

# The End of the Public Health Emergency: Postpartum Medicaid Extension Option

The American Rescue Plan Act (signed March 11, 2021) gave states the option of extending their Medicaid postpartum coverage from 60 days to 12 months by filing a State Plan Amendment (SPA) to their Medicaid program.\* States that use the new SPA option must provide full Medicaid benefits\*\* during pregnancy and the postpartum period. The option is effective April 1, 2022 and available to states for five years until March 31, 2027, when the statutory authority expires.



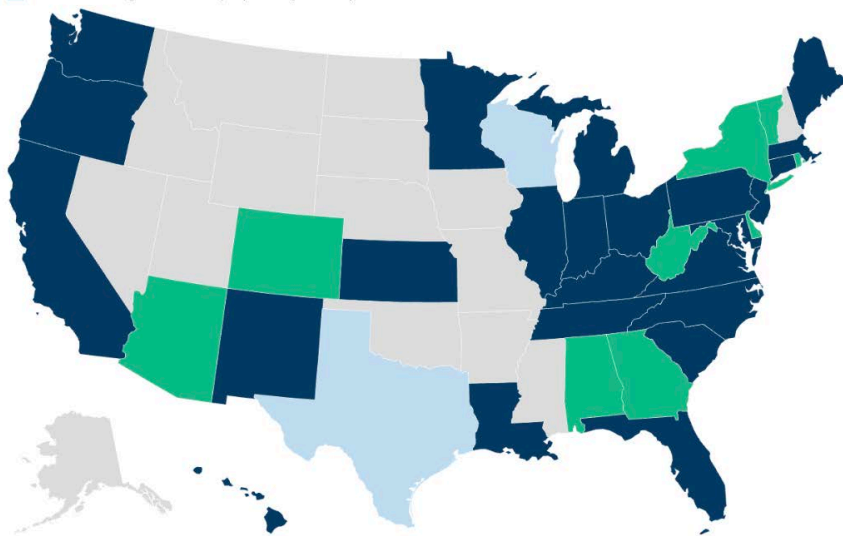
## Provide better maternal and newborn care: 75% support

75% of people surveyed support policies that "provide better maternal and newborn care by expanding postpartum in-home visits by nurses who can connect families with additional resources, and increasing coverage for the different ways people give birth." This is supported by 85% of Democrats, 69% of Independents, and 66% of Republicans.

Source: [United States of Care National Survey, 2021](#)

## Postpartum Coverage Tracker Map

■ 12-month extension implemented (26 states including DC)  
■ Planning to implement a 12-month extension (8 states)  
■ Limited coverage extension proposed (2 states)



SOURCE: Data KFF analysis of approved and pending 1115 waivers, state plan amendments, and state legislation, as of October 6, 2022 • PNG

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## Impact

- ★ Twenty-six states and D.C. have successfully [extended postpartum Medicaid to one year](#), and eight states are planning to implement a one year postpartum extension (as of October 2022)
- ★ Extending postpartum Medicaid eligibility to one year is associated with additional months of postpartum insurance enrollment and [an increase in probability of continuous insurance coverage during the first year after birth](#)
- ★ Pregnancy-related mortality disproportionately impact [non-Hispanic Black birthing people and non-Hispanic American Indian/Alaskan Native birthing people](#), and continuity of coverage can improve access to care and narrow these disparate health outcome
- ★ If all states extended pregnancy-related Medicaid eligibility to one year postpartum, 720,000 people would [experience expanded postpartum coverage annually](#)

## Implications if States do not take the Medicaid Postpartum Extension Option

- ★ Birthing and pregnant people in states that have not extended their postpartum Medicaid program will only have **Medicaid coverage connected to their pregnancy** for the federally mandated 60 days after birth, and these states will not capture reductions in maternal and infant mortality or reductions in racial health inequities
- ★ In states that do not extend postpartum Medicaid, disruptions in perinatal insurance coverage will continue to disproportionately impact [indigenous, Hispanic/Latino, and Black birthing people](#) and [low income families](#) (100-185% federal poverty level)

\*States have previously [expanded their postpartum coverage beyond the 60 days using waivers](#). A SPA option allows states to expand coverage more quickly and without a budget neutrality requirement.

\*\*Currently, states are allowed to cover a more narrow set of pregnancy-related benefits to people qualifying for Medicaid through the pregnancy pathway.



## Initiatives

### Federal Initiatives

- ★ The [Build Back Better Act](#), which passed the House of Representatives on November 19, 2021, would have required all states to extend Medicaid Postpartum Coverage to 12 months permanently
- ★ The Department of Health and Human Services (HHS) allocated [\\$350 million in awards to states](#) in September 2021 to expand home visiting services, support the Healthy Start initiative, increase the availability of community-based doulas, and improve data reporting on maternal mortality
- ★ The White House released a [Blueprint for Addressing the Maternal Health Crisis](#) with actions for different agencies in July 2022
- ★ The Centers for Medicare & Medicaid Services released its [Maternity Care Action Plan](#) in July 2022 to improve health outcomes and reduce inequities for people during pregnancy, childbirth, and the postpartum period

### State Initiatives

- ★ Twenty-six states and D.C. have successfully extended postpartum Medicaid to one year, and eight states are planning to implement a one year postpartum extension (as of October 2022)
- ★ Several states have passed [bills to expand coverage and improve maternal and child health outcomes](#) (beyond the one year postpartum option), including:
  - California: The state passed the [California Omnibus Act](#) which aims to close existing racial gaps in maternal and infant mortality rates through research and data collection, a stakeholder work group to implement the new Medi-Cal doula benefit, among others
  - Colorado: The state passed [Cover All Coloradans](#), which included the expansion of full health coverage for pregnant people who would otherwise be eligible for Medicaid and CHIP if not for their immigration status, and continues coverage through 12 months postpartum



## Recommendations

### Federal Policy Recommendations

#### LONGER-TERM SOLUTIONS

- ★ Reauthorize the statutory authority for the SPA option extending postpartum Medicaid to one year before it expires in 2027
- ★ Require states to provide one-year of postpartum coverage in Medicaid with full benefits and provide an enhanced federal medical assistance percentage (FMAP) to states
- ★ Continue investments in programs that improve maternal health outcomes

### State Policy Recommendations

#### IMMEDIATE OPPORTUNITIES

- ★ Adopt a SPA to extend postpartum Medicaid to one year

#### LONGER-TERM SOLUTIONS

- ★ Protect coverage for pregnant and postpartum people through [strategies](#) including:
  - Expand Medicaid
  - Evaluate and expand current income eligibility levels beyond the federally-required minimum (138% Federal Poverty Level (FPL)) for the pregnancy eligibility group
  - Expand pregnant and postpartum coverage to immigrant populations
- ★ Adopt [initiatives that improve maternal health outcomes](#), including covering and reimbursing different provider types (like doulas and midwives), increasing alternative sites for birthing (like at-home births and alternative birth centers), and increasing care coordination for birthing people

“It’s important and a great idea to provide additional support to families with newborns, and letting mothers have the freedom they deserve. Everyone should be able to have the opportunity to build a family.”

-[ReMesh](#) research participant on providing better maternal and newborn care. Male. 18-34. Democrat. Graduate or advance degree. White.

### UNITED STATES OF CARE

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This one-pager is part of USofCare's playbook, "The End of the COVID-19 Public Health Emergency: Lessons Learned from the Pandemic and Implications for People."

