Why the Affordable Care Act Matters for Women: Expanding Medicaid Family Planning Services

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Publicly funded family planning services provide essential health care that low-income women urgently need. For many women, the cost of contraceptive services is a significant barrier to accessing this important care. In addition, barriers to access have been shown to create disparities in contraceptive use – disparities that are later reflected in rates of unintended pregnancy.

Affordable Family Planning Through Expanded Medicaid Eligibility

Thirty states and the District of Columbia¹ have expanded their Medicaid programs to include individuals with incomes below 138 percent of the federal poverty level (FPL).² This means that many more women now have access to comprehensive coverage and health care services, including no-cost family planning care and supplies.

The ACA allows states to expand eligibility for Medicaid-covered family planning services without having to go through the cumbersome federal waiver process previously required.

- Under the federal waiver system, it took an average of 20 months to approve a state proposal to expand eligibility. Moreover, waivers had to be renewed after five years and then again every three years after that. Under the ACA, states are now able to expand eligibility for Medicaid-covered family planning care through a State Plan Amendment (SPA), which is a faster, streamlined, permanent process.

- In addition to covering family planning care for more women, most states provide Medicaid coverage to pregnant women with incomes at or above 200 percent FPL (a more generous income cap than what is typically used to determine Medicaid eligibility).³ The ACA allows states to use their pregnancy-eligibility income threshold to determine eligibility for Medicaid-covered family planning services. As a result, many more women now have access to affordable family planning care.
Studies have found that increasing eligibility not only expands access to care but also improves the geographic availability of reproductive health services, increases the diversity of providers and reduces unintended pregnancy. Furthermore, expanded eligibility generates significant savings for both the federal and state governments.4

As of August 2015, 28 states have received federal approval to expand eligibility for Medicaid family planning services through an SPA or waiver. Fourteen states operate their programs through SPAs and 14 states continue to offer expanded coverage through a waiver from the federal government.5

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2 Note: Prior to ACA implementation, eligibility levels varied widely, with most states providing a relatively high eligibility level for children, but with a broad range of eligibility requirements for adult parents and generally no coverage for adults without minor children.

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, access to quality health care and policies that help women and men meet the dual demands of work and family. More information is available at www.NationalPartnership.org.

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