

Protect Preventative Healthcare in Your State

TITLE X FAMILY PLANNING PROGRAM

MEDICAID FAMILY PLANNING SPAS



PATIENTS

Access care with any Title X grantee: all birth control methods, STI and related gynecological care (pap), care coordination for other reproductive and primary care services.

Household income $\leq 100\%$ FPL for no-cost care, sliding fee scale 101%-250% where services are provided at a discount.

Can enroll with any Title X grantee for immediate care.

Coverage for all genders and to individuals age 12+, including non-citizens.

Access care at any health entity that accepts Medicaid: all birth control methods, STI care, preventive services (repro vaccines), gynecological care (pap, colpos), often covered.

Household or individual income equaling the eligibility limits for pregnant people under Medicaid or CHIP for no-cost care.

Can enroll in ongoing coverage usually through the state's Medicaid application, or, in some states, enroll in immediate, temporary coverage with a provider.

Coverage often open to people of all genders and ages who are US citizens or qualified immigrants for 5+ years.



PAYORS

Grant awarded annually from federal Title X and state General Revenue Funds.

Title X grantees accept all insurance, applying Title X funds as a payor of last resort. Can draw down on TX grant even if covered by Medicaid/private insurance.

Ongoing Medicaid coverage at 90% federal/10% state for family planning services billed directly to state Medicaid as fee-for-service w/o a cap.

Often can qualify with private insurance that patient can not/does not want to apply because of confidentiality concerns or restrictions on coverage of reproductive services.



PROVIDERS

Confidential care for all, nobody turned away due to inability to pay when seeking covered services with Title X grantees.

Dispensing of no-cost or sliding fee scale supplies/meds at Title X grantee clinic site.

Grant administrative tasks for funding compliance.

Confidential care for all, nobody turned away due to inability to pay when seeking covered services at a community health/safety nets.

Dispensing of no-cost supplies/meds at patient's pharmacy of choice.

Same administrative tasks for compliance as full Medicaid plans.