

HB 1536-FN - AS INTRODUCED

2022 SESSION

22-2694

05/04

HOUSE BILL

1536-FN

AN ACT relative to expanding Medicaid to include certain postpartum health care services.

SPONSORS: Rep. M. Murray, Hills. 22; Rep. McWilliams, Merr. 27; Rep. Wazir, Merr. 17; Rep. Wilhelm, Hills. 42; Rep. Chretien, Hills. 42; Rep. Marsh, Carr. 8; Rep. Toll, Ches. 16; Rep. Simpson, Rock. 36; Sen. Whitley, Dist 15; Sen. Perkins Kwoka, Dist 21

COMMITTEE: Health, Human Services and Elderly Affairs

ANALYSIS

This bill directs the department of health and human services to submit a state plan amendment to expand postpartum coverage under Medicaid. The bill also establishes a quarterly reporting requirement.

Explanation: Matter added to current law appears in ***bold italics***.
 Matter removed from current law appears ~~[in brackets and struckthrough]~~
 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Two

AN ACT relative to expanding Medicaid to include certain postpartum health care services.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 Title. This act shall be known and may be cited as the "Healthy Moms, Healthy Babies Act of
2 2022".

3 2 New Paragraph; Medicaid Enhancement for Children and Pregnant Women. Amend RSA
4 167:68 by inserting after paragraph III the following new paragraph:

5 IV.(a) Pursuant to the state option under the American Rescue Plan Act of 2021 to expand
6 maternity care under Medicaid and section 1902(e)(16) of the Social Security Act (42 U.S.C.
7 1396a(e)), the commissioner of the department of health and human services shall submit, no later
8 than October 1, 2022, a Medicaid state plan amendment to the federal Centers for Medicare and
9 Medicaid Services to establish and implement 12 months of continuous coverage for the entire
10 postpartum period. This benefit shall be available to anyone who received medical assistance under
11 the state plan for all pregnancy-related and postpartum medical assistance available under the state
12 plan through the last day of the month in which the 60-day period (beginning on the last day of her
13 pregnancy) ends, remain eligible under the state plan for medical assistance for the period beginning
14 on the first day occurring after the end of such 60-day period and ending on the last day of the month
15 in which the 12-month period (beginning on the last day of her pregnancy) ends.

16 (b) The medical assistance provided for a pregnant or postpartum woman under this
17 section shall, consistent with Section 1902(e)(16) include all items and services covered under the
18 state plan that are not less in amount, duration, or scope, or are determined by the Secretary to be
19 substantially equivalent, to the medical assistance available for an individual described in
20 subsection (a)(10)(A)(i); and be provided for the individual while pregnant and during the 12-month
21 period that begins on the last day of the individual's pregnancy and ends on the last day of the
22 month in which such 12-month period ends.

23 (c) The purpose of the program shall be, through ensuring continuous coverage for a 12-
24 month postpartum period, to increase identification and mitigation of preventable pregnancy related
25 and pregnancy associated morbidity and mortality, including those related to substance use disorder
26 and mental illness.

27 (d) On January 1, 2023 , the commissioner shall begin submitting quarterly reports to
28 the oversight committee on health and human services, the legislative committees with jurisdiction
29 over health and human services, and the governor regarding the department's progress in obtaining
30 and implementing the state plan amendment. The quarterly reports shall include the department's
31 plans for reducing administrative burdens for enrollees and the department's efforts to expand

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1 access and participation to voluntary, evidence-based maternal home visiting programs, pursuant to
2 subparagraph (a). Reports submitted under this paragraph shall also be posted on the department's
3 website.

4 3 Effective Date. This act shall take effect upon passage.

HB 1536-FN- FISCAL NOTE
AS INTRODUCED

AN ACT relative to expanding Medicaid to include certain postpartum health care services.

FISCAL IMPACT: ☒ State ☐ County ☐ Local ☐ None

STATE:	Estimated Increase / (Decrease)			
	FY 2022	FY 2023	FY 2024	FY 2025
Appropriation	\$0	\$0	\$0	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	Indeterminable	\$200,000 - \$1 million state general funds; indeterminable matching federal funds	\$200,000 - \$1 million state general funds; indeterminable matching federal funds	\$200,000 - \$1 million state general funds; indeterminable matching federal funds
Funding Source:	<input checked="" type="checkbox"/> General matching funds. <input type="checkbox"/> Education <input type="checkbox"/> Highway <input checked="" type="checkbox"/> Other - Federal			

METHODOLOGY:

This bill requires the Department of Health and Human Services to submit a state plan amendment expanding postpartum coverage under Medicaid. The Department notes that currently, the state provides Medicaid coverage to pregnant women with incomes up to 196 percent of the federal poverty level (FPL) for 60 days postpartum, which would be extended to 12 months under the bill. In addition, the Granite Advantage Program currently covers individuals with incomes up to 138 percent of the FPL. Accordingly, the Department states the bill will effectively provide 10 months' worth of postpartum coverage for those between 138 percent and 196 percent of the FPL. As of December 2021, the Department is awaiting guidance from the federal Centers for Medicare and Medicaid Services (CMS) regarding the availability of an enhanced Federal Medical Assistance Percentage (FMAP) for these services. Depending on the FMAP available and the number of individuals eligible for the extended coverage, the Department estimates an annual increase in state general fund expenditures of \$200,000 to \$1,000,000 per year.

This bill is effective upon passage, resulting in an indeterminable fiscal impact in FY22.

AGENCIES CONTACTED:

Department of Health and Human Services