

State: Arkansas

Demonstration Name: Arkansas Women's Health Services Program

Description & Status:

Under this Demonstration, the State will provide a limited Medicaid benefit package of family planning and family planning-related services to populations currently not covered under the Medicaid State plan. Under this Demonstration, Arkansas expects to promote the objectives of title XIX as follows to:

- Increasing access to and the use of Medicaid paid family planning services for women of childbearing age;
- Decreasing inadequately spaced pregnancies among women in the target population;
- Decreasing the number of Medicaid paid deliveries; and
- Improving the availability of family planning services for the Demonstration population.

Populations:

The Arkansas Family Planning Demonstration currently provides family planning and family planning-related services for women of childbearing age, who have family income at or below 200 percent of the Federal poverty level (FPL), who are not otherwise eligible for Medicaid, the Children's Health Insurance Program (CHIP), the Arkansas section 1115 Safety Net Benefit Program and do not have any other health insurance coverage that provides family planning services.

Approval Date: June 18, 1996

Effective Date: September 1, 1997

Expiration Date: December 31, 2013

Pending Actions:

There are no pending actions at this time.

ARKANAS
SECTION 1115 FAMILY PLANNING DEMONSTRATION
FACT SHEET

Program Name: **Arkansas Women’s Health Services Program**

Initial Application

Date Proposal Submitted: September 13, 1995
Date Proposal Approved: June 18, 1996
Date of Implementation: September 1, 1997

First Renewal

Date Proposal Submitted: July 31, 2002
Date Approved: January 31, 2003

Second Renewal

Expiration Date: February 1, 2009

Third Renewal

Date Proposal Submitted: January 25, 2009
Date Approved: July 28, 2009
Expiration Date: January 31, 2012

Forth Renewal

Date Proposal Submitted: August 31, 2011
Date Approved: April 12, 2012
Expiration Date: December 31, 2013

SUMMARY

The Arkansas Women's Health Services Program provides coverage for family planning and family planning related services to women of childbearing age with a family income at or below 200 percent of the Federal poverty level, who are not otherwise eligible for Medicaid, the Children's Health Insurance Program, or the Arkansas section 1115 Safety Net Benefit Program, and do not have any other health insurance coverage that provides family planning services.

ELIGIBILITY

The Demonstration currently provides family planning and family planning-related services for women of child bearing age, who have a net family income at or below 200 percent of the FPL, who are not otherwise eligible for Medicaid, the Children’s Health Insurance Program (CHIP), the Arkansas section 1115 Safety Net Benefit Program or have other health insurance coverage that provides family planning services.

DELIVERY SYSTEM

The benefits for this Demonstration are offered through a Fee for Service model.

BENEFITS

Family planning services and supplies are those services and supplies whose primary purpose is family planning and which are provided in a family planning setting, such as approved methods of contraception, sexually transmitted infection (STI)/sexually transmitted disease (STD) testing, Pap smears and pelvic exams, contraceptive management, patient education and counseling.

Family planning-related services and supplies are defined as those services provided as part of or as follow-up to a family planning visit. Such services are provided because a “family planning-related” problem was identified and/or diagnosed during a routine or periodic family planning visit, such as a colposcopy or repeat Pap smears as follow up to an abnormal Pap smear, and drugs/treatment for STIs/STDs.

EVALUATION PLAN

The State’s evaluation plan focuses on objectives such as to:

- Increasing access to and the use of Medicaid paid family planning services for women of childbearing age;
- Decreasing inadequately spaced pregnancies among women in the target population;
- Decreasing the number of Medicaid paid deliveries; and
- Improving the availability of family planning services for the Demonstration population.