

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | IA2025MS00020 | IA-25-0019

Women who are pregnant or post-partum, with household income at or below a standard established by the state.

Package Header

Package ID	IA2025MS00020	SPA ID	IA-25-0019
Submission Type	Official	Initial Submission Date	3/20/2025
Approval Date	03/28/2025	Effective Date	4/1/2025
Superseded SPA ID	IA-25-0018		
User-Entered			

The state covers the mandatory pregnant women group in accordance with the following provisions:

A. Characteristics

- 1. Individuals qualifying under this eligibility group must be pregnant or post-partum, as defined in 42 CFR 435.4.
- 2. Pregnant women in the last trimester of their pregnancy without dependent children are eligible for full benefits under this group in accordance with section 1931 of the Act, if they meet the income standard for state plan Parents and Other Caretaker Relatives at 42 C.F.R. 435.110.

- ☒ Yes
- ☐ No

B. Financial Methodologies

MAGI-based methodologies are used in calculating household income. Please refer as necessary to MAGI-Based Methodologies, completed by the state.

C. Income Standard Used

The state uses the following income standard for this group:

FPL 215.00%

Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | IA2025MS00020 | IA-25-0019

Package Header

Package ID	IA2025MS00020	SPA ID	IA-25-0019
Submission Type	Official	Initial Submission Date	3/20/2025
Approval Date	03/28/2025	Effective Date	4/1/2025
Superseded SPA ID	IA-25-0018		
	User-Entered		

D. Benefits for Pregnant Women

Benefits for individuals in this eligibility group consist of the following:

- ☒ 1. All pregnant women eligible under this group receive full Medicaid coverage under this state plan.
- ☐ 2. Pregnant women whose income exceeds the income limit specified for full coverage of pregnant women receive only pregnancy-related services.

Pregnant Women

MEDICAID | Medicaid State Plan | Eligibility | IA2025MS00020 | IA-25-0019

Package Header

Package ID	IA2025MS00020	SPA ID	IA-25-0019
Submission Type	Official	Initial Submission Date	3/20/2025
Approval Date	03/28/2025	Effective Date	4/1/2025
Superseded SPA ID	IA-25-0018		
User-Entered			

E. Basis for Pregnant Women Income Standard

1. Minimum income standard

The state had an income standard higher than 133% FPL established as of December 19, 1989 for determining eligibility for pregnant women, or as of July 1, 1989, had authorizing legislation to do so.

☒ Yes

☐ No

a. The amount of the minimum income standard (no higher than 185% FPL) is:

FPL 185.00%

2. Maximum income standard

☐ a. The state certifies that it has submitted and received approval for its converted income standard(s) for pregnant women to MAGI-equivalent standards and the determination of the maximum income standard to be used for pregnant women under this eligibility group.

b. The state's maximum income standard for this eligibility group is:

- ☒ i. The state's highest effective income level for coverage of pregnant women under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified pregnant women), 1902(a)(10)(A)(i)(IV) (mandatory poverty level-related pregnant women), 1902(a)(10)(A)(ii)(IX) (optional poverty level-related pregnant women), 1902(a)(10)(A)(ii)(I) (pregnant women who meet AFDC financial eligibility criteria) and 1902(a)(10)(A)(ii)(IV) (institutionalized pregnant women) in effect under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL.
- ☐ ii. The state's highest effective income level for coverage of pregnant women under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified pregnant women), 1902(a)(10)(A)(i)(IV) (mandatory poverty level-related pregnant women), 1902(a)(10)(A)(ii)(IX) (optional poverty level-related pregnant women), 1902(a)(10)(A)(ii)(I) (pregnant women who meet AFDC financial eligibility criteria) and 1902(a)(10)(A)(ii)(IV) (institutionalized pregnant women) in effect under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL.
- ☐ iii. The state's effective income level for any population of pregnant women under a Medicaid 1115 demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL.
- ☐ iv. The state's effective income level for any population of pregnant women under a Medicaid 1115 demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL.
- ☐ v. 185% FPL

c. The amount of the maximum income standard is:

FPL 375.00%

G. Additional Information (optional)