

- ***Are we receiving the 90% federal match for all family planning services provided in Alaska that are not covered by Title X?***

Yes. Family Planning services, receiving 90% Federal match, are limited in nature and fall into three categories: 1) the diagnosis of general reproductive health conditions, 2) the diagnosis of sexually transmitted infections (STD), and 3) contraception. However, Family Planning related services, such as the treatment of the conditions diagnosed, receive the normal Federal participation rate of 50% even if treated at a Family Planning Clinic. For example, an individual could have a routine testing and diagnosis of an STD and receive 90% match for those services, while the actual medication for treatment and follow-up would receive 50% match.

- ***Side-by-side comparison of the services offered by Alaska DHSS and any services provided for under the State Plan Amendment for Family Planning Services offered by the Federal Government with a 90% federal match***

The following table shows Family Planning services currently covered by the State of Alaska alongside those offered through a possible expansion of services.

| Currently covered Family Planning services in the State of Alaska | Possible Family Planning services not currently covered in the State of Alaska |
|--|---|
| Diagnosis: General Reproductive Health | |
| Amenorrhea | |
| Cervical Cancer | |
| Female Reproductive Cancers | |
| Infertility | |
| Male Reproductive Cancers | |
| Pap Test | |
| Urinary Tract Infections | |
| Vaginal Discharge | |
| Diagnosis: Sexually Transmitted Infections | |
| Bacterial Vaginosis | |
| Chlamydia | |
| Gonorrhea | |
| Hepatitis B | |
| Hepatitis C | |
| Herpes | |
| HIV | |
| HPV | |
| Pelvic Inflammation Disease | |
| Syphilis | |
| Trichomoniasis | |
| Contraception: | Sterilization Procedures: |
| Birth Control Pills | Vasectomy Reversals |
| Cervical Cap | |
| Diaphragm | |
| Emergency Contraception | |
| Female Condoms | |

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|--|---|
| Female Sterilization | |
| Implantable Rods | |
| IUD | |
| Male Condoms | |
| Male Sterilization | |
| Natural Family Planning | |
| Contraceptive Patch | |
| Contraceptive Shot | |
| Spermicide | |
| Sponge | |
| Vaginal Ring | |
| *Other Cancer Screening and Prevention: | Other Cancer Screening and Prevention: |
| Mammogram | HPV Vaccine for adults 21 to 26 |
| Pap Testing | |
| Colposcopy | |
| *Preconception Care: | Preconception Care: |
| Gynecologic Exams | Contraceptive Counseling |
| | Reproductive Health Education |
| | Preconception Counseling |
| | Infertility Treatment |

*Other Cancer Screening and Prevention services and Preconception Care are sometimes covered as Family Planning services depending on the nature of the visit. If they are considered Family Planning, they receive 90% Federal match.

➤ **What is the status of family planning services in Alaska? Specifically:**

- **How many women are served?**

Within the Division of Public Health, approximately 7,500 women statewide were provided family planning services through Public Health clinics and direct grants to organizations under the Federal Title X Program.

Within the Medicaid program, an average of 5,711 unique individuals (women) have received family planning services over the past four fiscal years as indicated in the following chart:

| State Fiscal Year | Total Recipients | Total Cost per Recipient* | Cost Per Recipient** |
|-------------------|------------------|---------------------------|----------------------|
| 2013 | 5,619 | \$ 772 | \$ 703 |
| 2012 | 5,948 | \$ 682 | \$ 669 |
| 2011 | 5,877 | \$ 702 | \$ 670 |
| 2010 | 5,562 | \$ 724 | \$ 725 |
| 2009 | 5,146 | \$ 683 | \$ 625 |
| 2008 | 4,872 | \$ 511 | \$ 621 |
| 2007 | 5,227 | \$ 561 | \$ 621 |
| 2006 | 5,694 | \$ 430 | \$ 360 |
| 2005 | 5,895 | \$ 370 | \$ 318 |
| 2004 | 5,710 | \$ 330 | \$ 306 |

*Adjusted to include administrative accruals.

**Raw cost per female recipient.

- **With what services?**

Through the Division of Public Health, the following services are provided:

- Clinical breast examinations, PAP smear screening and pelvic examination;

- Counseling and screening for sexually transmitted infections and contraceptive methods;
- Counseling and referral for contraception services for males and females;
- Access to the full range of current, FDA-approved contraceptive methods and supplies to their family planning clients;
- Counseling and education on reproductive and preventive health topics, including abstinence education, parental involvement in the family planning decisions of minor clients, sexually transmitted disease/HIV prevention and risk reduction;
- Education, counseling, and referral for pregnancy care;
- Screening, counseling, and education for intimate partner violence and other unhealthy relationships and behaviors; and
- Mandatory reporting for sexual abuse of a minor and human trafficking.

Within the Medicaid program, services include family planning counseling and medical services related to birth control medications and devices. Medicaid also covers many over-the-counter birth control items such as contraceptive creams, gels, foams, and condoms if your health care provider writes a prescription for them. These supplies also are available from family planning clinics in larger towns. All women and men can receive family planning services at public health centers statewide.

Medicaid covers family planning services for women enrolled with Denali KidCare for 60 days after the birth of their child. These women can receive family planning services and supplies from any enrolled Medicaid provider statewide. Copay is not required for family planning services and supplies.

- Condoms
- Spermicide
- Sponges
- Female condom
- Tubal ligation/postpartum
- Tubal ligation/interval
- Vasectomy
- Testing for cervical cancer, sexually transmitted diseases, and HIV
- PAP Smear
- Pregnancy testing
- Contraceptive services (including emergency contraceptives, oral contraceptives, intrauterine devices, intrauterine device removal, implants, implant removal, injectable, diaphragm)
- Pelvic exams
- Screening for cervical and breast cancer
- Screening for high blood pressure, anemia, and diabetes
- Screening for sexually transmitted diseases and HIV/AIDS
- Health education

- Referrals for other health and social services
- PAP-LAB
- ***What gaps do we have in coverage for women in terms of family planning services in Alaska?***
All family planning services provided by the Division of Public Health are available to individuals in need of these services, regardless of income level. There are coverage gaps in terms of access to family planning healthcare providers in rural areas of the state, plus geographical barriers for individuals living in those areas that must travel, sometimes long distances, to a clinic which can and will provide services.
- ***What is the federal reimbursement for these services?***
The Division of Public Health receives 90% federal reimbursement for its family planning services under Title X.

Within the Medicaid program, federal reimbursement for these services is at a 90% federal participation rate (unless it is claimed through Indian Health Services which increases the federal rate to 100%). In past years, we may not have received the 90% rate due to the aging MMIS system used to process claims. The new Medicaid Management Information System will have the functionality to claim expenditures at the maximum rate.

- ***How much have we expended in the past 10 years?***
The Division of Public Health has expended approximately \$5,000.0 in federal funding under Title X and \$2,000.0 in general funds for public health clinics for FY2004-FY2013.

Within the Medicaid Program, over \$41,000.0 has been spent on family planning over the past ten years, as is indicated in the following chart:

| State Fiscal Year | State Portion | Federal Portion | Total Spending* |
|-------------------|---------------------|----------------------|----------------------|
| 2013 | \$ 433,949 | \$ 3,905,542 | \$ 4,339,491 |
| 2012 | \$ 405,631 | \$ 3,650,681 | \$ 4,056,312 |
| 2011 | \$ 412,319 | \$ 3,710,867 | \$ 4,123,186 |
| 2010 | \$ 402,738 | \$ 3,624,645 | \$ 4,027,383 |
| 2009 | \$ 351,605 | \$ 3,164,448 | \$ 3,516,053 |
| 2008 | \$ 249,187 | \$ 2,242,684 | \$ 2,491,871 |
| 2007 | \$ 293,481 | \$ 2,641,325 | \$ 2,934,806 |
| 2006 | \$ 244,846 | \$ 2,203,617 | \$ 2,448,463 |
| 2005 | \$ 218,081 | \$ 1,962,731 | \$ 2,180,812 |
| 2004 | \$ 188,316 | \$ 1,694,845 | \$ 1,883,161 |
| TOTAL | \$ 4,071,065 | \$ 37,243,159 | \$ 41,314,224 |

* Amount reported to the Center for Medicaid & Medicare Services (CMS).