



Maternity and Newborn Care in Medicaid

Medicaid provides vital insurance coverage and access to health services for low-income women, children and families. Today, Medicaid covers roughly half of all births in the United States, including many high-risk pregnancies. Low-income, childless adults can qualify for Medicaid coverage in the 32 states that have expanded their programs. All state Medicaid programs cover perinatal care for pregnant women with income levels up to 138% of the federal poverty level, and many states allow women at higher family income levels to access this care via Medicaid coverage.

Pregnancy care is a hallmark of the Medicaid program. Medicaid covers routine, quality prenatal care for eligible pregnant women in every state across the country, allowing them access to the preventive care and treatment necessary to have healthy pregnancies and give birth to healthy infants.

Postpartum care is covered by Medicaid for sixty days after birth. This enables new mothers to obtain the services needed to ensure a full recovery, as well as a postpartum visit that should include an assessment of physical, social, and psychological wellbeing.

Routine newborn care is covered by Medicaid in every state, and automatic enrollment for newborns born to mothers who are enrolled in Medicaid for prenatal care ensures that babies are covered from day one. It is vitally important that all infants receive preventive care services, such as newborn screening and immunizations, in full and on schedule without cost sharing. Further, Medicaid coverage ensures that babies born with complications or birth defects have comprehensive coverage so they can access the care they need to be as healthy as possible.

High-risk newborn care is also increasingly financed by Medicaid. Recent research has found that while rates of complicated births remained relatively constant between 2002 and 2009, the proportion of complicated births covered by Medicaid increased, while the proportion paid by private payers decreased. Medicaid is used by states as an essential coverage option for babies born with complications like prematurity, low birthweight, and birth defects.

Medicaid is a critically important coverage program for pregnant women and their infants. **The March of Dimes urges policymakers to oppose proposals to alter the fundamental nature of the Medicaid program, such as block grants or per-capita caps, which could put states at significant risk of being unable to cover the costs of care for pregnant women and infants.**