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## Proposed Revisions to Rhode Island Global Waiver 1115 Extension

### POTENTIAL NEW SERVICES UNDER CONSIDERATION

The State is in the process of researching and reviewing services that are designed to provide more effective and less costly alternatives to traditional Medicaid-funded services, such as emergency department visits and hospitalizations. The State looks forward to working with CMS regarding the ability to implement one or more of the following during the waiver extension period.

#### Extended Family Planning

To better achieve the goals of the Extended Family Planning Program, which are to ensure optimal inter-birth intervals and optimal maternal and child health for Medicaid recipients, and reduce the complexity of administration the Extended Family Planning Benefit will include the following categories of service:

1. New patient or established patient office visits
2. Screening, testing, counseling, and treatment (and, where applicable, vaccination and follow-up testing and treatment for sexually transmitted infections, including:
  - a. Gonorrhea
  - b. Chlamydia
  - c. HPV
  - d. Genital Herpes simplex
  - e. Trichomonas
  - f. Syphilis
  - g. Hepatitis B and C
  - h. HIV (screening and counseling only)
3. Screening and treatment for urinary tract infection
4. Age appropriate preventive screening, not covered by Breast and Cervical Cancer screening program, as recommended by the US Preventive Services Task Force.
5. FDA approved contraceptive pharmaceuticals and devices, including condoms, and their associated insertion and removal procedure codes. Also including reimbursement for dispensing the FDA approved contraceptive pharmaceuticals and devices and facility fees for outpatient surgical procedures.
6. Pre-conceptional counseling
7. Folic acid supplements
8. Tobacco cessation counseling and nicotine replacement therapy

These categories, while remaining within the relatively narrow definition of Family Planning Services, help avoid a short interbirth interval that can lead to adverse consequences for [the subsequent] pregnancy, maternal health, and birth health outcomes. Providing these services to the parent of a young infant and non-pregnant individuals is a cost effective method to prevent [subsequent low birthweight births] low birth outcomes in the Medicaid program, and to [insure] ensure adequate maternal resources are available to the Medicaid-eligible child born during the prior eligibility period. [All other aspects of the Extended Family Planning Program outlined in the prior demonstration remain in full effect in the extension period.]