

# Union Calendar No. 428

116TH CONGRESS  
2D SESSION

# H. R. 4996

[Report No. 116–527]

To amend title XIX of the Social Security Act to provide for a State option under the Medicaid program to provide for and extend continuous coverage for certain individuals, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 8, 2019

Ms. KELLY of Illinois (for herself, Mr. BURGESS, Ms. UNDERWOOD, Mrs. RODGERS of Washington, Ms. PRESSLEY, and Mr. CARTER of Georgia) introduced the following bill; which was referred to the Committee on Energy and Commerce

SEPTEMBER 21, 2020

Additional sponsors: Ms. HERRERA BEUTLER, Mr. WALDEN, Mr. ENGEL, Mrs. HAYES, Mr. TRONE, Mr. CRENSHAW, Mr. GUTHRIE, Mr. RUIZ, Ms. SCHAKOWSKY, Mr. FITZPATRICK, Mr. CUNNINGHAM, Ms. NORTON, Mr. LARSEN of Washington, Mr. CLAY, Mr. MCGOVERN, Ms. KENDRA S. HORN of Oklahoma, Ms. FINKENAUER, Mrs. AXNE, Ms. SHALALA, Mr. WALBERG, Mr. MCEACHIN, Mrs. FLETCHER, Mrs. BUSTOS, Mr. VAN DREW, Ms. JACKSON LEE, Ms. DEAN, Mr. LAMB, Mrs. DAVIS of California, Ms. PORTER, Mrs. NAPOLITANO, and Ms. HOULAHAN

SEPTEMBER 21, 2020

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on November 8, 2019]

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## **A BILL**

To amend title XIX of the Social Security Act to provide for a State option under the Medicaid program to provide for and extend continuous coverage for certain individuals, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
 2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 *This Act may be cited as the “Helping Medicaid Offer*  
 5 *Maternity Services Act of 2019” or the “Helping MOMS*  
 6 *Act of 2019”.*

7 **SEC. 2. STATE OPTION UNDER MEDICAID PROGRAM TO**  
 8 **PROVIDE FOR AND EXTEND CONTINUOUS**  
 9 **COVERAGE FOR CERTAIN INDIVIDUALS.**

10 *(a) STATE OPTION TO EXTEND CONTINUOUS COV-*  
 11 *ERAGE FOR PREGNANT AND POSTPARTUM INDIVIDUALS.—*  
 12 *Title XIX of the Social Security Act (42 U.S.C. 1396 et*  
 13 *seq.) is amended—*

14 *(1) in section 1902(e)(5), by inserting after “60-*  
 15 *day period” the following: “or, at the option of the*  
 16 *State, 1-year period”;*

17 *(2) in section 1902(e)(6), by inserting after “60-*  
 18 *day period” the following: “or, at the option of the*  
 19 *State, 1-year period”;*

20 *(3) in section 1902(l)(1)(A), by inserting after*  
 21 *“60-day period” the following: “, or, at the option of*  
 22 *the State, 1-year period,”;*

23 *(4) in section 1903(v)(4)(A)(i), by inserting after*  
 24 *“60-day period” the following: “, or, at the option of*  
 25 *the State, 1-year period,”; and*

1           (5) in section 1905(a), in the fourth sentence in  
 2           the matter following paragraph (30), by inserting  
 3           after “60-day period” the following: “, or, at the op-  
 4           tion of the State, 1-year period,”.

5           (b) *STATE OPTION TO PROVIDE CONTINUOUS COV-*  
 6           *ERAGE FOR FULL BENEFITS FOR INDIVIDUALS WHO ARE*  
 7           *OR BECOME PREGNANT.*—Section 1902(e)(6) of the Social  
 8           Security Act (42 U.S.C. 1396a(e)(6)), as amended by sub-  
 9           section (a), is further amended—

10           (1) by striking “(6) In the case of a pregnant  
 11           woman” and inserting

12           “(6)(A) In the case of a pregnant woman”; and

13           (2) by adding at the end the following:

14           “(B)(i) At the option of the State, the State plan may  
 15           provide that an individual who is eligible for medical as-  
 16           sistance under the State plan (or a waiver of such plan)  
 17           or for child health assistance under title XXI and who is,  
 18           or who while so eligible becomes, pregnant shall continue  
 19           to be eligible for such medical assistance or child health as-  
 20           sistance, respectively, through the end of the month in which  
 21           the 1-year period (beginning on the last day of such preg-  
 22           nancy) ends, regardless of the basis for the individual’s eli-  
 23           gibility for such medical assistance.”.

24           (c) *INCREASE OF FMAP.*—Section 1905 of the Social  
 25           Security Act (42 U.S.C. 1396d) is amended—

1           (1) in subsection (b), in the first sentence, by  
2           striking “and (ff)” and inserting “(ff), and (gg)”; and

3           (2) by adding at the end the following new sub-  
4           section:

5           “(gg) SPECIFIED COVERAGE EXTENSION STATES.—

6           “(1) IN GENERAL.—Notwithstanding subsection  
7           (b), beginning January 1, 2020, in the case of a spec-  
8           ified coverage extension State, for the initial extension  
9           calendar quarters with respect to such State, the Fed-  
10          eral medical assistance percentage that would other-  
11          wise apply to the State without application of this  
12          subsection, shall be increased by 5 percentage points.

13          “(2) SPECIFIED COVERAGE EXTENSION STATE.—

14          For purposes of this subsection, the term ‘specified  
15          coverage extension State’ means a State, the State  
16          plan of which has in effect the application of the 1-  
17          year period of continuous medical assistance pursu-  
18          ant to each of paragraphs (5) and (6) of section  
19          1902(e).

20          “(3) INITIAL EXTENSION CALENDAR QUARTER.—

21          For purposes of this subsection, the term ‘initial ex-  
22          tension calendar quarter’ means, with respect to a  
23          State, each calendar quarter occurring in the first fis-  
24          cal year that the State is a specified coverage exten-  
25          sion State.”.

1       (d) *APPLICATION TO CHIP OPTIONAL COVERAGE OF*  
 2 *TARGETED LOW-INCOME PREGNANT WOMEN.*—Section  
 3 2112 of the Social Security Act (42 U.S.C. 1397ll) is  
 4 amended—

5           (1) in subsection (d)(2)(A), by inserting after  
 6 “60-day period” the following: “, or, at the option of  
 7 the State, 1-year period”; and

8           (2) in subsection (f)(2), by inserting after “60-  
 9 day period” the following: “, or, at the option of the  
 10 State, 1-year period”.

11       (e) *EFFECTIVE DATE.*—The amendments made by this  
 12 section shall apply with respect to eligibility determinations  
 13 for items and services under State plans under title XIX  
 14 of the Social Security Act (or a waiver of such a plan) (42  
 15 U.S.C. 1396 et seq.) and under State child health plans  
 16 under title XXI (or waiver of such a plan) made on or after  
 17 January 1, 2020.

18 **SEC. 3. MACPAC REPORT.**

19       (a) *IN GENERAL.*—Not later than 1 year after the date  
 20 of the enactment of this Act, the Medicaid and CHIP Pay-  
 21 ment and Access Commission (referred to in this section  
 22 as “MACPAC”) shall publish a report on the coverage of  
 23 doula services under State Medicaid programs, which shall  
 24 at a minimum include the following:

1           (1) *Information about coverage for doula services*  
2           *under State Medicaid programs that currently pro-*  
3           *vide coverage for such services, including the type of*  
4           *doula services offered (such as prenatal, labor and de-*  
5           *livery, postpartum support, and also community-*  
6           *based and traditional doula services).*

7           (2) *An analysis of barriers to covering doula*  
8           *services under State Medicaid programs.*

9           (3) *An identification of effective strategies to in-*  
10          *crease the use of doula services in order to provide*  
11          *better care and achieve better maternal and infant*  
12          *health outcomes, including strategies that States may*  
13          *use to recruit, train, and certify a diverse doula*  
14          *workforce, particularly from underserved commu-*  
15          *nities, communities of color, and communities facing*  
16          *linguistic or cultural barriers.*

17          (4) *Recommendations for legislative and admin-*  
18          *istrative actions to increase access to doula services in*  
19          *State Medicaid programs, including actions that en-*  
20          *sure doulas may earn a living wage that accounts for*  
21          *their time and costs associated with providing care.*

22          (b) *STAKEHOLDER CONSULTATION.*—*In developing the*  
23          *report required under subsection (a), MACPAC shall con-*  
24          *sult with relevant stakeholders, including—*

25               (1) *States;*

1           (2) organizations representing consumers, in-  
 2           cluding those that are disproportionately impacted by  
 3           poor maternal health outcomes;

4           (3) organizations and individuals representing  
 5           doula services providers, including community-based  
 6           doula programs and those who serve underserved com-  
 7           munities, including communities of color, and com-  
 8           munities facing linguistic or cultural barriers; and

9           (4) organizations representing health care pro-  
 10          viders.

11 **SEC. 4. GAO REPORT.**

12          (a) *IN GENERAL.*—Not later than 2 years after the  
 13          date of the enactment of this Act and every five years there-  
 14          after, the Comptroller General of the United States shall  
 15          submit to Congress a report on the State adoption, under  
 16          the Medicaid program under title XIX of the Social Secu-  
 17          rity Act (42 U.S.C. 1396 et seq.) and the Children’s Health  
 18          Insurance Program under title XXI of such Act, of extend-  
 19          ing coverage to 365 days postpartum pursuant to the provi-  
 20          sions of (and amendments made by this Act). Such report  
 21          shall include the information and recommendations de-  
 22          scribed in subsection (b) and shall also identify ongoing  
 23          gaps in coverage for—



1           (1) *pregnant women under the Medicaid pro-*  
2           *gram and the Children’s Health Insurance Program;*  
3           *and*

4           (2) *postpartum women under the Medicaid pro-*  
5           *gram and the Children’s Health Insurance Program*  
6           *who received assistance under either such program*  
7           *during their pregnancy.*

8           (b) *CONTENT OF REPORT.*—*The report under sub-*  
9           *section (a) shall include the following:*

10           (1) *Information regarding the extent to which*  
11           *States have elected to extend coverage to 365 days*  
12           *postpartum pursuant to the provisions of (and*  
13           *amendments made by this Act), including which*  
14           *States make the election and when, impacts on*  
15           *perinatal insurance churn in those States compared*  
16           *to States that did not make such election, other health*  
17           *impacts of such election including regarding maternal*  
18           *mortality and morbidity rates, and impacts on State*  
19           *and Federal Medicaid spending.*

20           (2) *Information about the abilities, successes,*  
21           *and challenges of State Medicaid agencies in—*

22                   (A) *transitioning their eligibility systems to*  
23                   *incorporate such an election by a State and in*  
24                   *determining whether pregnant and postpartum*

1           *women are eligible under another insurance af-*  
2           *fordability program; and*

3           *(B) transitioning any such women who are*  
4           *so eligible to coverage under such a program,*  
5           *pursuant to section 1943(b)(3) of the Social Se-*  
6           *curity Act (42 U.S.C 1396w-3(b)(3)).*

7           *(3) Information on factors contributing to ongo-*  
8           *ing gaps in coverage resulting from women*  
9           *transitioning from coverage under the Medicaid pro-*  
10          *gram or Children's Health Insurance Program that*  
11          *disproportionately impact underserved populations,*  
12          *including low-income women, women of color, women*  
13          *who reside in a health professional shortage area (as*  
14          *defined in section 332(a)(1)(A) of the Public Health*  
15          *Service Act (42 U.S.C. 254e(a)(1)(A))), or who are*  
16          *members of a medically underserved population (as*  
17          *defined by section 330(b)(3) of such Act (42 U.S.C.*  
18          *254b(b)(3)(A))).*

19          *(4) Recommendations for addressing and reduc-*  
20          *ing such gaps in coverage.*

21          *(5) Such other information as the Comptroller*  
22          *General determines appropriate.*

1 **SEC. 5. REPORT ON MEDICAID BUNDLED PAYMENTS FOR**  
2 **PREGNANCY-RELATED SERVICES.**

3 *Not later than 2 years after the date of the enactment*  
4 *of this Act, the Medicaid and CHIP Payment Advisory*  
5 *Commission shall submit to Congress a report containing*  
6 *an analysis of the use of bundled payments for reimbursing*  
7 *health care providers with respect to pregnancy-related*  
8 *services furnished under State plans (or waivers of such*  
9 *plans) under title XIX of the Social Security Act (42 U.S.C.*  
10 *1396 et seq.).*

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