
Q: What is the Extended Women's Health Services Program?

- A:** The Extended Women's Health Services Program provides limited health services to uninsured women who are not otherwise eligible for Medicaid. To be eligible, a woman must:
- be between 18 and 55 years of age
 - have a family modified adjusted gross income for household size that does not exceed 201 percent of the federal poverty level
 - need family planning services
 - be uninsured, with no access to employer-sponsored insurance providing coverage for family planning services

Eligible participants are those enrolled only under Medicaid Eligibility Codes 80 and 89.

Q: What are the total funds available to providers under this program?

- A:** The Missouri General Assembly budgeted \$10,790,923 for state fiscal year 2017.

Q: What services does the program cover?

- A:** Eligible participants may receive:
- approved methods of contraception;
 - sexually transmitted disease testing and treatment, including pap tests and pelvic exams;
 - family planning, counseling and contraceptive; and
 - drugs, supplies, or devices related to these services, when prescribed by a physician or advanced practice nurse.

Q: Where can I get more information about this program?

- A:** More information is available on the MO HealthNet Division website, at <https://mydss.mo.gov/healthcare/uninsured-women-health-services>.

Q: Why have the reimbursement criteria changed for SFY 2017?

- A:** The General Assembly placed restrictions on these funds in Section 11.550 of House Bill 2011, the budget bill appropriating money to the MO HealthNet program. The text associated with this line item of funding states:

“none of the funds appropriated herein may be expended to directly or indirectly subsidize abortion services or procedures or administrative functions and none of the funds appropriated herein may be paid or granted to an organization that provides abortion services.”

Q: Does the bill define “abortion services?”

A: No.

Q: How can a provider determine what is meant by “abortion services?”

A: Since the bill does not define abortion services, the only other way to ascertain the legislature’s intent is to look to the statutory definition of abortion.

Q: What is considered an abortion under Missouri statute?

A: Section 188.015(1), RSMo defines an abortion as one of the following:

- (a) The act of using or prescribing any instrument, device, medicine, drug, or any other means or substance with the intent to destroy the life of an embryo or fetus in his or her mother's womb; or
- (b) The intentional termination of the pregnancy of a mother by using or prescribing any instrument, device, medicine, drug, or other means or substance with an intention other than to increase the probability of a live birth or to remove a dead or dying unborn child.

Q: Does the language in Section 11.550 include an exception for an abortion necessary to save the life of the mother?

A: There is no language in the bill that creates an exception for abortions necessary to save the life of the mother.

Q: Would prescribing RU486 be considered an abortion under Missouri statute?

A: The definition of abortion in Section 188.015 includes chemically induced procedures intended to terminate a pregnancy.

Q: Are morning after pills, such as Plan B, considered abortion?

A: It is not entirely clear whether emergency contraceptives fall within the definition of abortion under Missouri statute, but it is possible. Under Missouri statute, an unborn child includes a zygote, which is a fertilized egg. Theoretically, morning after pills could thin the lining of the uterus and prevent implantation of a fertilized egg, which could be considered to fall within Missouri’s definition of an abortion.

Q: Under Section 11.550, can my facility be denied funds for Extended Women’s Health Services even if it complies with all laws regulating abortions?

A: Nothing in Section 11.550 alters Missouri’s laws on abortion. It prohibits the payment of funds under this particular budget line to providers who perform abortions.

Q: When do these restrictions take effect?

A: HB 2011 took effect on July 1, 2016, the commencement of the state fiscal year. In a letter to providers, MO HealthNet indicated that it would cease reimbursement to providers who do not return the attestation by February 1, 2017. It is not clear if MO HealthNet intends to recoup any payments made prior to February 1 based on a provider's attestation.

Q: What if my facility does not provide abortions, but is affiliated with an entity that does?

A: Section 11.550 does allow an organization that is affiliated with an entity that provides abortion services to receive these funds, if the affiliated organization providing abortion services is independent of, and separately incorporated from, the organization that receives the funds.

Q: How will MO HealthNet identify organizations that provide abortions?

A: MO HealthNet has mailed attestation requests to hospitals, clinics and ambulatory surgical centers that it has identified as capable of providing abortions. The form asks each facility to affirm that it will not accept funds in contravention of Section 11.550, and to identify all affiliated organizations that will submit claims for 80/89 funding.

Q: What if my facility does not return the attestation?

A: In a letter to providers, MO HealthNet indicated payments to providers who do not return the attestation will cease as of February 1, 2017.

Q: Does the attestation contemplate that a facility may only provide abortions necessary to save the life of the mother?

A: Like the language in House Bill 2011, the attestation does not contemplate any exception for facilities that perform abortions only as necessary to save the life of the mother. The attestation asks each organization to attest that it "will not submit claims for payment ... that violate Section 11.550." Once a facility has performed any abortion services during SFY 2017, submitting claims for payment under this program is not advisable.

Q: Does MO HealthNet intend to use the attestation for audit or enforcement purposes?

A: MO HealthNet has not indicated that it will use the attestations for audit or enforcement actions; however, there is nothing preventing it from doing so. Any facility with questions regarding the legal ramifications of the attestation is encouraged to contact their legal counsel.