

WSR 23-01-030

HEALTH CARE AUTHORITY

[Filed December 11, 2022, 3:40 p.m.]

NOTICE

Title or Subject: Section 1115 Family Planning Only Waiver Extension Application.

Effective Date: July 1, 2023.

Purpose: This notice updates information previously published in a notice dated June 13, 2022, appearing in the Washington State Register under WSR 22-13-089 on July 6, 2022, regarding extending the Section 1115 Family Planning Only Demonstration Waiver. The health care authority (agency) submitted the waiver renewal application to the Centers for Medicare and Medicaid Services (CMS) on September 30, 2022, for initial review. During that review, CMS noted the following components should be included in the application prior to a formal CMS review: All data tables are updated and posted to the application posted on the agency website; clear inclusion of dates and details of public forums; and inclusion of an interim evaluation report on the current waiver cycle. The updated application must be posted publicly on the agency website (www.hca.wa.gov/family-planning) and an additional 30-day comment period must follow. Specifically:

- Data tables - all were updated and complete in the waiver application sent to CMS on September 30, 2022, in the version posted to the agency website (www.hca.wa.gov/family-planning) on October 6, 2022, and in the most current version.
- Public forums - included in this current version on page 17.
- Interim evaluation report - completed and included in this current version, starting on page 9.

To review the updated waiver renewal application, please click on the link at the end of this notice.

The information under the "description" section below repeats the information in the June 13, 2022, public notice.

Description: The agency intends to submit an application to extend the Section 1115 Family Planning Only Demonstration Waiver for five years (through July 2028). The current waiver expires on June 30, 2023. It covers limited family planning and family-planning-related services for people who identify as women, men, and gender fluid who are in need of contraceptive care and are enrolled in the family planning only programs.

The purpose, client eligibility requirements, and benefit package will remain the same. The only potential change is the elimination of the family-planning pregnancy-related program due to the implementation of the after-pregnancy coverage program. This change will take effect when the end of the public health emergency (PHE) is declared. There is currently no end date for the federal PHE.

The purpose of the family planning only program is to:

- Assure [ensure] access to family planning services.
- Decrease unintended pregnancies and births.
- Lengthen intervals between births.
- Reduce state and federal medicaid expenditures for averted births from unintended pregnancies.

The following groups are eligible for services under the family planning only program:

- Recently pregnant people who lose medicaid coverage after their pregnancy coverage ends. These women [people] are automatically enrolled for 10 months.¹
- Uninsured people with family incomes at or below 260 percent federal poverty level (FPL), seeking to prevent an unintended pregnancy.
- Teens and domestic violence victims who need confidential family planning services and are covered under their perpetrator's or parent's health insurance and are at or below 260 percent FPL.

¹ This eligibility group will be eliminated once the PHE ends, and then this group will be eligible for the after-pregnancy coverage benefit which provides 12 months of full-scope apple health (medicaid) benefits to people who have had a pregnancy within 12 months.

Coverage is for 12 months starting on the first day of the month the application was signed. Applications are available on the agency website or any apple health provider that offers family planning services who can assist with the completion of the application.

The family planning only program provides the following services on a fee-for-service basis: FDA-approved contraceptives, natural family planning, over-the-counter contraception, emergency contraception, sterilization, contraceptive education, counseling and management, limited STD testing and treatment related to the safe and effective use of the chosen contraceptive method, cervical cancer screening according to the national clinical guidelines when associated with a family planning visit, office visits, and limited ancillary services related to the above services. There are no cost-sharing requirements to receive services under this program.

There may be decreases in annual aggregate expenditures or enrollment due to the end of the PHE and implementation of the after-pregnancy coverage program. Based on demonstration year (DY) 2020, we expect approximately 8,000 enrollees and 1,500 participants with an expenditure of \$300,000 (DY 2021) for each year of the five-year renewal period.²

² These totals do not consider the loss of the family pregnancy-related group due to the implementation of the after-pregnancy coverage program.

The demonstration will test the hypotheses that by maintaining the family planning only program (1) access to family-planning services will remain available to people who otherwise may not have access; (2) health outcomes will improve or maintain for the waiver population; and (3) the unintended pregnancy rate in Washington state will remain stable or continue to decrease. The state expects that over the five years of the renewal period, the state will have decreased costs due to averted births from unintended pregnancy.

These hypotheses will be measured by evaluating enrollment in the family planning only program, contraceptive methods chosen, pregnancy risk assessment monitoring system data, birth certificates, and claims data. Due to small sample sizes, the evaluation may be limited to descriptive analysis.

The demonstration's expenditure authority falls under the state's Title XIX medicaid state plan and section 1115 (a)(2) of the Social Security Act. Requirements not applicable to the expenditure authorities are:

1. Methods of Administration: Transportation: Section 1902 (a)(4) insofar as it incorporates 42 C.F.R. 431.53. To the extent necessary to enable the state to not assure [ensure] transportation to and from providers for the demonstration population.

2. Amount, Duration, and Scope of Services (Comparability): Section 1902 (a)(10)(B). To the extent necessary to allow the state to offer the demonstration population a benefit package consisting only of family-planning services and family-planning-related services.

3. Prospective Payment for Federally Qualified Health Centers and Rural Health Centers and Rural Health Clinics: Section 1902 (a)(15). To the extent necessary for the state to establish reimbursement levels to these clinics that will compensate them solely for family-planning and family-planning-related services.

4. Eligibility Procedures: Section 1902 (a)(17). To the extent necessary to allow the state to not include parental income when determining a minor's (individual under age 18) eligibility for the family planning demonstration. To the extent necessary to allow the state to not require reporting of changes in income or household size for 12 months, for a person found income-eligible upon application or annual redetermination when determining eligibility for the family planning demonstration.

5. Retroactive Coverage: Section 1902 (a)(34). To the extent necessary to enable the state to not provide medical assistance to the demonstration population for any time prior to the first of the month in which an application for the demonstration is made.

6. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT): Section 1902 (a)(43)(A). To the extent necessary to enable the state to not furnish or arrange for EPSDT services to the demonstration population.

A link to the full public notice for the family planning only waiver extension application can be found at www.hca.wa.gov/family-planning. The agency updates this web page regularly. In addition, you may view all agency public notices at <https://www.hca.wa.gov/about-hca/news/public-notices>.

Comment: The new/additional public comment period for the family planning only demonstration waiver extension application is from December 19, 2022, through January 19, 2023, at 5:00 p.m. PST. Comments may be emailed to familyplanning@hca.wa.gov, faxed to 360-725-1152, or mailed to the address below. A copy of the draft application is available at www.hca.wa.gov/family-planning.

For additional information, contact Beth Tinker, Family Planning Only Program, 626 8th Avenue S.E., Olympia, WA 98504, phone 360-972-5506, TRS/TDD/TTY 711, fax 360-725-1152, email FamilyPlanning@hca.wa.gov, website <https://www.hca.wa.gov/health-care-services-and-supports/apple-health-medicaid-coverage/family-planning-only>.