

**Fact Sheet on Potential Cuts to Family Planning Dollars
Who loses in Gallatin County?
Why cutting preventive health services doesn't add up to cost savings.**

- Currently, the Montana legislature is considering a reduction of \$903,385 from contraceptive funding in Title X family planning clinics over the next biennium.
- These funds were included in the MT DPHHS 2009 budget when clinics experienced an over 70 percent increase in contraceptive costs due to de-regulation of drug manufacturers fees for contraceptives to safety net providers by the Budget Deficit Reduction Act in 2005.
- Peer-reviewed research has determined that every \$1 spent on family planning saves approximately \$4 in public-sector costs for maternity and infant care among Medicaid-eligible women.¹ Using that evidence-based calculation, Montana and its taxpayers stand to incur at least an additional \$3.6 million in costs from Medicaid-related births, balanced against the savings of \$903,000 over two years.
- Bridger Clinic, in Gallatin County, provides family planning and related health services to over 6,000 patients per year from Gallatin and surrounding communities under this program.
- It is important to know that these funds are not used for abortions.
- The program being targeted for cuts has helped offset high costs at Bridger Clinic by an average of \$73,409 over each of the past three years. This amounts to 16% of the total state and federal funding for Bridger Clinic. (Other income is derived from patient fees and contributions, health insurance revenues, private grants and fundraising.)
- These funding cuts, if enacted, would place pressure on all services offered by Bridger Clinic, including, its wide range of health education programs geared toward young people. These include workshops and classes in schools in Bozeman, Belgrade, Livingston, and Ennis on topics such as healthy decision making, communication with parents, avoidance of sexual coercion, and the advantages of abstinence. Reductions in funding limit Bridger's ability to deliver these services to youth.
- Bridger Clinic provides services and contraception on a sliding fee scale and no one is denied care.
 - 38% of patients receive services and contraception at no charge and live at or below the federal poverty level, 36% of patients receive reduced fee services, and 26% of patients are at full fee
 - Fees at Bridger Clinic average 35 – 50 % less than private sector fees for contraceptives and related health care in the local community
 - 51% of patients at Bridger Clinic are uninsured

(Please see other side)

- Affordable birth control is the primary reason patients cite for seeking care at Bridger Clinic. This funding reduction will impact nearly all the clinic's patient base. It is likely that some patients will choose not to prevent unwanted pregnancy if the short term cost of contraceptives is unaffordable.
- The average cost of one year supply of contraceptives at Bridger Clinic is **\$166.**
- The current average estimated Medicaid costs for prenatal care, delivery, and one year of infant care is **\$12,257 per birth.**
- In 2003, roughly 35 percent of births in Montana were financed by Medicaid, e.g. taxpayers.
- If they cannot access affordable care, patients will be less motivated to seek other important preventive care including cancer and sexually transmitted disease screening they also receive at Bridger Clinic

ⁱ Frost J;Finer L;Tapales A; The impact of publicly funded family planning clinic services on unintended pregnancies and government cost savings. *J Health Care Poor Underserved* 2008 Aug;19(3):778-96; **PMID:** 18677070