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# Implementing State-Level Policy and Operational Processes That Enhance Access to Medicaid Family Planning Program Services

## Executive Summary

Medicaid provides a critical source of health care coverage for low-income individuals in the United States, including 13 million women of reproductive age.<sup>1</sup> Medicaid is also the primary source of family planning coverage, accounting for 75% of public expenditures for family planning services in the United States.<sup>2</sup> State Medicaid programs have a long-standing requirement to provide family planning services in the benefits package that is provided to people enrolled in full-scope coverage.<sup>3</sup> In order to expand the number of people who can access family planning services, states have also taken the option to establish Medicaid family planning programs that cover a suite of family planning services for individuals not otherwise eligible for full-scope Medicaid.

Medicaid family planning programs play a key role in enabling individuals access to family planning services, and they are especially needed in states that have not yet expanded Medicaid to their adult population. To date, 30 states across the country have established Medicaid family planning programs.

States have considerable flexibility in designing their Medicaid family planning programs. As a result, access to and utilization of Medicaid family planning programs are largely impacted by the policies and operational processes a state Medicaid program chooses to implement. The decisions a state makes related to its application process, consumer outreach, confidentiality policies, scope of covered benefits and provider network are all critical programmatic features that determine how easy or difficult it is for an individual to enroll in and receive services through Medicaid family planning programs.

To promote access and utilization, this issue brief provides an array of best practice strategies in place across the nation to serve as an actionable road map for states that might be considering adopting such a program as well as states with existing programs looking to bolster participation and utilization rates. The strategies are derived from a review of national literature and policies and practices across the country and informed by an analysis of participation rates and utilization of services in 22 of the 30 states with programs in place.

As the source of critical health coverage for low-income individuals, state Medicaid programs have an extraordinary opportunity and responsibility to ensure enrollment in and utilization of Medicaid family planning programs. The federal opportunities and flexibilities are available, but optimal implementation at the state and local levels requires ongoing attention, engagement and collaboration among state policymakers and program administrators, individuals of reproductive age, providers, and community-based organizations. This can be a time of great opportunity to improve reproductive health care, as an increasing number of states and collaborating partners are focusing their attention on the continuum of reproductive health from family planning to birth and postpartum. The best practice strategies described in this issue brief can help stakeholders identify gaps in current practices, develop effective action plans and create sustainable systems for improving access to critical family planning program services.

## Checklist of Best Practice Strategies to Strengthen Enrollment and Increase Utilization in Medicaid Family Planning Programs

### 1. Eligibility and Enrollment

- ✓ **Offer Separate Medicaid Family Planning Application Pathway:** Provide individuals with the option to apply for coverage through a standalone short Medicaid family planning program-only application, in addition to the mandatory single streamlined application pathway.
- ✓ **Establish Presumptive Eligibility to Ensure Access to Same-Day Services:** Establish presumptive eligibility for the Medicaid family planning program, enabling an individual to attest to their eligibility and receive services on the same day that their application is submitted, prior to a full eligibility determination.
- ✓ **Implement 12-Month Continuous Eligibility:** Implement 12-month continuous eligibility to allow individuals to stay continuously enrolled in the Medicaid family planning program without the need to report any changes in circumstances, such as changes in income or household size.
- ✓ **Raise the Medicaid Family Planning Income Eligibility Limit:** Align the Medicaid family planning program's eligibility levels with the state's eligibility levels for pregnant individuals, the highest level permissible by the Centers for Medicare & Medicaid Services (CMS).
- ✓ **Apply Flexible Household Composition Eligibility Rules:** Apply different income and household composition rules for Medicaid family planning programs than what is applied to other populations in order to increase enrollment and protect individuals who are seeking to apply confidentially.

### 2. Consumer Outreach and Education Support

- ✓ **Develop Effective Consumer-Facing Outreach Materials:** Develop materials to promote program awareness, such as brochures, flyers and fact sheets that describe the separate Medicaid family planning program and provide key information on eligibility requirements, covered services, providers and how to apply.
- ✓ **Maintain Consumer-Facing Family Planning Program Information on State Agency Web Page:** Maintain a consumer-facing web page dedicated to the Medicaid family planning program that informs individuals about the eligibility for the program, covered services and the appropriate application pathways.
- ✓ **Build Partnerships With Local Entities to Provide Training and Technical Assistance on the Medicaid Family Planning Program:** Build partnerships with local entities (e.g., local health departments, providers, community-based organizations and health clinics), and offer training on the Medicaid family planning program to enable these entities to relay information about the program to potentially eligible individuals.
- ✓ **Issue a Family Planning Program-Specific Medicaid Identification Card:** Issue a program-specific identification card to help enrollees distinguish their coverage from full-scope Medicaid and facilitate understanding that the program covers only a limited set of family planning services.

### 3. Covered Services

- ✓ **Guarantee Coverage of All FDA-Identified Contraceptive Methods:** Cover all FDA-identified contraceptive methods for enrollees, including both prescription and nonprescription methods, as recommended by CMS.
- ✓ **Provide Coverage for Services Classified as Family Planning-Related Services:** Strengthen the service array available to enrollees by including family planning-related services in the Medicaid family planning program.
- ✓ **Enable Continued Access to Contraceptives Through 12-Month Dispensing Limits:** Enact policies that allow for a 12-month dispensing limit for contraceptives, as opposed to shorter limits such as one or three months.
- ✓ **Establish Pharmacist Ordering Policies That Enable Access to Over-the-Counter Hormonal Contraceptives:** Implement policies that expand pharmacists' scope of practice to allow them to prescribe over-the-counter contraceptives.

### 4. Confidentiality

- ✓ **Emphasize in Consumer-Facing Materials That Medicaid Family Planning Program Services Are Confidential:** Clearly indicate in member-facing materials that services provided through the Medicaid family planning program are confidential and that enrollees have a right to privacy regarding the services they access.
- ✓ **Exclude Family Planning Services From Explanation of Benefits (EOBs) to Protect Confidentiality:** Refrain from sending EOBs to enrollees in the Medicaid family planning program to protect patient privacy and minimize written documentation on the services enrollees access.
- ✓ **Implement Application and Consumer Communication Processes That Maintain Confidentiality and Enhance Access to Services for Adolescents:** Provide consumer communication explaining that adolescents can utilize services confidentially, without notifying parents or guardians, and that all notices will be mailed to the individual's requested address.

### 5. Provider Access

- ✓ **Strengthen Monitoring of Access to Family Planning Providers:** Take proactive steps to monitor network adequacy for its family planning providers, including augmenting existing Access and Monitoring Review Plans to include family planning providers.
- ✓ **Develop and Regularly Update a Provider Locator or Directory:** Develop resources that assist enrollees in identifying local family planning providers so that they can access family planning services and/or receive assistance applying for the program.
- ✓ **Allow Providers to Deliver Family Planning Services via Telehealth:** Enact permanent policies that allow individuals to access clinically appropriate family planning services via telehealth.

<sup>1</sup> Guttmacher Institute, *Why Protecting Medicaid Means Protecting Sexual and Reproductive Health* (March 9, 2017), available at <https://www.guttmacher.org/gpr/2017/03/why-protecting-medicaid-means-protecting-sexual-and-reproductive-health>.

<sup>2</sup> Kinsey Hasstedt, Adam Sonfield & Rachel Benson Gold, *Guttmacher Institute*, *Public Funding for Family Planning and Abortion Services, FY 1980–2015* (April 2017), available at [https://www.guttmacher.org/sites/default/files/report\\_pdf/public-funding-family-planning-abortion-services-fy-1980-2015.pdf](https://www.guttmacher.org/sites/default/files/report_pdf/public-funding-family-planning-abortion-services-fy-1980-2015.pdf).

<sup>3</sup> Centers for Medicare & Medicaid Services, *Medicaid Covers Family Planning Services* (2019), available at <https://www.medicaid.gov/about-us/program-history/medicaid-50th-anniversary/entry/47702>.

## About Arnold Ventures

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