

# New Mexico Title X Grantee's Perspective on Strengthening Family Planning Programs

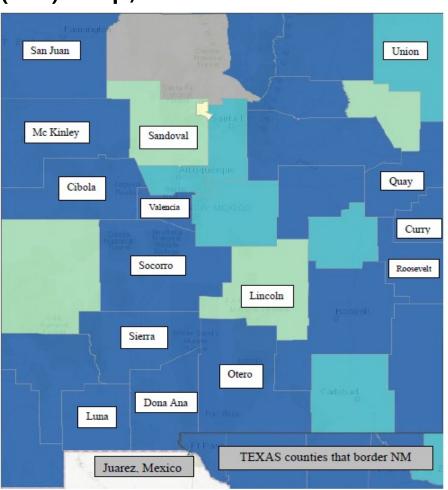
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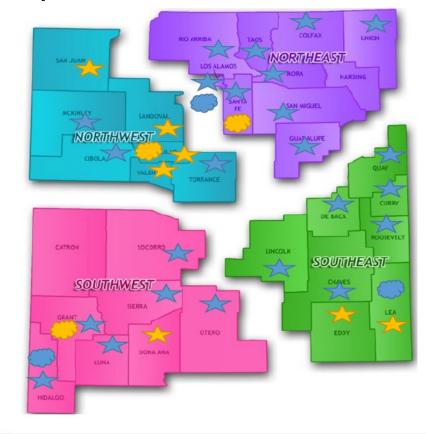


#### 2022 New Mexico Title X Need Assessment

## CDC's Social Vulnerability Index (SVI) Map, 2018



## Title X Services Clinic Coverage Map, 2022







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## NM DOH Family Planning Program (NM DOH FPP)

#### Title X Program Goals:

- Reduce unintended teen births
- Reduce unintended pregnancy
- Reduce chlamydial sexually transmitted infections that may cause infertility

#### **Clinical Services:**

- Reproductive health services
- Contraceptive counseling/ management
- Shared decision-making
- Lab testing

#### **Educational Programming:**

- Youth development
- Community education & outreach



#### NM DOH FPP Recommended Strategies

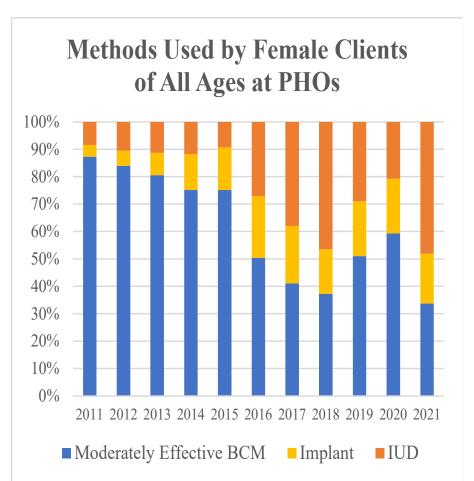
- Family planning clinical services: access to
  - Confidential services at low- or no-cost
  - Most and moderately effective contraceptive methods
  - Same-day access for moderately effective methods and emergency contraceptive pills
  - Telehealth family planning services
- Service learning and positive youth development programs: Teen Outreach Program, Teen Connection Project
- Comprehensive sex education
- Adult-teen communication programs:

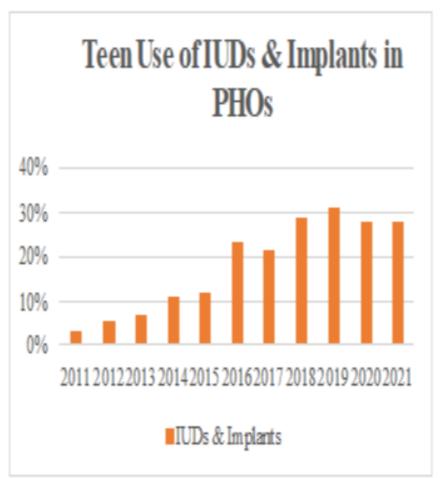


From Playground to Prom

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#### NM DOH Title X Public Health Offices









#### **New Mexico IPP LARC Initiative**

PROVISION OF LONG ACTING REVERSIBLE CONTRACEPTION (LARC) AT TIME OF AN INPATIENT DELIVERY STAY: A COLLABORATIVE EFFORT IN NEW MEXICO

Wanicha Burapa<sup>1</sup>, April Neri<sup>1</sup>, Lorraine Hyde<sup>2</sup>, Erica Archuleta<sup>2</sup>, Abigail Reese and Eve Espey <sup>3</sup>

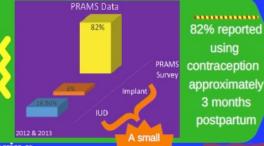
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#### Unintended pregnancies are common

Approximately half of pregnancies in Unintended pregnancies NM are unintended within one year of delivery in the U.S. are approximately

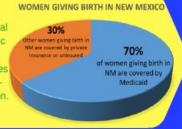
1 New Mexico Department of Health, Family Planning Program 2 New Mexico Human Services Department, Medical Assistance Division 3 University of New Mexico (UNM), Department of Obstetrics & Gynecology

#### NM postpartum PRAMS data

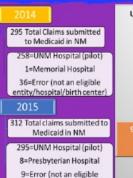


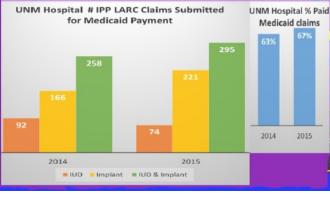
Percentage of births covered by Medicaid





#### In 2013, a Medicaid Supplemental Memo covering immediate postpartum (IPP) LARC was issued.









Expanding IPP LARC access is an important and cost-effective strategy for reducing unintended pregnancy in NM.





entity/hospital/birth center)

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2015

#### **Logic Model**

#### of National, State and Local Activities to Promote Increased Access to Contraception

Context	Inputs	$\Rightarrow$	Activities	Outputs	$\Rightarrow$	Short-term Outcomes	Intermediate Outcomes	Long-term Outcomes
National:  Political climate  State: Political climate Size/ demographics Urbanicity Climate for family planning Medicaid MCO structure Perinatal regionalization # service locations	National:  Funding for family planning services  ACOG, CDC, OPA clinical guidance re: contraceptive counseling and LARCs  Federal initiatives on infant mortality, postpartum and inter-conception health, contraceptive access (see arrow below)  Resources from organizations such as Guttmacher Institute and the National Campaign to Prevent Teen and Unplanned Pregnancy  State:  Funding for family planning services		See Table below for Activities by Learning Community Strategy and Level (National, State, Local)	See Table below for Outputs by Learning Community Strategy		State policies established to:     reimburse for full range     of contraceptive services     reimburse at cost for     LARC and other methods     reimburse for LARC     placement immediately     postpartum     remove administrative     barriers, such as preauthorization Reduced logistical barriers     for supply management of LARC devices  Increased access to full     range of most/moderately     effective methods at     outpatient clinics providing     contraceptive services Increased access to     immediate postpartum     LARC in birthing facilities     throughout the state	Increased uptake of most/moderately effective contraceptive methods by: people of reproductive age postpartum women  Improved client experience with the health care system  Improved client satisfaction with chosen contraceptive method	Increase in % of pregnancies that are planned     Appropriate pregnancy spacing      Reductions in*:         Preterm birth         Infant Mortality         Maternal Morbidity/ Mortality         Improved*:             Maternal educational and economic outcomes             Reproductive justice             Reductions in:             Costs to the healthcare system

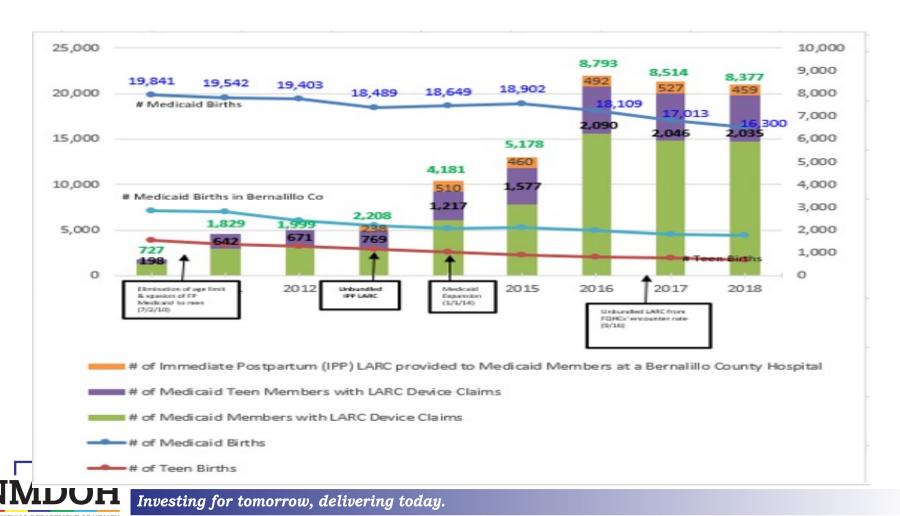
CMCS Maternal and Infant Health Initiative CMMI SIM Initiative OPA Quality Family Planning Guidelines/Contraceptive Measures

CDC Teen Pregnancy Winnable Battle CDC 6|18 HRSA/MCHB CollN Preconception and Interconception Strategy



Created by Dr. Kristin Rankin, University of Illinois at Chicago for the ASTHO Access to Contraception Learning Community

## NM Medicaid Policy Changes, 2010-2018

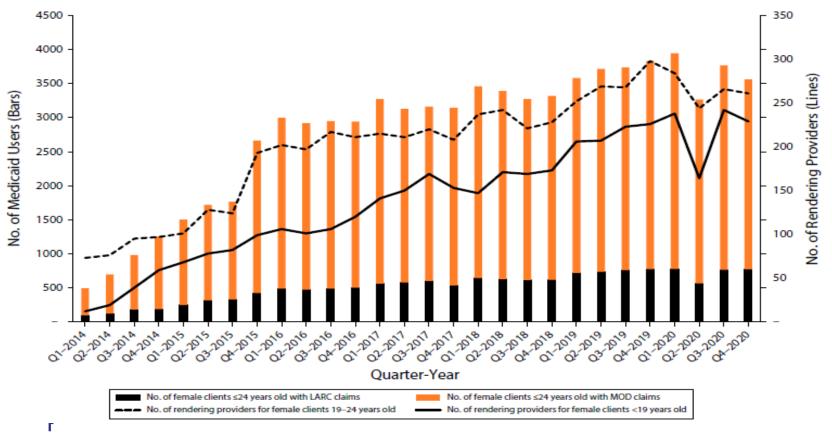


### New Mexico Strategies, 2014-2020

- **1. Provision of low- or no-cost contraception** in 60 Title X clinics statewide, including 30 NMDOH public health clinics
- 2. Provider training and technical assistance launched in December 2016
  - LARC Mentoring Program (LMP)
  - Virtual reproductive health clinic using the Extension for Community Healthcare Outcomes (ECHO) model
- 3. Public awareness campaigns: October 2016 June 2019
- 4. Policy changes: multiple, examples are
  - Medicaid family planning expansion via SPA (decades),
     Medicaid expansion (began in 2014), Codifying the
     Affordable Care Act contraceptive coverage provision



### NM Medicaid: Adolescents & Young Female Clients (≤24) – bar graph & Providers – line graph, 2014-2020, quarterly

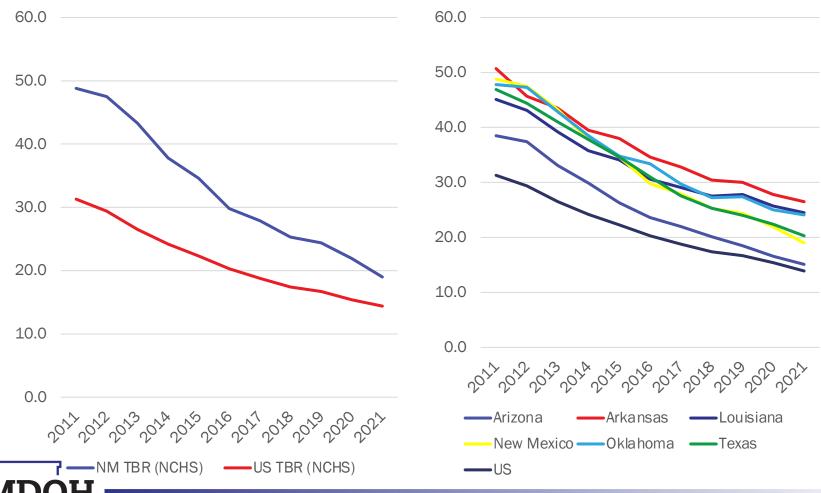




### Teen Birth Rate (TBR), 15-19



#### NM vs. SW states & US



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## NM Pregnancy Risk Assessment and Monitoring System (PRAMS)

