

Medicaid Family Planning Program

Presented to the Coordination of Care Committee and
Consumer Access Subcommittee

May 22, 2013


Why we need Medicaid Family Planning

Each year in the US publicly funded family planning services help women prevent nearly 2,000,000 unintended pregnancies, including almost 400,000 pregnancies among teenagers. Preventing these pregnancies results in 860,000 fewer unintended births, 810,000 fewer abortions and 270,000 fewer miscarriages. Avoiding the significant costs associated with these unintended births saves taxpayers close to \$4 for every \$1 spent on family planning.

The Guttmacher Institute



Family Planning Limited Benefit Program

- ▶ General Assembly passed bill directing DSS to apply to Centers for Medicaid and Medicare, (CMS), for a Family Planning Waiver.
 - ▶ Department of Social Services, (DSS), began offering coverage in March of 2012.
 - As part of a State Plan Amendment.
 - ▶ Intended for the prevention of pregnancy and the spacing of children.
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Family Planning Coverage Program

► Eligibility

- US citizen or registered alien, living in the US for five years.
- Connecticut resident.
- Uninsured or high deductible plan.
- Income is at or below 250% of the Federal Poverty Level.
 - Family of one - \$27,980 year.
- Women and men of reproductive age.

Family Planning Coverage Program

▶ Covered Services

- Family planning services and supplies
 - All FDA approved contraceptive methods, including IUDs and hormonal implants.
- Other services provided as part of family planning:
 - STD testing and treatment
 - Pap testing, colposcopy and cryosurgery—as part of family planning visit.

Point of service sign up

▶ Certified Entity

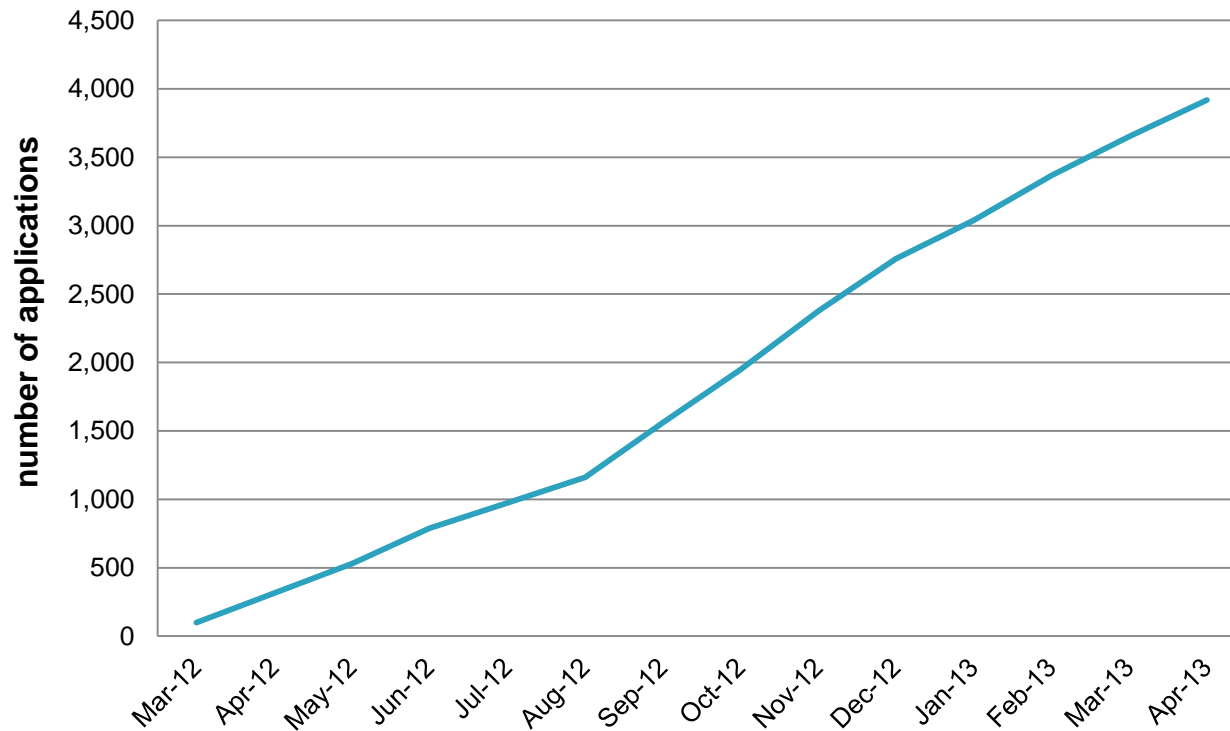
- Allows for PPSNE to grant **P**resumptive **E**ligibility (PE)
- PE voucher active for 10 days
- Ongoing coverage determined by DSS – yearly renewal
- Initial visit covered even if patient is denied ongoing coverage status

Enrollment

- ▶ PPSNE has submitted nearly 4,000 applications to date
 - Started off slowly and began build over the summer.
 - Our goal is to sign up—either new or renewal—125 individuals a week.

Medicaid Family Planning growth

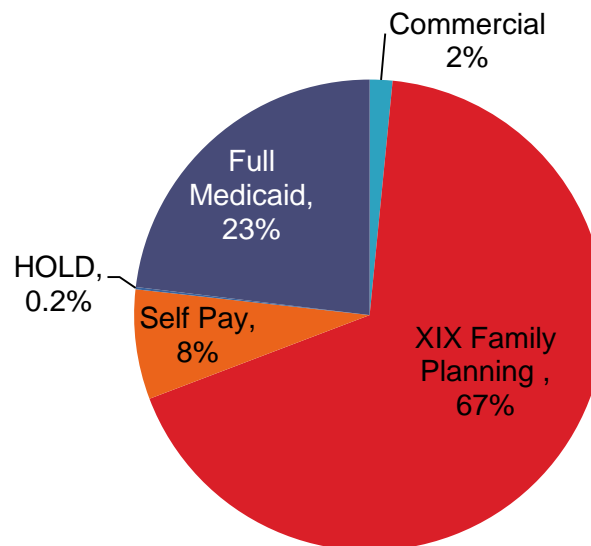
**PPSNE Medicaid Family Planning cumulative sign ups
(estimated)**



Where FP program patients eventually land

- ▶ Two thirds of patients who sign up for the Medicaid FPL end up getting a full year of FPL coverage.
- ▶ Nearly one-fourth are awarded full Medicaid benefits, such as LIA or Husky plans.
- ▶ A small percent eventually obtain commercial insurance.

Where FPL patients eventually land



People who signed up for FP program between April 2012 and March 2013 at PPSNE health centers.

Impact

- ▶ Program will significantly reduce public \$\$ spent on unintended pregnancies.
 - Use of Long Acting Reversible Contraception (LARCs) among PPSNE patients is up 35% in the last year.
 - This includes IUDs and hormonal implants.
 - Much of the increase is driven by patients who signed up for Medicaid Family Planning program.