

STATE OF NEW YORK

5279

2025-2026 Regular Sessions

IN ASSEMBLY

February 12, 2025

Introduced by M. of A. SOLAGES, BICHOTTE HERMELYN, ZINERMAN, SHRESTHA,
FORREST -- read once and referred to the Committee on Health

AN ACT to amend the social services law and the public health law, in relation to Medicaid expanding coverage for pregnant and postpartum individuals and their children, establishing a health expense account program for pregnant and postpartum individuals, and requiring the creation of informative pamphlets on maternal depression

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Subparagraph 1 of paragraph (b) of subdivision 4 of
2 section 366 of the social services law, as amended by section 3 of part
3 CCC of chapter 56 of the laws of 2022, is amended to read as follows:

4 (1) A pregnant [~~woman~~] or postpartum individual eligible for medical
5 assistance under subparagraph two or four of paragraph (b) of subdivi-
6 sion one of this section on any day of [~~her~~] their pregnancy will
7 continue to be eligible for such care and services for a period of [~~one~~
8 year] two years beginning on the last day of pregnancy, without regard
9 to any change in the income of the family that includes the pregnant
10 [~~woman~~] or postpartum individual, even if such change otherwise would
11 have rendered [~~her~~] them ineligible for medical assistance.

12 § 2. Subparagraph 2 of paragraph (b) of subdivision 4 of section 366
13 of the social services law, as added by section 2 of part D of chapter
14 56 of the laws of 2013, is amended to read as follows:

15 (2) A child born to [~~a woman~~] an individual eligible for and receiving
16 medical assistance on the date of the child's birth shall be deemed to
17 have applied for medical assistance and to have been found eligible for
18 such assistance on the date of such birth and to remain eligible for
19 such assistance for a period of [~~one year, so long as the child is a~~
20 ~~member of the woman's household and the woman remains eligible for such~~
21 ~~assistance or would remain eligible for such assistance if she were~~
22 ~~pregnant~~] two years, without regard to any change in the income of the

EXPLANATION--Matter in italics (underscored) is new; matter in brackets
[-] is old law to be omitted.

LBD09112-01-5

family that includes the child, even if such change otherwise would have rendered them ineligible for medical assistance.

§ 3. Section 365-a of the social services law is amended by adding a new subdivision 6-a to read as follows:

6-a. Any inconsistent provision of law notwithstanding, medical assistance for pregnant and postpartum individuals shall also include all pregnancy-related and postpartum services including, but not limited to, coverage for maternal mental health conditions for postpartum individuals diagnosed with a maternal mental health condition.

§ 4. Title 3 of article 25 of the public health law is amended to read as follows:

TITLE III
[~~CONTROL OF MIDWIFERY~~] HEALTH
EXPENSE ACCOUNT PROGRAM FOR
PREGNANT AND POSTPARTUM INDIVIDUALS

Section 2559-h. Definitions.

2559-i. Health expense account program for pregnant and postpartum individuals.

2559-j. Federal participation.

2559-k. Implementation of the program.

§ 2559-h. Definitions. For the purpose of this title, unless the context clearly requires otherwise:

1. "eligible person" means pregnant individuals and individuals up to two years postpartum that are receiving medical assistance under title eleven of article five of the social services law.

2. "out-of-pocket pregnancy-related costs" includes, but is not limited to, birth and infant care classes, doula services, midwifery care, lactation support services, prenatal vitamins, lab tests or screening, prenatal acupuncture or acupressure, and transportation expenses essential to medical care.

§ 2559-i. Health expense account program for pregnant and postpartum individuals. 1. On or before July first, two thousand twenty-seven, the department, in consultation with the department of social services, shall establish a health expense account program for pregnant and postpartum individuals. Under this program, an eligible person shall be eligible for reimbursement for out-of-pocket pregnancy-related costs in an amount not to exceed one thousand two hundred fifty dollars.

2. An eligible person shall not have to seek approval or be denied reimbursement for care for that care to be considered an out-of-pocket pregnancy-related cost. The department may authorize reimbursement for additional pregnancy-related expenses as it deems fit.

3. An eligible person shall not be reimbursed for out-of-pocket pregnancy-related costs unless the request for reimbursement is submitted within three months after the last day of pregnancy or within three months of the out-of-pocket pregnancy-related cost occurring.

4. The department shall be allowed to contract out for purposes of implementing the health expense account program for pregnant and postpartum individuals.

§ 2559-j. Federal participation. In implementing this title, the department shall seek to maximize federal financial participation. To the extent federal financial participation is unavailable, the department shall implement this title only with state funds with an opt-out option allowing localities with no need for the program established under this title to opt-out. To ensure such program is run effectively or based on a locality's needs, localities shall consult with organizations that address pregnant and postpartum individuals. In the event

1 that a locality opts out, said locality shall provide the department and
2 the office of mental health with justification, and any unused funds
3 shall be reallocated to other localities demonstrating a need for such
4 additional funding.

5 § 2559-k. Implementation of the program. The department shall imple-
6 ment this title through all-county or plan letters, or similar
7 instructions, no later than January first, two thousand twenty-nine.

8 § 5. Subdivision 2 of section 2500-k of the public health law, as
9 added by chapter 199 of the laws of 2014, is amended to read as follows:

10 2. Maternal depression information. (a) The commissioner, in consulta-
11 tion with the commissioner of mental health, shall make available to
12 maternal health care providers information on maternal depression. The
13 information shall include, but not be limited to:

14 (i) a summary of the current evidence base and professional guidelines
15 for maternal depression screening;

16 (ii) validated, evidence-based tools for maternal depression screen-
17 ing;

18 (iii) information about follow-up support for patients who may require
19 further evaluation, referral, or treatment including, when available,
20 information about specific community resources and entities licensed by
21 the office of mental health; ~~and~~

22 (iv) information on engaging support for the mother, which may include
23 communicating with the other parent of the child and other family
24 members, as appropriate and consistent with patient confidentiality;

25 (v) information on the psychological needs of the postpartum individ-
26 ual; and

27 (vi) how to be sensitive to cultural differences that surround child-
28 birth, which may involve eating particular foods and restricting certain
29 activities.

30 (b) The commissioner, in consultation with the commissioner of mental
31 health, shall develop and distribute to maternal health care providers
32 an informative pamphlet for patients with information on maternal
33 depression including, but not limited to:

34 (i) the signs and symptoms of maternal depression;

35 (ii) how to seek help for maternal depression;

36 (iii) physiological changes and medical issues that may arise during
37 the postpartum period; and

38 (iv) contact information where a patient can file a complaint or
39 report of any misconduct.

40 (c) The information on maternal depression shall be posted on the
41 department's website as a printable file, shall be available for order
42 as a printed deliverable, and shall be written in layperson's language
43 and shall be made available in English and the six most common non-Engl-
44 ish languages spoken by individuals with limited English proficiency in
45 New York state as based on the most recent census. The commissioner
46 shall, in collaboration with the commissioner of mental health, update
47 and review the information on maternal depression, as necessary.

48 § 6. This act shall take effect on the one hundred eightieth day after
49 it shall have become a law.