



Postpartum Medicaid Coverage: Impact of Pandemic Legislation

Summary: The Medicaid income eligibility limit for pregnant women in all states is already higher than the Affordable Care Act's limit of 138% of the federal poverty level (FLP) for individuals covered by the optional Medicaid expansion. However, states may receive federal matching funds for covering narrow pregnancy-related benefits for women who qualify through their pregnancies. Pandemic relief legislation has impacted postpartum Medicaid coverage, first through continuous coverage requirements and, subsequently, a temporary authorization of federal matching funds for 12 months of postpartum coverage.

Additionally, several states had previously submitted waivers to CMS seeking to extend postpartum Medicaid coverage, some of which have been recently approved.

Impact of Pandemic Relief Legislation: The Families First Coronavirus Response Act enhanced federal funding for state Medicaid agencies over the course of the pandemic public health emergency including services to postpartum beneficiaries. Additionally, the law includes a continuous coverage requirement barring states from disenrolling beneficiaries from the Medicaid program, which includes women enrolled in Medicaid on the basis of being pregnant. This means that states are prohibited from terminating women from the program at 60 days postpartum during the course of the COVID-19 national emergency.

In addition, the American Rescue Plan Act (PL 117-2) includes a provision to give states a five-year authorization to offer 12 months of Medicaid and Children's Health Insurance Program (CHIP) coverage to postpartum individuals. States employing this new option will have to provide full Medicaid benefits. The option takes effect April 1, 2022.

MACPAC Recommendation: At its January 2021 meeting, the Medicaid and CHIP Payment and Access Commission (MACPAC) approved a recommendation to require states to extend Medicaid coverage to all Medicaid services for postpartum women for up to 12 months at 100% federal matching rate. This was prior to the enactment of the ARPA, which provides federal reimbursement for the extension at the state's regular federal match rates. The recommendation will be published in the June Report to Congress.

Eligibility Estimates: In January 2021, the Urban Institute released a study examining the implications of extending the postpartum coverage period nationally.¹ The study finds that of

¹ Urban Institute. "Closing Postpartum Coverage Gaps and Improving Continuity and Affordability of Care through a Postpartum Medicaid/CHIP Extension." January 2021. https://www.urban.org/sites/default/files/publication/103560/closing-postpartum-coverage-gaps-and-care-through-postpartum-medicaid-chip-extension_2.pdf

the 441,000 uninsured new mothers, approximately 28 percent, or 123,000 women, would become newly eligible for Medicaid or CHIP through an extension of the postpartum period.

Most (about 83 percent) of uninsured new mothers likely to become eligible following an extension live in non-ACA-expansion states, and nearly two-thirds of these new mothers live in five states: Florida, Georgia, Missouri, North Carolina, and Texas. The study estimates that the expansion would provide coverage for:

- 37 percent of Black, non-Hispanic uninsured new mothers;
- 36 percent of white, non-Hispanic uninsured new mothers; and
- 24 percent of Hispanic uninsured new mothers.

State Action: More than 20 state legislatures proposed or considered legislation to expand postpartum coverage with full or partial Medicaid benefits² and some states submitted waivers to CMS seeking postpartum coverage extension waivers. CMS recently approved:

- Illinois’ waiver to extend postpartum coverage with full Medicaid benefits for women earning up to 208% of the Federal Poverty Level (FPL) for 12 months;
- Georgia’s waiver to extend postpartum coverage with full Medicaid benefits for women with incomes up to 220% FPL for six months; and
- Missouri’s waiver to extend Medicaid coverage for women receiving substance abuse treatment within 60 days of giving birth for the treatment of substance abuse for no more than 12 additional months, as long as the woman remains adherent with her treatment.

Indiana and New Jersey also have submitted waivers as described below.

State	Status	Description
Illinois	Approved	Full Medicaid benefits for women up to 208% of FPL for 12 months postpartum
Georgia	Approved	Full Medicaid benefits for women up to 220% of FPL for 6 months postpartum
Missouri	Approved	Medicaid benefits for women up to 196% of FPL for certain substance disease and mental health services for no more than 12 months postpartum
Indiana	Pending	Medicaid benefits for women up to 213% of FPL who participate in Indiana’s Maternal Opioid Misuse program for 365 days postpartum
New Jersey	Pending	Full Medicaid benefits for women up to 205% of FPL for 180 days postpartum

² State’s Efforts to Extend Medicaid Coverage to Postpartum Women <https://www.nashp.org/view-each-states-efforts-to-extend-medicaid-coverage-to-postpartum-women/>