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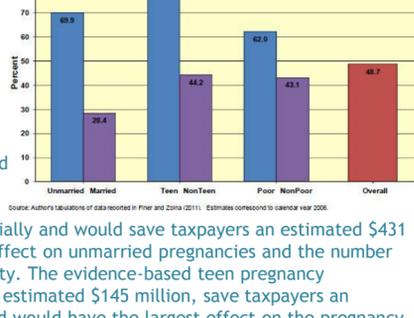
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Our monthly e-newsletter, *Adolescent Health News*, is designed to keep you up-to-date about current activities at The National Alliance to Advance Adolescent Health and related topics of interest to the adolescent health community.

## Policy Options for Reducing Unintended Pregnancies: New Study from the Brookings Institution

The Brookings Institution provides new evidence for cost-effective strategies to reduce unintended pregnancies, which now account for nearly half of all pregnancies in the United States and are generally concentrated among unmarried, teenage, and poor women. Numerous studies have shown unintended pregnancies have costly personal and societal impacts on education, employment, and health status.

The study simulated the benefits and costs of three strategies: a nationally implemented mass media campaign, a nationwide teen pregnancy prevention program geared towards at-risk youth, and expansions of Medicaid-funded family planning waivers. The results showed that a mass media campaign would cost an estimated \$100 million initially and would save taxpayers an estimated \$431 million with the greatest effect on unmarried pregnancies and the number of children born into poverty. The evidence-based teen pregnancy intervention would cost an estimated \$145 million, save taxpayers an estimated \$356 million, and would have the largest effect on the pregnancy rate among teenagers. Expanding access to Medicaid Family Planning waivers -- which would have the largest effect on unintended pregnancies overall -- would have an estimated cost of \$235 million and taxpayer savings of \$1.32 billion. According to the study's author, Adam Thomas, "The key message of these results is that each program would generate substantial net savings for taxpayers at the same time that it helps to reduce the child poverty and avert teen and unintended pregnancies."



For more information, read the [full report](#) from the Brookings Institution.

## Senate Democratic Women Fight for Contraceptive Coverage

The Blunt Amendment, as readers know, which would have allowed any employer to deny coverage for any service -- including contraceptives -- for any reason was defeated in the Senate in early March. After the bill was defeated, John Boehner pledged to bring similar legislation (which so far has over 200 co-sponsors) to a vote in the House. The 12 Democratic female Senators sent a letter to Speaker Boehner last week asking him to abandon his pledge to continue the fight over contraception and "drop all politically-charged efforts to deny [women] coverage," and added that legislation similar to the Blunt Amendment would "turn the clock back on women's access to health care." The [complete letter](#) is available online.

The National Alliance, along with many other organizations, has joined the Coalition to Protect Women's Health Care in an effort to protect contraceptive coverage. In honor of the second year anniversary of the Affordable Care Act and as part of a broader week-long effort to support the law, the Coalition will be mobilizing women around the country on March 20th to share stories of real people benefitting from the law and to underscore the consequences of taking away preventive care benefits. It also will be participating in a "visibility event" March 27th to focus on the importance of women's coverage at the time of the Supreme Court's oral arguments on the ACA.

## New Legislative Proposals under Consideration for Medicaid Reform

Proposals to reform federal funding for Medicaid to increase state flexibility and reduce costs are still a focus of attention, at least in the House. The State Health and Flexibility Act, introduced by Rep. Todd Rokita (R-Ind.), would combine federal funding for both Medicaid and CHIP into a single block grant. Under this proposal, states would have the flexibility to spend their funds however they choose and would have sole authority to determine eligibility, benefits, and provider reimbursement rates to improve the quality of care and access to vital services. It is estimated that this plan would prevent \$1.8 trillion in additional spending without cutting any current funds from Medicaid and CHIP. Many organizations -- including Americans for Prosperity, Association of American Physicians and Surgeons, Americans for Tax Reform, and Independent Women's Voice -- have written letters of support for the bill and 29 Republican governors are in support of it as well and are asking that it be brought to a vote in the House.

Another proposal, promoted by Rep. Bill Cassidy (R-La.), is still in the planning stage. It would set spending caps on federal Medicaid payments for individuals as an alternative to block-granting federal funds. A similar version of this plan was first offered and supported by then President Bill Clinton in the mid-1990s. The spending cap proposal would offer a per-patient, risk-adjusted payment for most Medicaid recipients including children and pregnant women. Unlike block grants, it would allow adjustment for population and economic changes because the allocated spending is individualized. Although there are still many issues to be resolved, the idea has received a good deal of interest from key Representatives.

## New National and State Transition Findings Presented at AMCHP Conference

In late February, The National Alliance staff presented analysis of new National Survey of Children with Special Health Care Needs results at the annual meeting of the Association of Maternal and Child Health Programs. Nationally, 40% of adolescents with special health care needs successfully transition from pediatric to adult health care. States transition performance varies from a low of 32% in Arkansas and Nevada to a high of 53% in Kansas. Our presentation elaborated on the factors affecting these national and state transition results along with potential policy implications. The National Alliance, as part of its ongoing collaboration with the National Health Care Transition Center, recently prepared a set of national and state tables from the 2009/2010 National Survey, which are available on the [Got Transition website](#).

## Bazon Center Amicus Brief In Support of Medicaid Expansion

The Affordable Care Act requires states to expand Medicaid by providing coverage to individuals with income at or below 133% of the federal poverty level. The expansion is intended to provide insurance for an additional 14 million people. Florida and 25 others states, however, are challenging the constitutionality of this requirement, arguing that it is unconstitutionally coercive because it requires states to allocate more money to the Medicaid program. The Supreme Court has agreed to hear the case, formally known as *Florida v. the U.S. Department of Health and Human Services*, this spring as one of the four cases brought forth addressing the legal issues in the Affordable Care Act.



In support of the ACA's Medicaid Expansion, the Bazelon Center for Mental Health Law prepared an amicus brief which The National Alliance and 78 other groups signed. In the brief, the Bazelon Center argues that the Expansion does not deprive the states of something to which they are otherwise entitled, that the Expansion is instead a gift to the states in the form of a large, federal grant, and that these characteristics therefore show that the expansion is not coercive. The brief argues that if the expansion is unconstitutionally coercive then the whole Medicaid Act itself is unconstitutional. Since all states participated in Medicaid before the Affordable Care Act expanded coverage, it follows that Congress expected all states to continue participating in Medicaid with the expansion, with additional federal funds, and without any coercion. The [full amicus brief](#) is available on the Bazelon Center for Mental Health Law website.

## Preventing Tobacco Use Among Youth and Young Adults: New Report from the U.S. Surgeon General

The U.S. Surgeon General recently released a new report, *Preventing Tobacco Use Among Youth and Young Adults*, that discusses the influences that lead youth to smoke, the scope of health consequences associated with smoking, and strategies to prevent tobacco use among this population group. According to the report, more than 600,000 middle schoolers and 3 million high schoolers smoke. Tobacco use is the number one killer of preventable and premature death. New science shows that teenagers are especially susceptible to nicotine addiction -- "the younger individuals are when they start using tobacco, the more likely they are to become addicted and the more heavily addicted they will become." As the report highlights, not only does smoking tobacco lead to serious health consequences later in life, it can also have serious damaging effects that begin immediately in young smokers, such as permanent reduction in lung function leading to persistent shortness of breath and early cardiovascular damage.



In an effort to promote awareness and prevention for tobacco use, the Surgeon General also released a practical guide to addressing tobacco use in young people, *Preventing Tobacco Use Among Youth and Young Adults: We Can Make the Next Generation Tobacco-Free*, and a Video Challenge to engage youth and young adults to make original videos that portray one or more of the report's findings. [Click here](#) for more information or to read the full report.

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## First Focus Leads Effort to Fix ACA's "Family Glitch"

In our [January Newsletter](#), we discussed a proposed Treasury Department that calculated "affordable coverage" for an entire family based on an individual's income, thus jeopardizing affordable coverage for many adolescent dependents. First Focus recently sent a letter to the President and congressional leaders urging them to fix this "family glitch." The National Alliance, along with over 100 other organizations, signed onto this letter to help fix this serious issue. To learn more about the issue, read the letter and other fact sheets on the [First Focus website](#).



## Featured Model Teen Program: Children's Hospital Los Angeles Teenage and Young Adult Health Center

This month's Model Teen Program is the Teenage and Young Adult Health Center, part of the Division of Adolescent Medicine at Children's Hospital Los Angeles. The Center accepts all adolescents, but has a unique focus on high-risk, underserved youth who, because of difficult life circumstances, are unable to find appropriate services elsewhere. Many of its broad array of programs specifically target youth who struggle with complex issues such as homelessness, substance abuse, or HIV to name a few. The Center meets the health needs of their adolescent patients through an interdisciplinary team of providers that includes physicians, psychologists, psychiatrists, researchers, social workers, nurses, health educators, substance abuse specialists, and peer advocates.

Learn more about this month's [Model Teen Program](#) on our website.