

**-- FOR DISCUSSION ONLY --**  
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Milwaukee Alliance for Sexual Health (MASH)  
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**Issue Paper Topic:** MA Family Planning Waiver Program

**Problem Description:**

The Wisconsin Family Planning Waiver (FPW) is a Medicaid expansion program developed to reduce unplanned pregnancies and improve reproductive health outcomes of low-income women. Similar programs in other states have proven to be effective and cost-saving. Wisconsin has exceeded initial projections made by DHFS for the number of enrolled women, but still lags behind the enrollment rates of other states. This paper examines the current state of the Wisconsin FPW, discusses possible causes of its under-utilization, and discusses possible solutions.

**Issue Paper Summary:**

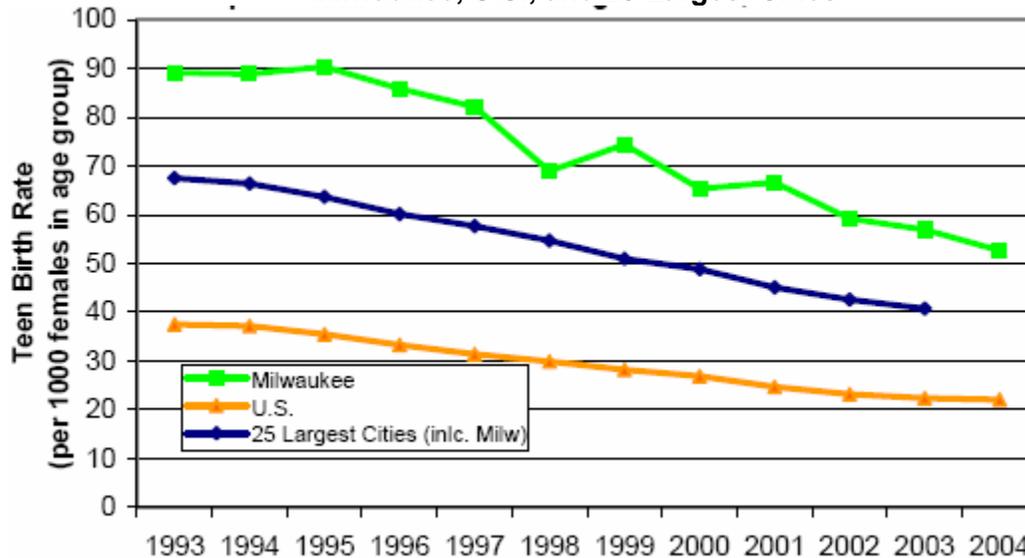
Despite exceeding initial expectations, utilization of the FPW is lower than average in some of the areas that have the highest number of women with unmet contraceptive needs, such as Milwaukee County. Several factors contribute to this situation. Comparisons with other states that have had success with similar programs, along with interviews with key stakeholders, reveal several key reasons for this low utilization that include, lack of access and insufficient outreach to providers and community members resulting in confusion regarding covered services and eligibility.

**Background:**

*Teen Pregnancy*

The express purpose of the FPW is to increase the availability of contraceptive care and reproductive health services to low-income women, so as to meet the Healthy People 2010 objective: *Build a community in which health sexual relationships, free of infection as well as coercion and unintended pregnancy, are the norm* (Healthy People 2010). In 2004, the teen pregnancy rate for Milwaukee was 52.67 per 1000 15-17 year old girls, more than double the national average. While the number of teen pregnancies and teen births have been decreasing in recent years, the rates in Milwaukee remain extremely elevated compared to the national averages and the averages of other metropolitan areas (see Figure 1).

Figure 1: Teen Birth Rates (15-17 yr olds)- Comparison of trends for Milwaukee, U.S., and 25 Largest Cities<sup>1</sup>



In addition, there exists a great deal of disparity of teen birth rates for different racial and ethnic groups. Despite the fact that rates have decreased for all ethnic groups, the birth rate for African American teens in Milwaukee continues to be more than three times that for non-Hispanic white teens and births to Hispanic teens is more than double that to non-Hispanic white teens.

A number of studies have linked teen pregnancy with a variety of negative outcomes. In *Kids Having Kids*, a special report commissioned by the Robin Hood Foundation, they found that boys born to teen moms are 2.7 times more likely to become incarcerated; girls born to teen mothers are 83% more likely to become teen mothers themselves; and that children born to teen mothers are twice as likely to be abused or neglected (*Kids Having Kids Report*, 1996).

#### *Wisconsin Family Planning Waiver*

Effective January 1<sup>st</sup>, 2003, the Medicaid FPW has provided family planning services and supplies for women ages 15 through 44 who are at or below 185% of the federal poverty level (FPL). The main goal of this program is to help such women avoid unintended pregnancy. The eligibility criteria for the FPW are as follows:

- Female age 15-44
- U.S. Citizen living in Wisconsin
- Does not receive Medicaid, BadgerCare, or Healthy Start
- Is at or below 185% of the FPL

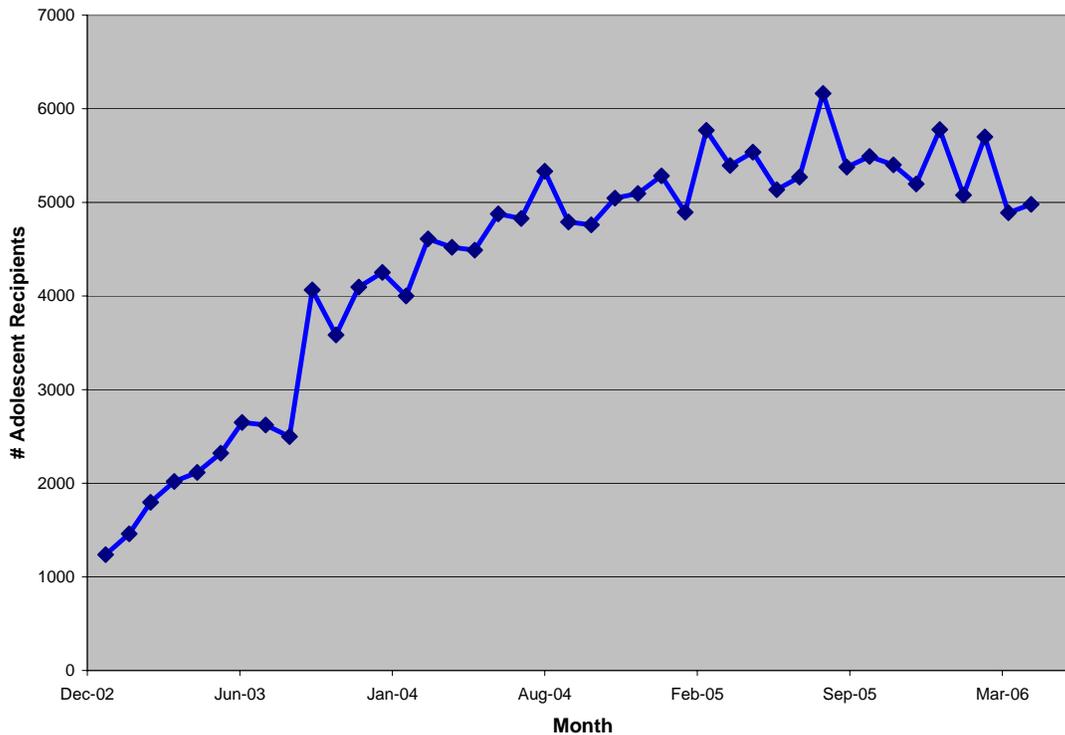
The Wisconsin FPW also contains a feature called “presumptive eligibility” that allows an applicant to receive contraceptive or other reproductive health services at the time of enrollment. This entails filling out a short form (one page) and allows the client to receive services that day. The client is eligible to receive services in this manner for three months. In order to extend coverage, the client must fill out the complete FPW form (the “long form”) within the three month period. Eligibility must be re-certified every 12 months.

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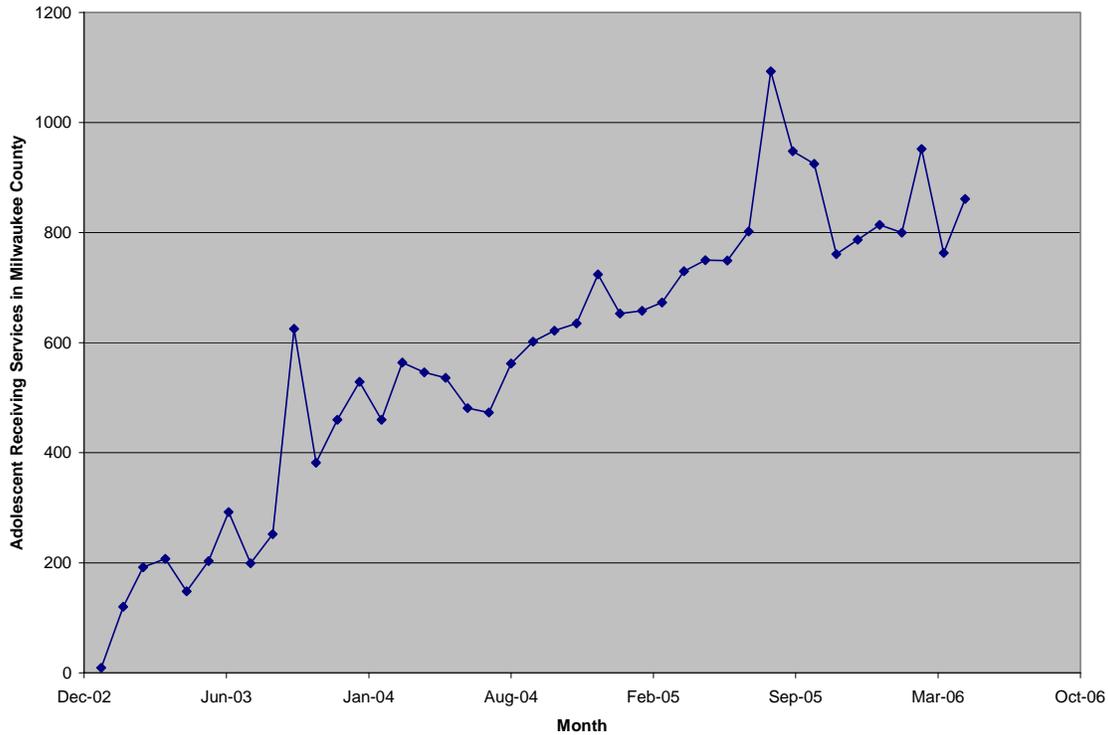
In the first annual report on the FPW, released in June of 2004, the FPW was reported to have exceeded expectations in terms of number of women who have received at least one family planning supply or service to delay or prevent pregnancy or otherwise control family size. The first year of the waiver's existence, 251,041 claims were filed on behalf of 33,494 women in Wisconsin. A total of \$5.8 million dollars was spent, with the state paying \$1.2 million and the federal government paying \$4.8 million. In determining the budget neutrality of the waiver, the 2004 report calculated that in the first year alone, the amount saved exceeded the amount expended by over \$3.3 million dollars thanks to averted births (2003 Family Planning Waiver Annual Report).

Despite these successes, the experiences of other states indicate that there is still room for improvement. As of the first quarter of 2006, an estimated 282,970 are potential eligible for enrollment in the FPW program. However, statewide, the mean enrollment rate is only 23%, with a total of 63,000 women enrolled. California and Oregon have enrollments in their FPW programs over 50%. This issue is especially important in Milwaukee, where the rate of teen pregnancy and teen births are well above the national average. In the most recent quarter, Milwaukee county has enrolled 20% of all eligible women in the FPW program and enrollment effectively plateaued in July 2005 (Figure 2; Figure 3). While Milwaukee County accounts for 15% of the population in Wisconsin, it provides only 10% of enrollees. Given Milwaukee County's elevated rate of adolescent pregnancy, a concerted effort should be made to increase enrollment and utilization of the FPW program among adolescents.

**Figure 2: Adolescent Receiving Services through the FPW in Wisconsin by Month Jan 2003-May 2006**



**Figure 3: Adolescents receiving Services through the FPW in Milwaukee County, Jan 2003-May 2006**



### *Experiences in Other States*

As of June 2006, 21 states have enacted expanded eligibility programs for family planning services to women who would otherwise be ineligible for such services. Perhaps one of the most well-known programs is the California Family Planning, Access, Care and Treatment (Family PACT) program. The PACT program has been identified as a good model for other states and demonstrates the positive effect that a strong FPW can have. In 2005, the California Department of Health Services, Office of Family Planning (DHS-OFP) released an evaluation report looking at utilization, impact, and perception of the Family PACT program. They found that, in part due to an aggressive marketing campaign aimed at high-risk communities and providers, over 1.5 million individuals were being served annually, and that by 2005, an estimated 57.3% of eligible women were enrolled in the PACT program. This resulted in an estimated prevention of 213,000 unintended pregnancies annually, with \$5.33 being saved for every dollar spent on the Family PACT program. (PACT 2005 annual report). Other states, such as Oregon and Arkansas have also demonstrated significant success with their FPW program.

States such as California, Oregon and Arkansas share several characteristics that have improved their enrollment rates of eligible women into their FPW programs. First is a state-wide social marketing campaign to raise the general awareness of the population as a whole. Second is a more focused advertising effort aimed at populations that have typically had significant unmet contraceptive needs. Finally, aggressive and continued

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recruitment of FPW providers, especially in areas with large populations of women with unmet needs, has been an important component of successful FPW programs

In contrast to these states, the Wisconsin FPW program has lacked several of these key components. The final proposal for the FPW did not contain a budget for outreach or advertisement campaigns to high-risk areas. Some advertising materials were developed thanks to in-kind donations from Division of Health Care Financing, Division of Public Health, Health Care Education and Training, Inc., Wisconsin Primary Care Association, Wisconsin Family Planning and Reproductive Health Association, the Wisconsin Adolescent Pregnancy Prevention Committee, and various county health and economic support agencies. These advertising materials included provider publications, websites, multiple public and private provider presentations, posters, billboards/bus signs, and outreach "tool kits" for clinics. With these in-kind efforts, an initial advertising campaign was implemented in Milwaukee, but no state-wide public advertising was performed. To date, there has been no evaluation of the advertising efforts for the Wisconsin FPW, and there has been no on-going social marketing effort in Milwaukee or anywhere else in Wisconsin.

Provider outreach and recruitment in the Wisconsin has also lagged behind that of other states. Prior to the initiation of the FPW, training sessions were held for interested physicians, covering program intent, eligibility determination, the application process as well as coding and billing procedures. This training, however, ended within the first year of the waiver's use, and there has been no further provider training for family planning providers. Furthermore, there had not been any fund allocated for provider recruitment or training. Provider enrollment for presumptive eligibility is an online process that is coordinated by Health Care Training and Education Inc., which walks providers through the enrollment process and answers questions regarding client eligibility, enrollment, or reimbursement.

In interviews with providers and stakeholders in the Milwaukee area, a certain amount of uncertainty and frustration was expressed regarding perceived lack of support for providers in regards to the FPW. Several providers reported uncertainty regarding billing codes and eligibility criteria. Frustrations related to waiver resulted in one provider "dropping [the FPW] altogether." Other issues that providers and stakeholders commonly discussed included the lack of coverage for men, the lack of coverage for undocumented citizens, and the lengthy process of filling out the long form for continued coverage. Providers were split concerning the knowledge of the FPW in the community. Some providers reported that none of their patients knew about the waiver, while other providers reported that patients often had heard about "the program that gives free birth control."

The Milwaukee Alliance for Sexual Health (MASH) is a collaboration between state and city health officials with community leaders to address the reproductive health of adolescents in Milwaukee. Specifically, MASH is focusing on 10 zip codes in the downtown Milwaukee area that have been particularly hard-hit by unintended teen pregnancy and STDs. To date, Medicaid lists 12 registered clinics in the MASH zip codes that can provide immediate and free contraception and reproductive services to women who qualify for presumptive eligibility. Four MASH zip codes (53205, 53209, 53208, and 53215) have no providers that are eligible to enroll patients for presumptive eligibility. Note absence of MHD, Milwaukee Adolescent Health Program, two federally-funded health centers (Milwaukee Health Services and Westside Community Health Center)

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and nursing clinics (UWM silver spring, others) and MCW and UW residency training sites (except for MCW-CSM), major provider hospitals (Aurora Mt. Sinai, St. Lukes, Columbia St. Marys, Froedtert, Childrens Hospital of Wisconsin) from presumptive eligibility providers,

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**Table 1: Presumptive Eligibility Providers in MASH Zip Codes**

<b>Zip Code</b>	<b>Clinic</b>	<b>Address</b>
53204	16 <sup>th</sup> Street Community Health Center	1032 South 16 <sup>th</sup> Street
	Gerald L. Ignace Indian Health Center, Inc.	1711 South 11 <sup>th</sup> Street
<b>53205</b>	<b>None</b>	--
53206	Health Care for the Homeless of Milwaukee	711 West Capitol Drive
<b>53208</b>	<b>None</b>	--
<b>53209</b>	<b>None</b>	--
53210	St. Joseph Regional Medical Center	5000 West. Chambers Street
	David E Amos, MD	5800 Burleigh Street
53212	Planned Parenthood of Wisconsin	1748 North Martin Luther King Drive
	Columbia St. Mary's Family Health Center	1121 East North Avenue
<b>53215</b>	<b>None</b>	--
53216	Planned Parenthood of Wisconsin	5500 West Capitol Drive
	Planned Parenthood of Wisconsin	5380 West Fond du Lac
53218	William L. Gerard, DO	5330 West Villard Avenue
	Planned Parenthood of Wisconsin	7630 West Mill Road

**Barriers and Gaps**

In the course of researching this topic, several stakeholders and providers in Milwaukee gave their input on their perception of difficulties associated with the FPW. These barriers include:

On the part of the community and adolescents:

- Perception that providing adolescents with contraception will increase sexual activity
- Lack of factual knowledge concerning current available contraception methods
- Negative attitudes concerning contraception
- Stigma associated with STDs and related treatments
- Inconvenience of filling out long form after presumptive eligibility makes it difficult to get extended FP coverage
- Few clinics, hospitals or other organizations enrolling clients in hardest-hit zip codes
- Few outreach or social marketing efforts to at-risk populations

On the part of providers:

- Poor coordination of clinical care leading to difficult referral process for services such as colposcopies
- Confusion on the part of clients and providers regarding eligibility, coverage, and other services
- Lack of support for providers enrolling patients in the FPW

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### **Community Strengths and Opportunities**

There are many opportunities within the community to encourage use of the FPW and to provide outreach to community members and providers in high-risk areas. These include:

- Planned Parenthood of Wisconsin, with 4 clinics within MASH area boundaries
- Brighter Futures Initiative
- Milwaukee Adolescent Health Program
- Milwaukee Teen Pregnancy Prevention Network
- Health Care Education & Training Inc. (HCET)
- [www.psssst.org](http://www.psssst.org), a website maintained by HCET that is aimed at teens and contains information about the FPW and where it is available in the Milwaukee area
- Big Brothers/Big Sisters of Milwaukee

### **Recommendations**

The Wisconsin FPW is an important tool to provide adolescents with free contraception and other reproductive health care services. At a 20% enrollment rate in Milwaukee County, the FPW is under-utilized in an area that stands to reap the greatest benefit. One of the most pressing issues is lack of knowledge among both communities and providers. An outreach effort aimed at recruiting new providers and educating existing providers is necessary to maintain awareness of the program and the services it covers, and may be a more cost-effective and focused effort compared to a broader social marketing campaign. Local health departments can host information sessions for providers who wish to become registered as presumptive eligibility providers.

Recommendations for provider outreach include

- Provider outreach, coordinated at the state and local health department level, with hosted training and provider enrollment sessions held annually or quarterly
- Continued education on waiver updates and billing practices
- Development of hotline for providers who have questions regarding billing, coding, and eligibility questions
- Continuing efforts to “mainstream” FPW so as to minimize the extra paper work for providers enrolling new patients.

Community organizations can be recruited to help disseminate information regarding the FPW and those eligible for its services. This may be an effective way to reach populations that won't be reached by traditional means (homeless, foster care, incarcerated, etc.). HCET already has pamphlets, posters, and other advertising materials that were developed when the waiver was first initiated in 2003. These and other materials can be used by school clinics and groups such as Brighter Futures and the Milwaukee Teen Pregnancy Prevention Network to increase awareness among adolescents about the FPW. Recommendations aimed at the community level include:

1. Targeted social marketing campaign to high-risk areas including the MASH zip codes
2. Involvement of existing community organizations in disseminating information concerning the waiver and who is eligible
3. Recruitment of youth educators within school systems to refer adolescents to clinics where services can be accessed.

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**Resources Consulted**

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