



## Legislation Text

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**File #:** Res 0402-2024, **Version:** \*

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### Res. No. 402

Resolution calling on the New York State Legislature to pass, and the Governor to sign, legislation to require health insurance plans to develop and implement a maternal mental health quality management program to promote access to affordable and comprehensive maternal mental health services.

By Council Members Lee, Restler, Gutiérrez, Farías, Hanif, Narcisse, Sanchez, Ayala, Cabán, Won, Bottcher, Louis, Hudson, Rivera and Mealy

Whereas, Maternal mental health (MMH) conditions are a significant public health concern, affecting an estimated 1 in 5 women during pregnancy and postpartum, disproportionately impacting Black and Brown mothers, according to the National Institutes of Health; and

Whereas, Per the American Psychological Association (APA), untreated MMH conditions can have lasting negative consequences for mothers, infants, and families, including increased risk of postpartum depression, anxiety disorders, and impaired child development; and

Whereas, Numerous studies have highlighted that access to mental health screenings and treatment during pregnancy and postpartum is crucial for improving maternal health outcomes, and yet less than 20% of United States patients were screened for maternal depression in 2021, according to the Policy Center for Maternal Mental Health (PCMMH); and

Whereas, Research estimates that 50-70% of MMH disorders remain undiagnosed; and

Whereas, Further, 75% of individuals diagnosed with a MMH do not receive treatment due to factors such as inadequate insurance coverage and a nationwide lack of emphasis on MMH, per PCMMH; and

Whereas, Health plans play a vital role in shaping access to mental healthcare services, but many health insurance plans in New York State (NYS), including Medicaid, lack adequate coverage for maternal mental health services, creating significant barriers for women seeking care; and

Whereas, This lack of MMH coverage annually costs the United States roughly \$14 billion, or \$32,000 per mother and infant for untreated MMH consequences, according to the March of Dimes; and

Whereas, To address this issue, in 2022 California became the first state to require health insurance plans to develop a MMH program designed to promote quality and cost-effective outcomes while improving screening, treatment, and referral to MMH services; and

Whereas, Given that mental health conditions ranked as the primary underlying cause of pregnancy-associated deaths in New York City in 2020 and the third leading cause of such deaths in NYS in 2018, as reported by the latest data from both the City and the State's Department of Health, comparable MMH services program could be a critical step in improving care and outcomes for pregnant people; and

Whereas, Implementing a standardized MMH quality management program would expand access to care, improve its quality, provide competitive rates, and incentivize providers to make these essential services available to pregnant and postpartum New Yorkers; now, therefore, be it

Resolved, That the Council of the City of New York calls on the New York State Legislature to pass, and the Governor to sign, legislation to require health insurance plans to develop and implement a maternal mental health quality management program to promote access to affordable and comprehensive maternal mental health services.

LS #14632  
3/15/2024  
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