

## Support for P64, P66, P166

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I write in support of three innovative ideas that would reduce unintended pregnancy and improve women's health overall. Beyond health care improvement for women, the positive outcomes from these project reach across most of society. Less unwanted pregnancies result in more education attainment, greater employment opportunity, less domestic violence, less children entering into the foster care system, and less engagement with law enforcement and judicial systems. Identifying one's "reproductive life plan" to more intentionally prepare for parenthood is a win win. These innovate efforts that will help women establish these plans should be adopted.

P166 – Woman's Medical Home – would allow women to select their women's health specialist as their primary care provider, allowing them to receive more reproductive focused prevention and related services delivered by the provider of their choice. More than half of all women see a women's health specialist annually, often as their sole care provider. Long Acting Reversible Contraception (LARC) and a Reproductive Life Plan are important elements of Woman's Medical Home care. Establishing a Women's Medical Home model would allow women to receive care in a way that fulfills the ACA promise of offering consumers a "better patient experience".

P64 – LARC – Long Acting Reversible Contraception – The LARC project trains providers in a quality family planning model teaching them how to engage with their patients about considering a reproductive health plan and a contraceptive method that matches that plan. The focus is on using the most effective and longest lasting method of choice to meet the woman's plan. With half of all pregnancies unintended, educating more providers and patients in LARC availability has the potential to return enormous financial savings on a scale much greater than just health care costs.

P66- Community Health Worker LARC – This project is similar to P64 but focuses on community workers to reach out to women of all ethnicities who are not necessarily being seen by health care providers. Having well respected community health workers reaching out to isolated communities would be critical to expand knowledge of how LARC works, various effectiveness, availability, etc.

These three project complement each other and together provide a strong platform to reduce costs by preventing unintended pregnancy and improving women's health overall. It simply isn't possible to attain significant long-term savings in Medicaid expenditures without prioritizing the reduction of unintended pregnancy as a key component of meaningful reform.

Linda McCarthy  
Mt. Baker Planned Parenthood