



**DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID & MEDICAL ASSISTANCE
POLICY & PLANNING UNIT**

ADMINISTRATIVE NOTICE A-18-2025

TO: DMMA and DSS Staff

DATE: December 17, 2025

PROGRAM(S): Medicaid and DHCP

SUBJECT: The Pregnancy and 12-Month Extended Postpartum Period for Medicaid and Delaware Healthy Children Program (DHCP)

BACKGROUND

This notice will provide additional information about the 12-month extended postpartum coverage period for Delaware Medicaid and Delaware Healthy Children Program (DHCP). [The American Rescue Plan Act of 2021 \(ARP\) \(Pub. L. 117-2\), section 9812](#) allowed states to extend postpartum coverage to 12 months for individuals enrolled in Medicaid. [Section 9822 of the ARP](#) extended this option to the Children's Health Insurance Program (CHIP). [Section 5113 of the Consolidated Appropriations Act, 2023 \(CAA, 2023\) \(Pub. L. 117-328\)](#) made the option permanent for both Medicaid and CHIP.

No changes have occurred since the implementation of the policies above. This notice serves as additional support for updating pregnancy and postpartum cases.

Pregnant individuals in any Medicaid category may be eligible to receive 12 months of postpartum coverage if they have received Medicaid or DHCP (or CHIP) benefits at any time during their pregnancy, regardless of the reason the pregnancy ends.

DISCUSSION

As of July 1, 2022, Delaware Medicaid extended the postpartum coverage to 12 months for eligible individuals who are enrolled in Delaware Medicaid and Delaware Healthy Children Program (DHCP).

The 12-month postpartum period is the time immediately following the end of the pregnancy.

- The 12-month postpartum period begins on the last day of an eligible individual's pregnancy and extends through the last day of the 12th month following the end of the pregnancy. However, in Assist Worker Web (AWW), if the pregnancy ends on the 1st day of the month, the postpartum period will also begin on the 1st day of that *same* month. If the pregnancy ends on the 2nd through the 31st day of the month, the postpartum period will begin on the 1st day of the *following* month.
- Eligible individuals are entitled to the extended postpartum coverage regardless of the reason the pregnancy ends (e.g., live birth, stillbirth, miscarriage, termination, or custody of the child is given to another party).
- Undocumented non-citizens are **not eligible** for the 12-month extended postpartum period.

Factors that could affect eligibility during the extended postpartum period

Continuous Eligibility (CE) during pregnancy and the 12-month postpartum period:

Continuous eligibility protects individuals from having their benefits reduced or their coverage terminated during their pregnancy and postpartum periods. Eligible individuals **must remain open** and enrolled in Medicaid or DHCP until the end of the 12-month postpartum period, regardless of changes in circumstances, with certain exceptions listed below:

- The individual requests to close their case;
- The individual is no longer a Delaware resident;
- Medicaid was opened in error due to an agency error or intentional program violation at the most recent determination or redetermination; or
- The individual dies.

Turning Age 19 during pregnancy and the 12-month extended postpartum period:

Pregnant and postpartum individuals turning 19 during their CE period must also remain open in their current benefit until the end of their CE period. In AWW, the case must be run and confirmed to ensure that pregnant individuals turning 19 in DHCP cascade into Pregnant Women's Medicaid to avoid interruption in their benefits.

Annual renewals during pregnancy and the 12-month extended postpartum period:

According to CMS [SHO #21-007](#), individuals do not need to complete their annual renewal if it is scheduled during their pregnancy or within their 12-month postpartum period. However, a full redetermination must be completed at the end of the individual's 12-month extended postpartum period.

Retroactive Eligibility in the 12-month extended postpartum period:

For Retroactive Eligibility for the 12-month extended postpartum period to be determined at application, the individual must have been pregnant within 90 days before the application date. Individuals who apply for Medicaid benefits after their pregnancy ends may be determined

eligible for the 12-month extended postpartum period *if* they were pregnant and were determined eligible for any of the months during the retroactive period. A person cannot be determined eligible for the postpartum period alone. See [DSSM Policy 14920](#) Retroactive Coverage.

Citizenship and pregnant and postpartum individuals:

Individuals with unverified citizenship or an ineligible immigration status cannot be determined eligible for 12-month postpartum coverage. This includes individuals with unverified immigration statuses following a Reasonable Opportunity Period (ROP). Pregnant Undocumented non-citizens may be eligible for Emergency Services and Labor and Delivery Services but are *not* eligible for postpartum coverage. See [DSSM Policy 15200.6](#) Postpartum Period.

ASSIST Worker Web (AWW) and Continuous Eligibility for Pregnant and Postpartum Individuals:

The information that is entered on the Pregnancy Details Screen determines whether individuals receive continuous eligibility during both their pregnancy and their extended 12-month post-partum period. Below are some important aspects to remember when completing the Pregnancy Details screen:

- The Pregnancy Due Date may be different from the Pregnancy End Date.
- The Pregnancy End Date must be entered for the 12-month postpartum period to calculate correctly.
- If the Pregnancy End Date is not updated accordingly, the 12-month postpartum period may incorrectly begin on the pregnancy due date instead of the date the pregnancy ended.

IMPORTANT NOTE:

During the pregnancy and the postpartum period, **the Pregnancy Detail Screen must *not* be end-dated or placed in history.** If the pregnancy screen is end-dated and/or placed in history, it will erroneously end the individual's pregnancy CE period and/or postpartum period.

Pregnancy Details

Document Imaging Verification

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Record History Number: **1**
Record Updated Date:

Name *
Begin Date *
End Date
History Reason

Details

Fetus Number *
Pregnancy Verification *
Pregnancy Due Date *
Verified By *
Pregnancy End Date
Name of Father

Have you been pregnant within the last 12 months?

Policies in Practice:

Example 1: The Renewal of the MAGI Parent Caretaker

Lucy is a mom whose Medicaid was originally due for renewal in December 2024. The renewal date changed when Lucy informed Medicaid that she was pregnant in August 2024. She became eligible for Pregnancy Medicaid and has continuous eligibility throughout her pregnancy and postpartum period. Lucy gave birth on May 15, 2025. Even though she gave birth on the 15th of the month, her pregnancy coverage continues through the end of that month until May 31, 2025. Her postpartum coverage will start in AWW on June 1, 2025.

Because of her pregnancy CE and the extended postpartum period...

- Lucy did not have to complete the annual renewal in December 2024, and she will not have to complete it in December 2025.
- Lucy's Eligibility Review Date will change automatically to May 31, 2026, once her **pregnancy end date** is added to her pregnancy details screen.
- Lucy will be required to complete a renewal when her 12-month postpartum period ends on June 30, 2026.

Example 2: The Renewal of the MAGI Parent Caretaker

Lisa began receiving Medicaid in August 2024. She informs Medicaid that she is pregnant in December 2024. After her case was run and confirmed in AWW, she cascaded to Pregnancy Medicaid and has continuous eligibility throughout her pregnancy and her 12-month postpartum period. Her pregnancy ended on January 1, 2025.

Because of her pregnancy CE and the extended postpartum period...

- Lisa's postpartum period began on January 1, 2025, because her pregnancy ended on the 1st day of the month.
- Lisa did not have to complete a renewal in August 2025, and her Eligibility Review Date will change automatically to December 31, 2025, once her **pregnancy end date** is added to her pregnancy details screen.
- Lisa will be required to complete a renewal when her 12-month postpartum period ends on January 31, 2026.

Example 3: DHCP

Sydney is 18 years old and open in DHCP. She was due to renew her benefits in October 2024 however, she notified the agency that she was pregnant in May 2024. Sydney turned 19 in September 2024, and she reported that her pregnancy ended on October 20, 2024.

Because of her pregnancy CE and the extended postpartum period...

- Sydney did not have to complete the annual renewal in October 2024.
- Sydney does not need to complete a renewal until October 2025 because her 12-month Postpartum Period began on November 1, 2024.
- To keep AWW from closing Sydney's benefits and erroneously ending her CE when **she turned 19, her case must be run and confirmed**, to cascade her from DHCP to MAGI Pregnant Women's Medicaid, and to maintain her continuous eligibility.

Example 4: Timely Retroactive Medicaid Request

Kim applied for Medicaid two months after terminating her pregnancy. She also requested retroactive coverage and was determined eligible.

Because of pregnancy CE and the extended postpartum period...

- Kim ***is*** eligible for both retroactive pregnancy Medicaid and the extended 12-month postpartum period. She was pregnant during the retroactive period and was determined eligible for each of the three months preceding her application date.
- To be eligible for continuous coverage through the 12-month extended postpartum period, the individual must have been *eligible for and enrolled in Medicaid or DHCP while pregnant*, including during a period of retroactive eligibility in Medicaid.

Example 5: Untimely Retroactive Medicaid Request

Morgan applied for Medicaid in April 2025, which was four months after giving birth on December 25, 2024. She asked for retroactive Medicaid.

Because of pregnancy CE and the extended postpartum period...

- Morgan ***is not*** entitled to the 12-month extended postpartum coverage because Morgan was not enrolled in Medicaid while she was pregnant.
- To be eligible for continuous coverage through the 12-month extended postpartum period, the individual must have been *eligible for and enrolled in Medicaid or DHCP while pregnant*, including during a period of retroactive eligibility in Medicaid.
- Since she was not pregnant at application or during the retroactive Medicaid period, a pregnancy screen **must not** be created.

Please Note:

Pregnant and postpartum persons are strongly encouraged to cooperate with Child Support Services, but are not required by the Medicaid Program to cooperate in establishing paternity or in obtaining medical support until the 12-month postpartum period ends. See DSSM 14630.

ACTIONS REQUIRED:

Staff **must** complete the Pregnancy Details Screen in ASSIST Worker Web (AWW) when they are made aware of an individual's pregnancy.

Staff **must** inform individuals that they may be eligible for the extended postpartum benefit regardless of the reason they are no longer pregnant (live birth, miscarriage, stillbirth, termination, or custody of the child is given to another party).

Staff **must** inform individuals that reporting the end of their pregnancy (regardless of the reason it ends) is crucial because that information generates their extended postpartum period correctly.

Staff **must** add the **pregnancy end date** on the Pregnancy Details Screen and add a case comment stating when and how the end date was received as soon as that information is received.

Staff **must not** **END DATE** or place the Pregnancy Details Screen **in History** during the pregnancy or postpartum period. Doing so will end the individual's CE for pregnancy and the 12-month extended postpartum period.

Staff **must not** update the Pregnancy Details Screen if the individual is not pregnant, not eligible for retroactive Medicaid during her pregnancy, or not eligible for postpartum coverage.

Staff should follow the DSSM policies found in these sections:

- 13405 Pregnant Women and Infants
- 14630 Cooperation in Establishing Paternity and Obtaining Support
- 14800 Verifications of Factors of Eligibility
- 14820 Changes in Circumstances
- 14920 Retroactive Coverage
- 15200.1 Definitions
- 15200.6 Postpartum Period

DIRECT INQUIRIES TO

DHSS_DMMA_PPU@delaware.gov

12/17/2025 | 12:00 PM EST

Date

DocuSigned by:

Andrew Wilson

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Andrew Wilson, Director
Division of Medicaid & Medical Assistance