

One Hundred Fifth Legislature - First Session - 2017

Introducer's Statement of Intent

LB120

Chairperson: Senator Merv Riepe

Committee: Health and Human Services

Date of Hearing: March 15, 2017

The following constitutes the reasons for this bill and the purposes which are sought to be accomplished thereby:

LB120 is three-fold:

1) Family Planning Services

Federal law requires states to furnish family planning services and supplies to all Medicaid recipients who are of childbearing age. Thus, low-income pregnant women and low income families with children are among the populations already receiving Medicaid coverage for health care services in Nebraska that include family planning supplies and services. Family planning supplies and services include providing: contraceptives; tests for human immunodeficiency virus (HIV) and other sexually transmitted infections (STIs); Pap tests and tests for human papillomavirus (HPV) and HPV vaccinations; and screening for breast cancer and reproductive cancers.

LB120 proposes to take advantage of a federal option to assist an additional tier of women in deferring child rearing until they are emotionally and financially ready. The federal program option authorizes the State to provide Medicaid coverage that is strictly limited to family planning supplies and services to all low-income individuals of childbearing age with income below 185 percent of the federal poverty level. In return, the state receives program reimbursement at a 90 percent rate, higher than for most other Medicaid services.

Since this option was first made available in the early 1990s, 30 states have taken advantage of it, and report that the cost of providing family planning services to individuals under the program is lower than the cost of providing care to women with unintended pregnancies. Further, results of a study conducted by the Guttmacher Institute published in 2013 and reported upon in the Milbank Quarterly (Vol. 92, No. 4, 2014) found that “public expenditures for the US family planning program not only prevented unintended pregnancies but also reduced the incidence and impact of preterm and low birth weight births, STIs, infertility, and cervical cancer. This investment saved billions of public dollars, equivalent to an estimated taxpayer savings of \$7.09 for every public dollar spent” (Page 668 of Milbank article); and, thereby enabled participants to have happy and healthy babies when the time was right for them. These cost savings may even be surpassed by the costs savings in pre-school training and juvenile behavioral issues arising out of a lack of pregnancy preparedness.

2) Financial literacy

To the extent possible, without violating federal rules, LB120 also proposes to expand the definition of family planning services to include training in the responsibilities of parenthood and education in the

financial, career, and generational implications of pregnancy and child rearing. If society is to return to a paradigm of personal responsibility and self-reliance it will only be after the fundamental lessons of such a society are learned. It is essential life lessons be learned before one or more pregnancies trap a young woman in the cycle and politics of the welfare state. The cost related to providing an educational component could possibly be covered through federal Title X funds or paid through cost savings, as noted above, that would incur by expanding the population receiving family planning services.

3) Every Woman Matters Program

Finally, the LB120 would authorize an additional \$1 million appropriation over a two year period to the Every Woman Matters program, administered by the Department of Health and Human Services, and funded primarily by the Centers for Disease Control and Prevention through the National Breast and Cervical Cancer Early Detection Program. Importantly, this program does not deliver family planning services; rather, it recognizes the role of grandmothers and their peers that dates to antiquity and appears to be a cornerstone of stable societies. As such , LB120 is designed to promote healthy and nurturing grandmothers by providing low income women between the ages of 40 and 74, whose income levels are at or below 225 percent of the Federal poverty level access to screening for and early detection of breast cancer, cervical cancer, and other chronic diseases. The Department verifies applicant eligibility and allocates money to participating providers and women requiring further treatment beyond initial testing and diagnostics are referred to other health care programs for low income people, all of which have their own set of income eligibility guidelines. LB120 would authorize the state funds be used for education and outreach and used to leverage other federal funds. Once operational, the \$1 million annual investment in the Every Woman Matters Program self-funds from the cost savings, associated with the other provisions of the LB120.

Principal Introducer: _____

Senator Paul Schumacher