Introduced by Assembly Member Maienschein

February 17, 2021

An act to add Section 1367.626 to the Health and Safety Code, and to add Section 10123.868 to the Insurance Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

AB 935, as introduced, Maienschein. Telehealth: mental health. Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of that act a crime. Existing law also provides for the regulation of health insurers by the Department of Insurance. Existing law requires health care service plan contracts and health insurance policies that provide hospital, medical, or surgical coverage to provide coverage for the diagnosis and medically necessary treatment of severe mental illnesses, as defined, of a person of any age. Existing law also requires health care service plans and health insurers, by July 1, 2019, to develop maternal mental health programs.

This bill would require health care service plans and health insurers, by July 1, 2022, to provide access to a telehealth consultation program that meets specified criteria and provides providers who treat children and pregnant and certain postpartum persons with access to a mental health consultation program, as specified. The bill would require the consultation by a mental health clinician with expertise appropriate for pregnant, postpartum, and pediatric patients to be conducted by telephone or telehealth video, and to include guidance on the range of

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evidence-based treatment options, screening tools, and referrals. The bill would require health care service plans and insurers to communicate information relating to the telehealth program at least twice a year in writing. The bill would require health care service plans and health insurers to monitor data pertaining to the utilization of the program to facilitate ongoing quality improvements, as necessary, and to provide a description of the program to the appropriate department. The bill would exempt certain specialized health care service plans and health insurers from these provisions. Because a willful violation of the bill's requirement 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. This act shall be known, and may be cited, as the Mothers and Children Mental Health Support Act of 2020.

SEC. 2. Section 1367.626 is added to the Health and Safety

3 4 Code, to read: 5 1367.626. (a) In order to more quickly diagnose and treat

children and pregnant and postpartum persons suffering from mental illness, by July 1, 2022, a health care service plan shall

provide access to a telehealth consultation program that provides

9 contracting providers who treat children and persons who are 10

pregnant or up to one year postpartum with access to a mental health consultation program during the treating provider's standard 11

provider hours, which may include evenings and weekends. The 12

13 telehealth consultation program shall include a triage service and

14 consultation by a mental health clinician with expertise appropriate

15 for pregnant, postpartum, and pediatric patients, including a

16 psychiatrist when appropriate or requested by the treating provider,

17 by telephone or telehealth video, and shall include guidance on 18 the range of evidence-based treatment options, including -3- AB 935

psychotherapy, as determined to be appropriate, screening tools, and referrals.

- (b) A health care service plan shall communicate information relating to the telehealth program and its availability to contracting medical providers who treat children and pregnant and postpartum persons, including pediatricians, obstetricians, and primary care providers, at least twice a year in writing.
- (c) A health care service plan shall monitor data pertaining to the utilization of its telehealth consultation program to facilitate ongoing quality improvements to the program, as necessary.
- (d) A health care service plan shall provide a description of the telehealth consultation program to the department in a manner and format prescribed by the department.
- (e) This section does not apply to a specialized health care service plan, except a specialized behavioral health-only plan offering professional mental health services.
- SEC. 3. Section 10123.868 is added to the Insurance Code, to read:
- 10123.868. (a) In order to more quickly diagnose and treat children and pregnant and postpartum persons suffering from mental illness, by July 1, 2022, a health insurer shall provide access to a telehealth consultation program that provides contracting providers who treat children and persons who are pregnant or up to one year postpartum with access to a mental health consultation program during the treating provider's standard provider hours, which may include evenings and weekends. The telehealth consultation program shall include a triage service and consultation by a mental health clinician with expertise appropriate for pregnant, postpartum, and pediatric patients, including a psychiatrist when appropriate or requested by the treating provider, by telephone or telehealth video, and shall include guidance on the range of evidence-based treatment options, including psychotherapy, as determined to be appropriate, screening tools, and referrals.
- (b) A health insurer shall communicate information relating to the telehealth program and its availability to contracting medical providers who treat children and pregnant and postpartum persons, including pediatricians, obstetricians, and primary care providers, at least twice a year in writing.

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(c) A health insurer shall monitor data pertaining to the utilization of its telehealth consultation program to facilitate ongoing quality improvements to the program, as necessary.

- (d) A health insurer shall provide a description of the telehealth consultation program to the department in a manner and format prescribed by the department.
- (e) This section does not apply to a specialized health insurer, except a specialized behavioral health-only insurer offering professional mental health services.
- (f) This section does not alter a health insurer's obligations pursuant to Section 10112.2 or 10144.4.
- SEC. 4. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIIIB of the California Constitution.