# **BILL ANALYSIS**

C.S.S.B. 826 By: Van de Putte Insurance Committee Report (Substituted)

# BACKGROUND AND PURPOSE

Post-partum depression is a devastating mood disorder that affects 10 to 20 percent of new mothers. Left untreated, postpartum depression can lead to further depression, substance abuse, loss of employment, social alienation, self-destructive behavior, child abuse and even suicide.

Both the Texas Department of Insurance and the Department of State Health Services recognize postpartum depression as a "major depressive disorder" for which insurance coverage is guaranteed under the Insurance Code. However, coverage for postpartum depression is not explicitly mandated in the code. Further, the section of the code that provides coverage for "major depressive disorders" only requires health benefit plans to cover 45 days of inpatient treatment and 60 visits for outpatient treatment per calendar year.

CSSB 826 requires the Health and Human Services Commission to conduct a study examining the feasibility and effects of providing 12 months of health services under the Medicaid program to women who are diagnosed with postpartum depression and are eligible for medical assistance

# **RULEMAKING AUTHORITY**

It is the opinion of the author that no additional rulemaking authority is expressly granted to a state officer, department, agency or institution

## ANALYSIS

**SECTION 1:** Defines post-partum depression as a disorder with post-partum onset that is characterized as a mood disorder by the American Psychiatric Association in the DSM-IV.

Requires the Health and Human Services Commission to conduct a study examining the feasibility and effects of providing 12 months of health services under the Medicaid program to women who are diagnosed with postpartum depression and are eligible for medical assistance under Chapter 32, Human Resources Code, at the time of diagnosis.

Requires HHSC to provide a report explaining the conclusions of the study to the Governor, Lieutenant Governor, Speaker of the House of Representatives, and Legislature not later than September 1, 2006.

**SECTION 2:** Effective date

### **EFFECTIVE DATE**

September 1, 2005

### **COMPARISON OF ORIGINAL TO SUBSTITUTE**

The substitute requires HHSC to conduct a "study examining the feasibility and effects" of providing 12 months of health services rather than a "cost benefit analysis", which the introduced version required.