



STATE OF IOWA FAMILY PLANNING PROGRESS REPORT | CALENDAR YEAR 2019

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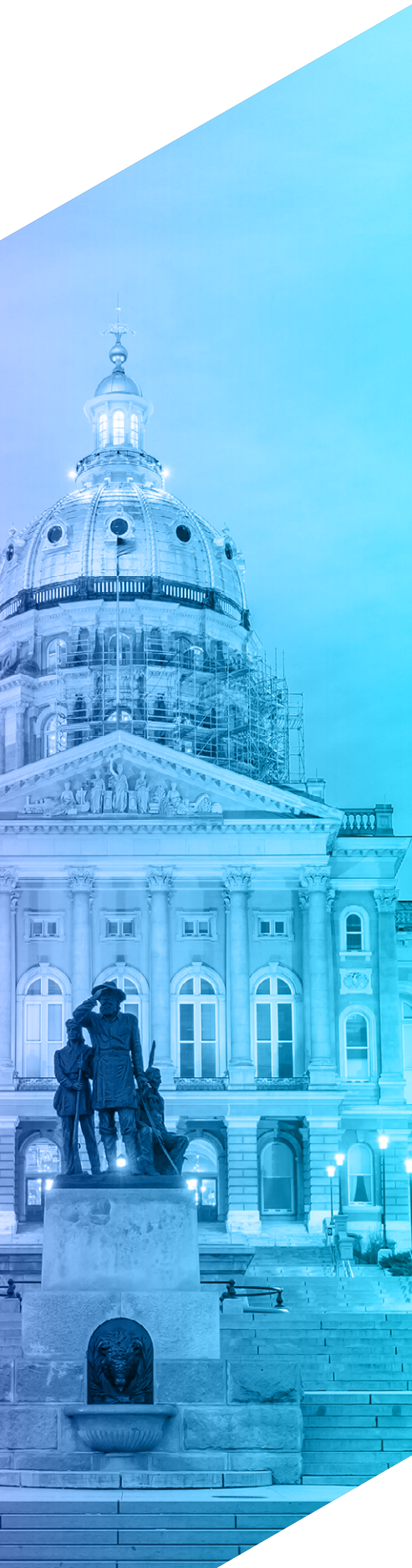


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EXECUTIVE SUMMARY

Family planning services are an important asset in the larger picture of reproductive health and health care. These services support women and men to achieve desired birth spacing, family size, and influence improved health outcomes for infants, children, women, and families. In Iowa, these services are administered by two state agencies through three programs: the state Family Planning Program (FPP), Medicaid family planning services and the Iowa Department of Public Health's (IDPH) Title X Family Planning Program (Title X). While each program maintains distinct characteristics, this foundational report shares data highlighting their separate but collective impact. All references to Title X in this report refer to the program managed by IDPH. A third agency outside of state government, the Family Planning Council of Iowa (FPCI), also provides Title X Family Planning services; however is not included in this report.

Organized by program, this report begins by sharing historical and contextual information and details related to state-funded program eligibility and services. Next, data from calendar year 2019 (CY2019) depicting the number of individuals served, the number of providers engaged, service counts including medical and prescription services, financial information, and completed health screenings. Each analysis is accompanied by narrative describing the results, methodology used, and associated limitations.

While comparisons across programs and data sets are complicated, a snapshot discloses basic details associated with their reach, availability, behaviors, and costs. In CY2019, the three programs served a total of 234,682 individuals. Of these, 175,349 (75%) were women and 59,333 (25%) were men. FPP services were delivered by 112 providers at. Title X services were delivered at 16 service sites. Medicaid family planning services were delivered by 2,674 providers located within and outside of Iowa. Of the 138,795 women ages 15-44 who accessed Medicaid family planning services and the state FPP, 118,806 (86%) accessed contraceptive services. Oral contraceptives were the primary choice for the majority of individuals accessing contraceptive services across all three programs. The average cost per service for the state FPP was \$95 and the average cost per member was \$493. For Medicaid family planning services, the average costs were \$142 per service and \$1,260 per member. The most recent data indicate the per-client costs of the IDPH Title X program were \$219.

An overview and analysis such as this provides the foundation for a more in-depth inquiry into system-wide performance, revealing opportunities for improvement. In addition, future inquiry and reporting can include perspectives and information from key collaborators such as the FPCI. Incorporation of the experiences and expertise of the range of community-based providers and statewide initiatives supporting maternal, family, and child health outcomes is also expected as we reach toward our goal of providing insight into the most efficient and effective family planning program strategies that meet the needs of Iowans.

INTRODUCTION

This report provides information on the array of state-administered family planning programs in Iowa, including a summary of the state-funded Family Planning Program (FPP), Medicaid, and the Title X Family Planning Program. While FPP and Medicaid are administered at the Department of Human Services (DHS) and Title X at the Iowa Department of Public Health (IDPH) and Family Planning Council of Iowa (FPCI), this report seeks to provide a comprehensive overview of the range of family planning services and access points for low-income Iowans.

DISCLAIMER: This is a baseline report. In future years, this report will continue to evolve as DHS and IDPH progress toward a systemic view of the family planning programs and the place of such programs in the women's health continuum of care. Information, data and figures contained in this report should not be used to compare to similar reports released previously, which may contain new or different information.

BACKGROUND

Family planning programs provide women and men with services to plan their birth spacing and family size as desired. Provision of family planning services can be linked to improved birth, child, maternal and family outcomes. This report will cover three programs administered by the State of Iowa providing family planning services: FPP, Medicaid services, and the Title X program. All of these programs provide family planning services, but each differs regarding client eligibility and services covered or provided.

FAMILY PLANNING PROGRAM

On July 1, 2017, DHS established the state-funded FPP. This program is a form of limited insurance and provides coverage for a variety of family planning services, and is not considered minimum essential coverage under the federal Affordable Care Act. Coverage under the FPP is available to individuals meeting financial and non-financial requirements. DHS provides payment for services rendered under the FPP through the fee-for-service (FFS) model.

Prior to the FPP, DHS provided family planning coverage through an 1115 Medicaid Demonstration Waiver, known as the Iowa Family Planning Network (IFPN). This program was established to increase access to family planning services for individuals whose income was above the eligibility threshold for Medicaid. The IFPN program operated from February 1, 2006 through June 30, 2017.

DHS discontinued the IFPN program pursuant to a 2017 legislative directive, which also established the FPP. In accordance with this same directive, DHS seamlessly transitioned IFPN-enrolled members to coverage under the FPP and did not make changes to eligibility criteria or covered services. This directive further required DHS to set additional provider enrollment requirements—including provider attestation that the provider does not perform abortions—with the shift to the FPP.

The program objectives are similar to the former IFPN and include:

- ▶ Increasing the spacing between births;
- ▶ Improving future birth outcomes; and
- ▶ Reducing the number of unintended pregnancies and births paid by Medicaid.

MEDICAID PROGRAMS - FAMILY PLANNING SERVICES

Under federal regulations, family planning services are mandatory benefits in Medicaid and states must provide such services to Medicaid members of childbearing age. In Iowa, Medicaid and the Iowa Health and Wellness Plan (IHAWP) offer comprehensive health coverage to low-income Iowans, which includes family planning services. A large majority of members covered by Medicaid and IHAWP receive coverage through a managed care organization (MCO).

Additionally, to support continued access to family planning services during the inter-conception and postpartum periods, postpartum women receiving Medicaid at the time of their pregnancy ending and who do not meet eligibility criteria for a different Medicaid eligibility group are automatically enrolled into the FPP for 12 months.

TITLE X FAMILY PLANNING PROGRAM

The Title X Family Planning Program was enacted in 1970 as Title X of the Public Health Service Act. Title X is the only federal grant program dedicated solely to providing individuals with voluntary, confidential comprehensive family planning and related preventive health services. The Title X program is designed to provide access to contraceptive services, supplies, preventative care related to reproductive health and information to all who want services, regardless of health insurance status. By law, Title X providers must give priority to low-income persons.

In Iowa, there are two federal grantees for the Title X Family Planning Program. The IDPH Title X Family Planning Program covers 45 out of the 99 counties and FPCI) covers the remaining 55 counties, with both federally funded grantees providing services in Polk County. IDPH and FPCI contracted agencies providing Title X services include local public health agencies, community action agencies, county nursing services, hospital clinics, and federally qualified health centers.

The federal Title X family planning program provides funding “to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents). The program is administered by the U.S. Department of Health and Human Services (HHS), Office of Populations Affairs (OPA) and is implemented through a competitive process.

Program funds support specific Title X clinics, determined by a competitive selection process, who must adhere to federal guidelines and statute associated with Title X funding. In Iowa, Title X clinics bill Medicaid, FPP, and other private and public payers. Title X clinics must also collect and submit program data, which is compiled at the federal level and publicly available through the HHS OPA Family Planning Annual Report (FPAR). Specific federal requirements and mandates include the requirement that family participation is encouraged for all clients, particularly adolescents, and that Title X funds cannot be used to support abortion.

Iowa Department of Public Health

IDPH has been awarded and administered Title X Family Planning funds since 1971. The Title X program is located within the Bureau of Family Health in the Division of Health Promotion and Chronic Disease Prevention. IDPH has a total of seven contractors which operate 19 local clinic sites. These sites are operated through subcontracts in the authorized federal service area defined as 45 of Iowa’s 99 counties. The network of contractors consists of one local health jurisdiction, one large health system, two community action organizations and three federally qualified health centers.

Family Planning Council of Iowa

The Family Planning Council of Iowa (FPCI) is a private 501(c)(3) non-profit organization incorporated in June 1980. FPCI's mission is to assure access to quality reproductive health care and family planning services for all the people of Iowa who desire such services. The function of FPCI is the planning, developing, financing, oversight and administering of voluntary, confidential family planning and related services. FPCI utilizes a provider network of eight sub-recipients providing family planning services at 12 clinic sites that are located throughout FPCI's 55 Iowa county service delivery area. FPCI's network consists of federally qualified health centers, health departments, family planning agencies and hospital-affiliated clinics. FPCI is a direct federal Title X grantee and IDPH does not have oversight over this agency.

Though this report does not include Title X data from FPCI's network at this time, DHS, IDPH, and FPCI aim to incorporate analogous data in future reports.

ELIGIBILITY AND SERVICES BY PROGRAM

FAMILY PLANNING PROGRAM

Eligibility

- ▶ Men and women ages 12 through 54 years
- ▶ Iowa resident
- ▶ U.S. citizen or qualified immigrant
- ▶ Income equal to or less than 300% of the federal poverty level (FPL)
- ▶ Not receiving Medicaid or IHAWP
- ▶ Women who were Medicaid eligible at the time a pregnancy ended are automatically enrolled in the FPP

Persons can apply for the FPP at an FPP-enrolled clinic or at a local DHS office. Services are available immediately; however, eligibility determinations may take up to 30 days. Once an individual is determined eligible for FPP benefits, they receive a benefits card through the mail and can seek services through eligible providers for 12 continuous months.

Services

- ▶ Birth control counseling
- ▶ Birth control supplies
 - ▶ Basal thermometer
 - ▶ Birth control pills
 - ▶ Birth control foam/jelly/sponges
 - ▶ Birth control implants (including long-acting reversible contraceptives)
 - ▶ Condoms
 - ▶ Depo Provera injections
 - ▶ Diaphragms, cervical caps, vaginal rings
 - ▶ Spermicidal suppositories
 - ▶ Vasectomies
 - ▶ Voluntary sterilizations
- ▶ Emergency contraception
- ▶ Gynecological exams

- ▶ Limited testing and treatment for sexually transmitted infections (STIs) and sexually transmitted diseases (STDs)
- ▶ Pap tests
- ▶ Pregnancy tests
- ▶ Ultrasounds (if medically necessary and related to birth control services)
- ▶ Yeast infection treatment

FPP members receive services by visiting a contracted provider or health care facility in the FPP network. To find an FPP provider, visit <https://dhs.iowa.gov/ime/members/medicaid-a-to-z/FPP>.

MEDICAID PROGRAMS - FAMILY PLANNING SERVICES

Eligibility

- ▶ Men and women of all ages
- ▶ Must meet income guidelines (varies by coverage group)
- ▶ Iowa resident
- ▶ U.S. citizen or qualified immigrant
- ▶ Additional non-financial requirements specific to coverage group
- ▶ Resource limits may apply

Services

- ▶ Birth control counseling
- ▶ Birth control supplies
 - ▶ Basal thermometer
 - ▶ Birth control pills
 - ▶ Birth control foam/jelly/sponges
 - ▶ Birth control implants (including long-acting reversible contraceptives)
 - ▶ Condoms
 - ▶ Depo Provera injections
 - ▶ Diaphragms, cervical caps, vaginal rings
 - ▶ Spermicidal suppositories
 - ▶ Vasectomies
 - ▶ Voluntary sterilizations
- ▶ Emergency contraception
- ▶ Gynecological exams
- ▶ Testing and treatment for STIs and STDs
- ▶ Pap tests
- ▶ Pregnancy tests
- ▶ Ultrasounds
- ▶ Yeast infection treatment

Medicaid and IHWP members can receive family planning services through any Medicaid provider. To find a Medicaid provider, visit <https://dhs.iowa.gov/ime/members/find-a-provider>.

TITLE X FAMILY PLANNING

Eligibility

The Title X Family Planning Program serves people with low incomes who cannot otherwise afford health care on their own.

- ▶ Men and women of all ages
- ▶ No residency or citizenship required
- ▶ No application needed to receive services
- ▶ Income up to 250% FPL to receive discounted services
 - ▶ Individuals with income above 250% FPL may still receive services at full cost
- ▶ May have health insurance that does not cover family planning services such as third-party payer
- ▶ No one can be denied services due to the inability to pay

Services

The program offers a wide range of health services for women and men along with core family planning services that include:

- ▶ Birth control counseling
- ▶ Birth control exams
- ▶ Birth control supplies
- ▶ Natural family planning methods counseling
- ▶ Testing and treatment for STIs
- ▶ PrEP (Pre-Exposure Prophylaxis)
- ▶ HIV testing
- ▶ Pelvic exams
- ▶ Pap tests
- ▶ Pregnancy tests
- ▶ Emergency contraception
- ▶ Breast and cervical cancer screening
- ▶ Evaluation and treatment for vaginal infection(s)
- ▶ HPV vaccine
- ▶ Basic infertility evaluation
- ▶ Wellness exams
- ▶ Domestic violence screening
- ▶ General social services outreach education and referrals

Title X family planning services can be received by visiting a Title X contracted provider and/or Title X clinic. To find a Title X Family Planning clinic and the family planning services available at a particular clinic, visit <https://opa-fpclinicdb.hhs.gov/>.

DATA BY PROGRAM

The below sections provide data regarding individuals accessing the array of state-administered family planning programs. This report attempts to align data elements across programs, where possible; however, given differences in information technology systems, data collection methodologies, and required data reporting elements to funders, variances in data elements exist. Notably, the FPP and Medicaid programs do not have reliable racial and ethnic data, as individuals may choose to not provide this information upon applying for the programs. Additionally, the Title X program operates as a point of service model where clients are scheduled for follow-up as needed. While Title X agencies bill for services, the Title X program data is not available at the procedure code level.

Unless specified otherwise, all data is from calendar year (CY) 2019.

FAMILY PLANNING PROGRAM

During CY2019, the average monthly enrollment for FPP was 2,904 individuals. Of these, 1,557 unduplicated clients accessed family planning services through the FPP from 112 providers during the same time period. Of the clients whom used services, 95.3 percent were female and 4.7 percent were male. The most utilized medical service categories were medical services/procedures and pathology/lab, with over 2,000 unique services provided per category.

Members Receiving Services

As shown in Table 1, below, the age group with the largest number of unduplicated users was 20 to 24 for both men and women, representing 27.9 percent of all users in CY2019. The next largest age group was 25 to 29, representing 20.2 percent of all users. Collectively, users ages 20 to 29 account for almost half (48.1 percent) of all users.

Table 1

Unduplicated Number of Users by Age Group and Sex

Age	Female	Male	Grand Total
Under 15	12	0	12
15 to 17	152	3	155
18 to 19	211	6	217
20 to 24	409	26	435
25 to 29	291	23	314
30 to 34	192	8	200
35 to 39	101	5	106
40 to 44	73	2	75
Over 44	43	0	43
Total Users	1,484	73	1,557

Providers

A total of 112 unique providers rendered services to FPP members, representing clinics, physician groups, independent physicians, and advanced registered nurse practitioners.

Table 2

Provider Count - Rendered Services

Region	Provider Count
In-State	103
Out-of-State	9
Total Provider Count	112

Medical Services

Table 3

Medical Service Category Count

Category	Service Count
Anesthesiology	0
Medical Services/Procedures	2,813
Medical & Surgical Supplies or DME	93
Pathology & Lab	2,172
Radiology	13
Surgery	454
Service Count Total	5,545

Table 4

Top 10 Medical Services

Service	Count
Oral contraceptive - 21-day supply	1,166
Chlamydia trachomatis - amplified probe technique	567
Gonorrhea - amplified probe test	566
Medroxyprogesterone acetate for contraceptive use - 1mg	559
Therapeutic - prophylactic - or diagnostic injection; subcutaneous or intramuscular	534
Urine pregnancy test	523
Contraceptive supply - hormone containing vaginal ring - each	217
Smear - primary source - with interpretation - without mount	171
Levonorgestrel (contraceptive) implants system - including implants and supplies	120
Insertion - non-biodegradable drug delivery implant	100

Contraceptive Prescriptions

Oral contraceptives accounted for the vast majority (74.7 percent) of contraceptive prescriptions provided to female FPP users accessing services in CY2019, followed by intravaginal contraceptives (13.7 percent).

Table 5

Contraceptive User Member Count

Therapy Class	F	M	Grand Total
Contraceptives, Intravaginal, Systemic	108	0	108
Contraceptives, Injectable	10	0	10
Contraceptives, Oral	588	0	588
Contraceptives, Transdermal	81	0	81
Member User Count Total	787	0	787

Cost per Service

As shown below in Table 6, the average cost per service provided in CY2019 was \$95. For members accessing services, the overall average cost per member served was \$493.

Table 6

Average Cost Per Service Provided

Category	Service Count	Amount	Per Service
Anesthesiology	0	\$0	\$0
Medical Services/Procedures	2,813	\$107,060	\$38
Medical & Surgical Supplies or DME	93	\$495	\$5
Pathology & Lab	2,172	\$66,118	\$30
Radiology	13	\$624	\$48
Surgery	454	\$37,681	\$83
Evaluation & Management	1,746	\$554,973	\$318
Contraceptive Prescriptions	787	\$962	\$1
Service Count Total	8,078	\$767,913	\$95

Health Screenings

Table 7

STI Testing Count

Category	Service Count
Cervical Cancer Screening	163
Chlamydia Testing	573
Syphilis Testing	4
HIV Testing	2,095
Service Count Total	2,835

MEDICAID PROGRAMS - FAMILY PLANNING SERVICES

During CY2019, 224,673 unduplicated clients accessed family planning services through Medicaid programs from 2,674 providers. Of the clients whom used services, 73.8 percent were female and 26.2 percent were male. The most utilized medical service category was pathology and lab, with 421,531 unique services provided.

Members Receiving Services

As shown in Table 8, below, the age group with the largest number of unduplicated users was 25 to 29 for women, representing 17.3 percent of all female users, and over 44 for men, representing 23.9 percent of all male users.

Table 8

Unduplicated Number of Users by Age Group and Sex

Age Group	Female	Male	Grand Total
Under 15	5,647	3,694	9,341
15 to 17	13,248	5,895	19,143
18 to 19	10,763	2,923	13,686
20 to 24	26,390	5,378	31,768
25 to 29	28,701	6,202	34,903
30 to 34	23,732	6,508	30,240
35 to 39	19,701	7,367	27,068
40 to 44	14,788	6,883	21,671
Over 44	22,781	14,072	36,853
Total Users	165,751	58,922	224,673

Providers

A total of 2,674 unique providers rendered services to Medicaid members accessing family planning services, representing clinics, physician groups, independent physicians, and advanced registered nurse practitioners.

Table 9

Provider Count - Rendered Family Planning Services

Region	Provider Count
In-State	1,987
Out-of-State	575
Total Provider Count	2,674

Medical Services

Table 10

Service Count

Category	Service Count
Anesthesiology	1,335
Medical Services/Procedures	130,333
Medical & Surgical Supplies or DME	389
Pathology & Lab	421,531
Radiology	86,266
Surgery	194,802
Service Count Total	834,656

Table 11

Top 10 Services

Service	Count
Venipuncture	167,982
Automated hemogram	74,569
Therapeutic – prophylactic – or diagnostic injection; subcutaneous or intramuscular	60,959
X-ray of chest – 2 views	60,393
Blood panel	38,568
Chlamydia trachomatis – amplified probe technique	38,269
Gonorrhea – amplified probe test	38,131
Urine pregnancy test	38,034
Urinalysis – auto without scope	35,796
Level IV – surgical pathology – gross and microscopic examination	24,252

Contraceptive Prescriptions

Oral contraceptives accounted for the vast majority (84.8 percent) of contraceptive prescriptions provided to female Medicaid program members accessing services in CY2019, followed by

similar usage patterns for intravaginal (4.3 percent), injectable (4.9 percent), and transdermal contraceptives (6.0 percent).

Table 12

Contraceptive User Member Count

Therapy Class	F	M	Grand Total
Contraceptives, Intravaginal, Systemic	5,087	0	5,087
Contraceptives, Injectable	5,746	102	5,848
Contraceptives, Oral	100,105	29	100,134
Contraceptives, Transdermal	7,081	0	7,081
Member User Count Total	118,019	131	118,150

Cost per Service

As shown below in Table 13, the average cost per service provided in CY2019 was \$142. For members accessing services, the overall average cost per member served was \$1,260.

Table 13

Average Cost Per Service Provided

Category	Service Count	Amount	Per Service
Anesthesiology	1,335	\$182,687	\$137
Medical Services/Procedures	130,333	\$6,887,012	\$53
Medical & Surgical Supplies or DME	389	\$76,783	\$197
Pathology & Lab	421,531	\$7,689,580	\$18
Radiology	86,266	\$1,640,903	\$19
Surgery	194,802	\$2,099,579	\$11
Evaluation & Management	1,041,674	\$264,547,045	\$254
Contraceptive Prescriptions	118,150	\$73,328	<\$1
Service Count Total	1,994,480	\$283,196,917	\$142

Health Screenings

Table 14

STI Testing Count

Category	Member Month Count
Cervical Cancer Screening	22,892
Chlamydia Testing	37,939
Syphilis Testing	3,996
HIV Testing	103,962
Service Count Total	168,789

TITLE X FAMILY PLANNING

DISCLAIMER: The data and information displayed for the Title X program is specific to the IDPH Title X Family Planning Program only and does not include any program data from the FPCI Title X Program.

During CY2019, the IDPH Title X program served 9,104 unduplicated clients. Out of the 9,104 unduplicated clients served, 351 were male and 8,753 were female. By race, 78.6 percent were White, 16 percent were Black, and 2.1 percent were of Asian descent. Those of American Indian and Pacific Islander descent, as well as those of multiracial backgrounds, comprised less than one percent each of unduplicated clients served in 2019. Of these clients, 69.6 percent earn income at or below 100 percent of the FPL. Over 65 percent of the clients served in CY19 relied on public health insurance or were uninsured.

Participants Served

The following tables report the unduplicated number of clients served through the Title X Family Planning Program during 2019 by gender, age, race, and ethnicity. Data include all active clients of Title X Family Planning who received a service in calendar year 2019. Two clients were not counted in the 2019 data analysis as they did not identify as male or female.

These data were collected from client-level records that are reported to and retained by the IDPH Title X Family Planning Program. Client-level information was re-coded to create the categories presented in the following tables. Per IDPH data standards and to protect client confidentiality, all cell level numbers of less than or equal to 5 were suppressed. Additional complementary suppression was used if necessary to protect against the identification of small numbers through simple math

Table 15

Count of unduplicated clients served by age, Title X Family Planning Program, CY 2019

Age in Years	Female	Male	Grand Total
Under 15	Suppressed	Suppressed	Suppressed
15-17	557	Suppressed	557
18-19	685	32	717
20-24	2,019	98	2,117
25-29	1,914	76	1,990
30-34	1,416	48	1,464
35-39	1,014	40	1,054
40-44	623	25	648
Over 44	443	19	462

Table 16

Count of unduplicated clients served by race, Title X Family Planning Program, CY 2019

Race	Female	Male
American Indian/Alaska Native	Suppressed	Suppressed
Asian	187	Suppressed
Black/African American	1,352	100
Native Hawaiian/Other Pacific Islander	Suppressed	Suppressed
White	6,919	234
More than one race	46	Suppressed
Unknown/Not reported	175	9

Table 17

Count of unduplicated clients served by ethnicity, Title X Family Planning Program, CY 2019

Ethnicity	Female	Male
Hispanic	2,209	45
Non-Hispanic	6,671	295
Unknown/Not reported	Suppressed	Suppressed

Table 18

Count of all clients served by Federal Poverty Level, Title X Family Planning Program, CY 2019

Income Level as a Percentage of the HHS Poverty Guidelines	Count of All Clients
100% and below	12,490
101% to 150%	2,643
151% to 200%	1,725
201% to 250%	690
Over 250%	595
Unknown/not reported	147
Total Users	18,290

Table 19

Count of all clients served by coverage for services, Title X Family Planning Program, CY 2019

Coverage for Services	Count of All Clients
Medicaid	6,744
Private Insurance (covers some FP services but not all)	3,856
Uninsured (no fee)	1,625
Private Insurance (covers all FP services)	2,254
Private Insurance (covers no FP services)	11
Family Planning Program (state coverage)	1,644
Medicare	133
Self-pay	1,523
Unknown	500
Total Users	18,290

Table 20

Count of Unduplicated clients with Limited English Proficiency, Title X Family Planning Program, CY 2019

Limited English Proficiency (LEP)	Count of Clients
LEP Users	1,545
Not LEP Users	7,151
Unknown/Not Reported	408
Total Users	9,104

Providers

The Title X Family Planning Program provides services based on client need. There are currently a total of 16 contractors among IDPH and FPCI operating numerous clinical sites across the state. Title X agencies bill Medicaid, FPP and/or private insurance. The Title X Family Planning Program does not collect the number of providers at each contracted agency. The program collects

information for each of the clinics where services are provided. The Title X family planning clinics provide various clinic hours for clients and are easily accessible. The IDPH Title X Family Planning program covers 45 out of the 99 counties and FPCI covers 55 out of the 99 counties, both agencies covering Polk County. FPCI data is not included in this report. To find the nearest clinic, visit <https://opa-fpclinicdb.hhs.gov/>

Contraceptive Services

IDPH Title X Family Planning agencies are required to ensure clients can easily access contraceptives and often have them available on-site for access purposes. The Title X Family Planning Program does not collect data specific to prescriptions. The program does collect the contraceptive “end method” which refers to the method that the client plans to use.

Please note that the data displayed below for the Title X program is specific to the IDPH Title X Family Planning Program only and does not include any program data from the FPCI Title X program.

Table 21

Count of primary contraceptive method among unduplicated female clients by age, IDPH Title X Clients CY 2019

Primary Method <i>Frequency</i>	Unduplicated Females by Age Categories						<i>Total</i>
	<i>11-19</i>	<i>20-24</i>	<i>25-29</i>	<i>30-34</i>	<i>35-39</i>	<i>40-44</i>	
Female sterilization	0	0	11	17	37	36	101
IUD or IUS	75	199	202	173	146	81	876
Hormonal implant	311	310	291	179	99	46	1,236
3-month hormonal injection	272	330	267	227	198	139	1,433
Oral contraceptives	287	501	387	274	161	87	1,697
Contraceptive patch	24	27	22	19	22	9	123
Vaginal ring	36	64	67	36	18	8	229
Cervical cap or diaphragm	*	*	*	*	*	*	<6
Female condom	*	*	*	*	*	*	<6
Spermicide (alone)	*	*	*	*	*	*	<6
FAM or LAM	0	11	5	7	10	11	44
Abstinence	41	40	39	23	21	27	191
Withdrawal or other	*	*	*	*	*	*	Suppressed
Vasectomy	0	0	9	11	12	19	51
Condom	78	147	134	95	61	38	553
Total	1127	1633	1441	1068	794	507	**6,570

* Per IDPH data standards and to protect client confidentiality, all cell level numbers of less than or equal to 5 were suppressed. Additional complementary suppression was used if necessary to protect against the identification of small numbers through simple math."

** This table excludes women who were pregnant or seeking pregnancy at the time of their clinic visit.

The top three methods of contraception among unduplicated female clients were oral contraceptives (28.5 percent), followed by hormonal injections [3-month] (25.4 percent) and the hormonal implant (17.6 percent). These percentages exclude those women who were pregnant or seeking pregnancy.

The most common contraceptive methods reported among males clients were withdrawal or other (n=11) and abstinence (n=7). When IDPH examined contraceptive methods by age, race/ethnicity, and primary payer among unduplicated male clients, we needed to suppress all values as all values were less than 6 events.

Table 22

Count of primary contraceptive method among unduplicated female clients by combined race and ethnicity, IDPH Title X Clients CY 2019

Primary Method Frequency	*** Combined Race and Ethnicity				Total Count of Method
	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic Other Races	Hispanic All Races	
Female sterilization	63	9	0	29	101
IUD or IUS	557	95	21	202	876
Hormonal implant	700	163	78	291	1,236
3-month hormonal injection	775	291	49	316	1,433
Oral contraceptives	1176	133	60	325	1,697
Contraceptive patch	57	*	*	48	123
Vaginal ring	183	*	*	28	229
Cervical cap or diaphragm	*	*	*	*	<6
Female condom	*	*	*	*	<6
Spermicide (alone)	*	*	*	*	<6
FAM or LAM	14	9	*	18	44
Abstinence	95	33	9	54	191
Withdrawal or other	*	*	*	*	Suppressed
Vasectomy	39	*	*	9	51
Condom	272	120	22	138	553
Total	3,940	888	254	1476	**6,570

* Per IDPH data standards and to protect client confidentiality, all cell level numbers of less than or equal to 5 were suppressed.

** This table excludes women who were pregnant or seeking pregnancy at the time of their clinic visit and those with unknown or unreported race or ethnicity.

*** To facilitate data presentation and reduce the number of cells with suppressed data, race and ethnicity were combined for Table 24.

Table 23

Count of primary contraceptive method among unduplicated female clients by primary payment source, IDPH Title X Clients CY 2019

Primary Method <i>Frequency</i>	Primary Payer						Total
	<i>State FPP</i>	<i>Medicaid</i>	<i>Missing or Medicare</i>	<i>No or partial fee</i>	<i>Private</i>	<i>Full fee</i>	
Female sterilization	*	39	*	19	36	*	101
IUD or IUS	60	316	8	154	330	8	876
Hormonal implant	120	518	13	217	360	8	1,236
3-month hormonal injection	99	634	11	261	412	16	1,433
Oral contraceptives	181	522	7	234	736	17	1,697
Contraceptive patch	8	42	0	38	29	6	123
Vaginal ring	23	85	*	15	103	*	229
Cervical cap or diaphragm	*	*	*	*	*	*	<6
Female condom	*	*	*	*	*	*	<6
Spermicide (alone)	*	*	*	*	*	*	<6
FAM or LAM	*	7	0	12	21	*	44
Abstinence	11	87	4	33	50	6	191
Withdrawal or other	*	*	*	*	*	*	Suppressed
Vasectomy	*	18	*	*	26	*	51
Condom	45	227	8	121	145	7	553
Total	554	2,506	57	1,116	2,262	75	** 6,570

**Per IDPH data standards and to protect client confidentiality, all cell level numbers of less than or equal to 5 were suppressed.*

*** This table excludes women who were pregnant or seeking pregnancy at the time of their clinic visit.*

Utilization and Cost

The IDPH Title X Family Planning Program provided a total of 18,290 service encounters during CY2019 (i.e., wellness exams, screening for STIs, and health education). Table 23 indicates the primary payment source at each of the patient encounters throughout CY2019. Since Iowa has the state-funded FPP, the activities paid for by this program are reflected under Family Planning Program. The Title X Family Planning Program conducts a cost analysis to determine the cost for providing each service; however, IDPH does not collect reimbursement rates that the contracted agencies receive for providing family planning services. Each contracted agency bills their cost and reimbursement amounts vary based on the contracts in place with third-party billing. This is not required for Title X reporting.

Health Screenings

The Title X Family Planning Programs provides services centered around pre-conception health and achieving pregnancy which include: basic infertility services, STD prevention education, screening and treatment, HIV testing and referral for treatment when appropriate, and screening for substance use disorders and referral when appropriate to help reduce adverse pregnancy-related outcomes and improve individuals' reproductive health. The Title X Program also includes other reproductive health and related preventive health services that are beneficial to reproductive health such as HPV vaccination, provision of HIV pre-exposure, PrEP, breast and cervical cancer screening, screening for obesity, smoking, drug and alcohol use, mental health and intimate partner violence.

Table 24

Type of Service	Number of Services Provided
<i>Cervical Cancer Screening Activities</i>	
Unduplicated number of female users who obtained a Pap test	2,510
Number of Pap tests performed	2,517
Number of Pap tests with an ASC or higher result*	291
Number of Pap tests with an HSIL or higher result**	14
<i>Clinical Breast Exams and Referrals</i>	
Unduplicated number of female users who received a clinical breast exam (CBE)	3,145
Unduplicated number of female users referred for further evaluation based on their CBE	34
<i>Testing Services</i>	
Unduplicated Users Tested for Chlamydia	4,328
Gonorrhea Testing	5,223
Syphilis Testing	636
HIV Tests	918

*ASC or higher results include ASC-US; ASC-H; LSIL; HSIL; squamous cell carcinoma; AGC; AGC, favor neoplastic; endocervical AIS; adenocarcinoma; or other malignant neoplasms.

**Number of Pap tests with an HSIL or higher result according to the 2014 Bethesda System (see Exhibit 1). HSIL or higher results include HSIL; squamous cell carcinoma; AGC; AGC, favor neoplastic; endocervical AIS; adenocarcinoma; or other malignant neoplasms.

FUTURE-FOCUSED ACTIVITIES CONCLUSION

While this report represents a first step toward improved collaboration and intentional focus on state-administered family planning programs, DHS and IDPH acknowledge the need for additional progress. The data provided in this report clearly demonstrate the need for deeper analysis of utilization patterns, particularly among the FPP and Medicaid programs, to understand differences in service utilization between coverage groups and age groups. Additionally, further study is necessary to identify root causes of low utilization and enrollment in the FPP, to enable DHS to implement strategies to better reach and serve Iowans. This work will necessarily involve close partnership with community providers for an on-the-ground perspective of the system’s performance. The existing partnership and agreement with FPCI will assist in accomplishing these goals.

As the State of Iowa continues to prioritize addressing maternal health issues such as severe maternal morbidity and mortality, the work must consider the full spectrum of women’s health to identify linkages and opportunities to improve health outcomes. Led by IDPH, this approach intentionally focuses on breaking down historic siloes between state agencies, programs, payers, providers, and communities. These efforts will build on the interdisciplinary work of the Iowa Maternal Quality Care Collaborative as well as the interdisciplinary work of the Medicaid/IDPH Maternal Health Taskforce.

IDPH and DHS will undertake this work over the coming year and beyond as the agencies work in partnership on programmatic alignment and movement toward a true health and human services system for the benefit of all Iowans.

APPENDIX A:

Side-by-Side of State-Administered Family Planning Programs

Topics	State Family Planning Program (SFPP) <i>State-Funded DHS</i>	Family Planning Services <i>Medicaid</i>	Title X Family Planning Program <i>Federally Funded IDPH and FPCI</i>
Eligibility Criteria	<ul style="list-style-type: none"> ▶ Serving men and women ▶ 12 to 54 years of age ▶ Iowa residents ▶ Proof of Identity ▶ Proof of Social Security Number ▶ U.S. citizens or qualified immigrants ▶ Income – Up to 300% Federal Poverty Level (FPL); proof required ▶ Apply through SFP Clinics or local DHS office ▶ Capable of fathering or bearing children ▶ Not otherwise eligible for Medicaid, including Iowa Health and Wellness Plan ▶ May be otherwise eligible for Health and Well Kids Iowa (Hawki) 	<ul style="list-style-type: none"> ▶ Serving men, women, and children ▶ No age restrictions ▶ Iowa residents ▶ Proof of Identity ▶ Proof of Social Security Number ▶ U.S. Citizen or qualified immigrant ▶ Income limits specific to coverage group ▶ Resource limits may apply ▶ Apply online, by phone, or in person at local DHS office 	<ul style="list-style-type: none"> ▶ Serving men and women ▶ Age – No restrictions ▶ No residency or citizenship required ▶ Income – Up to 250% of the FPL discounts; no proof required (people with incomes over 250% of poverty can be served but are charged full fee) ▶ No application needed in order to receive services ▶ Can have insurance coverage which would be billed
Services Covered	<ul style="list-style-type: none"> ▶ Birth control exams ▶ Birth control counseling ▶ Limited testing and treatment for STDs ▶ Pelvic exams ▶ Pap tests ▶ Pregnancy tests ▶ Birth control supplies ▶ Emergency contraception ▶ Ultrasounds (if medically necessary and related to birth control services) ▶ Yeast infection treatment ▶ Voluntary sterilization 	<ul style="list-style-type: none"> ▶ Birth control exams ▶ Birth control counseling ▶ Testing and treatment for STDs ▶ Pelvic exams ▶ Pap tests ▶ Pregnancy tests ▶ Birth control supplies ▶ Emergency contraception ▶ Ultrasounds ▶ Testing and treatment for HIV ▶ Breast and cervical cancer screening ▶ Evaluation and treatment for vaginal infection(s) ▶ HPV vaccine ▶ Overall comprehensive health ▶ Voluntary sterilization 	<ul style="list-style-type: none"> ▶ Birth control exams ▶ Birth control counseling ▶ Testing and treatment for STDs ▶ Pelvic exams ▶ Pap tests ▶ Pregnancy tests ▶ Birth control supplies ▶ Emergency contraception
Payment Method	<ul style="list-style-type: none"> ▶ SFPP coverage ▶ Medicaid eligible providers are paid by Fee-for-Service (FFS) billing to Iowa Medicaid 	<ul style="list-style-type: none"> ▶ Medicaid eligible providers are paid by the Managed Care Organizations (MCOs) and FFS 	<ul style="list-style-type: none"> ▶ Sliding fee scale ▶ Private insurance ▶ Donations ▶ Medicaid, Medicaid MCOs ▶ SFPP ▶ No payment is required for clients under 100% of FPL ▶ No one can be denied contraceptive services due to inability to pay

Additional services made available through Title X:

- ▶ Testing and treatment for HIV
- ▶ Breast and cervical cancer screening
- ▶ Evaluation and treatment for vaginal infection(s)
- ▶ HPV vaccine Gardasil available through separate payer source
- ▶ Natural family planning methods counseling
- ▶ Level 1 infertility evaluation
- ▶ Overall comprehensive health
- ▶ Domestic violence
- ▶ General outreach and education

Topics	State Family Planning Program (SFPP) <i>State-Funded DHS</i>	Family Planning Services <i>Medicaid</i>	Title X Family Planning Program <i>Federally Funded IDPH and FPCI</i>
Access to Services	<ul style="list-style-type: none"> ▶ FPP Family Planning Clinics ▶ Physicians ▶ Federally Qualified Health Centers ▶ Rural Health Clinics ▶ Any approved and enrolled Medicaid provider that has completed a FPP attestation 	<ul style="list-style-type: none"> ▶ FPP Family Planning Clinics ▶ Physicians ▶ Federally Qualified Health Centers ▶ Rural Health Clinics ▶ Any approved and enrolled Medicaid provider 	<ul style="list-style-type: none"> ▶ Selected Title X contractors through IDPH and FPCI Clinic locator – https://opa-fpclinicdb.hhs.gov/ ▶ All IDPH contracted Title X agencies must complete the Title X Certification and Assurance

ADDITIONAL RESOURCES

<https://idph.iowa.gov/Portals/1/userfiles/88/2017%20SFPP%281%29.pdf>

<http://idph.iowa.gov/pregnancy-options/information-for-women>

APPENDIX B:

DHS Family Planning Services

*Services do not include Evaluation and Management. All services listed are available to FPP and Medicaid members

Service	Category
Anesthesia for hysteroscopy	Anesthesiology
Anesthesia- tubal ligation/transection	Anesthesiology
Anesthesia for procedures on male genitalia (including open urethral procedures); vasectomy- unilateral or bilateral	Anesthesiology
Spermicidal suppositories	Medical & Surgical Supplies or DME
Essure Implant device	Medical & Surgical Supplies or DME
Condom- nonspermicidal	Medical & Surgical Supplies or DME
Female condom	Medical & Surgical Supplies or DME
Diaphragm	Medical & Surgical Supplies or DME
Supplies and materials provided by phys over/above norm serv	Medical & Surgical Supplies or DME
Cervical cap	Medical & Surgical Supplies or DME
Handling and/or conveyance of specimen for transfer from a physician's office to a lab	Medical Services/Procedures
IUD - Levonorgestrel-Release Intrauterine Contraception 52MG (brand name Merena)	Medical Services/Procedures
Therapeutic- prophylactic- or diagnostic injection; subcutaneous or intramuscular	Medical Services/Procedures
Hospital outpatient clinic visit for assessment and management of a patient	Medical Services/Procedures
Injection- Midazolam HCL- 1 mg (Versed)	Medical Services/Procedures
Intrauterine Device (IUD)	Medical Services/Procedures
Sign language or oral interpretive services- per 15 minutes	Medical Services/Procedures
injection- Fentanyl Citrate- 0.1 mg (Fentanyl)	Medical Services/Procedures
Prescription drug- oral- non-chemotherapeutic- not otherwise specified (Use for oral medications related to contraception services). J8499 requires the claim to include the NDC number.	Medical Services/Procedures
Handling and/or conveyance of specimen for transfer from patient to other than physician's office to a lab (distance may be indicated)	Medical Services/Procedures
Levonorgestrel-releasing intrauterine contraceptive 3 year duration	Medical Services/Procedures
Doxycycline	Medical Services/Procedures
Levonorgestrel (contraceptive) implants system- including implants and supplies (brand name Implanon)	Medical Services/Procedures
Contraceptive supply- hormone containing vaginal ring- each	Medical Services/Procedures
Levonorgestrel-releasing intrauterine contraceptive system (skyla)- 13.5 mg	Medical Services/Procedures
Oral contraceptive- 21-day supply	Medical Services/Procedures
Moderate (conscious) sedation by same physician- first 30 min intra-service time- ages 5 yrs and older	Medical Services/Procedures

Service	Category
Electrocardiogram- routine EKG with at least 12 leads; w/ interpretation and report	Medical Services/Procedures
Noninvasive ear or pulse oximetry for oxygen saturation; multiple determinations	Medical Services/Procedures
Administration and interpretation of caregiver-focused health risk assessment	Medical Services/Procedures
Medroxyprogesterone acetate for contraceptive use- 1mg	Medical Services/Procedures
Moderate sedation services by physician- 5 years of age or older; first 15 minutes	Medical Services/Procedures
Transdermal Hormonal (Evra - patch)	Medical Services/Procedures
Administration of patient-focused health risk assessment	Medical Services/Procedures
Moderate sedation services by physician; additional 15 minutes	Medical Services/Procedures
Levonorgestrel (contraceptive) implant system- including implants and supplies	Medical Services/Procedures
Progestasert IUD	Medical Services/Procedures
Levonorgestrel-releasing intrauterine contraceptive system- 19.5 mg	Medical Services/Procedures
High intensity behavioral counseling to prevent sexually transmitted infection; face-to-face- individual- includes: Education- skills training & guidance on how to change sexual behavior; performed semi-annually- 30 minutes	Medical Services/Procedures
Levonorgestrel-releasing intrauterine contraceptive 5 year duration	Medical Services/Procedures
Moderate (conscious sedation) by same physician- add-on code	Medical Services/Procedures
UA- auto with scope	Pathology & Lab
UA- auto without scope	Pathology & Lab
Automated hemogram	Pathology & Lab
Cytopathology- cervical or vaginal- liquid preservative; automated prep- manual screen under physician supervision	Pathology & Lab
Gonadotropin- chorionic; quantitative (HCG)	Pathology & Lab
Blood Panel	Pathology & Lab
UA by regent strips	Pathology & Lab
Culture- chlamydia	Pathology & Lab
Culture- presumptive pathogenic organisms- screening only	Pathology & Lab
Cytopathology pap- cervical or vaginal; any reporting system requiring interpretation by physician	Pathology & Lab
Level II - surgical pathology gross & microscopic exam	Pathology & Lab
Knickers test for yeast	Pathology & Lab
Blood count- hemoglobin	Pathology & Lab
Blood count- hematocrit	Pathology & Lab
Immunoassay for infectious agent reagent strip	Pathology & Lab
Syphilis tests; quantitative	Pathology & Lab
UA- routine without microscopy	Pathology & Lab

Service	Category
Cytopathology- cervical or vaginal- liquid preservative- auto prep-automated screening under physician supervision	Pathology & Lab
Cytopathology- cervical or vaginal- liquid preservative- auto prep-automated screen & manual rescreen- under physician supervision	Pathology & Lab
Infectious agent detection by nucleic acid; human papilloma virus; high-risk types	Pathology & Lab
Hematocrit	Pathology & Lab
Gonorrhea - amplified probe test	Pathology & Lab
Infectious agent detection by nucleic acid; human papilloma virus; types 16 and 18 only; includes type 45- if performed	Pathology & Lab
Gonadotropin- qualitative (pregnancy test)	Pathology & Lab
Koh test	Pathology & Lab
HPV - amplified probe test	Pathology & Lab
Infectious agent detection by nucleic acid; human papilloma virus; low-risk types	Pathology & Lab
Smear- primary source- with interpretation- wt mount	Pathology & Lab
Glucose- blood- stick test	Pathology & Lab
Level V- Surgical pathology- gross and microscopic examination	Pathology & Lab
Automated diff WBC count	Pathology & Lab
Infectious agent detection by nucleic acid- chlamydia?	Pathology & Lab
Chlamydia trachomatis- amplified probe technique	Pathology & Lab
Syphilis- qualitative (aka VDRL)	Pathology & Lab
Cytopathology- cervical or vaginal- liquid preservative; automated prep- manual screen & rescreen under physician supervision	Pathology & Lab
Level IV- Surgical pathology- gross and microscopic examination	Pathology & Lab
Differential WBC count	Pathology & Lab
Cytopathology- slides- cervical or vaginal (the Bethesda System); manual screening under physician supervision	Pathology & Lab
Infectious agent detection by nucleic acid; N. gonorrhea- direct probe technique	Pathology & Lab
Urine pregnancy test	Pathology & Lab
Cytopathology- slides-cervical or vaginal- manual screening under physician supervision	Pathology & Lab
Smear- primary source- with interpretation- routine	Pathology & Lab
Cytopathology-smears cervical or vaginal- screening by automated system under supervision of physician	Pathology & Lab
Cytopathology- smears cervical or vaginal- automated manual rescreening under physician supervision	Pathology & Lab
Semen analysis; presence and/or motility of sperm including Huhner test (post coital)	Pathology & Lab
X-ray of chest- 2 views	Radiology
Ultrasound- transvaginal	Radiology
Chest x-rays	Radiology

Service	Category
Radiologic exam- pelvis- complete- minimum of 3 views	Radiology
Ultrasound- pelvic (non-obstetric) B-Scan and/or real time with image documentation; complete (Payable only with a family planning related diagnosis)	Radiology
Radiologic exam- chest- two views	Radiology
Ultrasound- extremity- nonvascular- real-time with image documentation; limited- anatomic specific	Radiology
Ultrasound- pelvic (non-obstetric) B-Scan and/or real time with image documentation; limited or follow-up (Payable only with a family planning related diagnosis)	Radiology
Hysterosalpingography; supervision and interpretation only	Radiology
Insertion- non-biodegradable drug delivery implant	Surgery
Laparoscopy - with fulguration of oviducts (with or without transection)	Surgery
Drawing blood capillary	Surgery
Removal of IUD	Surgery
Laparoscopy - with occlusion of oviducts (e.g.- band- clip- falope ring)	Surgery
Colposcopy of the cervix including upper/adjacent vagina	Surgery
Removal- non-biodegradable drug delivery implant	Surgery
Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix and endocervical curettage	Surgery
Essure - female sterilization	Surgery
Colposcopy of the cervix including upper adjacent vagina; with biopsy(s) of the cervix	Surgery
Hysteroscopy- surgical; with removal of impacted foreign body	Surgery
Insertion of intrauterine device	Surgery
Salpingectomy- complete/partial- unilateral/bilateral (separate procedure)	Surgery
Removal of non-biodegradable drug- device or implant	Surgery
Ligation or transection of fallopian tube(s) abdominal or vaginal approach- unilateral or bilateral	Surgery
Ligation or transection of fallopian tube(s)- when done at the time of cesarean delivery or intra- abdominal surgery	Surgery
Occlusion of fallopian tube(s) by device (e.g.- band- clip- falope ring) vaginal or suprapubic approach	Surgery
Removal with reinsertion- non-biodegradable drug delivery implant	Surgery
Colposcopy of the entire vagina- with cervix if present- with biopsy(s) of vagina/cervix	Surgery
Vasectomy- unilateral/bilateral (separate procedure)- including postoperative semen examination(s)	Surgery
Diaphragm or cervical cap fitting	Surgery
Catheterization & introduction of saline infusion sonohysterography (SIS) or hysterosalpingography	Surgery

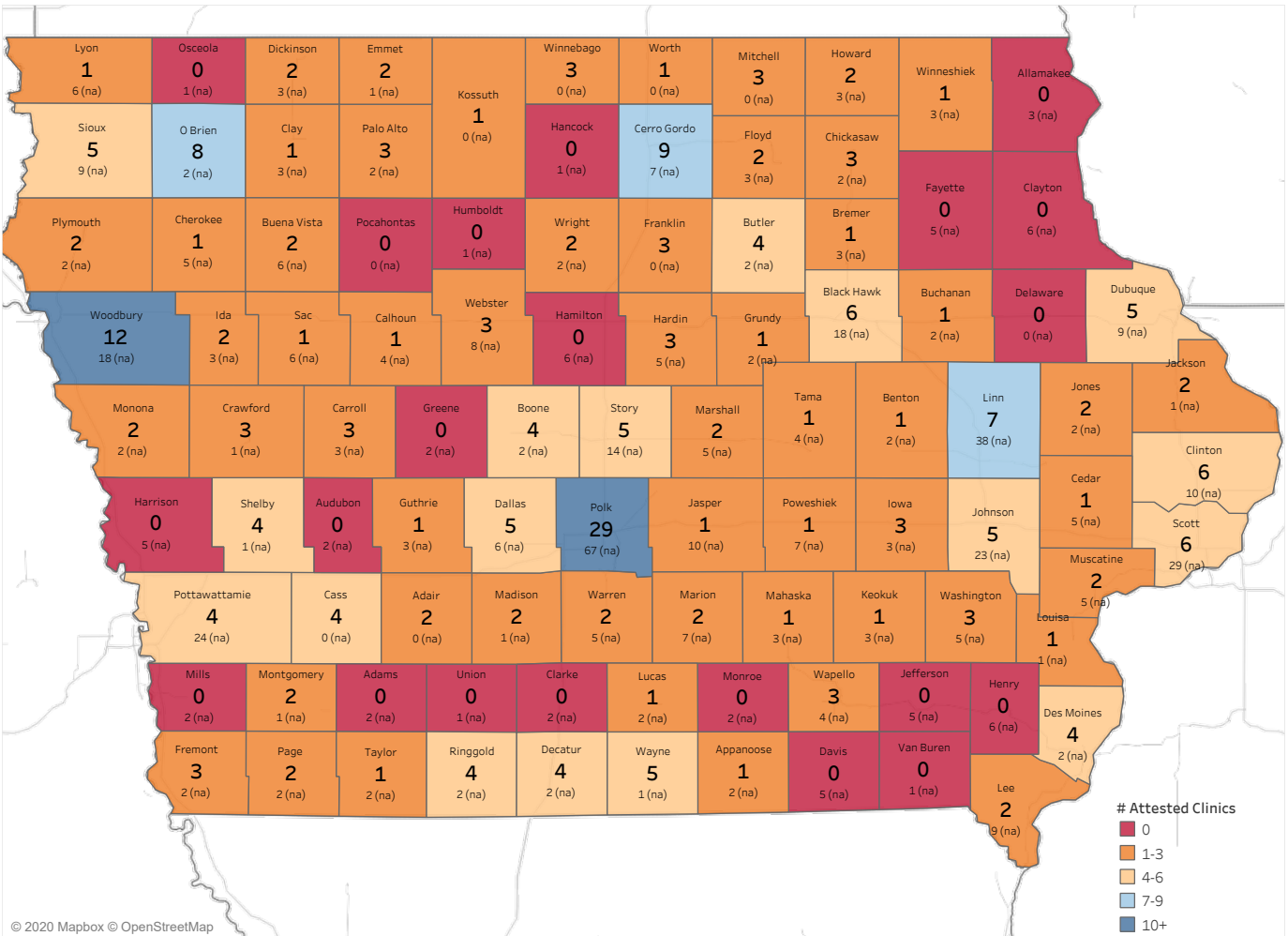
Service	Category
Ligation (percutaneous) of vas deferens- unilateral or bilateral (separate procedure)	Surgery
Venipuncture	Surgery
Colposcopy of the entire vagina with cervix if present	Surgery
Cautery of cervix; cryocautery- initial or repeat	Surgery
Conization of cervix- with or without fulguration- with or without dilation and curettage- with or without repair; loop electrode excision	Surgery

APPENDIX C:

State-Administered Family Planning Programs Clinic Map

This map is reflective of clinics, which are predominant providers of these services. However, this map does not include private practice or other providers and is instead intended to help illustrate where services are and are not available in the state

Family Planning Program Clinics, Attested, by County ('na' = 'Non-Attested')



APPENDIX D:

Data Analytic Methodologies for FFP and Medicaid Family Planning Services

Family Planning Program Member Identification

Family Planning Program members are identified by eligibility. Services for this population are extracted from encounters/claims.

- ▶ Recipient program code 906 used to identify FFP members
- ▶ Encounters/claims were extracted for these members for services in calendar year 2019 by date of service
- ▶ Services include all rendered: both medical and evaluation and management

Medicaid Family Planning Services members are identified by all other non-FFP Medicaid members that received services classified as family planning types of services.

- ▶ Family Planning types of service are identified by specific HCPCS/CPT codes.
- ▶ Encounters/claims were extracted for these members for services in calendar year 2019 by date of service
 - Services include all rendered: both medical and evaluation and management

Provider data is based on providers that rendered medical and evaluation services to both FFP and Medicaid Family Planning Service members.

- ▶ Provider legacy number is extracted from the encounter/claims and used to retrieve provider demographics/name from provider master file.
- ▶ Providers are categorized by program and region (In-State vs Out-of-State)

Contraceptive data is based on use of an indicator, within the record, that identifies medications associated with family planning.

- ▶ Pharmacy claims were extracted for both FFP and Medicaid Family Planning Services members in calendar year 2019 by date of service (prescription fill date)
- ▶ Contraceptives are grouped into the following categories:
 - Contraceptives, Intravaginal, Systemic
 - Contraceptives, Injectable
 - Contraceptives, Oral
 - Contraceptives, Transdermal

Member counts represent the unduplicated count of members in each population and by age range and gender.

Service Counts are derived by the count of HCPCS/CPT codes for members in each population and category.

Categories of medical services were grouped by type of service rendered and includes:

- ▶ Medical Services/Procedures
- ▶ Medical & Surgical Supplies or DME
- ▶ Pathology & Lab
- ▶ Radiology
- ▶ Surgery

Member months are based on the count of members by program, category and YYYYMM of the claim. These counts are used for calculating a PMPM cost by program and category. PMPM cost is calculated by Reimbursement Amount divided by Member Months

Service utilization is shown as cost per service within each category. This is calculated by Reimbursement Amount divided by the Service Count = Per Service Cost



