



Postpartum Medicaid and CHIP Coverage Extension

The Texas Health and Human Services Commission (HHSC) extended its postpartum Medicaid and Children’s Health Insurance Program (CHIP) coverage to 12 months for eligible women, effective March 1, 2024. The 12 months of postpartum coverage begins the month after a pregnancy has ended.

Am I eligible?

Effective March 1, 2024, eligible recipients include:

- Medicaid or CHIP recipients who were enrolled while pregnant or are no longer pregnant but are still within their 12-month postpartum period.
 - » Women who transitioned from Medicaid or CHIP to Healthy Texas Women (HTW) after their pregnancy ended and who are within their 12 months postpartum period will be reinstated to full coverage Medicaid or CHIP.
- Women who received services while pregnant in Texas that would have been covered by Medicaid but who apply for Medicaid after their pregnancy ends.
- Medicaid or CHIP recipients who are pregnant or become pregnant and women who enroll because they become pregnant.

Are there any exceptions to eligibility?

Eligible Medicaid and CHIP recipients will receive the extended coverage through their postpartum period unless they:

- Voluntarily withdraw.
- Move out of Texas.
- Are determined ineligible because of fraud, abuse or perjury.
- Die.

Want to learn more?

Scan the QR code, visit texasrhs.org/postpartum or call 2-1-1 and choose Option 2.



Do I need to apply to have my coverage extended?

Medicaid and CHIP recipients don’t need to apply to have their coverage extended.

Coverage will be reinstated for the remainder of the 12-month postpartum period for women who are not current Medicaid or CHIP recipients but who were enrolled in Medicaid or CHIP in Texas while pregnant and are still within their 12-month postpartum period (if they are still residents of Texas). They’ll get a notice by mail or through their Your Texas Benefits account.

What services are available?

Medicaid or CHIP covered services remain available in the 12-month postpartum period. This includes but is not limited to:

- Regular medical checkups.
- Prescription drugs and vaccines.
- Hospital care and services.
- X-rays and lab tests.
- Vision and hearing care.
- Access to medical specialists and mental health care.
- Treatment of special health needs and preexisting conditions.