

**HOUSE . . . . . No. 3897**

**The Commonwealth of Massachusetts**

PRESENTED BY:

**Ellen Story**

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act relative to post-partum depression.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Ellen Story	3rd Hampshire
John J. Binienda	17th Worcester
William N. Brownsberger	24th Middlesex
Christine E. Canavan	10th Plymouth
Stephen R. Canessa	12th Bristol
Cheryl A. Coakley-Rivera	10th Hampden
Mark V. Falzone	9th Essex
Mary E. Grant	6th Essex
John D. Keenan	7th Essex
Kay Khan	11th Middlesex
Peter V. Kocot	1st Hampshire
Jennifer M. Callahan	18th Worcester
Barbara A. L'Italien	18th Essex
James R. Miceli	19th Middlesex
Denise Provost	27th Middlesex
Kathi-Anne Reinstein	16th Suffolk
Pam Richardson	6th Middlesex
John W. Scibak	2nd Hampshire
Carl M. Sciortino, Jr.	34th Middlesex

Joyce A. Spilotis  
Brian P. Wallace

12th Essex  
4th Suffolk

# The Commonwealth of Massachusetts

In the Year Two Thousand and Nine

## AN ACT RELATIVE TO POST-PARTUM DEPRESSION.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1

2 SECTION 1. Chapter 17 of the General Laws is hereby amended by adding  
3 the following section:-

4 Section 18. The department of public health shall administer  
5 training around the commonwealth on screening tools, managing maternal  
6 responses, and maternal depression generally, building on previous  
7 agency trainings. Said department shall develop a curriculum to  
8 expand opportunities for additional training, including web-based  
9 training materials. The trainings will strongly encourage  
10 obstetricians, nurse midwives, and pediatricians to incorporate  
11 screenings into every visit in a routine manner.

12 SECTION 2. Chapter 175 of the General Laws is hereby amended by  
13 inserting after section 47I the following section:-

14 Section 47J. Any individual policy of accident and sickness  
15 insurance issued pursuant to section 108, and any group blanket policy  
16 of accident and sickness insurance issued pursuant to section 110,  
17 except policies providing supplemental coverage to Medicare or to  
18 other government programs, delivered, issued or renewed by agreement  
19 within or without the commonwealth shall provide coverage for  
20 screening for post-partum depression, consistent with rules,  
21 regulations and criteria established by the department of public  
22 health pursuant to section 218 of chapter 111. Said screening process  
23 in multiple settings will increase the likelihood of detection of  
24 post-partum depression and reduce the stigma associated with it. These  
25 screenings shall consist of 3 screenings in an obstetrical setting,

26 including: (a) one in the first trimester, including risk assessment  
27 based on history of prior depression; (b) 1 in the third trimester;  
28 and (c) 1 at the 6-week post-partum visit. At least 4 required  
29 screenings in a pediatric setting, including (i) one in the first month  
30 of life, including risk assessment based on history of prior  
31 depression; and (ii) three additional screenings at routine well-child  
32 visits during the child's first year. If a woman switches her  
33 children's pediatrician during the first year of her child's life, the  
34 new pediatrician is required to perform a screen and risk assessment  
35 at the first appointment, as well as at as many of the remaining  
36 required screens as possible. If a woman switches obstetricians or  
37 nurse midwives during pregnancy the new provider is required to  
38 perform a screen and risk assessment at the first appointment, as well  
39 as the remaining required screens. Because both parents have access  
40 to children's medical records, pediatricians should consider safety  
41 and confidentiality when indicating the results of depression screens  
42 on those records. All providers must use a validated instrument for  
43 screens, to be determined by the department. The commonwealth and  
44 private insurers shall establish a reimbursement structure for  
45 screenings, and are strongly encouraged to use existing billing codes.

46 SECTION 3. Section 110 of said chapter 175, as so appearing, is hereby  
47 amended by adding the following subdivision:-

48 (Q) Any individual policy of insurance described in subdivisions  
49 (A), (C) or (D), which is delivered or issued for delivery within or  
50 without the commonwealth and which covers residents of the  
51 commonwealth and any employees health and welfare fund which is  
52 promulgated or renewed to any persons or group of persons in the  
53 commonwealth shall provide benefits for screening for post-partum  
54 depression. Said screening process in multiple settings will increase  
55 the likelihood of detection of post-partum depression and reduce the  
56 stigma associated with it. These screenings shall consist of 3  
57 screenings in an obstetrical setting, including: (a) one in the first  
58 trimester, including risk assessment based on history of prior  
59 depression; (b) 1 in the third trimester; and (c) 1 at the 6-week  
60 post-partum visit. At least 4 required screenings in a pediatric  
61 setting, including (i) one in the first month of life, including risk  
62 assessment based on history of prior depression; and (ii) three  
63 additional screenings at routine well-child visits during the child's  
64 first year. If a woman switches her children's pediatrician during the  
65 first year of her child's life, the new pediatrician is required to  
66 perform a screen and risk assessment at the first appointment, as well  
67 as at as many of the remaining required screens as possible. If a  
68 woman switches obstetricians or nurse midwives during pregnancy the

69 new provider is required to perform a screen and risk assessment at  
70 the first appointment, as well as the remaining required screens.  
71 Because both parents have access to children's medical records,  
72 pediatricians should consider safety and confidentiality when  
73 indicating the results of depression screens on those records. All  
74 providers must use a validated instrument for screens, to be  
75 determined by the department. The commonwealth and private insurers  
76 shall establish a reimbursement structure for screenings, and are  
77 strongly encouraged to use existing billing codes.

78 SECTION 4. Chapter 176A of the General Laws is hereby amended by  
79 inserting after section 8AA the following section:-

80 Section 8BB. Any contract, except contracts providing  
81 supplemental coverage to Medicare or other governmental programs,  
82 between a subscriber and the corporation under an individual group  
83 hospital service plan which shall be delivered, issued or renewed in  
84 the commonwealth shall provide, as a basis benefit to all individual  
85 subscribers and members within the commonwealth and to all group  
86 members having a principle place of employment within the commonwealth  
87 for expense for the screening for post-partum depression, consistent  
88 with rules, regulations and criteria established by the department of  
89 public health pursuant to section 218 of chapter 111. Said screening  
90 process in multiple settings will increase the likelihood of detection  
91 of post-partum depression and reduce the stigma associated with it.  
92 These screenings shall consist of 3 screenings in an obstetrical  
93 setting, including: (a) one in the first trimester, including risk  
94 assessment based on history of prior depression; (b) 1 in the third  
95 trimester; and (c) 1 at the 6-week post-partum visit. At least 4  
96 required screenings in a pediatric setting, including (i) one in the  
97 first month of life, including risk assessment based on history of  
98 prior depression; and (ii) three additional screenings at routine  
99 well-child visits during the child's first year. If a woman switches  
100 her children's pediatrician during the first year of her child's life,  
101 the new pediatrician is required to perform a screen and risk  
102 assessment at the first appointment, as well as at as many of the  
103 remaining required screens as possible. If a woman switches  
104 obstetricians or nurse midwives during pregnancy the new provider is  
105 required to perform a screen and risk assessment at the first  
106 appointment, as well as the remaining required screens. Because both  
107 parents have access to children's medical records, pediatricians  
108 should consider safety and confidentiality when indicating the results  
109 of depression screens on those records. All providers must use a  
110 validated instrument for screens, to be determined by the department.  
111 The commonwealth and private insurers shall establish a reimbursement

112 structure for screenings, and are strongly encouraged to use existing  
113 billing codes.

114 SECTION 5. Chapter 176B of the General Laws is hereby amended by  
115 inserting after section 4BB the following section:-

116 Section 4CC. Any subscription certificate under an individual or  
117 group medical service agreement, except certificates which provide  
118 supplemental coverage to Medicare or other governmental programs which  
119 shall be delivered or issued or renewed in the commonwealth shall  
120 provide as benefits to all individual subscribers and members within  
121 the commonwealth and to all group members having a principal place of  
122 employment within the commonwealth for expense of screening for post-  
123 partum depression, consistent with rules, regulations and criteria  
124 established by the department of public health pursuant to section 218  
125 of chapter 111. Said screening process in multiple settings will  
126 increase the likelihood of detection of post-partum depression and  
127 reduce the stigma associated with it. These screenings shall consist  
128 of 3 screenings in an obstetrical setting, including: (a) one in the  
129 first trimester, including risk assessment based on history of prior  
130 depression; (b) 1 in the third trimester; and (c) 1 at the 6-week  
131 post-partum visit. At least 4 required screenings in a pediatric  
132 setting, including (i) one in the first month of life, including risk  
133 assessment based on history of prior depression; and (ii) three  
134 additional screenings at routine well-child visits during the child's  
135 first year. If a woman switches her children's pediatrician during the  
136 first year of her child's life, the new pediatrician is required to  
137 perform a screen and risk assessment at the first appointment, as well  
138 as at as many of the remaining required screens as possible. If a  
139 woman switches obstetricians or nurse midwives during pregnancy the  
140 new provider is required to perform a screen and risk assessment at  
141 the first appointment, as well as the remaining required screens.  
142 Because both parents have access to children's medical records,  
143 pediatricians should consider safety and confidentiality when  
144 indicating the results of depression screens on those records. All  
145 providers must use a validated instrument for screens, to be  
146 determined by the department. The commonwealth and private insurers  
147 shall establish a reimbursement structure for screenings, and are  
148 strongly encouraged to use existing billing codes.

149 SECTION 6. Section 4 of chapter 176G of the General Laws, as appearing  
150 in the 2006 Official Edition, is hereby amended by adding the  
151 following sentence:- Such health maintenance contract shall also  
152 provide coverage for screening for post-partum depression as set forth  
153 in section 47I of chapter 175.

154 SECTION 7. The department of public health shall establish a multi-  
155 disciplinary task force to promote collaborative communication and  
156 continuity of care. Said task force shall include representatives from  
157 the department, the department of mental health, the department of  
158 early education and care, the department of children and families,  
159 MassHealth, and the children's behavioral health initiative, grass  
160 roots groups, professional groups and national organizations  
161 addressing maternal and infant mental health. It will also include  
162 one Obstetrician, one Pediatrician, one Psychiatrist, one Child and  
163 Adolescent Psychiatrist, and one mother who has survived post-partum  
164 depression. Said task force shall facilitate the compilation of 2  
165 referral lists for providers; a list of service providers for  
166 individual counseling; and a list of support groups around the  
167 commonwealth, including groups run by nonprofits; and investigate  
168 opportunities to link the referral lists with existing resources, such  
169 as parental stress hotlines. This task force shall also investigate  
170 opportunities to establish a day treatment program in the commonwealth  
171 for women suffering from severe post-partum depression with the  
172 capacity for women to bring their infants. The taskforce shall  
173 investigate opportunities to promote education about post-partum  
174 depression as part of medical school curriculum and continuing medical  
175 education.

176 SECTION 8. The early intervention partnership program shall be  
177 expanded from 9 to 13 communities statewide as determined by the  
178 department of public health.

179

180 SECTION 9. The department of public health shall be required to  
181 develop, market and distribute culturally-sensitive, multi-lingual  
182 public awareness and education materials on maternal depression,  
183 including making it available in birth hospitals and pediatricians'  
184 office to build on their work in the Maternal and Infant Maternal  
185 Health Project, and in consultation with community leaders. The  
186 department will investigate partnering with graduate communications  
187 programs to establish effective social marketing strategies.