
DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 784 Engrossed

2022 Regular Session

Duplessis

Abstract: Establishes the Perinatal Mood and Anxiety Disorders Act to improve awareness, screening, and treatment of perinatal mood and anxiety disorders.

Proposed law provides for awareness of all hospitals and birthing centers that provide labor and delivery services.

Proposed law provides that a healthcare provider who is providing pediatric care to an infant shall screen the caregiver for postpartum depression or related mental health disorders if he believes in the exercise of his professional judgment that such screening would be in the best interest of the patient.

Present law provides that perinatal mood and anxiety disorder screening shall not create either a physician-patient relationship between the healthcare provider and the caregiver or any continuing obligation to provide medical services.

Proposed law requires the La. Dept. of Health office, in collaboration with Medicaid-managed care organizations, to identify providers who specialize in pregnancy-related and postpartum depression or related mental health disorders and substance use disorders.

Proposed law requires the La. Dept. of Health office, in collaboration with Medicaid-managed care organizations, to develop network adequacy standards for treatment of pregnant and postpartum women with depression or related mental health disorders and substance use disorders.

(Adds R.S. 40:1125.1-1125.4)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Health and Welfare to the original bill:

1. Provide that a pediatric healthcare provider who provides care to an infant shall screen the caregiver of the infant for postpartum depression or related mental health disorders if he believes that such screening is in the best interest of the patient.
2. Provide that perinatal mood and anxiety disorder screening shall not create a physician-patient relationship nor shall such screening create any continuing obligation

to provide medical services.

3. Require the La. Dept. of Health to collaborate with Medicaid-managed care organizations to identify providers who specialize in pregnancy-related and postpartum depression or mental health disorders and substance use disorders relative to such illnesses and to develop network adequacy standards for treatment of those disorders.
4. Remove reimbursement provisions.
5. Make technical corrections.