



LB913 | Extend postpartum coverage for CHIP599 mothers

Policy Brief | 2024

□ Key Points

- ▶ In Nebraska, CHIP 599 provides limited prenatal and pregnancy-related health care coverage to expectant mothers who lack insurance and do not qualify for Medicaid.
- ▶ Currently, CHIP 599 includes no provisions for the postpartum care. Coverage concludes at the end of the month in which a woman gives birth.
- ▶ LB913 would extend postpartum coverage under CHIP 599 for at least six months after birth and ensures this coverage is identical to that offered through Medicaid.

■ Background and statutory history

More than half of all pregnancy-related deaths occur during the "fourth trimester" (up to a year following birth), making this a critical window for detecting and managing postpartum health complications. Given its importance to the health outcomes of mothers and children, the National Conference of State Legislatures acknowledges this period as "an opportune time for policy intervention" — such as increasing the availability of postpartum insurance coverage.¹

In 2012, the Nebraska Legislature passed LB599, which leveraged the unborn children option of the Children's Health Insurance Program (CHIP) to provide limited prenatal and pregnancy-related health care coverage to expectant mothers who lack other insurance and do not meet the income qualifications for Medicaid. This legislation drew the endorsement of an unlikely mix of supporters including Nebraska Right to Life, Nebraska Catholic Conference, Planned Parenthood, federally qualified health centers, medical providers and others.

In passing LB599, lawmakers acknowledged the importance of health care coverage for pregnant women who are of low income and face obstacles that can compromise their own well-being and that of their children. The state of Nebraska calls these women "CHIP 599" mothers.

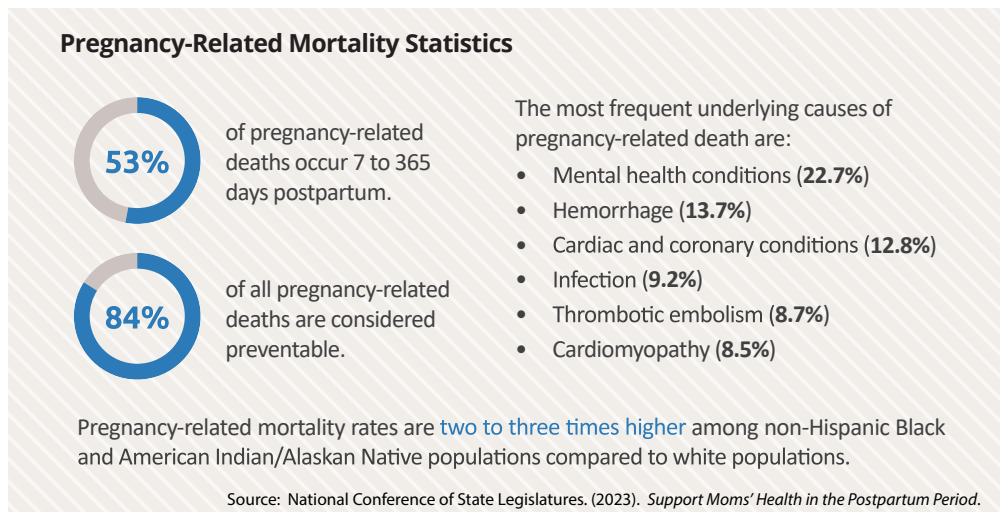
However, CHIP 599 is not equivalent to Medicaid in either the scope or duration of health care services covered. In 2023, Nebraska lawmakers successfully passed LB419, introduced by Senator Anna Wishart, as part of a Health and Human Services Committee package that extended postpartum coverage under Medicaid from 60 days to 12 months. However, this did not also apply to those covered under CHIP 599. For these mothers, the need for policy action to extend access to postpartum care is particularly urgent.

■ Who does CHIP 599 serve?

As of September 2023, about 821 Nebraska mothers received limited prenatal and pregnancy-related health care coverage through CHIP 599. These include:

- ▶ Pregnant women who do not qualify for Medicaid because their income is above 197% of the Federal Poverty Level (FPL).
- ▶ Pregnant minors whose legally responsible parent(s)/guardian(s) do not qualify for Medicaid due to their household income.
- ▶ Pregnant women who do not qualify for Medicaid due to their immigration status.

To qualify for CHIP 599, pregnant women must have no other credible sources of insurance that provide prenatal or maternity care.



While CHIP 599 addresses services associated with the health of unborn children, including labor and delivery, it is not equivalent to the full benefits package offered by Medicaid. Currently, CHIP 599 mothers lose coverage at the end of the month in which they give birth. If they give birth at the end of a month, coverage concludes at the end of the following month.

■ Federal supports for CHIP 599

Funding for prenatal care covered under the CHIP 599 program aligns with the state's Federal Medical Assistance Percentage (FMAP), which is used to determine the amount of federal payments to a state for services under the Medical Assistance Act. In Nebraska, the current FMAP for the Children's Health Insurance Program (CHIP) is 71%.

The CHIP program also allows for Health Services Initiatives (HSIs). HSIs must be focused on improving the health of children of low income who are eligible for CHIP, Medicaid or other services targeting this population. Under this option, states may use up to 10% of their total CHIP spending for HSIs after they cover their administrative expenses.

States have substantial flexibility for HSIs and can receive their regular CHIP FMAP for these expenditures (71%). Three states (California, Illinois and Minnesota) currently use a CHIP HSI to provide a full 12 months of postpartum coverage for eligible recipients. Virginia uses a CHIP HSI to extend postpartum coverage through the unborn child option for 60 days.

□ LB913: Addressing the postpartum needs of Nebraska mothers

LB913, introduced by Senator Megan Hunt, proposes using a CHIP HSI to extend coverage for mothers under the unborn child option in CHIP. Notable provisions of the bill:

- ▶ Requires NDDHS to submit a state plan amendment to the Center for Medicaid and Medicare Services (CMS) on or before October 1, 2024, addressing the use of a HSI to extend postpartum coverage under CHIP 599 for at least six months after a woman gives birth.
- ▶ Specifies that CHIP 599 postpartum coverage would be identical to that offered through Medicaid.

References

¹ National Conference of State Legislatures. (2023). <https://www.ncsl.org/health/supporting-moms-health-in-the-postpartum-period> Supporting Moms' Health in the Postpartum Period. Accessed 1/17/24.

