

2003-04 SESSION  
COMMITTEE HEARING  
RECORDS

Committee Name:

Senate Committee on  
Health, Children,  
Families, Aging and  
Long Term Care  
(SC-HCFALTC)

Sample:

Record of Comm. Proceedings ... RCP

- 03hrAC-EdR\_RCP\_pt01a
- 03hrAC-EdR\_RCP\_pt01b
- 03hrAC-EdR\_RCP\_pt02

➤ Appointments ... Appt

➤ \*\*

➤ Clearinghouse Rules ... CRule

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➤ Committee Hearings ... CH

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➤ Committee Reports ... CR

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➤ Executive Sessions ... ES

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➤ Hearing Records ... HR

➤ 03hr\_sb0186\_pt04

➤ Miscellaneous ... Misc

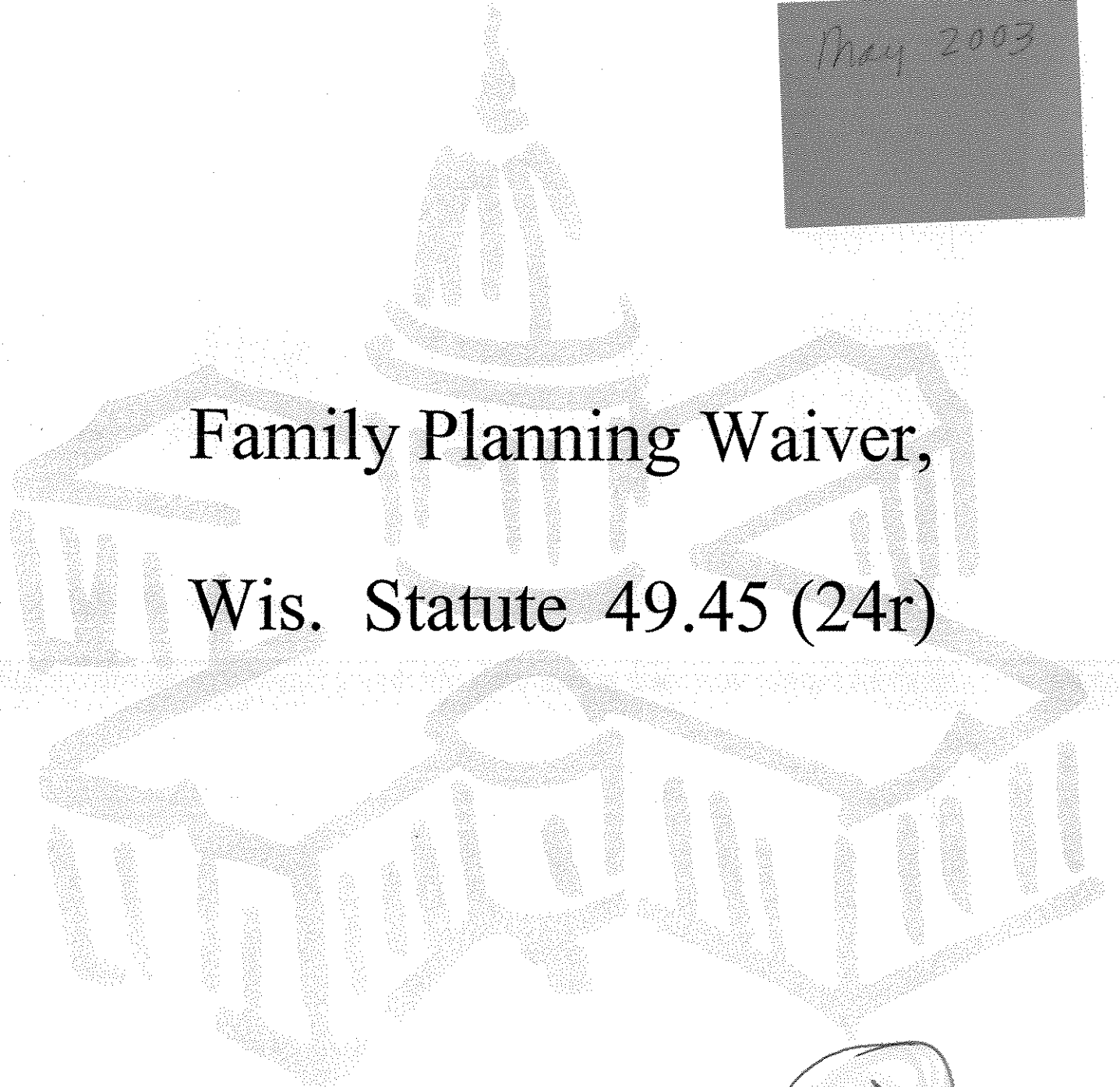
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SB 186

May 2003



**Family Planning Waiver,  
Wis. Statute 49.45 (24r)**

May  
2003



FOR IMMEDIATE RELEASE  
May 1, 2003

Contact: Lisa Boyce & Chris Taylor  
608-256-7549

**LEGISLATIVE COMMITTEE MOVES TO REJECT MILLIONS IN FEDERAL FUNDING  
TO EXTEND HEALTH CARE FOR LOW INCOME WOMEN**  
*Move impacts 47,000 low income women and efforts to reduce teen pregnancy*

(Madison, WI) In a highly unusual move, the Joint Committee on Administrative Rules voted 5-4 today to reject \$7.6 million dollars in annual federal aid to improve maternal and child health by extending health care benefits to an estimated 47,000 low income women in need of reproductive health care services in Wisconsin. The committee's action sets the stage to overturn a law (49.45(24r)) passed by the state Legislature with bi-partisan support in 1997 and recently approved by Secretary Tommy Thompson, that attracts additional federal funding to extend family planning services to low income women that are at high risk of unintended pregnancy because they do not have health coverage through Medicaid or Badgercare.

The goal of the family planning demonstration project is to reduce unintended pregnancy, the transmission of sexually transmitted infections and to promote early detection of cancer among low income women aged 15-44 who have no health care coverage. The program is estimated to attract \$29 million in federal funds over the 5 year project and save the state \$17 million GPR dollars over five years and \$8.9 million in Medicaid costs associated with unintended pregnancies.

"The members of the committee who voted to suspend this program (Rep. Grothman, Rep. Seratti, Rep. Gunderson, Sen. Lazich, Sen. Leibham) were clear in their belief that they do not support access to contraception and improved efforts to detect cancer and sexually transmitted infections among low income women," stated Lisa Boyce, vice president of public affairs for Planned Parenthood of Wisconsin. "To suspend this program that has already served the health care needs of thousands of women based on the narrow belief that contraceptives are immoral and threaten the lives of women, is a troubling indicator of the extreme policies we will face with the anti-birth control majority in the Legislature."

###



## Family Planning Waiver Talking Points

- **The Waiver allows low-income women to have health care they would not have otherwise.** Under the waiver 47,000 additional women would be served in the first year alone.
- **Expanding family planning services will help WI reduce rates of unintended pregnancy and abortion.** Half of all pregnancies in Wisconsin are unintended, and half of those end in abortion. Family planning services, including contraception, are an essential part of basic health care for women and are credited with preventing 24,200 unintended pregnancies and 12,100 abortions in Wisconsin each year
  - **Contraception is an essential component of women's health care.** By helping women to plan and space births, contraceptives help women to support themselves and their families and facilitate participation in the workforce, thereby reducing welfare dependency and encouraging self-sufficiency
  - **Unintended pregnancies have significant implications for a woman's health and well-being.** The consequences of unintended pregnancies disproportionately affect low-income women.
  - **The waiver program will reduce teen pregnancy by an estimated 15%.**
- **The family planning waiver will attract an estimated \$38 million in federal funds to Wisconsin over a 5 year period to enhance health care coverage for low income women.** The federal government has committed to paying 90% of the cost to implement this expanded program.
- **The family planning waiver is cost-effective.** Each public dollar spent to provide family planning services saves an estimated \$3.00 that would otherwise be spent on Medicaid costs for pregnancy-related care and medical care for the newborn.
  - 38 % of births in the United States and 36% of births in Wisconsin are born into families at or below 185% of poverty and therefore paid for by the Medicaid program.
  - **The waiver will save taxpayers millions.** By working to reduce the number of unintended pregnancies among low income women, the waiver is estimated to save the state \$17 million in general purpose revenue and Medicaid \$8.9 million over a 5 year period.
- **The Waiver has bi-partisan support.** In 1997, Republican State Representative Tom Ourada and Democratic State Senator Russ Decker advanced a proposal seeking legislative approval of a waiver from the federal government to expand family planning services to low income women who were not pregnant and did not already have children. The waiver was approved by the Legislature on a bi-partisan vote and was signed into law by then Governor Tommy Thompson. Last year, U.S. Health and Human Services Secretary Tommy Thompson announced final approval of the Waiver for Wisconsin.
- **Minors need confidential access to contraceptive care.** Constitutional law and federal courts have repeatedly held that minors have the right to reproductive privacy and contraceptive care without parental notification or consent.
  - **Teen are sexually active.** Statistics estimate that about 25% of 15 year olds and 55% of 17 year olds have had sex.
  - **Laws can't enforce good family communication**

- Forcing teens to get parental consent will not stop them from having sex – it will stop them from getting needed sexual health care.
  - Parental consent requirements will lead to an increase in unintended pregnancies, STD's and abortion.
  - Government should not erect barriers to teens who are trying to act responsibly by seeking information, assistance and medical care.
- 
- It is the height of hypocrisy for a legislator who opposes a woman's right to choose to also limit a woman's access to the very tools that help prevent unintended pregnancies and make abortions less necessary.
  - According to polling of voters by Snell Perry & Associates, 74 percent favor increased public funding for family planning services to reduce the number of unintended pregnancies.
  - **Family planning clinics involved in the waiver do not perform abortions.** Under federal and state law, no family planning clinic receiving state and/or federal funding may perform abortions or counsel in favor of abortions. Federally supported clinics, however, are required to provide women with nondirective information on all of their health care options including, adoption and pregnancy termination.



## **SUPPORT THE FAMILY PLANNING WAIVER**

**In the past, low-income women who were not pregnant or did not have children were ineligible for health care services under Medicaid or BadgerCare. Effective January 1, 2003, Wisconsin received a Waiver from the federal government to expand access to family planning health care services. Under this Waiver, low-income Wisconsin women of child-bearing age can receive family planning services, such as breast and cervical cancer screens, contraceptive counseling and services and testing and treatment for sexually transmitted infections.**

### **The Waiver Promotes Maternal and Child Health**

By expanding family planning services to low income women of child bearing age, the Waiver assures access to basic preventative and diagnostic health services and promotes maternal and child health. The Centers for Disease Control listed family planning as one of the top ten public health achievements of the 20<sup>th</sup> century. Publicly supported family planning programs reduce the number of unintended pregnancy and the transmission of STIs, and promote early detection of cancer. Wisconsin's family planning program averts 24,200 unintended pregnancies and 12,100 abortions each year. Allowing more women access to family planning services will decrease the number of unintended pregnancies and abortion. It is estimated that 47,000 women will receive family planning services under the Waiver, women who would not have these services otherwise.

### **The Waiver is Cost Effective**

Expanding family planning services to low-income women will attract an estimated \$35 million in federal funds to Wisconsin and is cost effective! By preventing unintended pregnancies, according to the Department of Health and Family Services' Fiscal Estimate, over a five-year period, the Waiver will save taxpayers over \$17 million in state general purpose revenue and \$8,897,500 in Medicaid costs. Under this program, the Federal government covers 90% of the costs associated with expanding family planning services.

According to a study by the Alan Guttmacher Institute, each dollar spent on family planning services saves an estimated \$3.00 that would otherwise be spent in medical care and other social services to women who by law would be eligible for such services if they became pregnant.

### **The Waiver has Bi-Partisan Support**

In 1997, Republican Representative Tom Ourada and Democratic State Senator Russ Decker, advanced a proposal seeking legislative approval of a waiver from the federal government to expand family planning services to low income women who were not pregnant and did not already have children. The waiver was approved by the Legislature on a bi-partisan vote and was signed into law by then Governor Tommy Thompson. Last year, U.S. Health and Human Services Secretary Tommy Thompson announced final approval of the Waiver for Wisconsin.

*This information was compiled by Planned Parenthood of Wisconsin's Public Affairs department. For more information about legislation related to reproductive health and choice, or to join our action alert contact PPWI at PO Box 2566 • Madison, WI 53701 • (608) 256-7549 or toll-free (800) 261-2464 • [www.ppwi.org](http://www.ppwi.org)*

5/4/2003

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## Daily Reports

THE COMPREHENSIVE SOURCE

### Daily Reproductive Health Report

**State Politics & Policy | Wisconsin Legislative Committee Attempts to Shut Down Family Planning Project by Suspending Rules**  
[May 02, 2003]

The Wisconsin Legislature's Joint Committee for Review of Administrative Rules on Wednesday voted 6-4 to suspend the rules for the federally funded Family Planning Demonstration Project, which provides birth control and other health services using federal funds, in an attempt to suspend the project's operation, the *AP/St. Paul Pioneer Press* reports. The program, which went into effect in January, provides \$29.3 million in federal funds over five years for family planning services for women who do not qualify for such services under Medicaid or Wisconsin's BadgerCare program. According to the state Department of Health and Family Services, 6,470 women had enrolled in the program as of Feb. 16 *AP/St. Paul Pioneer Press*, 5/1). According to Rep. Glenn Grothman (R), chair of the joint committee, the program covers all females ages 15 to 44 in the state who make less than 185% of the federal poverty level, or \$16,613 a year. Grothman said that the program allows teenagers to access contraceptives without parental consent. Despite the vote, the state will still be able to run the program because it is authorized by state law, according to the *Milwaukee Journal Sentinel*. Although Grothman acknowledged that the vote would not shut down the program, he said that the committee will consider other actions to limit it, according to the *Journal Sentinel*. "The idea of providing free family planning to every 15-year-old girl in the state, without their parents' knowledge, is an extreme position and offensive," Grothman said (Chapman, *Milwaukee Journal Sentinel*, 4/30). Sen. Joe Leibham (R) said that the vote was "more a philosophical stance against the age eligibility" than an attempt to shut down the program, adding that the program should require parental consent for minors seeking contraception, according to the *AP/Pioneer Press*. Leibham and Reps. Scott Gunderson (R) and Lorraine Serrati (R) plan to introduce legislation that would raise the minimum age for participation in the program to 18 (*AP/St. Paul Pioneer Press*, 5/1).

**Democrats Support Program**

Democrats on the committee said that Republicans were trying to restrict women's access to birth control, adding that the program is expected to serve 47,000 women and save the state approximately \$9 million in future health care costs in its first year, according to the *Journal Sentinel*. "Legislators who want to eliminate birth control are now in control of the Legislature," Rep. Jon Richards (D) said, adding, "This is the first of what likely will be many examples of wrong-headed anti-birth control, anti-family planning legislative actions." Gov. Jim Doyle (D) called the committee's move a "disaster," adding that the program provides "many women access to many of the same services that legislators have available under their state health insurance coverage" (*Milwaukee Journal Sentinel*, 4/30). Diane Welsh, DHFS executive assistant, said that the health department would try to work with the committee and research a possible age requirement change (*AP/St. Paul Pioneer Press*, 5/1).

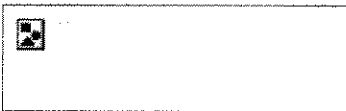
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**SAVE THE FAMILY PLANNING WAIVER**  
**OPPOSE AB 383 AND SB 186**

The Family Planning Waiver (FPW) is a Medicaid program through which low-income women ages 15-44 receive diagnostic and preventative health services. AB 383 and SB 186 seek to dismantle this important program by excluding young women ages 15-17 from the program.

• **THE FPW PROVIDES NEEDED HEALTH CARE TO WOMEN**

- The FPW provides basic diagnostic and preventative health care services to low-income women, such as:
  - cancer screens and breast exams
  - sexually transmitted infection diagnosis and treatment
  - access to family planning services, such as birth control. No public monies can be used to provide abortion services.
- Publicly supported family planning programs reduce the number of unintended pregnancy, abortion, and the transmission of sexually transmitted infections, and promote early detection of cancer.
  - Wisconsin's family planning program averts 24,200 unintended pregnancies and 12,100 abortions each year.
- The FPW helps alleviate the health care crisis in our state
  - Since January, 2003, over 25,000 women have been enrolled in the FPW
  - It is estimated that 47,000 women will receive family planning services under the FPW. These women who would not have these services otherwise.

• **THE FPW PREVENTS TEEN PREGNANCY**

- FPW is estimated to reduce teen pregnancy by 15%
- Most recent studies on teen pregnancy (by the National Campaign for the Prevention of Teen Pregnancy) confirm that access to birth control is a key component to preventing teen pregnancy.
- *To access with control*  
~~Minors have a legally recognized right to confidential reproductive health services under all Medicaid programs. State parental consent laws for access to family planning services under Medicaid have been struck down by courts throughout the country.~~

• **THE FPW SAVES WISCONSIN TAXPAYERS MILLIONS OF DOLLARS**

- The federal government pays 90% of the FPW program, attracting \$7.6 million in federal funds into our state;
- The FPW saves Wisconsin taxpayers \$17 million dollars over the five year life of the program.
- The Waiver saves taxpayers' money by preventing teen pregnancy:

# Charges expected in baby's death

## Initial appearance to take place Thursday

**BY JIM COLLAR**  
OF THE NORTHWESTERN

Criminal charges will be filed this week in an Oshkosh case involving the death of an infant girl, Calumet County District Attorney Ken Kratz stated Monday.

Kratz on Monday afternoon issued a press release stating that an initial appearance is expected to take place Thursday in Winnebago County Circuit Court on charges related to the death. The release did not indicate who would be charged. The 17-year-old mother of the baby is being held in Winnebago County Jail on a probation hold, police records show.

Kratz could not be reached for comment following the issue of the release.

Oshkosh police began investigating late last month after the young infant was found dead April 26. Officials have since offered little information on the circumstances of the death of the child.

An autopsy was conducted on the baby April 28. The results were not released to the public because they could show the cause or manner of the death.

Police delivered the results of their investigation to Kratz Wednesday.

The Calumet County district attorney was named special prosecutor last week after Winnebago County District Attorney Bill Lennon removed himself from any dealings in the case. Lennon cited a conflict of interest because he is a friend of the baby's grandfather.

The mother of the baby, a student at Oshkosh West High School, is on probation after two convictions last year for misdemeanor theft and disorderly conduct. The Northwestern is not reporting the name of the mother because no formal charges have yet been filed in the case.

Kratz Monday did not indicate what charges would be filed in the case and said no more information will be released until criminal proceedings begin. The initial court appearance in the case is expected to begin at 1:30

OUR OPINION

# Family planning prevents abortion

**B**reak out the burkas. It looks as if state lawmakers are finally set to shackle society's most dangerous element: women capable of reproduction.

A legislative committee recently voted to suspend rules for a federally funded family planning program for the poor in hopes of shutting it down. The project, which went into effect in January, would provide \$29.3 million in federal money over five years for services such as family planning and cancer screening.

What's the problem? Rep. Glenn Grothman, R-West Bend, the rules committee co-chairman, worries that the project will allow girls 15 and older to seek contraceptives without parental consent. It's too bad that Grothman and others are too blinded by ideology to see value in the program. The Family Planning Demonstration Project is expected to save about \$26 million in taxpayer money and Medicaid costs by preventing pregnancies among poor women, according to the Republicans who proposed the project in the late 1990s.

But this new, wrong-headed effort to shutter the project is just a drip from a deep well of backward ideas to keep women from getting birth control or reliable information about their reproductive health, their bodies and even their pregnancies. Pending in the state Assembly or Senate are measures that would:

◆ Let pharmacists refuse to sell women birth control if they don't think women should have that option (AB 63 and SB 21).

◆ Let doctors withhold birth-defect test results from women when there's a

Lawmakers are drawing from a deep well of backward ideas to keep women from getting birth control or reproductive health information.

problem with the fetus — on the worry that the woman might then terminate her pregnancy (SB 27). In combination with another bill (AB 67) that would expose hospitals to liability for employees who refuse to do their jobs based on moral or religious beliefs, this measure could create a field of dreams for civil trial lawyers.

◆ Take away public funding for family planning clinics that give women information about abortion (AB 231 and SB 84).

Sheesh, where's the bill requiring women to go barefoot?

These measures don't stand much chance of becoming law, but the trend is still troubling. Last time we checked, abortion and birth control were legal.

More curiously, the rules committee antics suggest that abortion isn't what most bothers our overzealous lawmakers. It's sex.

Despite our best efforts to convince young people to delay having sex until they are mature enough to handle it, and to live with the consequences, many still go ahead. Within that group, many have sex that is unprotected, and far too many become pregnant.

In this very real world, information and contraceptives are the best tools to reduce abortion. Those who truly oppose abortion undermine their cause when they try to prevent women from preventing pregnancy through family-planning services,

## Wisconsin State Journal

JAMES W. HOPSON Publisher

FRANK DENTON Editor TIM KELLEY Editorial page editor

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SB 186

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# Teen charged in newborn's death

## Cleaver faces life in prison for homicide

By Jim Collar  
OF THE NORTHWESTERN

An Oshkosh teen-ager could receive automatic life imprisonment if convicted of drowning her newborn and hiding the infant's body.

Special prosecutor Ken Kratz said 17-year-old Kristen K. Cleaver went to great lengths to hide her pregnancy and later murdered her minutes-old infant, a baby girl.

"The child was born and, as the facts of the case indicate, Miss Cleaver left four to five inches of water in the bathtub and watched as her newborn child drowned," said Kratz, district attorney for Calumet County.

Cleaver made her initial appearance as an adult Thursday in Winnebago County Circuit Court on charges of first-degree intentional homicide in connection with the March 16 death.

The criminal complaint states that Cleaver hid her pregnancy from her parents and denied being pregnant when confronted.

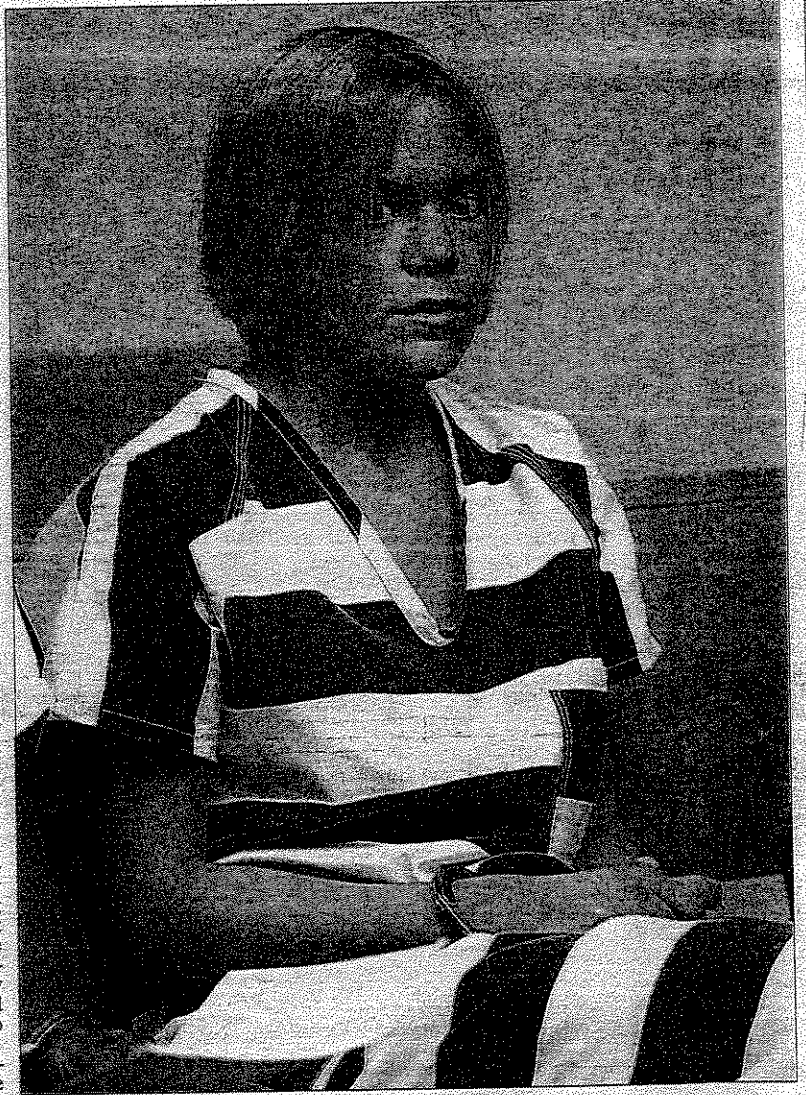
On April 26, Cleaver's parents discovered the baby in a blue plastic bag in their daughter's bedroom closet after noticing a strong odor coming from the basement room. That same day, Cleaver told police that she gave birth in the bathtub while home alone nearly six weeks earlier and watched her child drown, according to the complaint.

Police began an investigation after her parents found the body.

The family later named the infant Eva Marie Cleaver.

Family members and local media packed the Public Safety Building courtroom prior to the 1:30 p.m. appearance. The hearing was an emotional one.

Cleaver shed some tears and her voice wavered while answering questions from Court Commissioner Daniel Bissett. Facial expressions



JOE SIENKIEWICZ/OF THE NORTHWESTERN

**KRISTEN CLEAVER** appeared in Winnebago County Circuit Court Thursday and is charged with the first degree intentional homicide of her baby and hiding a corpse.

Following the hearing, a scuffle broke out in the parking lot among some of those who sat in the gallery.

Kratz said Thursday the baby's death was both tragic and intended.

Cleaver told police that she

Cleaver cut the umbilical cord with a pair of scissors. After the child stopped moving, Cleaver got a plastic bag from the hall closet, placed the child in the bag and put the bag in her bedroom, the complaint states.

dirty laundry was causing the odor. She called for her husband to come home and they opened the bag together.

"She was absolutely horrified to find a dead infant in the basement of her family home," Kratz said.

While the case is tragic on



# Republican-controlled panel would se

ASSOCIATED PRESS

MADISON — The state Department of Natural Resources would have to try to sell \$40 million in public land bought through the state stewardship fund under a proposal approved by the Legislature's budget-writing committee Thursday.

The Republican-controlled Joint Finance Committee voted 12-4 along party lines to require the agency to sell \$20 million of land in both 2004 and 2005 and submit any reasons why it can't reach those numbers to the committee. The state uses the stewardship fund to buy wilderness areas and preserve them for the public.

Sen. Gwendolynne Moore, D-

Milwaukee, accused Republicans on the committee of turning their backs on Wisconsin's wilderness. She said she worried about developers gobbling up the land.

"People don't buy property so my grandkids can go up there and have a picnic," Moore said.

Sen. Bob Welch, R-Redgranite, who introduced the measure, said he was offended by Moore's sug-

gestions.

"I'm insulted you think the only people who want to buy land are developers," Welch told Moore. "That's goofy."

The proposal calls for the DNR to try to sell isolated parcels first. Any sales would be subject to committee approval. The money would go into the state's budget reserves as it grapples with a

## Charges: Teen hid pregnancy from parents, hid baby's corpse

FROM PAGE A1

make a decision for the health and well-being of her child.

Cleaver told officers that she learned about her pregnancy after taking a home test on July 6. After the test, she decided not to tell her family or her boyfriend, according to the complaint.

Cleaver said she began to gain weight in December, about a month after she began to feel the child move and kick.

In February, her father asked whether she was pregnant, but she denied it, according to the complaint. Both parents told officers that they noticed their daughter's abdomen shrink in the weeks before discovering the baby.

According to the complaint, the identity of the father of the child could be a motive for the teen's crime.

Cleaver told police that while her 25-year-old boyfriend was out of town, she had a sexual relationship with someone else. She was upset that the baby

could have been conceived with the other partner, also 25, according to the complaint.

She further said that she didn't think she could care for the child and didn't think people would help her through her pregnancy, according to the complaint.

Pathologist Alan Stormo, who conducted an April 28 autopsy on the child, said it was initially difficult to determine whether the child was alive during birth. Kratz said Thursday that other evidence later clarified the case.

"This in fact was a live birth," he said.

Cleaver's next court hearing could come as early as next week.

She remains in Winnebago County Jail on probation hold relating to previous convictions for theft. If the hold is lifted, she must still meet a \$100,000 cash bond for release.

A preliminary hearing in the case is scheduled for May 14, but

it may be delayed. Cleaver waived the right to a speedy preliminary hearing to give her attorney more time to prepare for the hearing if needed. Cleaver is being represented by the State Public Defender's Office.

Kratz was named special prosecutor last week after Winnebago County District Attorney Bill Lennon removed himself from any dealings in the case. Lennon cited a conflict of interest because he is a friend of the baby's grandfather.

Defense attorney Colleen Bradley on Thursday asked the court for preservation of tissue evidence for their discovery process. Another attorney from the office will be appointed to handle the case through the remaining proceedings, she said.

Investigation into the case continues even while prosecution began.

Kratz said it could be a full month before an autopsy report becomes available. Investigators

are also working to compare DNA with the two men who could be the father. It's unknown if or when other charges could be filed in relation to the case, he said. Prosecutors could charge one or both of the men with sexual assault.

In addition to the homicide charge filed against Cleaver, prosecutors filed a second felony charge in the case for hiding a corpse. That charge carries a maximum 10-year prison sentence.

Kratz said Cleaver knew she had other options available, but went out of her way not to take those options. Neither Cleaver's age nor the short life of her child is any reason to consider less serious charges, he said.

"It didn't make any difference if the child was 6 minutes old, 6 years old or 60 years old," Kratz said. "The accountability has to be the same."

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Robert Wood Johnson  
Community Health Leadership Program  
EMBARGOED FOR A.M. TUES. MAY 18  
For more information, contact:  
Susan Laine at 301-656-0348  
or [Susan.Laine@verizon.net](mailto:Susan.Laine@verizon.net)

## WISCONSIN ADVOCATE WINS \$120,000 NATIONAL AWARD FOR EXPANDING ACCESS TO FAMILY PLANNING SERVICES

*Community Health Leadership Program Awards \$1.2 million to Health Innovators*

**BOSTON** (May 18, 2004) – Lon Newman, who champions the cause of accessible, affordable family planning and contraceptives for poor and young women in Wisconsin, has earned the nation's highest honor for community health leadership.

Newman is among 10 outstanding individuals from across the country chosen this year to receive a Robert Wood Johnson Community Health Leadership Program (CHLP) award.

A long-time family planning advocate, Newman directs Family Planning Health Services, Inc., in Wausau, Wisc., which offers reproductive health care, contraceptive services and education at seven clinics in a seven-county area of central Wisconsin.

Each year, the agency serves about 5,000 women seeking lower costs and access to all options for confidential reproductive health care. Additionally, the agency serves 3,000 families with the Women, Infants and Children (WIC) nutritional program.

"Lon is a tireless advocate in the pursuit of quality, affordable, accessible reproductive health care," said a colleague. "His creativity and energy level continue despite the adversity he encounters on a routine basis."

Newman spent several years working with other family planning advocates to win passage in the Wisconsin legislature of a federal waiver to expand Medicaid eligibility for reproductive health care to all women in the state between the ages of 15 and 44.

He successfully fought last-minute attempts to change the program's fee structure to one that would cripple family planning agencies. Newman has protected minors' access to confidential healthcare against legislative attacks.

"Though often cast in the role of 'a voice crying in the wilderness,' he has and continues to provide passionate, yet reasoned, views on the ever-contentious issue of family planning and reproductive healthcare," Newman's nominator said.

While human growth and development project director for several Wisconsin school districts in the 1980s, he gained notoriety for bringing a sexuality education speaker to a community meeting. He emerged as a pragmatic voice when he generated support for the program from students, parents and community members troubled by teen pregnancy trends.

More recently, Newman convinced several major employers that they would save money on personnel costs by providing comprehensive reproductive health care to employees through Family Planning Health Services. He also developed the Contraceptive Kiosk, a creative outreach tool that can be set up at colleges and businesses so women can determine their eligibility for services and make appointments at a clinic.

Newman was instrumental in forming the Wisconsin Family Planning Reproductive Health Association, which keeps providers of low-cost services up to date on technical skills and issues and works to protect access.

"These committed people have stepped into the breach, providing services and attending to needs that our larger health care system is unable to meet," said Catherine Dunham, program director, CHLP. "They have the wisdom to invest in and educate their communities because they know that the only real way to improve the health of the people in their communities is to prevent illness and injury in the first place."

The program awards \$1.2 million each year to individuals who have overcome significant challenges to expand access to health care and social services to underserved members of their communities. Newman and this year's other winners will be honored at a June 16 event in Washington, D.C. He will receive \$105,000 to enhance his program and \$15,000 as a personal award.

Newman was chosen from nearly 800 nominations for this year's honor. Since 1992, the program has given 120 awards to community leaders in 44 states, Puerto Rico and the District of Columbia.

This year's award winners represent urban and rural areas of California, Florida, Illinois, New York, Maine, Maryland, Michigan, Missouri, and Wisconsin. They were nominated by community leaders, health professionals, government officials and others inspired by their work in providing essential health services to their communities.

The Community Health Leadership Program is a national program of The Robert Wood Johnson Foundation, the nation's largest philanthropy devoted exclusively to improving health and health care for all Americans.

For more information, contact the program at (617) 426-9772 or visit [www.communityhealthleaders.org](http://www.communityhealthleaders.org)

###



## GUEST COLUMN

# Family planning program deserves support

By Mark Moody

**O**f 24 states with a federally approved Family Planning Program, about a dozen mirror Wisconsin's approach. They all think this great idea makes a lot of sense, and in Wisconsin, it passed the Legislature with wide support as well as the support of then-Gov. Tommy Thompson.

That's hardly the impression left by Jeffrey Jones in his guest column Wednesday in the Wisconsin State Journal. Like a few legislators, he wants to torpedo the program on a distorted interpretation of what the program seeks to accomplish, and a narrow vision of how unwanted pregnancies should be avoided.

Wisconsin's Family Planning Program is designed to help low-income women and teens aged 15 to 44 who are not in the Medicaid program gain access to family planning and primary care services. Services include pap tests, colposcopy, testing for sexually transmitted diseases, routine preventive care and contraceptive services. The federal government pays for 90 percent of the program, which is designed to benefit some 47,000 eligible Wisconsin women while preventing unwanted pregnancies and building a healthier Wisconsin.

Among other criticisms, Jones says the program "assumes unrealistically that Medicaid births will fall 80 percent, from 6,000 to 1,200 per year." Actually, the program does not address the birth rate for the entire Medicaid population, as he claims. In 2000, Medicaid paid for 24,587 births — not the 6,000 referred to by Jones. What the program does assume is that, if 47,000 low-income women receive the services offered by the program, the births among these 47,000 women will be reduced from 6,000 to 1,200.

Jones' misreading of the program's target audience also leads him into an irrelevant debate about intended and unintended pregnancies in the Medicaid program. The Family Planning Program's target audience does not include women currently enrolled in Medicaid; it only includes women who are not otherwise eligible for Medicaid.

Misunderstandings aside, it seems that what's really bugging Jones is his opposition to minors' ability to obtain contraceptives without parental consent and his belief that promotion of abstinence from sex is the best strategy.

I agree that abstinence is the best way to prevent teen pregnancy and sexually transmitted disease. I also agree that parental involvement in a teen's life has a positive impact on behavior. But even healthy families often have difficulty discussing sexuality and sexual behavior. And of the young women who do receive guidance, some will not heed it.

The result hits Wisconsin taxpayers. In the year 2000, there were 7,081 teen births in Wisconsin. Of those, a staggering 5,995 — or 85 percent — were paid for by the Medicaid program. Pregnancy and birth will qualify these new mothers for continued Medicaid coverage, putting additional strain on the taxpayers. And the future of many of these new families can be bleak.

Furthermore, the debate over parental notification was settled long ago. Statutes and case law have firmly established the confidentiality rights of teens in matters of reproductive health. Like it or not, it is the law.

Promotion of abstinence plays a role in preventing unwanted pregnancies, but the promotion of abstinence alone will not solve the problem. The Department of Health and Family Services manages an aggressive teen abstinence program, as do other organizations. However, the fact that we still have some 7,000 teen births a year is a telling argument for the necessity of a balanced, preventive approach to the issue.

The Family Planning Program is an important feature of such an approach. Judging by the past bipartisan support of our Legislature, most folks in Wisconsin understand that. In fact, many people opposed to abortion support this program precisely because reducing unintended pregnancies reduces demand for abortions.

In the debate on teen sexual activity, we should not lose sight of the fact that the Family Planning Program is not just about teens — it will reach out to some 47,000 low-income women, of whom about 85 percent are adults. Also, the program covers other services besides contraceptives.

The Family Planning Program is a reasonable approach to help solve many pressing reproductive and preventive health needs. It deserves the support of the people of Wisconsin.

---

*Moody is administrator of the Division of Health Care Financing, Wisconsin Department of Health and Family Services.*

WSJ, Tues 20 May 2003

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The Capital Times ■ Wednesday, May 21, 2003

9A

## Family planning project merits bipartisan support



Arnesen

Family planning programs are under assault in the Wisconsin Legislature. The attack escalated in late April, when the Joint Committee for Review of Administrative Rules voted to suspend the rules for a new family planning program that was initially drawn up by Gov. Tommy Thompson.

The new program, known as the Medicaid Family Planning Demonstration Project, is expected to provide family planning services to nearly 50,000 Wisconsin women. The Thompson and McCallum administrations developed the initiative, and last year the Bush administration approved a federal waiver for the project.

In the waiver agreement, the federal government committed to pay 90 percent of the cost of the family planning services, compared to 59 percent for other Medicaid programs. Despite that generous cost-sharing arrangement, the project is expected to save the fed-

eral treasury \$9 million over the next five years by avoiding Medicaid and welfare costs associated with unplanned pregnancies. Wisconsin is expected to save even more — an estimated \$17 million.

Over the past four months, the new project has provided free family planning services, including routine exams, cancer screenings and contraceptive products, to nearly 17,000 women. The program provides health care to women at or below 185 percent of the federal poverty line who do not qualify for Medicaid or Badger Care. It extends benefits to childless women between the ages of 15 and 44, in an effort to decrease nonmarital and unplanned pregnancies. Given the impressive number of women already served, it is clear that this program was needed.

Unfortunately, conservative legislators are opposed to providing family planning services to low-income women. They, along with groups such as Pro-

Continuing downward trends in teen pregnancy and abortion rates are beneficial because unintended pregnancies are associated with a multitude of problems, including reduced educational attainment for the mother, higher poverty rates and higher health risks for the children. Access to family planning services allows women to prevent or postpone pregnancy and increases their ability to achieve self-sufficiency. In addition to reducing Medicaid-eligible pregnancies, the program will also improve the overall health of low-income women through preventive screenings and the treatment of STIs and cervical cancer.

Leading opponents of the family planning program, such as Grothman, argue that the provision of family planning services to teens interferes with parental control. They fall to acknowledge that there are good reasons federal courts have repeatedly protected

teens' rights to confidential reproductive health services: Requiring parental consent puts the health and lives of teens at risk. The sexual behavior of teens does not change with or without parental consent — but their utilization of health care services changes for the worse. Teens will be sexually active whether or not parental consent is mandated, and four out of 10 girls still become pregnant by the age of 20.

• • •

Surely, both Republicans and Democrats agree that rising rates of unintended pregnancies, abortions and untreated STIs should be avoided. Bipartisan support was responsible for the new family planning project, and there should be bipartisan support to continue it.

Anne Arnesen is executive director of the Wisconsin Council on Children and Families, an advocacy organization for issues related to the health and well-being of children and families.

### ANNE ARNESEN

**The Medicaid Family Planning Demonstration Project has the potential to significantly reduce unplanned pregnancies, abortions and the incidence of sexually transmitted infections. The Department of Health and Family Services estimates that the program will reduce teen pregnancy by 15 percent.**

Life Wisconsin, believe that access to contraception increases the rate of abortions, pregnancies and sexually transmitted infections (STIs). Rep. Glenn Grothman and others are especially concerned with the provision of family planning services to teens; they believe that making contraceptives available to sexually active teens will undermine parental authority. They also believe that this program will encourage sexual promiscuity.

Opponents of family planning cite a controversial study that concluded the provision of contraceptives in Britain increased the number of pregnancies. However, according to

the Alan Guttmacher Institute, the study results were flawed. Most research indicates that access to family planning services and contraception decreases pregnancy and abortion rates. Furthermore, a comprehensive study by the National Campaign to Prevent Teen Pregnancy found that these services do not increase sexual activity.

The Medicaid Family Planning Demonstration Project has the potential to significantly reduce unplanned pregnancies, abortions and the incidence of STIs. The Department of Health and Family Services estimates that the program will reduce teen pregnancy by 15 percent.

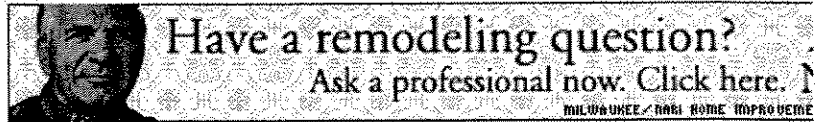
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# Study: Condoms Don't Increase Teen Sex

Associated Press

Last Updated: May 28, 2003 at 11:37:52 a.m.

WASHINGTON - Teenagers at high schools where condoms were available were no more likely to have sex than other teens, a study published Wednesday finds.

The study confirms earlier research on the programs developed in the 1990s to stem the spread of HIV and reduce teen pregnancy. It found that students in high schools with condom programs were more likely to use condoms, though students in other high schools were more likely to use other forms of birth control.

Some conservative groups have staunchly opposed such programs, saying they send the wrong message and in effect encourage and enable teens to have sex before marriage.

Researchers writing in the American Journal of Public Health, examined high schools in Massachusetts, where the state Department of Education encouraged schools to develop condom programs. In most cases, the condoms were available from the school nurse or from other personnel such as a gym teacher.

The study took a sample of all high schools, comparing students at nine schools that made condoms available with those at 50 schools that did not. The data came from a 1995 survey of students' sexual behavior.

They found students in schools with condom programs were slightly less likely to report having had sexual intercourse than those at other schools. Specifically, 49 percent of students at non-condom schools reported having ever had sex, compared with 42 percent of those at schools with condoms available.

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"The concerns of the small minority of parents who oppose providing condoms or related instruction in schools were not substantiated," wrote lead author Susan M. Blake and her colleagues at George Washington University School of Public Health and Health Services.

Among teens who were sexually active, more at schools where condoms were available said they used condoms the last time they had sex: 66 percent vs. 49 percent at non-condom schools. The students at non-condom schools were more likely to have used other birth control.

Overall, there was no difference in pregnancy rates among students.

The study also found that schools offering condoms were also more likely to teach students how to use them properly. Students at condom schools also were more likely to have received information about HIV and AIDS.

Curiously, though, the study found that students at schools with condom programs were no more likely than others to say that condoms were easily available, even though they were more likely to use them.

Researchers said it may not have been that making condoms available prompted teens to use them, but that communities that were likely to adopt the programs were also more likely to support condom use to begin with.

The study did not compare teenage sexual behavior before and after condom programs were instituted, researchers note, so the study does not prove that the program changed anyone's behavior.

The data on teen sexual behavior came from the 1995 Massachusetts Youth Risk Behavior Survey. It included interviews with 4,166 students. About one in five of them were enrolled in a school with a condom availability program.

On the Net: American Journal of Public Health: <http://www.ajph.org> (PROFILE (COUNTRY:United States; ISOCOUNTRY3:USA; UNTOP:021; APGROUP:NorthAmerica;))



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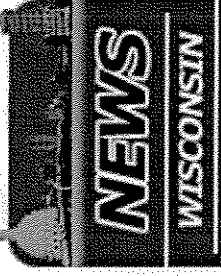


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## GOP fights program's teen birth control

### Bills would block Medicaid-paid services to poor

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By RICHARD P. JONES  
rjones@journal sentinel.com

Last Updated: May 27, 2003

**Madison** - A divided legislative committee took steps Tuesday to prevent a state-run family planning program from offering its services to girls under 18, a move that will likely set the stage for a heated debate this session on teenage sex, birth control and abortion.

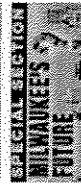
On a party-line 5-4 vote, the Republican-controlled Joint Committee for Review of Administrative Rules sent both houses identical bills that would block the Family Planning Demonstration Project from providing birth control, cancer screening and other services to those under 18.

The program, which began under the administration of former GOP Gov. Scott McCallum, uses federal Medicaid funds to provide family planning services to low-income women between 15 and 44. The program operates under a federal waiver approved by Health and

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Human Services Secretary Tommy Thompson, McCallum's predecessor.

The program provides \$29.3 million over five years to aid women who would be ineligible for family planning services under Medicaid or BadgerCare. Backers of the program say it could save an estimated \$9 million in BadgerCare and Medicaid costs in the years ahead.

The committee last month voted to suspend the rules for the program because committee members opposed including teenagers as young as 15. But officials with the state Department of Health and Family Services continued operating the program, citing authority under the statute authorizing such health care services.

### Parental consent a key issue

Rep. Glenn Grothman (R-West Bend), committee co-chairman, objected to offering free contraceptive services for 15-year-old girls without parental consent.

"I have talked to many women in my district . . . and I can't find any of them who don't think that the idea of pre-family planning for 15-year-olds is an outrage," he said.

But Democrats on the committee said denying family planning services to teens would violate the terms of the federal waiver and would jeopardize the entire program, which is expected to serve 47,000 low-income women.

Sen. Judy Robson (D-Beloit), a registered nurse, said teens will continue to have sex, become pregnant and likely have abortions. Republicans who oppose abortion should see the program as a way to prevent abortion, she added.

Robson cited a recent report by the National Campaign to Prevent Teen Pregnancy that she said offered sobering statistics on teen sex and abortion that adults cannot ignore.

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"Teenagers not only are getting pregnant, they are having abortions, lots of abortions," Robson said. "This is real. You can prevent teens from having abortions - probably 1,100 or more - by having them have access to contraceptive services. Wishing it ain't going to happen is not going to happen. Kids are having sex."

**Republicans dispute claim**

However, Sen. Mary Lazich (R-New Berlin) and Rep. Lorraine Seratti (R-Florence) rejected such arguments.

"There's fewer high school students engaging in risky behavior," Lazich maintained, based on her reading of a U.S. Centers for Disease Control and Prevention report on sexually transmitted diseases among teens. She said providing teens with contraceptives would give them a false sense of security and encourage them to have sex.

Republicans acknowledged that even if their bill passes the full Legislature, it likely would be vetoed by Democratic Gov. Jim Doyle. Still, they said the issue needs to be debated.

"It appears that we've got entrenched bureaucrats in the room, and we've got Democrats grandstanding for special-interest groups," Seratti said. "This is an issue that I believe many, many parents across the state would like to have more of a voice in. It's very obvious that because of federal and state court decisions, we don't have a choice on some parts of it. But that's not to say we can't take a principled stand."

Rep. Scott Gunderson (R-Waterford) said the legislation backed by the committee isn't about abortion or family planning.

"It's about parental notification for 15-, 16- and 17-year-olds," he said. "Our action here today will not shut down this program. What it will do is open up a new discussion around this state about how we deal with these issues. The governor's not going to let this go forward anyway. The governor will veto this. We'd all be kidding ourselves if we thought different."

But Rep. Spencer Black (D-Madison) said the legislation could undermine health care for all low-income women eligible for the program.

"Low-income women need health care, and the reality of this bill is that it will place in jeopardy health care for 47,000 women in this state," Black said.

Diane Welsh, a Health and Family Services official, said the legislation, if enacted, likely would require the state to seek a modification of the waiver. She urged lawmakers to let the agency continue providing services to women 15 to 44 years of age until such a modification is approved.

She noted that in 2000, there were 2,067 births and 715 abortions among teenagers between 15 and 17.

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# Legislation would end family planning for teenagers

Associated Press

**"The extreme right wing of the Republican party wants no family planning at all. Some of you live in the Ozzie Nelson, Ward Cleaver world."**

Rep. Tom Hebl  
D-Sun Prairie

MADISON - Girls under age 18 would not have access to a federally funded family planning program for the poor under legislation a legislative committee voted to introduce Tuesday.

The bill is the latest effort by Republicans to prevent teenagers from participating in the project, which went into effect in January.

Last month, the Republican-controlled Joint Committee for Review of Administrative Rules voted to suspend the rules for the program because they opposed including teenagers as young as 15.

But officials with the state Department of Health and Family Services continued operating the Family Planning Demonstration Project. They claim state law requires them to allow younger teens to obtain contraceptives so Wis-

consin will not lose the federal money used to pay for the program.

Rep. Spencer Black, D-Madison, accused Republicans on the panel of trying to cut off access to family planning by promoting legislation that "would place this entire program in jeopardy."

The Republicans said they opposed allowing girls under 18 to obtain contraceptives without parental consent.

"We shouldn't be encouraging sexual activity by giving them a

false sense of security," said Rep. Lorraine Seratti, R-Spread Eagle. "I'm not asking to blow up the whole program."

But Democrats claimed that's exactly what Republicans are trying to do.

"The extreme right wing of the Republican party wants no family planning at all," said Rep. Tom Hebl, D-Sun Prairie. "Some of you live in the Ozzie Nelson, Ward Cleaver world."

Wisconsin is expected to receive \$6.6 million in federal dollars dur-

ing the next two years for services such as family planning and cancer screening to women between the ages of 15 and 44.

The bill, which the committee voted 5-4 along party lines to introduce Tuesday, would require women to be at least 18 to take part in the program.

DHFS executive assistant Diane Welsh told the committee that state law directs the agency to serve those as young as 15 under the program, as does the agreement the state has with the federal government to operate the program.

She said notifying parents their daughters are using the program would violate Medicaid rules and state law.

Welsh also said any changes to the program without federal approval could jeopardize the fund-

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NOTE TO MY READERS: To learn more about EB5, call toll free: 1-800-929-8325 or visit their website at www.eb5.com.

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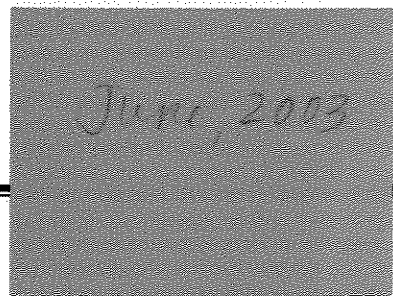
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JUN 02 2003

SB 186



May 28, 2003

Dear Legislator:

On May 27, The Joint Committee on Administrative Rules took action to send a bill to the legislature that would jeopardize health care to 47,000 Wisconsin women. Although their effort is purportedly to exclude minors from the program, if this bill were to become law, it would put Wisconsin's Medicaid Family Planning Waiver at serious risk.

Our organization represents family planning providers in every legislative district in Wisconsin. We support successful implementation of Wisconsin's Family Planning Waiver. Without this program, a large group of women in the state will go without essential health care.

This program covers those women most frequently uninsured: those who currently do not have children and those who are working in lower paying service sector jobs. The Medicaid Family Planning Waiver fills the gap for those not eligible for the Wisconsin Well Women Program and Medicare and supports the State Division of Public Health in its effort to provide preventive health services to Wisconsin residents. The program will reduce rates of cancer, sexually transmitted diseases, and the incidence of other health risks such as poor nutrition and tobacco use. The funding provided through the State Medicaid program is supported with a 9 to 1 federal match -- and even those state funds will be saved by preventing unintended pregnancies in this group of women who would be eligible for other more costly Medicaid services if they became pregnant.

As you are aware, the greatest number of unintended births in the state is to women ages 18 to 25. This program directly supports preventive and reproductive health services for these women.

Your support of the Waiver continuation means you support access to women's health care for the uninsured in Wisconsin. It means you support maximizing federal funding for preventive health care in Wisconsin. It means you support reducing unintended pregnancies and reducing abortions. We urge you to oppose any legislation that jeopardizes this program.

Sincerely

Lon Newman  
Public Affairs Committee Chair

Wisconsin Family Planning and Reproductive Health Association

719 North Third Ave., Wausau, WI 54401

(715)675-9858 - fax (715)675-5475 - email Newm104w@Juno.com

JUN 02 2003

May 30, 2003

To: Senator Carol Roessler, Senator Michael G. Ellis, Representative Gregg Underheim, Rep. Terri McCormick

From: Dorry Wilner, 1707 Chestnut Street, Oshkosh, WI 54901 (920) 233-8579

Re: Joint Committee for Review of Administrative Rules Action concerning Family Planning Demonstration Project


As a professional working with youth in five counties in the Northeast Central region of Wisconsin, I am writing to ask your help in convincing Republicans to discontinue their efforts to suspend the rules for the Family Planning Waiver benefit that affect young women ages 15-17.

Field based research proves that access to family planning care and information DOES NOT promote or encourage sexual activity among teens. Teens make the choice to be sexually active for a myriad of other reasons that are not influenced by access to family planning care and information. Other research shows that sexual activity and pregnancies among teens are on the decline, partly because teens do have access to family planning care and information and make the choice to have safe sex.

If teens choose to be sexually active, they should have access to health care and information in a safe and nurturing setting that comes with adequate health care. Many teens do not have that access through their parents because many parents don't attend or choose not to attend to the sexuality of their teens or they don't have access to health care themselves.

Recent local events (two newspaper articles are enclosed) are evidence that there is a need for more accessible family planning information for teens in our communities. The Family Planning Waiver was a breakthrough in providing this care to this population. It will be up to us, the professionals working with teens, to educate them about good decision-making and self care but we need resources like the Family Planning Waiver to assist us with that work. By educating young women about healthy choices and options, we are insuring a healthier older population and healthier children born to those women in the future.

Please help us in our work by convincing other legislators not to interfere with the opportunity we have to offer family planning health care to teens who need it! Thank you in advance for your consideration.

Dorry Wilner   
Youth Programs Coordinator  
Center for Career Development and Employability Training  
UW Oshkosh

## 2003 SENATE BILL 186


[Link to Bill History](#)

**June 3, 2003 - Introduced by Joint Committee For Review of Administrative Rules. Referred to Committee on Health, Children, Families, Aging and Long Term Care.**


Pg1Ln1     **An Act** to amend 49.45 (24r) of the statutes; relating to: a Medical Assistance  
Pg1Ln2     family planning demonstration project minimum age eligibility limitation  
Pg1Ln3     change.

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### Analysis by the Legislative Reference Bureau

SB186 

Under current law, the Department of Health and Family Services (DHFS) must request a waiver from the secretary of the federal Department of Health and Human Services for conduct of a demonstration project, under the Medical Assistance Program, to provide family planning services to women aged 15 to 44 whose family incomes do not exceed 185% of the federal poverty line for families the size of the women's families. DHFS must implement the waiver, if granted, by July 1, 1998, or the waiver's effective date, whichever is later.

SB186 

This bill changes the minimum age requirement, from 15 to 18 years, for eligibility for the Medical Assistance Program demonstration project to provide family planning services to women whose family incomes do not exceed 185% of the federal poverty line for families the size of the women's families.

SB186 

This bill is introduced as required by s. 227.26 (2) (f), stats., in support of the action of the Joint Committee for Review of Administrative Rules in suspending on April 31, 2003, a revision to chs. HFS 101 to 107, Wis. Adm. Code, relating to the Medicaid Family Planning Demonstration Project, an emergency rule of DHFS. The suspended rule provided for implementation in February 2003 of the Medicaid Family Planning Demonstration Project, under which family planning services would be provided to women aged 15 to 44 whose family incomes do not exceed 185% of the federal poverty line for families the size of the women's families.

For further information see the state and local fiscal estimate, which will be printed as an appendix to this bill.

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*The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:*

SB186, s. 1



Pg2Ln1

**Section 1.** 49.45 (24r) of the statutes is amended to read:

SB186, s. 1 - continued



Pg2Ln2

Pg2Ln3

Pg2Ln4

Pg2Ln5

Pg2Ln6

Pg2Ln7

Pg2Ln8

Pg2Ln9

Pg2Ln10

49.45 (24r) **Family planning demonstration project.** The department shall request a waiver from the secretary of the federal department of health and human services to permit the department to conduct a demonstration project to provide family planning services, as defined in s. 253.07 (1) (b), under medical assistance to any woman between the ages of ~~15~~ 18 and 44 whose family income does not exceed 185% of the poverty line for a family the size of the woman's family. If the waiver is granted and in effect, the department shall implement the waiver no later than July 1, 1998, or on the effective date of the waiver, whichever is later.

**(End)**

**To:** All Senators

**From:** Lisa Boyce, V.P. of Public Affairs  
Chris Taylor, Legislative Director

**Date:** June 18, 2003

**RE:** **Protect Funding for Family Planning and the Family Planning Waiver in the Budget**

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We expect that a motion may come before the Senate today to derail Wisconsin's successful family planning program, including the Medicaid Family Planning Waiver. Specifically, we anticipate that there may be an effort to impose a "gag rule" on what family planning clinics can say to their patients to receive state family planning funds. In addition, there may be an attempt to restrict coverage for the Family Planning Waiver Program from the current population of women ages 15-44 to women 18-44.

We urge you to vote against these efforts and to support the Governor's and Joint Finances' allocation of funds for family planning in the budget, without any additional restrictions. These vital family planning programs must be preserved without excluding young women and without restricting what a health care professional can communicate to patients!

**Wisconsin's Family Planning Program and the Family Planning Waiver Provide Health Care to Low-Income Women**

The state's successful family planning program provides low-income individuals with access to contraceptive services and supplies, breast and cervical cancer screenings, pregnancy counseling as well as testing and treatment of sexually transmitted infections. Wisconsin's family planning clinics serve 106,860 women and avert 24,200 unintended pregnancies and 12,100 abortions each year. The Centers for Disease Control listed family planning as one of the top ten public health achievements of the 20<sup>th</sup> century.

The basic preventative and diagnostic reproductive health care services offered under the Family Planning Waiver promote and protect women's health. To date, over 16,000 women have enrolled in this program. Under this program, deadly diseases like cervical cancer are detected, sexually transmitted infections are screened and treated and the number of unintended pregnancies is reduced.

**Wisconsin's Family Planning Program and the Family Planning Waiver are Cost Effective**

Each dollar spent on family planning services saves an estimated \$3.00 that would otherwise be spent on medical care and other social services to women who by law would be eligible for such services if they become pregnant.

The federal government pays 90% of the costs for the Family Planning Waiver that was originally approved by the Wisconsin legislature on a bi-partisan vote. The DHFS estimates that this program will attract \$38 million of federal dollars to Wisconsin. The cost to Wisconsin to maintain this program over the next two years is \$499,200. It is estimated that the Waiver program will save Wisconsin taxpayers \$17,076,646 in GPR over the five year program.

Currently, Wisconsin taxpayers pay for 73% of teen births and 36% of all births in Wisconsin under Medicaid. Thus, the goal of the waiver is to reduce these expenses related to unintended pregnancy by enhancing women's ability to access preventative health care services.

Any attempt to impose restrictions on the Family Planning Waiver program may render Wisconsin out of compliance with the terms of the state's Waiver program as approved by the federal government. These expected actions will not only jeopardize the 47,000 women estimated to benefit from these preventative health services under this program, but will jeopardize Wisconsin's ability to receive millions of dollars in federal assistance. ~~Further,~~

**For these reasons, we urge you to support funding for Wisconsin's Family Planning Program and the Medicaid Family Planning Waiver Program as they are currently being implemented and to reject any efforts to amend, or restrict funding for, these important programs.**



**Jermstad, Sara**

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**From:** Rohrer, Daniel  
**Sent:** Thursday, June 19, 2003 2:20 PM  
**To:** Jermstad, Sara; Jermstad, Sara  
**Subject:** New Forward Contact Ownership and Assignment

Constituent: Adam Bindert (173303)  
 315 Polk St Apt 8  
 North Fond Du Lac, WI 54937-1259

**Owner:** Jermstad, Sara  
**Assigned:** Jermstad, Sara  
**Summary:** Family planning

**Issue:**  
**Position:**  
**Status:** Pending  
**Contact Type:** E-mail  
**Description:**

-----Original Message-----

**From:** abindert@yahoo.com [mailto:abindert@yahoo.com]  
**Sent:** Thursday, June 19, 2003 10:30 AM  
**To:** Sen.Roessler@legis.state.wi.us  
**Subject:** Support Family Planning in the Budget!

June 19, 2003

Dear Sen. Carol Roessler,

Family planning is key to helping women and men make responsible choices about their reproductive health. Family planning programs not only help women avoid unintended pregnancy, but also provides them with basic health care such as breast and cervical cancer screenings, annual exams, contraceptives, pregnancy testing and counseling, and testing and treatment of sexually transmitted infections. Wisconsin's family planning clinics serve over 106,000 women and prevent 24,200 unintended pregnancies and 12,100 abortions each year. Additionally, each dollar spent on family planning services saves an estimated \$3.00 that would otherwise be spent on medical care and other social services to women who, by law, would be eligible for such services if they became pregnant. And with the implementation of the Medicaid Family Planning Waiver, an additional 50,000 low-income women will have access to these services this year alone (and will save Wisconsin taxpayers \$17 million over the 5-year term of the program).

Efforts to strip family planning providers of crucial funding that is necessary to help Wisconsin citizens stay healthy, puts the lives of thousands of women, and men, at risk. It is unfortunate that some elected officials don't seem to appreciate access to quality health care, nor understand that abortion can be prevented if unwanted pregnancy is prevented. Gutting the state family planning program and crippling health care providers' efforts to reduce unintended and teen pregnancy is simply a senseless attack on women's health care.



I urge you to support the Governor's and the Joint Finance Committee's budget allocation for family planning funding and the Family Planning Waiver. I also urge you to oppose any efforts to defund or restrict these programs and to vote against AB 231/SB 84 (the "State Gag Rule") and AB 383/SB 186 (the "Repeal of the Family Planning Waiver" bill). It is essential that the funding in the current budget versions is sustained and that these critical programs, which ensure low-income women have access to basic reproductive health care, are preserved.

Sincerely,

Adam Bindert  
315 Polk St Apt 8  
North Fond Du Lac, WI 54937-1259