

[Discussion Draft]

AMENDMENT TO _____

OFFERED BY M____. _____

Add at the end of [____] the following:

1 **SEC. [____] MEDICAID POSTPARTUM COVERAGE EXTEN-**
2 **SION.**

3 (a) MODIFICATIONS TO CERTAIN COVERAGE UNDER
4 MEDICAID AND CHIP FOR PREGNANT AND POSTPARTUM
5 WOMEN.—

6 (1) STATE OPTION.—Section 1902(e) of the So-
7 cial Security Act (42 U.S.C. 1396a(e)) is amended
8 by adding at the end the following new paragraph:

9 “(16) EXTENDING CERTAIN COVERAGE FOR
10 PREGNANT AND POSTPARTUM WOMEN.—

11 “(A) IN GENERAL.—At the option of the
12 State, the State plan (or waiver of such State
13 plan) may provide that an individual who, while
14 pregnant, is eligible for and has received med-
15 ical assistance under the State plan approved
16 under this title (or a waiver of such plan) (in-
17 cluding during a period of retroactive eligibility
18 under subsection (a)(34)) shall, in addition to
19 remaining eligible under paragraph (5) for all

1 pregnancy-related and postpartum medical as-
2 sistance available under the State plan (or
3 waiver) through the last day of the month in
4 which the 60-day period (beginning on the last
5 day of her pregnancy) ends, remain eligible
6 under the State plan (or waiver) for medical as-
7 sistance for the period beginning on the first
8 day occurring after the end of such 60-day pe-
9 riod and ending on the last day of the month
10 in which the 1-year period (beginning on the
11 last day of her pregnancy) ends.

12 “(B) FULL BENEFITS DURING PREGNANCY
13 AND THROUGHOUT THE 1-YEAR POSTPARTUM
14 PERIOD.—The medical assistance provided for a
15 pregnant or postpartum individual by a State
16 making an election under this paragraph, with-
17 out regard to the basis on which the individual
18 is eligible for medical assistance under the
19 State plan (or waiver), shall—

20 “(i) include all items and services cov-
21 ered under the State plan (or waiver) that
22 are not less in amount, duration, or scope,
23 or are determined by the Secretary to be
24 substantially equivalent, to the medical as-

1 sistance available for an individual de-
2 scribed in subsection (a)(10)(A)(i); and

3 “(ii) be provided for the individual
4 while pregnant and during the 1-year pe-
5 riod that begins on the last day of the indi-
6 vidual’s pregnancy and ends on the last
7 day of the month in which such 1-year pe-
8 riod ends.”.

9 (2) APPLICATION TO CHIP.—

10 (A) IN GENERAL.—Section 2107(e)(1) of
11 the Social Security Act (42 U.S.C.
12 1397gg(e)(1)) is amended—

13 (i) by redesignating subparagraphs
14 (J) through (S) as subparagraphs (K)
15 through (T), respectively; and

16 (ii) by inserting after subparagraph
17 (I) the following new subparagraph:

18 “(J) Paragraph (16)(A) of section 1902(e)
19 (relating to the State option to provide full ben-
20 efits under title XIX for pregnant women dur-
21 ing pregnancy and the 1-year postpartum pe-
22 riod), in the case of a State that has elected to
23 apply such paragraph with respect to pregnant
24 women under title XIX and has elected under
25 section 2112(a) to provide pregnancy-related

1 assistance for targeted low-income pregnant
2 women. In the case of any such State, the re-
3 quirement to provide coverage of such benefits
4 during pregnancy and the 1-year postpartum
5 period under this title shall be required and not
6 at the option of the State.”.

7 (B) OPTIONAL COVERAGE OF TARGETED
8 LOW-INCOME PREGNANT WOMEN.—Section
9 2112(d)(2)(A) of the Social Security Act (42
10 U.S.C. 1397ll(d)(2)(A)) is amended by insert-
11 ing after “60-day period” the following: “, or,
12 in the case that section 1902(e)(16) applies to
13 the State child health plan (or waiver of such
14 plan) pursuant to section 2107(e)(1), the 1-year
15 period,”.

16 (C) CONTINUOUS ELIGIBILITY FOR TAR-
17 GETED LOW-INCOME PREGNANT WOMEN.—Sec-
18 tion 2112 of such Act (42 U.S.C. 1397ll) is
19 amended by adding at the end the following:

20 “(g) APPLICATION OF CONTINUOUS ELIGIBILITY.—
21 A State that elects the option under subsection (a) and
22 satisfies the conditions described in subsection (b), and
23 has elected to apply paragraph (16) of section 1902(e)
24 with respect to pregnant and postpartum under title XIX,
25 shall apply paragraph (6) of section 1902(e) (relating to

1 continuous eligibility for pregnant women) to the State
2 child health plan in the same manner as such section ap-
3 plies to the State plan under title XIX.”.

4 (3) EFFECTIVE DATE.—The amendments made
5 by paragraphs (1) and (2), shall apply with respect
6 to State elections made under paragraph (16) of sec-
7 tion 1902(e) of the Social Security Act (42 U.S.C.
8 1396a(e)), as added by paragraph (1), on or after
9 the 1st day of the 1st fiscal year quarter that begins
10 1 year after the date of the enactment of this Act.

11 (4) PROGRAM INTEGRITY.—Nothing in this
12 subsection or the amendments made by this sub-
13 section shall prevent a State from applying all rel-
14 evant program integrity provisions of law to the
15 services and populations covered in this subsection
16 and the amendments made by this subsection.

17 (5) RESEARCH.—To the extent practicable, not
18 later than 3 years after enactment of this law, the
19 Secretary shall conduct research to determine the ef-
20 fects of postpartum coverage extended for 12
21 months by States that elect the option to extend
22 such coverage under the amendments made by this
23 subsection on the rate of maternal mortality,
24 disaggregated by State, race, ethnicity, age, socio-
25 economic status and other demographic factors. The

1 research shall employ widely accepted research meth-
2 ods.

3 (b) GAO REPORT.—

4 (1) IN GENERAL.—Not later than 3 years after
5 the date of the enactment of this Act and 5 years
6 thereafter, the Comptroller General shall submit to
7 Congress a report regarding State adoption of the
8 options under Medicaid and CHIP to provide full
9 benefits coverage for a period of 365 days
10 postpartum. Such report shall include the informa-
11 tion and recommendations described in paragraph
12 (2) and shall also identify ongoing gaps in coverage
13 for—

14 (A) pregnant women under Medicaid and
15 CHIP; and

16 (B) postpartum women under Medicaid
17 and CHIP who received assistance under either
18 such program during their pregnancy.

19 (2) CONTENT OF REPORT.—The report under
20 paragraph (1) shall include the following:

21 (A) Information regarding the extent to
22 which States have or have not elected to provide
23 full benefits coverage for a period of 365 days
24 postpartum under Medicaid, CHIP, or both
25 such programs, including—

1 (i) identification of the States electing
2 such options;

3 (ii) analyses of the impact of making
4 such elections on perinatal insurance churn
5 in such States as compared to States that
6 do not make such elections; and

7 (iii) other health impacts related to
8 making such elections, including to the ex-
9 tent possible, maternal mortality and mor-
10 bidity rates, and impacts on State and
11 Federal spending under Medicaid and
12 CHIP.

13 (B) Information about the abilities, suc-
14 cesses, and challenges of State Medicaid and
15 CHIP agencies in—

16 (i) transitioning their eligibility sys-
17 tems to incorporate such elections by a
18 State and in determining whether pregnant
19 and postpartum women are eligible under
20 another insurance affordability program;
21 and

22 (ii) transitioning any such women who
23 are so eligible to coverage under such a
24 program, pursuant to section 1943(b)(3) of

1 the Social Security Act (42 U.S.C. 1396w-
2 3(b)(3)).

3 (C) Information on factors contributing to
4 ongoing gaps in coverage resulting from women
5 transitioning from coverage under Medicaid or
6 CHIP that disproportionately impact under-
7 served populations, including low-income
8 women, women of color, women who reside in a
9 health professional shortage area (as defined in
10 section 332(a)(1)(A) of the Public Health Serv-
11 ice Act (42 U.S.C. 254e(a)(1)(A))), or women
12 who are members of a medically underserved
13 population (as defined by section 330(b)(3) of
14 such Act (42 U.S.C. 254b(b)(3)(A))).

15 (D) Recommendations for addressing and
16 reducing such gaps in coverage.

17 (E) Such other information as the Comp-
18 troller General determines appropriate.

