



## CHIP Coverage for Pregnant Women

The Children's Health Insurance Program (CHIP) is a critical source of health care coverage for children and pregnant women who earn too much to qualify for Medicaid but too little to purchase private health insurance. Without extension, funding for this bipartisan, popular program will end in 2017, jeopardizing coverage for pregnant women and children. **The March of Dimes urges Congress to support CHIP so that pregnant women and children receive the care needed to ensure healthy pregnancies and healthy babies.**

### How Does CHIP serve pregnant women?

**CHIP is a safety net program for pregnant women**

- CHIP covers pregnant women up to at least 185% of the federal poverty level (FPL). Most states cover women at higher income levels.

2015 Income eligibility levels for pregnant women (% Federal Poverty Level)			
	Medicaid	CHIP	Coverage Authority
Arkansas	0-209	0-210	UCO <sup>1</sup>
California	0-208	0-322	UCO
Colorado	0-195	196-260	SPA <sup>2</sup>
DC	0-206	206-324*	SPA, ICHIA <sup>3</sup>
Illinois	0-208	0-209	UCO
Louisiana	0-133	0-209	UCO
Massachusetts	0-200	0-200	UCO
Michigan	0-195	0-195	UCO
Minnesota	0-278	0-278	UCO
Nebraska	0-194	0-197	UCO
New Jersey	0-194	194-200	SPA, ICHIA
Oklahoma	0-133	0-185	UCO
Oregon	0-185	0-185	UCO
Rhode Island	0-190	0-253	Waiver <sup>4</sup> , SPA, UCO
Tennessee	0-195	0-250	UCO
Texas	0-198	0-202	UCO
Virginia	0-143	143-205	Waiver
Washington	0-193	0-193	UCO
Wisconsin	0-301	0-301	UCO

<sup>1</sup> State plan option to cover unborn child from conception to birth.

<sup>2</sup> State plan option to cover targeted low-income pregnant women through a state plan amendment (SPA).

<sup>3</sup> State plan option to cover lawfully residing immigrant pregnant women according to Immigrant Children's Health Improvement Act (ICHIA).

<sup>4</sup> Section 1115 waiver to cover uninsured pregnant women.

### Key Facts about CHIP

- While all states use CHIP funds to cover children, 18 states also use CHIP funding to cover pregnant women.
- Each year, approximately 370,000 pregnant women receive care through CHIP.
- States receive enhanced federal matching funding (averaging 70%) for covering pregnant women through CHIP.

### CHIP offers affordable coverage for pregnant women, removing barriers to pregnancy services and prenatal care

- CHIP provides a critical safeguard for women who cannot otherwise obtain affordable coverage.
- 13 states have no copays, premiums, or other cost-sharing for pregnant women in CHIP.
- Those remaining states with cost-sharing only require copayments or premiums for pregnant women at higher income levels.

### CHIP provides state flexibility in covering pregnant women

- States have four mechanisms to cover pregnant women in CHIP:
  - ✓ Section 1115 waiver to cover uninsured pregnant women
  - ✓ State plan option to cover unborn children
  - ✓ State plan option to cover low-income pregnant women
  - ✓ State plan option to cover lawfully-residing immigrant pregnant women
- 14 states use the "unborn child option," four states cover the pregnant woman, and one state covers both the pregnant woman and the unborn child.

The March of Dimes is a national voluntary health agency whose volunteers and staff work to improve the health of infants and children by preventing birth defects, premature birth and infant mortality. Founded in 1938, the March of Dimes funds programs of research, community services, education and advocacy. For the latest resources and information, visit [marchofdimes.org](http://marchofdimes.org) or [nacersano.org](http://nacersano.org).

# Services Provided to Pregnant Women

## CHIP benefits for pregnant women vary widely

- 9 states provide comprehensive coverage for at least some pregnant women.
- 8 states limit their coverage to those services that are “pregnancy related.” States define “pregnancy related” services in different ways. (See table below for types of services states provide.)
  - ✓ All 19 states cover prescription drug services.
  - ✓ 15 states cover mental health, emergency services, and dental benefits.
  - ✓ 13 states cover disease management for pre-existing conditions.
- 15 states provide the same network of providers as is available in their Medicaid program.
- 16 states extend coverage for 60 days post-partum.

State	Full Scope Benefits (comparable to full scope Medicaid or CHIP in state)	Pregnancy Related Coverage	Services provided in CHIP					
			Prescriptions	Disease Management for Pre-existing Conditions	Oral Health	Mental Health	Emergency Services	Post - partum Care <sup>4</sup>
AR <sup>1</sup>		✓	N/A	N/A	N/A	N/A	N/A	•
CA <sup>2</sup>	✓	✓	•	•	•	•	•	•
CO	✓		•	•	•	•	•	•
DC	✓		•	•	•	•	•	•
IL	✓		•	•	•	•	•	•
LA		✓	•		•	•	•	
MA		✓	•		•	•	•	•
MI		✓	•	•				•
MN	✓		•	•	•	•	•	•
NE		✓	•	•	•	•	•	
NJ	✓		•	•	•	•	•	•
OK		✓	•	•	•	•	•	
OR		✓	•		•	•	•	•
RI	✓		•	•	•	•	•	•
TN		✓	•	•				•
TX <sup>3</sup>		✓	•					•
VA		✓	•		•	•	•	•
WA	✓		•	•	•	•	•	•
WI	✓		•	•	•	•	•	•

<sup>1</sup>Information not available; did not respond to survey regarding services included in “pregnancy related” coverage.

<sup>2</sup>Women 0-200% FPL receive pregnancy related services only; women 200-300% FPL receive full-scope CHIP benefits. Pregnancy related services include those services that, if not treated, could complicate pregnancy.

<sup>3</sup>Care coordination offered as needed.

<sup>4</sup>Several states pay using global fees, and post-partum care would not be covered outside these fees in many instances.

## Methods Notes

March of Dimes commissioned a survey of Children’s Health Insurance Program (CHIP) Directors to gain a better understanding of coverage for pregnant women in this program. In 2013, National Academy for State Health Policy developed and implemented this survey in the 19 states that then covered pregnant women. The questionnaire to State CHIP directors included information on coverage authority, eligibility, covered benefits and cost-sharing. This information was compiled and included in a summary chart for use by the March of Dimes. This information was updated in Fall 2015 by contacting states to verify any changes. The information summarized above is current as of December 2015.

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