

Fiscal Estimate - 2025 Session

☒ Original ☐ Updated ☐ Corrected ☐ Supplemental

LRB Number 25-1066/1	Introduction Number AB-0097	
Description extension of eligibility under the Medical Assistance program for postpartum women		
Fiscal Effect		
State:		
<input type="checkbox"/> No State Fiscal Effect		
<input type="checkbox"/> Indeterminate		
<input type="checkbox"/> Increase Existing Appropriations	<input type="checkbox"/> Increase Existing Revenues	
<input type="checkbox"/> Decrease Existing Appropriations	<input type="checkbox"/> Decrease Existing Revenues	
<input type="checkbox"/> Create New Appropriations		
<input checked="" type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<input type="checkbox"/> Decrease Costs		
Local:		
<input type="checkbox"/> No Local Government Costs		
<input type="checkbox"/> Indeterminate		
1. <input type="checkbox"/> Increase Costs	3. <input type="checkbox"/> Increase Revenue	
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	
2. <input type="checkbox"/> Decrease Costs	4. <input type="checkbox"/> Decrease Revenue	
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	
5. Types of Local Government Units Affected		
<input type="checkbox"/> Towns	<input type="checkbox"/> Village <input type="checkbox"/> Cities	
<input type="checkbox"/> Counties	<input type="checkbox"/> Others	
<input type="checkbox"/> School Districts	<input type="checkbox"/> WTCS Districts	
Fund Sources Affected		
<input checked="" type="checkbox"/> GPR <input checked="" type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS 20.435 (4) (b) and (o)		
Affected Ch. 20 Appropriations		
Agency/Prepared By	Authorized Signature	Date
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Fiscal Estimate Narratives

DHS 3/27/2025

LRB Number	25-1066/1	Introduction Number	AB-0097	Estimate Type	Original
Description extension of eligibility under the Medical Assistance program for postpartum women					

Assumptions Used in Arriving at Fiscal Estimate

Under current law, pregnant individuals in Wisconsin are eligible for Medicaid at a higher income threshold than non-pregnant adults. Pregnant individuals with incomes up to 306 percent of the federal poverty level are eligible for Wisconsin Medicaid. As required by federal code and state statute, this eligibility extends to the last day of the month that contains the 60th day following the end of the pregnancy. After this post-pregnancy period, Medicaid members can retain eligibility as a parent or childless adult if their income is below 100 percent of the federal poverty level.

Under 2021 Wisconsin Act 58, the Department of Health Services was directed to seek federal approval for a state plan amendment or waiver to extend eligibility to the last day of the month that contains the 90th day following the end of the pregnancy. Eligibility would only be extended if federal approval is granted. On June 3, 2022, the Department received approval from the Legislature's Joint Committee on Finance to submit the waiver request, and it was submitted to CMS the same day. In January 2024, the Department received notification from CMS that the waiver would not be approved.

This bill requires the Department of Health Services to seek approval from the federal Department of Health and Human Services to extend until the last day of the month in which the 365th day after the last day of the pregnancy falls Medical Assistance benefits to women who are eligible for those benefits when pregnant. Eligibility would only be extended if federal approval is granted. The American Rescue Plan Act of 2021 changed federal Medicaid law to allow states the option to extend post-pregnancy coverage to 365 days through a state plan amendment.

This estimate compares the bill's provisions to the current-law Medicaid program. Based on expected ongoing annualized enrollment and costs for FY27, it is projected that extending post-pregnancy coverage to the last day of the month that contains the 365th day following the end of a pregnancy would increase average monthly Medicaid enrollment by 5,020 members. Members qualifying for the extended eligibility are projected to incur costs of approximately \$307 per month, on average. The total annualized cost of this increased enrollment is projected to be \$18.5 million all funds (\$7.3 million GPR) compared to the current 60-day eligibility period.

Long-Range Fiscal Implications