

September 8, 2023

Jennifer Strohecker
State Medicaid Director
Division of Integrated Healthcare
Department of Health & Human Services
PO Box 143101
Salt Lake City, UT 84101

Dear Director Strohecker:

On May 18, 2023, the state of Utah submitted an amendment application, entitled “Twelve-Month Extended Postpartum Coverage,” as required by state law,¹ to the “Utah Medicaid Reform 1115 Demonstration.” This request proposes to extend Medicaid coverage from sixty (60) days to twelve (12) months postpartum for certain Medicaid beneficiaries. The state has proposed to restrict eligibility for extended postpartum services to women whose pregnancy ends by way of birth, miscarriage, stillbirth, or an abortion permitted under Utah’s state code.²

The Centers for Medicare & Medicaid Services (CMS) agrees that the postpartum period is critically important for birthing people and infants. Complications related to pregnancy, childbirth, and the postpartum period can lead to devastating health outcomes, and result in hundreds of deaths each year. This maternal health crisis is particularly devastating for Black and American Indian and Alaska Native people, and those in rural communities, who all experience maternal mortality and morbidity at significantly higher rates than their white and urban counterparts.

As you know, Medicaid and the Children’s Health Insurance Program (CHIP) play a critical role in ensuring access to care for pregnant and postpartum individuals, improving the quality of maternal health care, and addressing disparities in health outcomes and pregnant and postpartum care. It is a priority of this Administration to expand access to high-quality, affordable health care and extending Medicaid and CHIP postpartum coverage is an important part of these efforts.

As part of the American Rescue Plan Act of 2021 (Pub. L. 117-2) and the Consolidated Appropriations Act of 2023 (Pub. L. 117-328), states now have a state plan option to provide 12 months of continuous postpartum coverage to pregnant individuals enrolled in Medicaid and

¹ 2023 Utah S.B. 113, Modifications to Medicaid Coverage, <https://le.utah.gov/~2023/bills/static/SB0133.html>

² Utah Code 76-7a-201, https://le.utah.gov/xcode/Title76/Chapter7a/76-7a-S201.html?v=C76-7a-S201_202005122020051276-7a-S201.html?v=C76-7a-S201_2020051220200512

CHIP. This extended postpartum coverage option offers states an opportunity to provide coverage for care that can reduce pregnancy-related deaths and severe maternal morbidity, and improve continuity of care for chronic conditions such as diabetes, hypertension, cardiac conditions, substance use disorder, and depression. As of July, 2023, 32 states, the District of Columbia, and the US Virgin Islands have approved state plan amendments for this option, providing extended postpartum coverage for an estimated 412,000 individuals.

On December 7, 2021, CMS issued guidance regarding this state plan option in the State Health Official (SHO) letter, “Improving Maternal Health and Extending Postpartum Coverage in Medicaid and the Children’s Health Insurance Program.”³ This letter identifies the parameters of the 12-month postpartum coverage option and includes the associated operational and financial details for states interested in taking up this option. As noted in the December 7, 2021, SHO letter, the 12-month postpartum coverage option, like the 60-day postpartum mandate, applies without regard to the manner in which a pregnancy ends.

We applaud Utah for seeking to address critical maternal health issues by proposing to extend the postpartum coverage period, and while we are encouraged by the state’s demonstration amendment application seeking to extend that coverage to twelve months, we note that section 1115 demonstrations are intended to test interventions that are not generally offered within Medicaid, to evaluate whether they promote the objectives of the Medicaid program. However, as described in our December 7, 2021 SHO letter, the evidence supporting the importance of extended care to *all* individuals during their postpartum period is very robust. The state’s authorizing legislation for this demonstration amendment indicates that if this request is not approved by January 1, 2024, the state shall submit a Medicaid state plan amendment consistent with the requirements described in section 1902(e)(16) of the Social Security Act, which extends postpartum coverage to 12 months for pregnant individuals and provides continuous eligibility during that period. As such, since CMS does not intend to approve the amendment request during that timeframe, we encourage the state to pursue the fallback option described in state law.

CMS appreciates Utah’s commitment to improving maternal health outcomes by expanding postpartum coverage, and we look forward to partnering with you as you consider providing this coverage consistent with what is available in the state plan. Our staff stand ready to assist the state with any technical assistance needed to advance this initiative. If you have questions regarding this letter, please contact Ms. Mehreen H. Rashid, Acting Director, State Demonstrations Group, Center for Medicaid and CHIP Services, at (410) 786-9686.

Sincerely,



Daniel Tsai
Deputy Administrator and Director

³ State Health Official Letter #21-007, <https://www.medicaid.gov/federal-policy-guidance/downloads/sho21007.pdf>

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cc: Tyler Deines, State Monitoring Lead, Medicaid and CHIP Operations Group