

STATE OF IOWA FAMILY PLANNING PROGRESS REPORT

CALENDAR YEAR 2019

February 2021

Background

Family planning services are an important asset in the larger picture of reproductive health and health care. These services support women and men to achieve desired birth spacing, family size, and influence improved health outcomes for infants, children, women, and families (*Office of Disease Prevention and Health Promotion, Healthy People 2020*). In Iowa, these services are administered by two state agencies through three programs: the state Family Planning Program (FPP), Medicaid family planning services and the Iowa Department of Public Health’s (IDPH) Title X Family Planning Program (Title X).

Eligibility and Services

This side-by-side comparison of state-administered family planning programs reveals the similarities and differences resulting in broader coverage and increased reach of the services provided.

Topics	State Family Planning Program (SFPP) <i>State-Funded DHS</i>	Family Planning Services <i>Medicaid</i>	Title X Family Planning Program <i>Federally Funded IDPH and FPCI</i>
Eligibility Criteria	<ul style="list-style-type: none"> ▶ Serving men and women ▶ 12 to 54 years of age ▶ Iowa residents ▶ Proof of Identity ▶ Proof of Social Security Number ▶ U.S. citizens or qualified immigrants ▶ Income – Up to 300% Federal Poverty Level (FPL); proof required ▶ Apply through SFP Clinics or local DHS office ▶ Capable of fathering or bearing children ▶ Not otherwise eligible for Medicaid, including Iowa Health and Wellness Plan ▶ May be otherwise eligible for Health and Well Kids Iowa (Hawki) 	<ul style="list-style-type: none"> ▶ Serving men, women, and children ▶ No age restrictions ▶ Iowa residents ▶ Proof of Identity ▶ Proof of Social Security Number ▶ U.S. Citizen or qualified immigrant ▶ Income limits specific to coverage group ▶ Resource limits may apply ▶ Apply online, by phone, or in person at local DHS office 	<ul style="list-style-type: none"> ▶ Serving men and women ▶ Age – No restrictions ▶ No residency or citizenship required ▶ Income – Up to 250% of the FPL discounts; no proof required (people with incomes over 250% of poverty can be served but are charged full fee) ▶ No application needed in order to receive services ▶ Can have insurance coverage which would be billed
Services Covered	<ul style="list-style-type: none"> ▶ Birth control exams ▶ Birth control counseling ▶ Limited testing and treatment for STDs ▶ Pelvic exams ▶ Pap tests ▶ Pregnancy tests ▶ Birth control supplies ▶ Emergency contraception ▶ Ultrasounds (if medically necessary and related to birth control services) ▶ Yeast infection treatment ▶ Voluntary sterilization 	<ul style="list-style-type: none"> ▶ Birth control exams ▶ Birth control counseling ▶ Testing and treatment for STDs ▶ Pelvic exams ▶ Pap tests ▶ Pregnancy tests ▶ Birth control supplies ▶ Emergency contraception ▶ Ultrasounds ▶ Testing and treatment for HIV ▶ Breast and cervical cancer screening ▶ Evaluation and treatment for vaginal infection(s) ▶ HPV vaccine ▶ Overall comprehensive health ▶ Voluntary sterilization 	<ul style="list-style-type: none"> ▶ Birth control exams ▶ Birth control counseling ▶ Testing and treatment for STDs ▶ Pelvic exams ▶ Pap tests ▶ Pregnancy tests ▶ Birth control supplies ▶ Emergency contraception ▶ Additional services made available through Title X: <ul style="list-style-type: none"> ▶ Testing and treatment for HIV ▶ Breast and cervical cancer screening ▶ Evaluation and treatment for vaginal infection(s) ▶ HPV vaccine Gardasil available through separate payer source ▶ Natural family planning methods counseling ▶ Level 1 infertility evaluation ▶ Overall comprehensive health ▶ Domestic violence ▶ General outreach and education

Report Findings

TOTAL CLIENTS SERVED

206,031 individuals aged 18-44 were served by all three programs. 76% were women and 24% were men.

PROVIDERS RENDERING SERVICES

Family planning service providers include clinics, physician groups, independent physicians, and advanced registered nurse practitioners.

- ▶ State Family Planning Program: A total of 112 unique providers rendered services to FPP members. 103 of those identified locations within Iowa and 9 identified locations outside of Iowa.
- ▶ Medicaid Family Planning Services: A total of 2,674 unique providers rendered services to Medicaid members accessing family planning services. 1,987 of those identified locations within Iowa and 575 identified locations outside of Iowa.
- ▶ Title X: There are currently 16 Title X contractors operating numerous clinical sites across the state, with the IDPH program covering 45 of 99 counties.

CONTRACEPTIVE USE

Oral contraceptives were the primary choice for the majority of individuals accessing contraceptive services across all three programs. Oral contraceptives accounted for the majority of contraceptive prescriptions provided to female FPP users (74.7 percent), female Medicaid program members (84.8 percent), and female Title X clients (26 percent) accessing services in CY2019.

COST PER CLIENT

The average cost per service for the state FPP was \$95 and the average cost per member was \$493. For Medicaid family planning services, the average costs were \$142 per service and \$1,260 per member. The most recent data indicate the per-client costs of the IDPH Title X program were \$219 (*Guttmacher Institute, 2016. <https://data.guttmacher.org/states>*).

Next Steps

Analysis of the data has highlighted the separate but collective impact of these programs on Iowans. It has also revealed key opportunities for a more in-depth inquiry into system-wide performance, revealing opportunities for improvement. Those opportunities include:

- ▶ Understanding the low enrollment and utilization for both members and providers in FPP.
- ▶ Sustaining efforts to collect and analyze the data gleaned from the two state agencies and from the broader family planning system including the Family Planning Council of Iowa to develop a more complete understanding of how services are utilized, how they are connected to health outcomes, and where more work is needed.
- ▶ Expanding the scope beyond family planning and into the scope of overall women's health and maternal health, building on work from collaborators such as the IMQCC and the Maternal Health Task Force, resulting in increased capacity and quality within this important system of care.