

# Research

Research Brief on

## Access to Publicly-Funded Family Planning Services by Women in Need, Fiscal Year 2009-10 to Fiscal Year 2012-13

November 2015

### INTRODUCTION

One important measure of success in serving women in need of publicly-funded family planning services is to consider the trend in access to such services through the Family Planning, Access, Care, and Treatment (Family PACT) program or Medi-Cal. Access is measured by comparing the number of women who received a contraceptive method at least once during the year in relation to the total number of women who were in need of these services. Women ages 20-44 are considered in need of these services if they are at risk of unintended pregnancy (i.e., they are sexually active, able to become pregnant, and neither currently pregnant nor seeking pregnancy), and have an income at or below 200% of the Federal Poverty Guideline. Adolescent females ages 15-19 are considered in need if they are sexually active, regardless of income.

This report examines the proportion of women in need of publicly-funded family planning services that were served by either the Family PACT program or Medi-Cal family planning services over time from fiscal year (FY) 2009-10 through FY 2012-13. This report updates previous reports<sup>1</sup> with FY 2012-13 data.

### FINDINGS

In FY 2012-2013 there were an estimated 1.97 million California women ages 15-44 in need of publicly-funded contraceptive services. Of these women, 65% received publicly-funded contraceptive services: 48% received contraception through Family PACT alone, 13% were served through Medi-Cal, and 4% were served by both Family PACT and Medi-Cal during the 12-month period (Figure 1).<sup>2</sup>

Access to publicly-funded contraceptive services among California women in need has gradually declined from 72% in FY 2009-10 to 65% in FY 2012-13. Access through Family PACT alone has decreased from 55% to 48% during the same time period. This general decline in access reflects the growth in the population in need (from 1.83 million in FY 2009-10 to 1.97 million in FY 2012-13) growing faster than the number of women served. Access through Medi-Cal remained relatively stable (13-14%) between FY 2009-10 and FY 2012-13, and the proportion of women accessing services through both programs remained stable at 4%.

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**Bixby Center**  
for Global  
Reproductive  
Health

**UCSF**

University of California San Francisco

<http://bixbycenter.ucsf.edu>

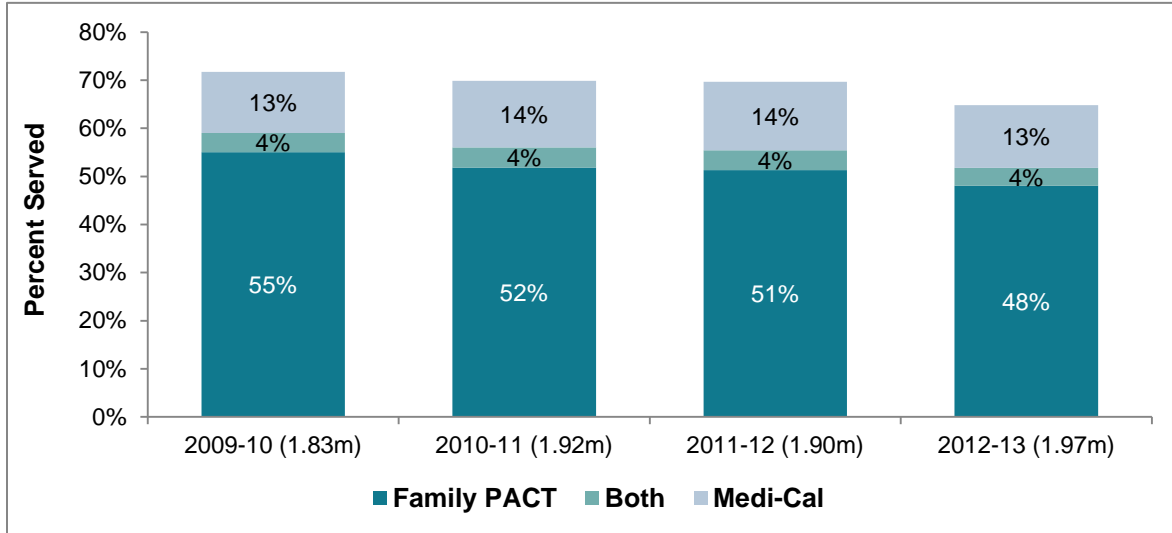
<sup>1</sup> Chang R, Navarro S, Swann D, Thiel de Bocanegra H. *Access to Publicly Funded Family Planning Services in California, Fiscal Year 2007-08 to Fiscal year 2011-12*. Sacramento, CA: Bixby Center for Global Reproductive Health, University of California, San Francisco, 2014.

<sup>2</sup> Women may have been served by both programs if they changed Medi-Cal eligibility during the year.

## Access to Publicly-Funded Family Planning Services by Women in Need Fiscal Year 2009-10 to Fiscal Year 2012-13

Figure 1

**Access to Publicly-Funded Family Planning Services:  
Percentage of California Women ages 15-44 in Need of Publicly-Funded Contraceptive Services,  
Who Were Served by Family PACT, Medi-Cal, or Both, FY 2009-10 through FY 2012-13**



*Sources: Family PACT enrollment and claims data; Medi-Cal claims and encounter data (fee-for-service and managed care); State of California Department of Finance, State and County Population Projections by Age, Race/Ethnicity, and Gender, 2010-2060, January 2013; California Health Interview Survey; California Women's Health Survey; and California American Community Survey.*

### NEXT STEPS

Examination of access to family planning services through Family PACT and Medi-Cal among women in need through FY 2012-13 has shown an increase in the number of women in need and a gradual decrease in those accessing services. This data will act as baseline data prior to full implementation of the Affordable Care Act. With the Medi-Cal expansion that provides Medi-Cal eligibility to nulliparous women, it is expected that delivery of family planning services through Medi-Cal Managed Care and, hopefully, the percentage of women in need accessing family planning services will increase in the next reporting periods. To the extent that Family PACT clients transition into full-scope Medi-Cal, the percentage of women receiving family planning services from both programs in a 12-month period may also increase.

For the next reporting period, it will be informative to analyze the FY 2013-14 data in smaller time periods; for example, July-December 2013 and January-June 2014, to identify trends in the provision of family planning services.

### Suggested Citation:

Cross Reidel J, Thiel de Bocanegra H. *Access to Publicly-Funded Family Planning Services by Women in Need, Fiscal Year 2009-10 to Fiscal Year 2012-13*. San Francisco, CA: Bixby Center for Global Reproductive Health, University of California, San Francisco, CA, 2015.