

Factsheet

State Children’s Health Insurance Program (S-CHIP) Coverage During Pregnancy

Nineteen states and Washington, DC offer prenatal coverage for pregnant women under the S-CHIP program. S-CHIP is a partnership between the state and federal government to provide insurance for children under 19 years of age whose family does not qualify for Medicaid or private health insurance. The following chart illustrates how the S-CHIP program operates within each state and the types of coverage afforded to pregnant and postpartum women. States implement this program through four funding options: section 1115 waivers; state plan option to cover unborn children; state plan option to cover low-income pregnant women; or state plan option to cover lawfully-residing immigrant pregnant women.

State	Postpartum Coverage	Fees	Mother’s Eligibility and Provided Services	Infant Eligibility	Name of the Program / Type of Plan and Resources
AR	Services are provided through the month the 60 th day postpartum falls on.	Bundled payment of prenatal, labor and delivery, and postpartum services.	<ul style="list-style-type: none"> • Same services as Medicaid prenatal program. • No limit on the number of visits that are covered. • Sterilization procedures not covered. 	N/A	Unborn Child Option http://humanservices.arkansas.gov/dco/Pages/MedicaidEligibility.aspx
CA	Services are provided through the month the 60 th day postpartum falls on.	Pregnant women who qualify pay 1.5% of their Modified Adjusted Gross Income.	<ul style="list-style-type: none"> • Pregnant on date of application. • State resident. • Does not already receive no-cost Medi-Cal or Medicare Part A or Part B. • Must be uninsured or have private coverage with a separate maternity deductible/co-pay of more than \$500.00. • Benefits are provided through participating health plans. Women must look at their Health Plan coverage to see what their exact benefits are. 	Infants are eligible for the Medi-Cal Access Infant Program	Medi-Cal Access Program – Unborn Child Option http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/Medi-calAccessProgram.aspx Medi-Cal Access Program website: http://mcap.dhcs.ca.gov/Home/default.aspx

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program / Type of Plan and Resources
CO	Services are provided through the 60 th day postpartum.	Prenatal women do not have to pay annual enrollment fees or payments. Cannot be eligible for Medicaid or have other health insurance.	<ul style="list-style-type: none"> • Prenatal, labor and delivery, and postpartum care. • Presumptive Eligibility if an enrollee needs immediate prenatal care without waiting for eligibility (60 day enrollment). 	Once the program is notified of the child's birth, the child is automatically enrolled in CHIP Plus for up to 1 year.	CHIP Plan Plus - Unborn Child Option https://www.colorado.gov/pacific/hcpf/child-health-plan-plus
IL	Services are provided through the 60 th day postpartum.	No cost sharing.	<ul style="list-style-type: none"> • Presumptive Eligibility program gives pregnant women 60 days eligibility before the Moms & Babies application is processed. • Outpatient services: prenatal checkups, doctor visits, lab tests, prenatal vitamins, medicine, specialty medical care, eye care, dental care, emergency room care, mental health and substance abuse services, transportation to get medical care and other services. • Hospital services, including labor and delivery, are included. • Must meet income requirements. • DO NOT have to be a legal immigrant/citizen OR have a SSN to obtain this service. • Option to sign up for text4baby. 	The child can receive checkups, well-baby care, shots and many other services through the All Kids program for 1 year.	Moms & Babies program - Unborn Child Option http://www.allkids.com/pregnant.html

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program/Type of Plan and Resources
IN	No	Package A: No premiums, small co-pay for pharmacy, transport, and emergency services.	<ul style="list-style-type: none"> • Package A - Standard Plan. • Package P - Presumptive Eligibility for Pregnant Women: limited service while full application is being processed. 	N/A	Hoosier Healthwise - 3 plans, Pregnant women are eligible for Packages A and P. http://member.indianamedicaid.com/programs--benefits/medicaid-programs/hoosier-healthwise.aspx
LA	Limited: postpartum women may receive coverage through the 60 th day postpartum, but it is not guaranteed.	No cost sharing	<ul style="list-style-type: none"> • Same services as Medicaid prenatal program. • Other services offered are prescription drugs, oral health services, mental health services and emergency services. • There are no visit limits. 	The child is automatically enrolled in LaCHIP at birth.	LaMOMs - Unborn Child Option http://dhh.louisiana.gov/index.cfm/page/231
MA	Limited: services may be provided through the 60 th day postpartum.	<p>Standard - No Premium charged, may have copays. If individual has other health insurance may pay part of household health insurance premium.</p> <p>Limited - N/A</p>	<ul style="list-style-type: none"> • Standard - Inpatient/outpatient services provided. • Medical services. • Behavioral health. • Well-child screenings. • Transportation services. • Smoking cessation services. • Limited - Inpatient services include labor and delivery. • Outpatient services include pharmacy services for emergency medical conditions, ambulance transportation (emergency reasons), and medical services provided outside of a clinic or hospital. 	N/A	<p>MassHealth Standard Unborn Child Option http://www.mass.gov/eohhs/consumer/insurance/masshealth-coverage-types/masshealth-standard.html#Who can get benefits</p> <p>Mass Health Limited Unborn Child Option http://www.mass.gov/eohhs/consumer/insurance/masshealth-coverage-types/masshealth-limited.html#Who can get benefits</p>

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program/Type of Plan and Resources
MI	No	N/A	<ul style="list-style-type: none"> The services are meant to supplement a woman's prenatal/infant care to ensure the woman and child maintain good health. 	N/A	MIHP (Maternal Infant Health Program) - Unborn Child Option http://www.michigan.gov/mihp
MN	An individual is eligible to receive coverage through the second month postpartum.	No copays or monthly premiums. Can possibly pay cost of other insurance so individual can keep that health coverage.	<ul style="list-style-type: none"> Same services as Medicaid prenatal program. No visit limits. Coverage starts the first day of the month individual became pregnant OR up to three months before the month the application is received, whichever is later. 	The child is automatically covered from date of delivery through the month of its first birthday.	Medical Assistance (MA) - Unborn Child Option http://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/pregnant-women.jsp
NE	An individual is eligible to receive coverage through the 60 th day postpartum.	Minimal co-pay, no other cost sharing	<ul style="list-style-type: none"> Pregnancy related coverage ONLY with no visit limits. Other services provided only if they impact the health of the unborn child: prescription drugs, disease management for pre-existing conditions (i.e. diabetes), oral health, mental health, emergency care. 	If the mother is eligible for Medicaid then the child is also eligible for 12 months as long as the child remains in the state.	Unborn Child Option http://dhhs.ne.gov/medicaid/Documents/attach3.pdf (page 2)

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program/Type of Plan and Resources
NJ	Services are provided through the 60 th day postpartum.	No cost sharing.	<ul style="list-style-type: none"> • Same services as Medicaid prenatal program. • There is no visitation limit. • The services cover both low-income women and lawful immigrant women. 	N/A	Eligibility Groups http://www.njfamilycare.org/docs/elig_groups.pdf Questions and Answers http://www.njfamilycare.org/q_and_a.aspx#20
OK	No	No cost sharing.	<ul style="list-style-type: none"> • Same services as Medicaid prenatal program. • Additional Services provided if medically necessary and benefit the unborn child. • No visit limits. Only covered during pregnancy. 	N/A	SoonerCare - Unborn Child Option https://www.okhca.org/individuals.aspx?id=12496&menu=42&parts=12497
OR	Limited: coverage is terminated the day after the baby is delivered. Coverage may be extended if the mother qualifies for Medicaid or CHIP.	No cost sharing.	<ul style="list-style-type: none"> • Same services as the Medicaid prenatal program. • Does not cover postpartum care beyond the global payment, sterilization, abortion, death with dignity, or hospice. • Postpartum may be covered under a global plan when bundled with the delivery procedure. 	N/A	Unborn Child Option Refer to "PC – Unborn Option" on page 19 http://www.oregon.gov/oha/healthplan/DataReportsDocs/CHIP%20State%20Plan.pdf

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program/Type of Plan and Resources
RI	Services are provided through the 60th day postpartum. An individual is then enrolled in the state Extended Family Planning benefit for 2 years (provided via state funds).	No cost sharing.	<ul style="list-style-type: none"> Same services as Medicaid to include: childbirth education programs, drug or alcohol treatment, parenting classes, smoking cessation programs, transportation and dental care. 	N/A	Rite Care - Unborn Child Option http://www.eohhs.ri.gov/Consumer/ConsumerInformation/Healthcare/FamilieswithChildren.aspx
TN	Services are covered through the 60 th day postpartum.	No premiums, coinsurance, or deductibles.	<ul style="list-style-type: none"> Must be Tennessee resident, not eligible for TennCare. No immigration documents required if pregnant. Covers women who do not have maternity health benefits under their current health benefits. Covers: full prenatal coverage, labor and delivery, postpartum, and prescription drugs and disease management for pre-existing conditions. No visit limits 	N/A	CoverKids - Unborn Child Option https://www.tn.gov/coverkids/topic/coverkids-eligibility

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program/Type of Plan and Resources
TX	Limited: allows for two doctor visits postpartum.	No cost sharing. Postpartum services are funded through capitation payments to the plan OR bundled with prenatal care OR pay an incentive payment for complying with clinical guidelines.	<ul style="list-style-type: none"> • Twenty prenatal visits. • Prenatal vitamins/medicine per doctor orders. • Diabetic supplies per doctor orders. • Covers the cost of labor in a medical facility with the delivery of the baby (labor costs may be switched to Emergency Medicaid based on income). • Women who do not qualify for Medicaid prenatal coverage due to immigration status or income level may still qualify for CHIP. • Cannot have other health insurance. 	The child may be switched to Medicaid for first year of life based on maternal income. The CHIP program will cover well checkups, vaccines, and medicines prescribed by the doctor for the infant.	Unborn Child Option https://chipmedicaid.org/en/chip-perinatal-benefits
VA	Services are provided through the 60th day postpartum.	There is no enrollment fee or monthly premiums. There are no copays for pregnancy related services.	<ul style="list-style-type: none"> • Comprehensive prenatal care. • Receive dental care benefits during the pregnancy through the VA Smiles for Children program. • Starting 1/1/16 mothers that choose to breastfeed are covered for breast pumps and breastfeeding support. • Breast pump coverage and breastfeeding support begins during pregnancy and continues after infant is born. 	The mother must notify program staff of the birth of the child so the child can be enrolled in FAMIS or FAMIS Plus for the first year of life.	FAMIS MOMS program http://www.dmas.virginia.gov/Content/atchs/atchs/FAMIS%20OMS%20Amendment%20Public%20Notice.pdf http://www.coverva.org/programs_moms.cfm

Factsheet

State	Postpartum Coverage	Fees	Mother's Eligibility and Provided Services	Infant Eligibility	Name of the Program/Type of Plan and Resources
WA	Services are provided for two months postpartum.	Free if income is 210% below the Federal Poverty Line. There is a low monthly payment if income is 312% at or below the Federal Poverty Line.	<ul style="list-style-type: none"> • Same services as Medicaid program, not limited to pregnancy services. 	N/A	Apple Health for Kids - Unborn Child Option http://www.hca.wa.gov/applehealth/pages/more_information.aspx
Washington, D.C.	Services are provided through the 60 th day postpartum.	No cost sharing	<ul style="list-style-type: none"> • Full Medicaid coverage for pregnancy related care, labor and delivery, any complications that may occur, and postpartum care. 	N/A	DC Healthy Families - Unborn Child Option http://dhcf.dc.gov/service/dc-healthy-families http://dhcf.dc.gov/node/892412
WI	Services are provided for postpartum services that typically occur 6 weeks after birth.	No cost sharing. Bundled payment for prenatal services, labor and delivery, and postpartum services.	<ul style="list-style-type: none"> • Prenatal care • Maternity and newborn care • Mental health, behavioral health, substance abuse treatment, prescription drugs • Lab visits • Vision care • Hospital care • Transportation to appointments. 	N/A	BadgerCare Plus https://www.dhs.wisconsin.gov/publications/p1/p10179.pdf https://www.dhs.wisconsin.gov/badgercareplus/index.htm http://kff.org/health-reform/factsheet/the-wisconsin-health-care-landscape/

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under cooperative agreement number: UC4MC28036; award title: Alliance for Innovation on Maternal and Child Health: Cooperative Agreement Expanding Access to Care for the Maternal and Child Health Population (Category 1: Collaborative Engagement). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.