

AMENDED IN SENATE MARCH 24, 2025

SENATE BILL

No. 626

Introduced by Senator Smallwood-Cuevas

February 20, 2025

An act to amend Sections 1367.625 and 123640 of the Health and Safety Code, and to amend Section 10123.867 of the Insurance Code, relating to ~~maternal~~ *perinatal* health.

LEGISLATIVE COUNSEL'S DIGEST

SB 626, as amended, Smallwood-Cuevas. ~~Maternal~~ *Perinatal* health screenings and treatment.

Existing law requires a licensed health care practitioner who provides prenatal, postpartum, or interpregnancy care for a patient to offer to screen or appropriately screen a mother for maternal mental health conditions. *For purposes of that requirement, existing law defines "maternal mental health condition" to mean a mental health condition that occurs during pregnancy, the postpartum period, or interpregnancy, as specified.*

This bill would *modify the term "maternal mental health condition" to "perinatal mental health condition" and additionally include in its definition a mental health condition that occurs during the perinatal period. The bill would require a licensed health care practitioner who provides perinatal care for a patient to screen, diagnose, and treat the patient for a ~~maternal~~ perinatal mental health condition according to the clinical guidelines from the American College of Obstetricians and Gynecologists.*

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful

violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan or health insurer to develop a maternal mental health program designed to promote quality and cost-effective ~~outcomes, as specified.~~ *outcomes. Existing law requires the program to, among other things, conduct specified maternal mental health screenings during pregnancy and the postpartum period. For purposes of these provisions, existing law defines “maternal mental health” to mean a mental health condition that occurs during pregnancy or during the postpartum period, as specified.*

This bill would *modify the term “maternal mental health” to “perinatal mental health” and additionally include in its definition a mental health condition that occurs during the perinatal period, as specified. The bill would instead require the above-described program to include perinatal mental health screening to be conducted during pregnancy and during the postpartum and perinatal periods according to clinical guidelines from the American College of Obstetricians and Gynecologists. The bill would require a health care service plan or health insurer to provide case management and care coordination for an enrollee or insured during the perinatal period. The bill would require a plan or insurers to annually report the utilization and outcomes of case management services to the appropriate department and to post that reported information to its internet website. The bill would require a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2026, to provide coverage for at least one medication and one digital therapeutic for ~~maternal~~ perinatal mental health, as specified. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program.*

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1367.625 of the Health and Safety Code
2 is amended to read:

3 1367.625. (a) A health care service plan shall do all of the
4 following:

5 (1) Develop a ~~maternal perinatal~~ maternal perinatal mental health program
6 designed to promote quality and cost-effective outcomes. ~~The~~
7 ~~program shall consist of at least one maternal mental health~~
8 ~~screening to be conducted during pregnancy, at least one additional~~
9 ~~screening to be conducted during the first six weeks of the~~
10 ~~postpartum period, and additional postpartum screenings, if~~
11 ~~determined to be medically necessary and clinically appropriate~~
12 ~~in the judgment of the treating provider. The program shall include~~
13 ~~perinatal mental health screening to be conducted during~~
14 ~~pregnancy and during the postpartum and perinatal periods~~
15 ~~according to clinical guidelines from the American College of~~
16 ~~Obstetricians and Gynecologists.~~ The program shall be developed
17 consistent with sound clinical principles and processes, and shall
18 include quality measures to encourage screening, diagnosis,
19 treatment, and referral. The program guidelines and criteria shall
20 be provided to relevant medical providers, including all contracting
21 obstetric providers. As part of a ~~maternal perinatal~~ maternal perinatal
22 ~~program~~ program, the health care service plan is encouraged to
23 improve screening, treatment, and referral to ~~maternal perinatal~~
24 mental health services, include coverage for doulas, incentivize
25 training opportunities for contracting obstetric providers, and
26 educate enrollees about the program.

27 (2) Provide case management and care coordination for an
28 enrollee during the perinatal period.

29 (3) Annually report to the department on the utilization and
30 outcomes of case management services.

31 (4) Publicly post the information reported pursuant to paragraph
32 (3) on the plan's internet website.

33 (b) A health care service plan contract issued, amended, or
34 renewed on or after January 1, 2026, shall provide coverage for at
35 least one medication approved by the United States Food and Drug
36 Administration (FDA) for ~~maternal perinatal~~ maternal perinatal mental health and
37 for at least one FDA-approved digital therapeutic for ~~maternal~~
38 ~~perinatal~~ maternal perinatal mental health.

1 (c) For the purposes of this section:

2 (1) “Contracting obstetric provider” means an individual who
3 is certified or licensed pursuant to Division 2 (commencing with
4 Section 500) of the Business and Professions Code, or an initiative
5 act referred to in that division, and who is contracted with the
6 enrollee’s health care service plan to provide services under the
7 enrollee’s plan contract.

8 (2) “Health care service plan” includes Medi-Cal managed care
9 plans that contract with the State Department of Health Care
10 Services pursuant to Chapter 7 (commencing with Section 14000)
11 and Chapter 8 (commencing with Section 14200) of Part 3 of
12 Division 9 of the Welfare and Institutions Code. The State
13 Department of Health Care Services shall seek any federal
14 approvals it deems necessary to implement this section. This
15 section applies to Medi-Cal managed care plan contracts only to
16 the extent that the State Department of Health Care Services obtains
17 any necessary federal approvals, and federal financial participation
18 under the Medi-Cal program is available and not otherwise
19 jeopardized.

20 (3) ~~“Maternal~~ “*Perinatal* mental health” means a mental health
21 condition that occurs during ~~pregnancy or during the postpartum~~
22 ~~period~~ *pregnancy, the postpartum period, or the perinatal period*
23 and includes, but is not limited to, postpartum *or perinatal*
24 depression.

25 (d) This section does not apply to specialized health care service
26 plans, except specialized behavioral health-only plans offering
27 professional mental health services.

28 (e) Notwithstanding subdivision (a), a Medi-Cal managed care
29 plan shall continue to comply with any quality measures required
30 or adopted by the State Department of Health Care Services.
31 Quality measures included in a Medi-Cal managed care plan’s
32 ~~maternal~~ *perinatal* mental health program shall not be inconsistent
33 with quality measures required or adopted by the State Department
34 of Health Care Services.

35 (f) *This section shall not be construed to limit access to*
36 *additional treatment options for perinatal mental health.*

37 SEC. 2. Section 123640 of the Health and Safety Code is
38 amended to read:

39 123640. (a) A licensed health care practitioner who provides
40 prenatal, postpartum, *perinatal*, or interpregnancy care for a patient

1 shall ensure that the mother is offered screening or is appropriately
2 screened for ~~maternal~~ *perinatal* mental health conditions.

3 (b) A licensed health care practitioner who provides perinatal
4 care for a patient shall screen, diagnose, and treat the patient for
5 a ~~maternal~~ *perinatal* mental health condition according to the
6 clinical guidelines from the American College of Obstetricians
7 and Gynecologists.

8 (c) This section shall not apply to a licensed health care
9 practitioner when providing emergency services or care, as defined
10 in Section 1317.1.

11 (d) This section does not preclude any licensed or certified
12 provider acting within their scope of practice from screening for
13 ~~maternal~~ *perinatal* mental health conditions.

14 (e) For purposes of this section, the following definitions apply:

15 (1) “Health care practitioner” means a physician and surgeon,
16 naturopathic doctor, nurse practitioner, physician assistant, nurse
17 midwife, or a midwife licensed pursuant to Division 2
18 (commencing with Section 500) of the Business and Professions
19 Code or an initiative act referred to in that division and who is
20 acting within their scope of practice.

21 (2) ~~“Maternal”~~ “*Perinatal* mental health condition” means a
22 mental health condition that occurs during pregnancy, the
23 postpartum period, *the perinatal period*, or interpregnancy and
24 includes, but is not limited to, postpartum *or perinatal* depression.

25 SEC. 3. Section 10123.867 of the Insurance Code is amended
26 to read:

27 10123.867. (a) A health insurer shall do all of the following:

28 (1) Develop a ~~maternal~~ *perinatal* mental health program
29 designed to promote quality and cost-effective outcomes. ~~The~~
30 ~~program shall consist of at least one maternal mental health~~
31 ~~screening to be conducted during pregnancy, at least one additional~~
32 ~~screening to be conducted during the first six weeks of the~~
33 ~~postpartum period, and additional postpartum screenings, if~~
34 ~~determined to be medically necessary and clinically appropriate~~
35 ~~in the judgment of the treating provider. The program shall include~~
36 *perinatal mental health screening to be conducted during*
37 *pregnancy and during the postpartum and perinatal periods*
38 *according to clinical guidelines from the American College of*
39 *Obstetricians and Gynecologists.* The program shall be developed
40 consistent with sound clinical principles and processes, and shall

1 include quality measures to encourage screening, diagnosis,
 2 treatment, and referral. The program guidelines and criteria shall
 3 be provided to relevant medical providers, including all contracting
 4 obstetric providers. As part of the ~~maternal perinatal~~ mental health
 5 program, a health insurer is encouraged to improve screening,
 6 treatment, and referral to ~~maternal perinatal~~ mental health services,
 7 include coverage for doulas, incentivize training opportunities for
 8 contracting obstetric providers, and educate insureds about the
 9 program.

10 (2) Provide case management and care coordination for an
 11 insured during the perinatal period.

12 (3) Annually report to the department on the utilization and
 13 outcomes of case management services.

14 (4) Publicly post the information reported pursuant to paragraph
 15 (3) on the insurer's internet website.

16 (b) A health insurance policy issued, amended, or renewed on
 17 or after January 1, 2026, shall provide coverage for at least one
 18 medication approved by the United States Food and Drug
 19 Administration (FDA) for ~~maternal perinatal~~ mental health and
 20 for at least one FDA-approved digital therapeutic for ~~maternal~~
 21 *perinatal* mental health.

22 (c) For the purposes of this section:

23 (1) "Contracting obstetric provider" means an individual who
 24 is certified or licensed pursuant to Division 2 (commencing with
 25 Section 500) of the Business and Professions Code, or an initiative
 26 act referred to in that division, and who is contracted with the
 27 insured's health insurer to provide services under the insured's
 28 health insurance policy.

29 (2) ~~"Maternal"~~ "*Perinatal* mental health" means a mental health
 30 condition that occurs during ~~pregnancy or during the postpartum~~
 31 ~~period~~ *pregnancy, the postpartum period, or the perinatal period*
 32 and includes, but is not limited to, *postpartum or perinatal*
 33 depression.

34 (d) This section does not apply to specialized health insurers,
 35 except behavioral health-only insurers that provide coverage for
 36 professional mental health services.

37 (e) *This section shall not be construed to limit access to*
 38 *additional treatment options for perinatal mental health.*

39 SEC. 4. No reimbursement is required by this act pursuant to
 40 Section 6 of Article XIII B of the California Constitution because

1 the only costs that may be incurred by a local agency or school
2 district will be incurred because this act creates a new crime or
3 infraction, eliminates a crime or infraction, or changes the penalty
4 for a crime or infraction, within the meaning of Section 17556 of
5 the Government Code, or changes the definition of a crime within
6 the meaning of Section 6 of Article XIII B of the California
7 Constitution.

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