



LB153 | Addressing the Postpartum Needs of Nebraska Mothers

Policy Brief | 2025

The CHIP 599 program provides limited prenatal care to expectant mothers who don't qualify for Medicaid. However, coverage ends shortly after giving birth, leaving postpartum mothers vulnerable.

LB153 proposes extending CHIP 599 to provide 6 months of postpartum care identical to Medicaid benefits, aiming to improve maternal health outcomes by addressing complications that can arise after giving birth.

■ Background

More than half of all pregnancy-related deaths occur during the "fourth trimester" (up to a year after giving birth), making this a critical window for detecting and managing postpartum health complications. 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. In passing LB599, lawmakers acknowledged the importance of health care coverage for pregnant women and babies who face obstacles that can compromise their health and well-being. The State of Nebraska calls these women "CHIP 599" mothers.

■ Who are CHIP 599 Mothers?

Nebraska mothers receive limited prenatal and pregnancy-related health care coverage through CHIP 599. These services 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.

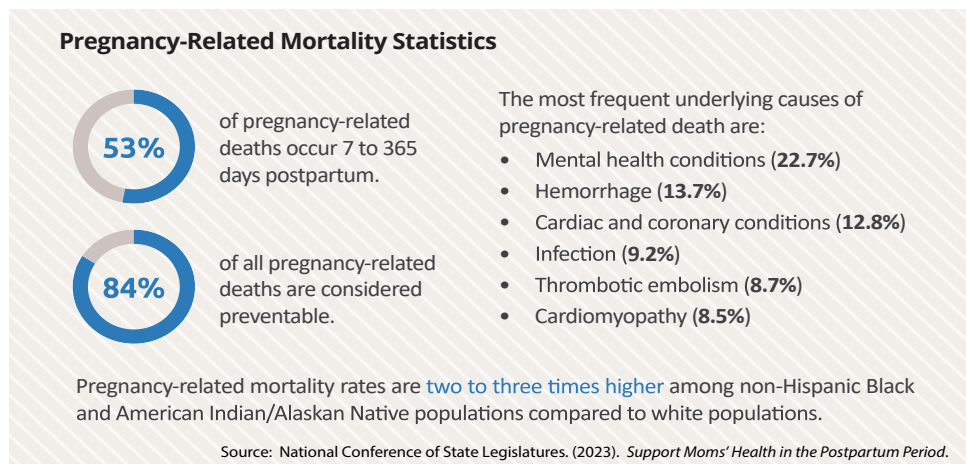
To qualify for CHIP 599, pregnant women must have no other credible sources of insurance that provide prenatal or maternity care. Based on recent trending, it is estimated that 840 babies will be impacted by LBXX in FY25.¹

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.

Funding

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 is 71%. The expanded services outlined in LBXXX would be funded by the Medicaid Managed Care Excess Profit Fund.

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.



□ LB153: Addressing the postpartum needs of Nebraska mothers (Sen. Dunixi Guereca, Dist. 07)

LB153, introduced by State Senator Dunixi Guereca, proposes using a CHIP Health Services Initiative to extend coverage for mothers under the unborn child option in CHIP. Notable provisions of the bill:

- ▶ Requires the Nebraska Department of Health and Human Services to submit a state plan amendment to the Centers for Medicaid & Medicare Services (CMS) on or before October 1, 2025, addressing the use of a HSI to extend postpartum coverage for CHIP 599 mothers for at least six months.
- ▶ Specifies that CHIP 599 postpartum coverage would be identical to that offered to new mothers through Medicaid.

References

¹ Nebraska Legislative Fiscal Office. (2024). Estimate of Fiscal Impact for LB913.