Lessons Learned from Medicaid 1115 Family Planning Demonstration Programs

Audience	Domain	Questions of Interest
Medicaid programs incorporating FP into standard coverage either in a SPA or with the ACA expansion.	Domain Utilization/Access Financing Care processes	How do you let people know they are covered? Is coverage enough or is outreach needed? How can we reach the women most in need of services? What is the most effective form of outreach? Do changes in eligibility procedures impact utilization of services? What is the anticipated cost of the services to the population? What are the main drivers of expenditures? Is there repeated use year after year? What role has supplemental counseling/case management played in effective use? How important is it to maintain participation by non-Title 10 providers? How is that best done? What indicators can be put in place to monitor quality of care in the program? Did the waivers 'work' through increased use of family planning alone? OR from increased use of effective contraceptives? How was the use of effective services maintained by states over the waiver's life? Did the waivers also affect the use of primary care, management of chronic disease or prevention of STDs. etc. all of which could affect women's reproductive health?
	Outcomes	Summary – known impact of FP use on subsequent maternity costs? Do we know anything about waiver effects on maternal or infant outcomes?

Private Insurers mandated to cover contraception	Utilization/ Access	What is the publicly insured population's demand for contraception over time? What characterizes users and non-users of services? Do we expect this population to be markedly different from a privately insured population?
	Financing	What are the variations in expenditures across provider types, client types? What are the main drivers of expenditures? Are policies inclusive of family planning less costly due to impact of coverage on reduced unintended pregnancy? Better maternal and infant outcomes?
	Care processes	Is there any unnecessary over-utilization of services? How can quality of care be monitored, what characterizes good and poor quality care? How can the quality of family planning care be measured?
	Outcomes	Likely health outcomes of active contraceptive program – birth spacing, reduced unintended pregnancies.
Family Planning Providers and Program Managers	Utilization/ Access	What facilitates use of services, what are the barriers to use of services? Are there vulnerable segments of the population who tend not to participate? What role did safety net providers play in expanding access under waivers? How will they transition into ACA?
	Financing	What are the main drivers of expenditures? Is there variation across participating providers in patterns of expenditures?
	Care processes	What are the characteristics of the most effective FP programs/care delivery systems?
	Outcomes	What characterizes FP participants who subsequently become pregnant?
Federal Government	Evaluation	What are the most challenging components to evaluate, and why? Why did the government not examine health outcomes?
	Financing	What was the most meaningful way to assess budget neutrality? Why was budget neutrality dropped from the waiver process?
	Eligibility	What impact did different eligibility criteria have on program operation and participation? Including postpartum, income based waivers, and changes in presumptive eligibility.