# Immediate Postpartum (IPP) Long-Acting Reversible Contraceptives (LARCs)

### HEALTH PLAN UPDATE

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## Positive Birth Outcomes for Medicaid: What's at Stake?

63%

Of births in Florida were covered by Medicaid SFY 15/16 Total Medical Costs over \$801 million

For 14,837 babies who started out in NICU.

Many were born preterm/ low birthweight.

74,000

Of women whose deliveries were covered by Medicaid only attained eligibility for the program through pregnancy.

Bureau of Medicaid Data Analytics. (SFY 15/16).



## **Background Data**

- Medicaid covers more than 110,000 deliveries annually, or 63% of the births in the State of Florida.
- Florida is fourth highest in unintended pregnancy rate, 59% of pregnancies. Medicaid finances more than 70% of those births, at a cost of approximately \$1.3 billion (2010).
- Teen pregnancy in Florida is higher than the national average
- 85% of births to mothers with substance abuse history are unintended.
- More NAS babies in NICU—2 days in hospital for healthy babies vs. 19 days average in the NICU for NAS.
- South Carolina Medicaid successfully implemented an immediate postpartum LARC program in 2012, resulting in 5.65% lower pregnancy rate for the first 21 months, at a savings of \$13K per avoided pregnancy.



## Aligning Stakeholder Efforts for Access to Reproductive Life Planning to Reduce Unintended Pregnancy and Improve Birth Outcomes



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## Reproductive Life Planning

- Birth choices are best considered in the context of education, family life, work, health status, and other priorities
- During their pregnancies, women have been very receptive to the option of receiving a LARC immediately after delivery, but until now, there have been barriers to access in the hospital setting
- Waiting until the post-partum 6-week check is often too late
- During pregnancy, 3<sup>rd</sup> trimester access to counseling and reproductive life planning allows the health plan and hospital to coordinate well in advance of the birth if the woman chooses IPP LARC
- A research-informed pre-conception/inter-conception curriculum published by the Centers for Disease Control and Prevention (CDC) is available for health plans <a href="here">here</a>.



# About Long-Acting Reversible Contraceptives (LARCs)

- LARCs are a safe, cost effective option, and these devices provide 3–5 or 10 years of reversible birth control (IUD or implant)
- Enable planned birth spacing
- Reduce incidence of low birth weight and premature births
- Prevent the potential for prenatal drug exposure and poor maternal and birth outcomes
- Reduce preventable NICU admissions and hospital length of stay
- LARC devices can be removed at health department clinics throughout the state, even if the member is no longer Medicaid eligible



# Florida Medicaid Inpatient Hospital Services Coverage Policy

### 8.2 Specific Criteria

Florida Medicaid reimburses for inpatient hospital services using a DRG methodology, with the exception of:

- ✓ Infant and newborn hearing screening
- ✓ Intrathecal baclofen therapy pump
- ✓ Long-acting reversible contraception
- ✓ Transplant services
- √ Vagus nerve stimulator device



# Florida Medicaid LARC Utilization

#### By Health plan:

- LARC utilization rate among the health plans ranges from 0.33% to 1.49% (in women between the ages of 12–59)
- Mean of about 1%

#### By Region:

 Highest concentration in Miami-Dade, Broward, Palm Beach, Osceola

#### By Age Group and Ethnicity:

- As low as 11 and as high as 59 years
- Ages 16–35 highest utilization
- Ages 25–27 peak utilization
- Higher among White and Hispanic; lower among blacks and other ethnicities



## **LARC Pilot and Quality Initiative**

### Jacksonville Pilot

Addresses the entire health care community

- UF Health Jacksonville
- UnitedHealthcare
- NE FL Healthy Start



## • FPQC "Access LARC" Quality Initiative

Engages hospital systems to prepare them to educate and train staff, stock LARC devices, and provide and bill for this service. Hospitals interested in participating can find more information on the FPQC website link:

http://health.usf.edu/publichealth/chiles/fpqc/larc.



### **Postpartum LARC Access Initiative**

- Participation with Stakeholders
  - (DOH, FPQC, Jax LARC Discussion Group, Medicaid Health Plans)
- Identification/Elimination of Barriers to Access in Medicaid
  - Coverage and Reimbursement Policy Changes
  - Evaluation of Reimbursement
  - Assess Utilization

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- Instructions for Fee-for-Service Medicaid Billing for IPP LARC
- Technical assistance to health plans to facilitate implementation
  - Statewide Medicaid Utilization Data
  - Education & Training (Webinars, PIP Check-ins)
  - Tool Kit Resources (address member education, hospital contracting, and coordination, etc.)

### Postpartum LARC Access—Tool Kit Components

(Patient, Provider, Hospital, and Health Plan)

## Patient & Provider

- Inform patients and providers about current data, address myths to improve knowledge
- Engage patients and providers at the community and institutional level

### Health Plan Preparedness

- Establish administrative and clinical champions or stakeholders
- Evaluate and test internal processes and systems
- Develop or adopt provider service and device reimbursement methodologies (insertion and removal)
- Collection of data and frequent surveillance
- Education materials and resources for reproductive life planning

# Hospital Provider Preparedness

- Establish administrative and clinical champions or stakeholders
- Refine systems and contracts between hospitals and health plans
- Educate and train clinicians and billing and coding staff
- Ensure stock and supply in pharmacies and on medical floors



#### Agency's Partnership in the Immediate Postpartum (IPP) Last updated on 8/2017 Long-Acting Reversible Contraceptive (LARC) Initiative: **Status Color Key** Green - Complete **MMA Health Plans** Blue - In Progress **Timeline** Red - Delayed Grey - Not Yet Started 2017 - 2020 2018 - 2020 2017 Conduct hospital Update AHCA recruitment FPOC on hospital Continue webinar recruitment SYSTEM TESTING & IMPLEMENTATION drafting Participate in Begin LARC Access Conduct focus MMA recruiting toolkit group study prerecruitment/ hospitals implementation info call **AUGUST** OCTOBER JULY SEPTEMBER 0 0 0 0 2016 2018-2020 Conduct MMA **9**— **FAHP** survey post-**Ø**= implementation Meeting with **FL EQRO** Send IPP LARC **FAHP** Re-evaluate meeting on Conduct f/u MGT LEVEL Readiness **FAHP** Medical Aug. 30th utilization of AHCA-health plan Send provider Survey to Committee **IPP LARCs** LARC Access QI alert to all health plans. data HIGH webinar w/FPQC providers about **LEVEL** inpatient LARC SUSTAINABILITY **Meeting Topics** policy change Present on Conduct f/u Promote, Statewide LARC Policy change AHCA-health plan implement, and updates Initiative at the MGT LEVEL LARC Access QI • Marie D. to present on ALL offer trainings to Update on **FAHP Annual Conf.** Conduct AHCA webinar w/ FPQC **Plan Conf. Call** (7/2017) HIGH LEVEL residents/physicians billing/ **Quality/Operations** Conduct MMA LARC Kick-Off Info Finalize MMA IPP LARC on evidence-based reimbursement Committee Meeting. leadership (e.g., Webinar (in-lieu of Access Prep Guide **Meeting Topics** program guidelines methodologies CEOs) conference steering comm.) for System testing for family planning call with CMOs, pharmacy, Sept. 15<sup>th</sup> (Friday) • Provider and LARC use in FL **Beth Kidder** contract, and patient/ health Joint comm. mtg. **Medical Schools** quality staff. plan-enrollee Quality Network. Will have a webinar outreach series. strategies AWARENESS, RECRUITMENT, PRE-IMPLEMENTATION, & SYSTEM READINESS

### **Resources – Health Plans and Providers**

#### General family planning information

- One Key Question™ Pregnancy Intention Questionnaire (Oregon Health Plan)
- CDC Show Your Love Campaign includes a preconception/inter-conception tool providers integrate
  in clinical practice and health plans may incorporate questions into their health assessments.

#### • US Medical Eligibility Criteria (US MEC)

- CDC Use Contraceptives Guidelines-includes recommendations for using contraceptive methods by women and men who have certain characteristics and medical conditions.
- MEC Summary Chart (<u>English</u>) and (<u>Spanish</u>)

#### Getting to Know Long-Acting Reversible Contraception (LARC)

- <u>LARC FAQs</u> The American Congress of Obstetricians and Gynecologists (ACOG) presents answers to frequently asked questions (FAQs) regarding LARCs.
- <u>LARC First</u> –an evidence-based contraceptive care model that contains tools for practitioners, patients, and administrative staff necessary to successfully adopt CHOICE counseling into a provider practice.
- CDC Birth Control Effectiveness Includes all available contraceptive methods by effectiveness;
   LARCS can be found on the top-tier.
- Compare Birth Control methods <a href="https://www.bedsider.org/methods/matrix">https://www.bedsider.org/methods/matrix</a>
- <u>Intrauterine Device (IUD) Fact Sheet</u> -Brief information on IUDs for consumers.
- Hormonal Implant Information Brief information on the hormonal implant for consumers.
- ACOG Motivational Interviewing Behavior Change Tool
   recommended as the most appropriate counseling method for providers to employ during a woman's (e.g., adolescents) prenatal care visit.