for Medi-Cal beneficiaries who become pregnant. CPSP participants are provided **wraparound perinatal services**, and services are available from the date of conception through **60 days** following the end of the pregnancy.

Bill Summary



AB 1930 would change coverage for services provided under the Comprehensive Perinatal Services Program: 1) extend coverage for CPSP services from **60 days** to **12 months** postpartum; 2) request federal approval to cover certain services by **unlicensed perinatal health workers (PHWs)**; and 3) change the **supervision requirements** of unlicensed PHWs delivering CPSP services.

Insurance Subject to the Mandate

- Medi-Cal enrollees in **DMHC-regulated managed care plans**
- Medi-Cal enrollees in the **Fee-for-Service program**
- Medi-Cal enrollees in **County Organized Health Systems**
- Commercial** enrollees
- CalPERS** enrollees

Medical Effectiveness

CHBRP did not identify any studies that compared interventions that were provided for 60 days or less postpartum to interventions that were provided over a longer period of time.



Based on studies conducted in other states that cover comprehensive perinatal services similar to those that would be covered in CA under AB 1930, CHBRP found:

- Inconclusive evidence** of the impact of programs in which services were delivered solely by unlicensed PHWs on **breastfeeding and maternal depression**.
- Insufficient evidence** of the impact of programs delivered by a combination of unlicensed PHWs and licensed health professionals.

Benefit Coverage and Cost Impacts

At baseline, there are

69,861

users of CPSP services.

0% of eligible Medi-Cal beneficiaries have coverage of preventive CPSP services rendered by unlicensed PHWs away from a medical site. **Postmandate**, CHBRP estimates additional

349

Medi-Cal beneficiaries would use CPSP services.



AB 1930 would raise total net annual expenditures by **\$75,000** due to an increase in expenditures by Medi-Cal Managed Care plans.

Public Health Impacts



AB 1930 would have **no measurable impact**, due to existing barriers to PHW supply and lack of evidence showing the effectiveness of comprehensive perinatal services when provided more than 60 days postpartum.