



MARYLAND Department of Health

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

November 14, 2018

The Honorable Thomas V. Mike Miller, Jr.
President of the Senate
H-107 State House
100 State Circle
Annapolis, MD 21401-1925

The Honorable Michael E. Busch
Speaker of the House of Delegates
H-101 State House
100 State Circle
Annapolis, MD 21401-1925

Re: SB 774/HB 994 — Maryland Medical Assistance Program – Family Planning Services (Chapters 465 and 464 of the Acts of 2018) – Workgroup Report on Ensuring Family Planning Participants Have Access to Contraceptives

Dear President Miller and Speaker Busch:

The Maryland Department of Health respectfully submits this workgroup report on ensuring that Family Planning (FP) Program participants have access to contraceptives, pursuant to the requirements of SB 774/HB 994 — *Maryland Medical Assistance Program – Family Planning Services* (Chapters 465 and 464 of the Acts of 2018). The bill requires the Department to make certain changes to its FP Program; to integrate the FP Program into Maryland Health Connection (MHC) and develop a presumptive eligibility process no later than October 1, 2020 in collaboration with stakeholders; and expand coverage through Medical Assistance and the Maryland Children's Health Insurance Program to include a single dispensing of a supply of contraceptives for a 12-month period.

Thank you for your consideration of this information. If you have questions or need more information on the subjects included in this report, please contact Webster Ye, Deputy Chief of Staff at (410) 767-6480 or webster.ye@maryland.gov.

Sincerely,

Robert R. Neall
Secretary

Executive Summary

The Maryland Department of Health (the Department) respectfully submits this report pursuant to the requirements of SB 774/HB 994 — *Maryland Medical Assistance Program - Family Planning Services* (Chapters 465 and 464 of the Acts of 2018). The bill requires the Department to make certain changes to its Family Planning (FP) Program, to integrate the FP Program into Maryland Health Connection (MHC) and develop a presumptive eligibility process no later than October 1, 2020 in collaboration with stakeholders and expand coverage through Medical Assistance and the Maryland Children’s Health Insurance Program to include a single dispensing of a supply of contraceptives for a 12-month period.

SB 774/HB 994 requires the Department to expand its Family Planning Program to serve individuals of any age and gender up to 250% of the federal poverty level under a State Plan Amendment (SPA). The Department currently operates its FP Program under its § 1115 waiver authority. Services were previously limited to women up to the age of 51 at or below 200% FPL. The Department submitted a § 1115 amendment to transition authority for the program to a SPA on July 2, 2018 and submitted a matching SPA with an effective date of July 1, 2018 to the Centers for Medicare and Medicaid Services (CMS). Stakeholders were engaged in this process and public hearings held were on May 24 and June 6, 2018. At the time of this report, the Department is engaged in final negotiations with CMS regarding the proposed changes and anticipates approval will be forthcoming.

Additionally, the Department is currently developing system requirements to integrate the FP Program in the MHC system by September 2019. Work has also begun to develop requirements for a presumptive eligibility process. Interested stakeholder groups will be convened to advise the Department on development of a presumptive eligibility process, using the FP Program to encourage individuals to enroll in full health coverage through Medicaid or a Qualified Health Plan and make recommendations to ensure all FP Program participants have access to the full range of appropriate contraceptive options.

Finally, the Department has implemented the requirement to cover a single dispensing of a supply of contraceptives for a 12-month period. A transmittal was sent to providers in May 2018 to alert them to this policy change effective July 1, 2018.¹

Introduction

Pursuant to SB 774/HB 994 — *Maryland Medical Assistance Program - Family Planning Services* (Chapters 465 and 464 of the Acts of 2018), the Department must implement the following changes:

- Expansion of FP Program eligibility and transition to SPA authority,
- Integration the FP Program into MHC by October 1, 2020, and creation of a presumptive eligibility program with stakeholder input,

¹ https://mmcp.health.maryland.gov/MCOupdates/Documents/pt_25-18.pdf.

- Expansion of coverage through Medical Assistance and MCHP for single dispensing of contraceptives.

This report serves as an update regarding each of these Family Planning initiatives and plans to engage stakeholders.

FP Program Background

The Department currently operates its FP Program under its § 1115 waiver authority. Services were previously limited to women up to the age of 51 at or below 200% FPL. Participants must be Maryland residents, and U.S. citizens or qualified aliens who meet all requirements for benefits.

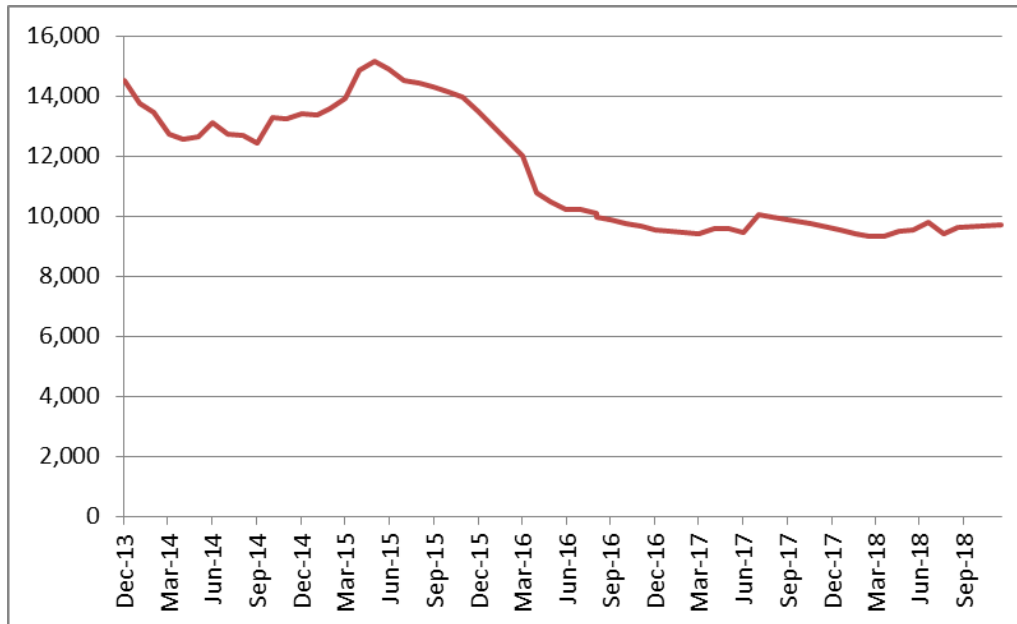
The FP Program is a partial benefit service; it is not a replacement for traditional health insurance. Covered family planning services include:

- Advice about birth control methods;
- Physical exams, including pelvic and breast exams;
- Screenings, such as pap smears and for sexually transmitted infections, when done as part of the family planning visit;
- Birth control pills and devices, such as IUDs;
- Emergency contraception; and
- Permanent sterilization (must be aged 21 or over).

This program does not cover prenatal services, abortion, and infertility services. There are no fees to enroll, no deductibles, no monthly premium, and no annual benefit limit. There are no copays for contraceptive prescriptions (birth control). Participants receive a FP Program Card, which allows them to choose any family planning provider that accepts Medicaid. Most local health departments, community health centers, federally qualified health centers (FQHC), and Planned Parenthood also accept the FP Program card.

The Department has seen enrollment in the FP Program decrease since Maryland expanded Medicaid in 2014. As of September 2018, there were 9,630 participants enrolled in the FP Program (see Figure 1).

Figure 1: Number of Participants enrolled in Family Planning Program, December 2013 through September 2018



Expansion of FP Program Eligibility and Transition to SPA Authority

HB 994/SB 774 requires the Department to expand its Family Planning (FP) Program to serve individuals of any age and gender up to 250% of the Federal Poverty Level. The Department must further seek authority to operate the FP Program under a SPA. The Department submitted an amendment to its §1115 waiver on July 2, 2018, and subsequently submitted a minor revision on August 14, 2018.² In tandem with the §1115 waiver amendment, the Department also submitted a SPA to shift the FP Program to the state plan effective date July 1, 2018. Stakeholders were actively engaged in this process and public hearings held were on May 24 and June 6, 2018.

Based on preliminary negotiations with CMS, the Department will need to continue to operate a small portion of its FP Program under its §1115 waiver until the FP Program can be integrated into MHC. Specifically, the §1115 waiver would continue to cover postpartum pregnant women. Pregnant women continue to be eligible for full Medicaid benefits for two months postpartum. Those who no longer qualify for benefits after the end of the postpartum period because their income is over scale are automatically enrolled in the FP Program for one year (12 months). After 12 months, these women must re-apply for benefits to continue their enrollment in the FP Program. Once the FP Program is integrated into MHC, the Department will transition all participants to be covered under the SPA.

² <https://mmcp.health.maryland.gov/Pages/1115-HealthChoice-Waiver-Renewal.aspx>.

At the time of this report, the Department is engaged in final negotiations with CMS regarding the proposed changes and anticipates approval will be forthcoming.

Integration into MHC and Presumptive Eligibility Program

HB 994/ SB 744 requires the Department to integrate the FP Program into MHC and establish a presumptive eligibility (PE) by October 1, 2020. The Department anticipates it will be able to integrate the FP Program into the MHC system by July 1, 2019. Systems requirements are currently being developed. Work has also begun to develop requirements for a presumptive eligibility process. Interested stakeholder groups will be engaged to advise the Department on development of a presumptive eligibility process, using the FP Program to encourage individuals to enroll in full health coverage through Medicaid or a Qualified Health Plan, and make recommendations to ensure all FP Program participants have access to the full range of appropriate contraceptive options. The Department is also analyzing other state's presumptive eligibility processes, including New York, Minnesota, and Connecticut.

Conclusion and Next Steps

The Department has made substantial headway implementing the requirements of HB 994/ SB 774. Approval of the Department's §1115 waiver and SPA are pending before CMS and final negotiations are underway. System planning has begun to integrate the FP Program into MHC and discussions regarding the presumptive eligibility process have been initiated. Stakeholder input will be sought regarding the presumptive eligibility process in December 2018. Additionally, coverage has been expanded to include single dispensing of contraceptives for a 12-month period, effective July 1, 2018.