



# NETWORK *Notification*

**Notice Date:** February 29, 2024  
**To:** Indiana Medicaid Providers  
**From:** CareSource  
**Subject:** Postpartum Coverage Extension

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## Summary

As a gentle reminder, effective April 1, 2022, the coverage period for Healthy Indiana Plan (HIP) and Hoosier Healthwise members was extended from 60 days to 12 months of continuous eligibility, regardless of change in circumstance that would otherwise result in loss of eligibility.

## Impact

The Family and Social Services Administration (FSSA) has made these changes to comply with sections 9812 and 9822 of the American Rescue Plan Act of 2021 (ARP), which gives states a new option to provide 12 months of extended postpartum coverage to pregnant individuals. There are no changes to the benefits covered, and members will continue to be exempt from cost-sharing during pregnancy and the postpartum coverage period.

The postpartum coverage period is available to an individual who meets one of the following criteria:

- Becomes pregnant while already enrolled in HIP or Hoosier Healthwise.
- Applies for Medicaid while pregnant and is eligible on the date pregnancy ends (by birth or other means).
- Applies for Medicaid after the child is born (or the pregnancy is terminated by other means) and was both pregnant and financially eligible in the month of application or one of the three retro months prior to the application month.

For pregnant individuals who were eligible and enrolled (including retroactive enrollment) on the date their pregnancy ends, the agency must provide coverage described through the last day of the month in which the 12-month postpartum period ends. The postpartum coverage period is not available in the following Emergency Services Only (ESO) categories of coverage::

- Individuals in ESO Coverage with Pregnancy Coverage (Package B) still receive 60 days postpartum coverage.
- Individuals in ESO (Package E) do not receive any postpartum coverage.

During the 12-month postpartum period, HIP Maternity members will continue to receive full benefits that cover all the same services as the HIP State Plan. Hoosier Healthwise members in the 12-month postpartum coverage period will continue to receive full benefits under Package A – Standard Plan. The small number of pregnant members who are covered under Traditional Medicaid (fee-for-service, full

coverage) or Hoosier Care Connect when their pregnancy begins will also receive the 12 months of postpartum protection and coverage.

If, at the end of the 12-month postpartum coverage period, the member is no longer eligible in their previous category of coverage, the Division of Family Resources (DFR) will review for eligibility in any other Indiana Health Coverage Programs (IHCP) benefit plan before disenrolling. Members who are eligible for HIP coverage when their postpartum period ends will start out in HIP Basic and be given an opportunity to pay their first Personal Wellness and Responsibility (POWER) Account contribution and move to HIP Plus.

### **Questions**

Please contact Provider Services at **1-844-607-2831**, Monday through Friday 8 a.m. to 6 p.m. Eastern Time (ET).

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