

March 24, 2022

PUBLIC NOTICE

Public Notice of Final Action for 12 Month Postpartum Coverage Option Under the American Rescue Plan Act

The South Carolina Department of Health and Human Services (SCDHHS) gives notice of the following action to extend postpartum Medicaid coverage from 60 days to 12 months for certain eligibility groups under the State Plan under Title XIX of the Social Security Act Medical Assistance Program (Medicaid).

Effective on or after April 22, 2022, SCDHHS will amend the South Carolina Title XIX State Plan to extend postpartum Medicaid coverage for designated eligibility groups from 60 days to 12 months as outlined in Center for Medicaid and CHIP Services SHO# 21-007 *RE: Improving Maternal Health and Extending Postpartum Coverage in Medicaid and the Children's Health Insurance Program (CHIP)*, dated Dec. 7, 2021, ([sho21007.pdf \(medicaid.gov\)](#)). SHO# 21-007 was provided subsequent to passage of the American Rescue Plan Act of 2021 (Sections 9812 and 9822), which provided the states *an option* to extend postpartum coverage to pregnant women enrolled in Medicaid and CHIP to 12 months regardless of any changes in circumstances. Extended postpartum coverage shall offer an opportunity to provide care that can reduce pregnancy-related deaths and severe maternal morbidity and improve continuity of care for chronic conditions such as diabetes, hypertension, cardiac conditions, substance use disorder, and depression. According to the South Carolina Maternal Morbidity and Mortality Review Committee, more than 80% of pregnancy-related deaths occur in the 12-month postpartum period, and 14% occur after six weeks postpartum. Those included in extended coverage will maintain full Medicaid coverage for the 12-month postpartum period. Per CMS guidance, the state option is currently limited to a 5-year period beginning on or after April 1, 2022, and ending no later than March 30, 2027.

Based on the actions above, SCDHHS anticipates a budget impact of approximately \$3.2 million per year in total dollars to the SC Medicaid Fee for Service Program.

Copies of this notice are available at each South Carolina Healthy Connections Medicaid county office and at www.scdhhs.gov for public review. Additional information regarding these actions is available upon request at the address cited below.

Any written comments submitted may be reviewed by the public at the SCDHHS, Office of Health Services, 1801 Main Street, Columbia, South Carolina, Monday through Friday between the hours of 9 a.m. and 5 p.m.

Robert M. Kerr
Director

Notice of Non-Discrimination

The South Carolina Department of Health and Human Services (SCDHHS) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. SCDHHS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

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If you believe SCDHHS has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with the Civil Rights Official using the contact information provided above. You can file a grievance in person, by mail, or via email. If you need help filing a grievance, we are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 or by phone at: 800-368- 1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html> .