

Quinn, Kimberly

From: Goodhue, Laura <Laura.Goodhue@ppsenfl.org>
Sent: Friday, May 26, 2017 12:42 PM
To: FLMedicaidWaivers
Subject: Comments FL Family Planning Waiver Renewal
Attachments: FAPPA Comments-FLFPWaiverRenewal - State Level 5.30.17.pdf

To Whom It May Concern:

Please see the attached letter Re: Family Planning Waiver Extension Request from the Florida Alliance of Planned Parenthood Affiliates.

Sincerely,

Laura Goodhue



Florida Alliance of Planned Parenthood Affiliates, Inc.

Laura Goodhue

Executive Director

Florida Alliance of Planned Parenthood Affiliates

561-472-9940

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May 30, 2017

VIA ELECTRONIC TRANSMISSION

Secretary Justin Senior
Agency for Health Care Administration
2727 Mahan Drive, MS #20
Tallahassee, Florida 32308

Re: Section 1115 Family Planning Research and Demonstration Waiver Renewal

Dear Secretary Senior:

The Florida Alliance of Planned Parenthood Affiliates (FAPPA) provides these comments in response to Florida's proposal to renew its Family Planning Research and Demonstration Waiver (Waiver). We appreciate the opportunity to provide the Agency for Health Care Administration (AHCA) feedback on this application.

With nearly 78% of Planned Parenthood health centers in medically underserved areas, Planned Parenthood is a trusted provider for communities in need. Each year nearly 70,000 Floridians come to a Planned Parenthood health center for critical care – contraception, cancer screenings, STI testing and treatment, HIV tests and abortion care. Planned Parenthood continues to be invested in assuring that our communities have access to reproductive health care services.

Medicaid is a vital part of our nation's health care system and plays a major role in ensuring access to family planning and other primary health care services for women and men. Nearly 4.4 million Floridians,¹ 57 percent of which are female,² rely on Medicaid coverage for essential primary and preventive care, including lifesaving cancer screenings and birth control. Medicaid is critical to improving their health and well-being.

We support the continuation of a family planning program and urge AHCA to expand eligibility guidelines so that more individuals can benefit from critical family planning care. While we appreciate AHCA's current efforts to maintain a family planning program, it is clear that the program is not sufficient to meet Florida's needs. In 2014, more than 1.2 million women in Florida were in need of publicly-funded family planning care, but only 206,130 women actually

¹ Kaiser Family Foundation. Mar. 2017. "Total Monthly Medicaid and CHIP Enrollment." <http://kff.org/health-reform/state-indicator/total-monthly-medicaid-and-chip-enrollment/?currentTimeframe=0&sortModel=%7B%22collId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

² Kaiser Family Foundation. "Medicaid Enrollment by Gender." <http://kff.org/medicaid/state-indicator/medicaid-enrollment-by-gender/?currentTimeframe=0&sortModel=%7B%22collId%22:%22Location%22,%22sort%22:%22asc%22%7D> (reflects the latest available data of fiscal year 2011).

received care from publicly-supported health centers.³ Notably, even with meeting less than 20 percent of the public's needs, government-supported contraceptive care has saved nearly \$260.3 million in public funds; has helped avoid nearly 50,000 unintended pregnancies, 18,000 abortions, and more than 6,100 preterm/low birth weight births; and prevented nearly 3,500 sexually transmitted infections.⁴ These figures would be significantly higher if the Waiver covered more individuals who need contraceptive care.

To that end, we recommend that AHCA expand Waiver eligibility, as well as implement presumptive eligibility, to all individuals of reproductive age who have incomes up to 196 percent FPL (the highest income level for pregnant women). Expanding eligibility for the Waiver is especially important in light of the fact that the state has chosen not to expand its Medicaid program. With millions of individuals still uninsured and underinsured without Medicaid expansion, providing coverage under the Waiver would mean that at least some individuals could gain access to critical family planning services. Family planning is critical for women and is directly linked to improving women's health and the health of their children. Women who plan their pregnancies are more likely to access prenatal care, which in turn, decreases the risk of developing pregnancy complications and improves maternal and child health outcomes.⁵ Moreover, expanding access to family planning services contributes to women and men completing their educations, furthering their careers, and earning greater wages.⁶

At a minimum, we urge AHCA to remove the new eligibility guideline proposed in the Waiver that will limit coverage to women who are not eligible for other health insurance coverage that provides family planning services. This new proposal will cut off safe, confidential access to essential health care for young people and women who live in abusive households and are enrolled on their abuser's health insurance coverage.

Young people are particularly likely to delay or forgo accessing critical care, such as family planning services and STI testing and treatment, often because they are worried their parents will find out.⁷ Failure to receive such care, however, has serious implications, including unintended pregnancy, delayed access to prenatal care, and complications from untreated STIs. Yet, under the Affordable Care Act (ACA), an increasing number of young adults are covered through a parent's plan. In fact, 2.3 million young adults up to age 26 gained coverage through a parent's plan since the ACA went into effect,⁸ and approximately 36 percent of women between

³ Guttmacher Institute. Sept. 2016. "State Facts on Publicly Funded Family Planning Services: Florida." <http://kff.org/medicaid/state-indicator/medicaid-enrollment-by-gender/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

⁴ *Id.*

⁵ Guttmacher Institute. Jun. 2004. "Low Birth Weight is Linked to Timing of Prenatal Care and Other Maternal Factors." Vol. 30, No. 3 <https://www.guttmacher.org/pubs/journals/3010104.html>.

⁶ Sonfield, A., Hasstedt K., Kavanaugh, M., and Anderson, R. March 2013. "The Social and Economic Benefits of Women's Ability to Determine Whether and When to Have Children." Guttmacher Institute; Bailey, J, Hershbein, B, and Miller A. 2012. "The Opt-in Revolution? Contraception and the Gender Wage Gap in Wages." *American Economic Journal: Applied Economics*, 4(3): 225-254.

⁷ Abigail English et. al. (July 2012). "Confidentiality for Individuals Insured as Dependents: A Review of State Laws and Policies." <https://www.guttmacher.org/report/confidentiality-individuals-insured-dependents-review-state-laws-and-policies>.

⁸ ASPE. Dec. 2016. "Compilation of State Data on the Affordable Care Act." <https://aspe.hhs.gov/compilation-state-data-affordable-care-act>.

the ages of 19 and 25 are covered as dependents under a parent's or spouse's plan.⁹ Family planning policies must reflect the new landscape of health care coverage and provide for adequate confidentiality protections, particularly for sensitive or stigmatized services like family planning care.

Survivors of interpersonal and domestic violence, abuse, or sexual assault are also acutely affected by lack of confidentiality protections. An individual in an abusive relationship may forgo health care altogether if she or he cannot be assured privacy and confidentiality. Fear for personal safety may override a person's desire for needed health care. Notably, though, access to health care providers may provide that same individual an opportunity to openly discuss their relationship, be connected to social supports, and help them leave their abuser – as well as get the assistance they need to take care of their physical and mental wellbeing.

The Waiver's proposed eligibility standards run contrary to AHCA's intent to ensure its family planning program provides timely access to birth control, STI services, well-woman exams, and other essential preventive and primary care to reduce the unintended pregnancy rate, increase healthy birth spacing, and improve access to family planning services. To meaningfully meet these important goals, we urge AHCA to broaden eligibility so that more individuals who need care can access it quickly and without barrier.

We look forward to working with AHCA in our shared goal to improve access to quality health care, and we thank you for the opportunity to provide these comments. If you have any questions, please don't hesitate to contact me at Laura.Goodhue@ppsenfl.org.

Sincerely,

Laura Goodhue
Vice President of Public Policy
Florida Alliance of Planned Parenthood Affiliates

⁹ Kaiser Family Foundation. Oct. 2016. "Women's Health Insurance Coverage." <http://kff.org/womens-health-policy/fact-sheet/womens-health-insurance-coverage-fact-sheet/>.