

# More states to consider extending postpartum Medicaid coverage beyond two months

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Lawmakers in several conservative-led states—including Montana,

Wyoming, Missouri, and Mississippi—are expected to consider proposals to provide a year of continuous health coverage to new mothers enrolled in Medicaid.

Medicaid beneficiaries nationwide are guaranteed continuous [postpartum](#) coverage during the ongoing COVID-19 public health emergency. But momentum has been building for states to extend the default 60-day required coverage period ahead of the emergency's eventual end. Approximately 42% of births nationwide are covered under Medicaid, the federal-state health insurance program for low-income people, and extending postpartum coverage aims to reduce the risk of pregnancy-related deaths and illnesses by ensuring that new mothers' medical care isn't interrupted.

The push comes as a provision in the American Rescue Plan Act makes extending postpartum Medicaid coverage easier because states no longer need to apply for a waiver. A renewed focus on maternal health amid high U.S. [maternal mortality rates](#) also is driving the proposals, as is the expectation that more women will need postpartum care as state abortion bans proliferate in the wake of the U.S. Supreme Court's decision to eliminate federal protections.

Thirty-five states and Washington, D.C., have already extended, or plan to extend, postpartum eligibility in their Medicaid programs. That number includes Texas and Wisconsin, which did not implement the ARPA provision but have proposed limited extensions of six months and 90 days, respectively.

The 15 states that limit postpartum Medicaid eligibility to 60 days are predominantly a swath of Republican-led states that stretch from the Mountain West to the South. But that could change when legislative sessions start in the new year.

In Montana, Republican Gov. Greg Gianforte and Department of Public Health and Human Services Director Charlie Brereton included 12-month postpartum eligibility in the governor's proposed state budget. It would cost \$9.2 million in federal and [state funding](#) over the next two years, according to the proposal, with the federal government covering nearly 70%.

A 2021 U.S. Department of Health and Human Services report estimated about 2,000 women in Montana would benefit from the change. State health department spokesperson Jon Ebelt said state officials' estimate is half that number. The reason for the disparity was not immediately clear.

Brereton considers the "extension of coverage for new mothers to be a pro-life, pro-family reform," Ebelt said.

To become law, the proposal must be approved by state lawmakers once the legislative session begins in January. It has already received enthusiastic support from the senior Democrat on the committee that oversees the health department's budget. "Continuous eligibility for women after they have a baby is really important," said state Rep. Mary Caferro during the Children's Legislative Forum in Helena on Nov. 30.

The top Republican on the committee, state Rep.-elect Bob Keenan, said he hasn't dug in on the governor's budget proposal but added that he plans to survey his fellow lawmakers and health care providers on the postpartum extension. "I wouldn't dare venture a guess as to its acceptance," he said.

Nationwide, more than 1 in 5 mothers whose pregnancies were covered by Medicaid lose their insurance within six months of giving birth, and 1 in 3 pregnancy-related deaths happen between a week and a year after a birth occurs, according to federal health officials.

The U.S. had the highest overall maternal mortality rate, by far, among wealthy nations in 2020, at 23.8 deaths per 100,000 births, according to a report by the Commonwealth Fund, a foundation that supports research focused on health care issues. The rate for Black women in the U.S. is even higher, 55.3 deaths.

"Many maternal deaths result from missed or delayed opportunities for treatment," the report said.

The maternal mortality rate in Montana is not publicly available because the Centers for Disease Control and Prevention suppressed the state data in 2020 "due to reliability and confidentiality restrictions." Ebelt, the state health department spokesperson, could not provide a rate before this article's publication.

Annie Glover, a senior research scientist for the University of Montana's Rural Institute for Inclusive Communities, said the governor's proposal to extend postpartum Medicaid coverage could make a significant difference in improving overall [maternal health](#) in Montana. The university was awarded a federal grant this year for such efforts, particularly to lower the mortality rate among Native Americans, and Glover said the state measure could further reduce rates.

"The reason really has to do with maintaining access to care during this very critical period," Glover said. That goes for helping mothers with postpartum depression, as well as medical conditions like high blood pressure that require follow-ups with a physician well after delivery, she said.

In Wyoming, a legislative committee voted 6-5 in August to introduce a bill in the next session; dissenters cited the cost and their reluctance to further entangle the state in federal government programs.

About a third of Wyoming births are covered by Medicaid, and state officials estimate about 1,250 women would benefit from the change.

Postpartum eligibility bills are also expected to be taken up by legislators in Missouri and Mississippi, two states that have previously grappled with the issue. Both states have outlawed most abortions since the U.S. Supreme Court lifted federal protections in June, and Mississippi leaders have said additional postpartum care is needed because of the thousands of additional births expected as a result of the state's ban.

A proposed coverage expansion died in the Mississippi House last session, but Lt. Gov. Delbert Hosemann said the Senate will revive the measure, according to Mississippi Today.

Last year, federal officials approved a Medicaid waiver for Missouri that allows the state to extend postpartum eligibility. But state officials delayed implementing the change to determine how enrollment would be affected by Missouri voters' decision in August 2020 to expand Medicaid eligibility to more people. The delay prompted a bill to be filed last session that would have extended postpartum coverage by a year. That measure died, but a state lawmaker has pre-filed a bill that will bring back the debate in the upcoming session.

In Idaho, a children's advocacy group said it will press lawmakers to approve a postpartum eligibility extension, among other measures, after the state banned nearly all abortions this year.

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