Path to Coverage for Pregnant Women: Julie

Twenty-five-year-old, single, pregnant Julie lives in Birmingham, AL. Despite working two jobs, she is uninsured. Her total annual income is $17,000, making her eligible for tax credits and cost-sharing reductions to buy private insurance through the federally facilitated marketplace (FFM). However, Julie did not enroll during open enrollment.

What steps can Julie take to get coverage?

Step 1: Julie Applies For and Enrolls in Medicaid for Pregnant Women (MPW)

In Alabama, MPW covers those making up to 141% of the Federal Poverty Line (FPL).

Medicaid eligibility rules consider an unborn child to be part of the mother’s household size.

Giving Julie has a household of two with an annual income of $17,000.

Alabama considers MPW as Minimum Essential Coverage (MEC) so Julie will not have to pay the penalty for not having health insurance while enrolled.

Step 2: Julie Gives Birth

Because she is an enrollee, Julie’s baby is deemed eligible for Medicaid for the 1st year of his life.

60 days of post-partum coverage is provided to Julie through MPW.

Step 3: Julie Looks for Options for Ongoing Coverage Beyond Her Pregnancy

Option 1: Alabama has not expanded Medicaid.

Option 2: Julie is eligible for coverage through federally facilitated marketplace. This coverage is limited and not considered MEC. If enrolled Julie would have to pay tax for not having health insurance, or enroll in another form of coverage considered MEC.

Option 3: Julie is eligible for premium tax credit in the FFM. Based on her household size and income she is also eligible for a premium tax credit of $197 per month.

Step 4: Julie Enrolls in A Qualified Health Plan (QHP) Through the Marketplace

After her premium tax credit is applied Julie has:

- $29 premium, per month
- $500 deductible
- $750 out-of-pocket maximum

Policy Implications for States:

Coverage
According to federal guidance, pregnant women who become eligible for coverage under Medicaid or CHIP as a result of pregnancy, have the option to enroll in existing coverage or transition to public coverage with potentially lower out-of-pocket costs.

Care
While she was able to enroll in Medicaid, she was uninsured for a portion of her pregnancy. As a result, Julie may not have received all the necessary prenatal care, which could lead to high health care costs for her and her baby.

Outreach
Targeted outreach messages or education on the benefits of coverage and the importance of the open enrollment period may have encouraged Julie to apply for and enroll in coverage beyond the open enrollment period.

Sources:
1. States who have established their own state-based Marketplaces can establish their own qualifying life events and may recognize pregnancy as a qualifying life event that would trigger a special enrollment period. However, the majority of state-based Marketplaces and state Medicaid programs do not recognize pregnancy as a qualifying life event.