
Nevada Advocates for Planned Parenthood Affiliates, Inc.

To: Members of the Senate Health & Human Services Committee

From: Elisa Cafferata, Cafferata & Co on behalf of NAPPA

Date: Sept 21, 2018

Re: Support for Interim Health Committee recommendations re: family planning

Summary:

Issue: Nevada has been falling behind for years when it comes to meeting the needs of women who need publicly funded family planning. Program changes, budget cuts and proposed regulations at the federal level mean that fewer women than ever will have access to the family planning they need. Fewer dollars, fewer providers, harder to access all lead up to less healthcare.

Importance: Why is it important? Family planning is basic health care, and for many women the only health care they get for years. Family planning is fundamental for healthy women, healthy moms, healthy families.

Solution: Because we are expecting more cuts, Nevada has to step up and provide family planning with state dollars, or see huge increases in unplanned pregnancies, adverse health outcomes, and state expenses related to these issues. This memo supports the Interim Health Committee's recommendations and provides additional background information to answer some of the questions raised at the last hearing.

Background: Nevada made significant strides in improving access to family planning in 2017:

- SB 122 = created an independent, state family planning grant program
- AB 397 = funded SB 122 for \$1 million (or at least that was the legislative intent)
- SB 233 = puts ACA women's preventive health requirements in NV law
- AB 249 = allowed for 12 month dispensing of birth control

Our intention was for the \$1 million appropriation to go through the grant program created by SB 122. From HHS' perspective, there were several issues with this idea, and in the end, they treated SB 122 and AB 397 as completely different legislative proposals.

The state grants office awarded the \$1 million in family planning grants. And then, since there were no funds, the state has not set up the regulations for SB 122 to create a state family planning grant fund.

Proposed remedies for 2019 session:

NAPPA proposed several recommendations to the Interim Health Committee. And at their last meeting, the Committee approved the following:

- Appropriate \$12 million to fund the “Account for Family Planning” created by SB 122.
- Authorize the use of funds in the Account by local governments to contract with the state for community health nurses and other family planning health care providers in addition to the entities currently eligible for funding pursuant to NRS 442.725.
- Prohibit the administrator from discriminating against any contraceptive method when awarding grants.

The Committee also agreed to send a letter to the Director DHHS encouraging the evaluation of Medicaid rules and reimbursement rates to ensure that the rates cover the costs of business for family planning providers.

And to send a letter to the Director of DHHS encouraging Medicaid to allow community health centers to bill Medicaid for services provided by community health workers (Promotoras).

In response to questions raised during the last Committee meeting, we wanted to provide some added background information for your consideration:

Where did the \$12 million figure come from?

The short answer is that this would get us back to previous levels of funding, although not our previous levels of service since the need has grown.

- Government funding for family planning in 2010 was \$5.8 million in 2010.¹
- “Publicly funded family planning centers in Nevada helped avert 9,100 unintended pregnancies in 2013 which would likely have resulted in 4,500 births and 3,100 abortions.”²
- By averting unintended pregnancies, publicly funded family planning services provided by safety-net health centers helped save the federal and state governments \$30.6 million in Nevada in 2010.³

In 2010, the \$5.8 million investment in family planning, which served less than 20% of the women in need netted Nevada \$30.6 million in total savings.⁴ While we will not be serving as high a percentage of women in need as we did in 2010, by returning funding levels to \$6 million per year, we will be providing tremendous health benefits to thousands of Nevada women and families.

¹ guttmacher.org/fact-sheet/contraceptive-use-united-states

² Contraceptive Needs and Services 2013 guttmacher.org/pubs/win/contraceptive-needs-2013.pdf

³ Assessment of benefits and cost savings of US publicly funded family planning program 2014 onlinelibrary.wiley.com/enhanced/doi/10.1111/1468-0009.12080

⁴ guttmachers.org/fact-sheets/state-funded-family-planning-services-nevada

Additional background on the need for publicly supported family planning:

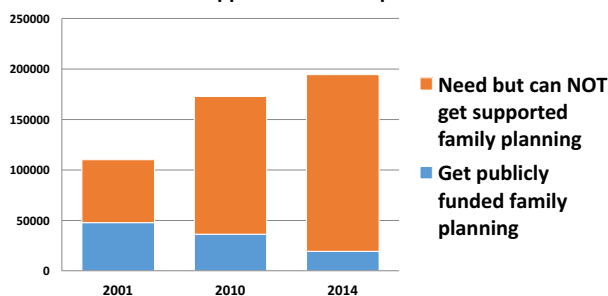
In Nevada, the number of women who need publicly supported (safety-net) family planning is growing. At the same time, the percent of women who can actually get access to the services they need has plummeted.

The number of women who need publicly supported (safety-net) family planning in Nevada has grown significantly, from 110,030 in 2001 to 194,431 in 2014.⁵ In 2001, Nevada met 43% of the need for publicly funded women's health services. By 2014, only 10% of women in Nevada who needed it got publicly funded contraceptive services; Nevada tied with Texas for having the lowest percentage of the state need met.⁶ In 2014, almost 175,000 Nevada women could not access the publicly supported contraception they need. The 10% number does not reflect the 2016 loss of the Title X grant that served rural Nevada.

Problem:

More In Need; Fewer Helped

Nevada Women Who Need Publicly-Supported Contraception

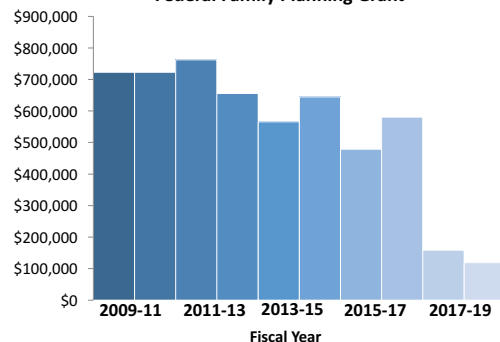


Source: Guttmacher.org/sites/default/files/report_downloads/contraceptive-needs-and-services-tables-2014.pdf

Problem:

Title X Family Planning Grants

Federal Family Planning Grant



⁵ Source:

www.guttmacher.org/sites/default/files/report_downloads/contraceptive-needs-and-services-tables-2014.pdf

⁶ https://www.guttmacher.org/sites/default/files/report_downloads/contraceptive-needs-and-services-tables-2014.pdf

Title X grant changes:

The Title X program now prioritizes family planning in primary care settings, putting rural health community nurses at a disadvantage. Proposed administration rules would add natural family planning and abstinence counseling as program priorities, taking money away from providing health care for patients. The latest clinical guidelines do not even reference contraception, raising concerns that the administration will further reduce these funds.

The Title X proposed rule changes prohibit referrals to providers who offer abortion care (even though use of Title X funds on abortions is already prohibited). Grantees will no longer need to provide all forms of contraception. And grantees will no longer have to provide medically-approved contraception.

All of these changes support the need for the state to step up and fund family planning services on its own. We support the changes proposed by the Interim Health Committee.

Nevada Advocates for Planned Parenthood Affiliates:

Nevada Advocates for Planned Parenthood Affiliates (NAPPA) is the independent, non-partisan, nonprofit education, policy and advocacy arm of Planned Parenthood's two affiliates (Mar Monte and the Rocky Mountains).

Planned Parenthood's three Nevada health centers see over 18,000 patients each year. We offer affordable care, in some cases on a sliding fee scale; many of our patients have nowhere else to go for basic health care. We are proud of our long record of quality care -- over 35 years in Nevada -- always affordable, confidential, culturally appropriate, and welcoming to our clients. We also provide medically accurate and age appropriate sexual health education to youth and adults across our state. Thank you for the opportunity to offer our full support of the Interim Committee's recommendations and to share additional background information regarding family planning in Nevada.

Thank you for the opportunity to share additional information. Please let us know if there is anything else we can provide.



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