

Agency: 303 Department of Health
Decision Package Code/Title: A2 Family Planning Program Reduction
Budget Period: 2015-17
Budget Level: PL-Performance Level

Recommendation Summary Text:

This package makes a 15 percent reduction to the departments Family Planning Program by reducing contracts with local family planning agencies. It is estimated that approximately 15 percent of family planning clients will be insured through the Affordable Care Act.

Fiscal Detail

Operating Expenditures		<u>FY 2016</u>	<u>FY 2017</u>	<u>Total</u>
001-1	General Fund-State	(944,000)	(1,734,000)	(2,678,000)
Total Cost		(944,000)	(1,734,000)	(2,678,000)

Package Description:

In 2013, Department of Health (DOH) funded family planning entities saw more Medicaid and private insurance clients than in 2012. They also saw more clients without any coverage in need of federal Title X family planning funding. Access to affordable family planning services is cost effective and averts costly unintended pregnancies that have an impact on Medicaid and other public assistance programs. Services that family planning clients receive range from physical examinations, contraceptive services, pregnancy service, and STD/HIV services.

This package reduces state support for the DOH Family Planning Program by 15 percent by decreasing contract amount with local family planning agencies. This assumes that approximately 4,940 family planning clients will be insured by Medicaid or private insurance. Current data does not show any reduction after the first open enrollment period. Therefore, more of the reduction is pushed into the second year of the biennium to allow time for more data. In fiscal year (FY) 2016 and FY 2017 respectively, general fund state in the amounts of \$944,000 and \$1,734,000 will be reduced from the state's Family Planning Program.

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Narrative Justification and Impact Statement:

What specific performance outcomes does the agency expect?

None.

Performance Measure Detail

Activity: A010 – Promote Family and Child Health and Safety

Is this Decision Package essential to implement a strategy identified in the agency's strategic plan?

The Family Planning Program contributes to Goal 2: Prevent illnesses and injury and promote ongoing wellness across the lifespan for everyone in Washington. Objective 1: Give all babies a planned, healthy start in life; and Objective 5: Prevent or reduce the impact of adverse childhood experiences on children and families.

Does this decision package provide essential support to one or more of the Governor's Results Washington priorities?

The Family Planning Program supports:

Goal 4: Healthy and Safe Communities: Provide access to good medical care to improve people's lives.

Objective 1.1.d. Decrease the rate of teen pregnancy for 15-17 year olds from 19.4 per 1,000 in 2011 to 17.5 per 1,000 by 2016

What are the other important connections or impacts related to this proposal?

Data from the clients served in 2013 indicates that 288 pregnancies are averted per 1,000 clients served.

What alternatives were explored by the agency and why was this alternative chosen?

The Department of Health (DOH) used the following process to get to the mandated 15 percent General Fund State Reductions:

- All General Fund State supported programs were put into three tiers:
 - Tier 1 – Programs that are 100 percent foundational public health services
 - Tier 2 – Programs that are partially foundational public health services and/or directly tied to the Governor's Results Washington measures and/or part of the agency strategic plan
 - Tier 3 – All remaining general fund programs
- Tier 2 and Tier 3 programs were scored using the public health criteria matrix, then ranked using the scores and our professional judgment
- Reductions were proposed from the ranked list
- The DOH widely shared our draft reductions both internally and externally to the department and sought feedback

What are the consequences of adopting or not adopting this package?

Adopting this package assume that approximately 4,940 family planning clients will be insured by Medicaid or private insurance.

What is the relationship, if any, to the state capital budget?

None.

What changes would be required to existing statutes, rules, or contracts, in order to implement the change?

Contracts would have to be amended.

Expenditure and revenue calculations and assumptions

Revenue:

None.

Expenditures:

In FY 2016 and FY 2017 respectively, General Fund-State in the amounts of \$944,000 and \$1,734,000 will be reduced from the state’s Family Planning Program. This reduction will occur by reducing contract amount with local family planning agencies.

Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?

These reductions are assumed to be ongoing. The impact of these reductions in future biennia will be determined as family planning agencies/clinics see reductions or increases in the number of uninsured people seeking services in their clinics.

For federal grants: Does this request require a maintenance of effort or state match?

No.

For all other funding: Does this request fulfill a federal grant’s maintenance of effort or match requirement?

No.

<u>Object Detail</u>		<u>FY 2016</u>	<u>FY 2017</u>	<u>Total</u>
A	Salaries and Wages			0
B	Employee Benefits			0
C	Personal Service Contracts			0
E	Goods and Services	(11,000)	(20,000)	(31,000)
G	Travel			0
J	Capital Outlays			0
N	Grants,Benefits&Clinet Svc	(933,000)	(1,714,000)	(2,647,000)
	Total Objects	(944,000)	(1,734,000)	(2,678,000)