



WRONG-HEADED DECIMATION OF FAMILY PLANNING:

Massive Double-Hit Will Increase Abortions and Unplanned Medicaid Births and Cost Texas More

Access to birth control for low-income Texas women will be critically wounded under the conference committee proposed budget, collateral damage in battles over abortion. Contraceptive services—not abortion—will be gutted in the state budget on two fronts. Like all states, Texas funds family planning through federal block grants and through Medicaid coverage. It should be noted that these programs provide not only birth control, but also preventive care and basic check-ups to low-income and largely uninsured women (one-third of Texas working age adults are uninsured). Sadly, the Texas legislature now proposes to profoundly undermine both areas of birth control access (again, not abortion services, which are not covered under either funding source, or funded in any way through our state budget). **As proposed, these budget actions will cause over 400,000 Texas women to lose family planning and basic health services.**

State Health Services Family Planning Programs

Department of State Health Services (DSHS) administers family planning funding from federal block grants Title X, V, and XX, which go to about 285 health care sites (family planning clinics, community health centers, county health departments and others) across the state. As reported in our last health care budget updates (<http://www.cphp.org/research.php?aid=1092>; <http://www.cphp.org/research.php?aid=1102>), the introduced budget bill would have reduced family planning programs at DSHS to \$99.6 million for 2012-13, which is \$11.9 million less than the 2010-11 funding level, or 11 percent lower. But the Texas House voted to reduce family planning by another \$61 million from the amount in the introduced budget; leaving just \$38 million, or a 66 percent reduction from current 2010-11 funds. The Texas Senate voted to stay at the amount in the introduced budget (i.e., the 11 percent cut), but media reports now indicate that the conference committee on the budget has decided to adopt the lower House funding. This decision has not been announced in a public hearing; the decisions were announced as “pending” on May 16 and have not been mentioned since in the conference committee proceedings. House and Senate budget chairs have told reporters that the House decisions will be taken when the conference committee meets again on Thursday May 26.

Nearly all of the DSHS family planning funds being cut will be federal funds; the state-dollar (GR) share is less than \$1 million. **With the cuts, 284,000 fewer low-income women will receive birth control services, resulting in tens of thousands of unplanned pregnancies, and a projected \$98 million increase in Medicaid costs.** As Healthy Futures of Texas (<http://www.healthyfuturestx.org/>) has projected, these cuts would also mean thousands more abortions, and many clinics that are not Planned Parenthood clinics would be forced to close.

Medicaid Family Planning

Texas Medicaid pays for more than half of Texas births, but full Medicaid coverage is not available to most low-income uninsured women (only about 200,000 Texas parents in deep poverty get full Medicaid coverage, compared to 2.4 million children). In 2005, Texas joined a number of other states in creating a special Medicaid family planning program, the Medicaid Women's Health Program (WHP), that allows all US citizen women at the same income levels as those who could qualify for maternity benefits to get family planning services. **Texas saves \$10 for each \$1 it puts into the program, and renewal of WHP is officially estimated to save the state over \$83 million in 2012-13.**

Texas' program, which serves about 120,000 additional low-to-moderate income women, is now due for renewal with federal Medicaid authorities, and bills to reauthorize the WHP have come under attack from anti-abortion forces in attempt to exclude Planned Parenthood affiliates from participating in the program (Planned Parenthood clinics today serve about 40% of WHP's clients). It appears possible that the impasse over legislation to renew the program could result in a shut-down of these Medicaid-funded birth control services as well. **If this happens, over 120,000 Texas women per month will lose access to family planning and well-women exam services.**

Access to family planning is a health care and an economic opportunity issue. Access is critical to reducing several Texas challenges: high and growing rates of pre-term births, births too close together causing medical risks for the newborn, and births to unmarried teen moms. When more than half of all Texas births are unplanned, maintaining family planning services is essential to making sure this number does not grow.

Access to the tools to plan the timing and size of our families is critical to promoting healthy infants, but it is also a critical to reducing poverty. Making sure all Texans have access to the tools they need to plan the timing and size of their families is a critical piece of the puzzle in building equal economic opportunity for Texans who aspire to overcome poverty, join the middle class, and realize prosperity.

The Center for Public Policy Priorities is a nonpartisan, nonprofit policy institute committed to improving public policies to better the economic and social conditions of low- and moderate-income Texans. Learn more at www.cppp.org.

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