

Protect Women's & Children's Health: Preserve Pre-Natal and Family Planning Coverage in Medicaid

By investing in family planning and pre-natal services, Maryland has made considerable progress in improving health outcomes for low-income women and promoting the well-being of children. **The proposed cuts to Medicaid now will result in significant costs to Medicaid and will have devastating impacts on the health outcomes of Maryland's women and children. The State pays for bad outcomes because the Maryland Medicaid program covers the costs of delivery of a newborn and ongoing care for the child.**

Medicaid Coverage for Pregnant Women (\$4.7 million in GF, 4.7 million in FF¹)

Starting in January 2016, pregnant women with incomes between 185% and 250% of federal poverty level (FPL) will lose Medicaid coverage. **While theoretically these women could be covered under an Exchange plan (qualified health plan), there are three key barriers that could result in over 1,000² pregnant women a year stranded without coverage:**

Barrier 1 – Open Enrollment Period Restrictions: Women can only enroll in an Exchange plan during open enrollment, except in cases of a “qualifying life event.” Surprisingly, pregnancy does not qualify under federal standards³. **This means that women who become pregnant after open enrollment have no options for coverage of critical services such as pre-natal care.**

Barrier 2 – Need to Plan Ahead to Enroll: In theory, women of child-bearing age could enroll in an Exchange plan during open enrollment *if they knew they were going to need coverage of pre-natal and other critical services.* **Unfortunately, 51%⁴ of pregnancies are unplanned, so women facing unplanned pregnancies after open enrollment period will be uninsured.**

Barrier 3 – Prohibitive Cost Sharing Requirements in an Exchange Plan: Low-income individuals can receive federal subsidies to off-set cost sharing requirements for Exchange plans. However, these subsidies are not always sufficient. **This economic reality will make Exchange plans out-of-reach for some low-income pregnant women, leaving them uninsured.**

Elimination of the Medicaid Family Planning Program (\$0.1 Million in GF and 0.7 Million in FF⁵)

The fiscal 2016 proposed budget eliminates the Medicaid Family Planning Program. The program offers a low-cost, critical benefits package to women under 200% of FPL. The cut means

- **About 7,500^{6,7} women a year will lose coverage, putting them at risk for unintended pregnancies.**
- Maryland does have a public health grant program for family planning, but it cannot absorb the cost of the 7,500 women losing Medicaid coverage. The grant program already lost \$1 million when these funds were transferred to start-up the Medicaid Family Planning Program.

¹ For coverage of pregnant women, Maryland Medicaid receives 50% in matching federal funds.

² The Maryland Medicaid Program estimates that about 1,400 pregnant women, with incomes in the 185% to 250% of FPL, are covered in a year.

³ Federal law permits states to set their own parameters, above and beyond the federal minimum, for special enrollment periods. A State could mandate that pregnancy was a qualifying event but it would have to do so for all income levels and not just low-income women.

⁴ Finer LB and Zolna MR, Shifts in intended and unintended pregnancies in the United States, 2001–2008, *American Journal of Public Health*, 2014, 104(S1): S44-S48.

⁵ For coverage of the Family Planning Program, Maryland Medicaid receives a 90% match in federal funds.

⁶ The Maryland Medicaid Program estimates that about 40% of the 14,000 women enrolled receive regular services.

⁷ Women in the Medicaid Family Planning Program could theoretically enroll in an Exchange plan, but they do face the cost-sharing barriers. As a result, some women will likely forgo enrollment and be left without coverage of family planning services.