

Medicaid Family Planning Expansions Approved in Ohio, Maryland

In late October, the federal Centers for Medicare and Medicaid Services (CMS) approved Ohio's request to expand eligibility for family planning and related services to individuals with an income up to 200% of the federal poverty level.¹ (The poverty level is \$18,530 for a family of three in 2011.²) This makes Ohio the seventh state to utilize the new authority given states under the Affordable Care Act to amend their Medicaid plans to provide coverage for family planning services to individuals with incomes above the state's income eligibility ceiling for the program generally (see table).³

More significantly, however, Ohio becomes the first totally new state to avail itself of this authority; the other six had previously expanded cover-

age by obtaining a waiver from CMS. (This new authority both streamlined the process for states and allowed them to expand coverage permanently, compared with the more cumbersome process and time-limited expansion permitted under a waiver.) Ohio's move is further noteworthy because the state's new governor, John Kasich, was one of a cadre of Republican firebrands swept into office with the 2010 elections and has not been shy about reversing the policies of his more liberal predecessor.

Just a few months before approving Ohio's state plan amendment, CMS approved a request from Maryland to expand its Medicaid family planning waiver.⁴ Since 1995, Maryland had extended coverage for family planning to women who otherwise would

have lost Medicaid coverage at the end of their postpartum period. This spring, the legislature enacted a measure directing the state to convert its limited program to a broad-based effort to provide coverage to women of childbearing age with an income up to 200% of poverty. CMS approved that request in June.

Including Ohio and the new expansion in Maryland, CMS has approved family planning expansions in 29 states. Twenty-four of these programs are broad-based efforts offering coverage based solely on income, generally up to 200% of poverty. (The remaining five states have more limited programs offering coverage to individuals whose Medicaid coverage is ending.) According to a new review of state evaluation reports, these programs have yielded significant benefits, including expanding access to contraceptive services, lowering levels of unintended and teen pregnancy, improving maternal and child health, and generating significant cost-savings for the federal and state governments.⁵

When the Ohio and Maryland programs become operational, potentially as early as January 2012, 71% of women of reproductive age will live in a state with a broad-based Medicaid family planning expansion, in which eligibility is determined based on the woman's income.⁶

—Rachel Benson Gold

MEDICAID FAMILY PLANNING EXPANSIONS

Twenty-nine states have been approved to expand eligibility for family planning services to individuals not otherwise eligible for coverage under Medicaid.

State Plan Amendments	Income-based Waivers	Limited Waivers
California	Alabama	Arizona
New Mexico	Arkansas	Delaware
Oklahoma	Georgia	Florida
Ohio*	Illinois	Maryland
South Carolina	Iowa	Rhode Island
Virginia	Louisiana	Wyoming
Wisconsin	Maryland*	
	Michigan	
	Minnesota	
	Mississippi	
	Missouri	
	New York	
	North Carolina	
	Oregon	
	Pennsylvania	
	Texas	
	Washington	

*Approved by CMS but not yet implemented (as of Nov. 1, 2011). Source: Reference 3.

REFERENCES

1. Johnson V, Associate Regional Director, Division of Medicaid and Children's Health Operations, letter to John McCarthy, Medicaid Director, Ohio Department of Job and Family Services, Oct. 20, 2011.
2. Department of Health and Human Services, Annual update of the HHS poverty guidelines, *Federal Register*, 2011, 76(13): 3637–3638, <<http://edocket.access.gpo.gov/2011/pdf/2011-1237.pdf>>, accessed Nov. 1, 2011.
3. Guttmacher Institute, Medicaid family planning eligibility expansions, *State Policies in Brief (as of November 2011)*, 2011, <http://www.guttmacher.org/statecenter/spibs/spib_SMFPE.pdf>, accessed Nov. 8, 2011.
4. Mann C, Director, Center for Medicaid, CHIP and Survey & Certification, Centers for Medicare and Medicaid Services, letter to Joshua Sharfstein, Secretary, Maryland Department of Health and Mental Hygiene, June 27, 2011.
5. Sonfield A and Gold RB, *Medicaid Family Planning Expansions: Lessons Learned and Implications for the Future*, New York: Guttmacher Institute, 2011 (forthcoming).
6. Special tabulations of data from the Guttmacher Institute and the 2010 and 2011 U.S. Census Bureau Current Population Surveys.