

Mississippi Family Planning Waiver

Project Number 11-W-00157/7

Section 1115 Quarterly Report

Demonstration Year 12, Quarter 1

May 29, 2015

The initial Mississippi family planning section 1115(a) Medicaid (FPW) demonstration was approved for a 5-year period on January 31, 2003 and implemented October 1, 2003. The demonstration was extended on October 30, 2008 through September 30, 2011. The demonstration operated under temporary extensions through December 31, 2014.

Effective through December 31, 2017, the FPW will provide family planning and family planning-related services to women who are losing Medicaid pregnancy coverage at the expiration of the 60- day postpartum period and individuals (men and women), ages 13 through 44, who have family income at or below 194 percent of the federal poverty level (FPL) (post Modified Adjust Gross Income (MAGI) conversion), and who are not otherwise enrolled in Medicaid, Children Health Insurance Plan (CHIP), or has other health insurance coverage that provides family planning services.

Under this demonstration, Mississippi expects to promote the objectives of Title XIX by:

- Improving the access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service;
- Improving birth outcomes and the health of women by increasing the child spacing interval among women in the target population;
- Decreasing the number of Medicaid paid deliveries, which will reduce annual expenditures for prenatal, delivery, newborn and infant care;
- Reducing the number of unintended and unwanted pregnancies among women eligible for Medicaid;
- Reducing teen pregnancy by reducing the number of repeat teen births; and,
- Increasing the overall savings attributable to providing family planning services by covering women for 1 year postpartum.

Demonstration Year 12	Begin Date	End Date	Quarterly Report Due Date (60 days following end of quarter)
Quarter 1	January 1, 2015	March 31, 2015	May 31, 2015

Enrollment

This demonstration has three eligible populations.

Population 1: Women losing Medicaid pregnancy coverage at the expiration of the 60-day postpartum period

Population 2: Women who have family income at or below 194 percent of the FPL (post MAGI) conversion) who are capable of reproducing

Population 3: Men who have family income at or below 194 percent of the FPL (post MAGI conversion) who are capable of reproducing.

<i>DY 12: 2015</i>	Quarter 1 (1/1/15-3/31/15)			
	Population 1	Population 2	Population 3	Total Population
# of Newly enrolled	3,502	2,553	42	6,097
# of Total Enrollees	13,658	9,425	42	23,125
# of Participants	3,138	3,972	2	7,112
# of Member Months	33,841	24,975	111	58,927

Service and Providers

•Service Utilization

Family planning services and supplies provided to beneficiaries include:

- Approved methods of contraception;
- Sexually transmitted infection (STI)/sexually transmitted disease (STD) testing, Pap smears and pelvic exams. Laboratory tests done during an initial family planning visit for contraception include a Pap smear, screening tests for STIs/STDs, blood count and pregnancy test. Additional screening tests may be performed depending on the method of contraception desired and the protocol established by the clinic, program or provider. Additional laboratory tests may be needed to address a family planning problem or need during an inter-periodic family planning visit for contraception.
- Drugs, supplies, or devices related to women's health services prescribed by a MS Medicaid provider.

- Contraceptive management, patient education, and counseling.

Utilization for Approved Methods of Contraception

Oral Contraceptives	Ortho-Evra	Nuva-Ring	LARC's
5,866	858	367	2,447

Family planning-related services and supplies provided to beneficiaries include:

- Colposcopy (and procedures done with/during a colposcopy) or repeat Pap smear performed as a follow-up to an abnormal Pap smear.
- Drugs for the treatment of STIs/STDs, except for HIV/AIDS and hepatitis, when the STI/STD is identified/ diagnosed during a routine/periodic family planning visit. A follow-up visit/encounter for the treatment/drugs and subsequent follow-up visits to rescreen for STIs/STDs based on the Centers for Disease Control and Prevention guidelines may be covered.
- Drugs/treatment for vaginal infections/disorders, other lower genital tract and genital skin infections/disorders, and urinary tract infections, where these conditions are identified/diagnosed during a routine/periodic family planning visit. A follow-up visit/encounter for the treatment/ drugs may also be covered.
- Other medical diagnosis, treatment, and preventive services that are routinely provided pursuant to family planning services in a family planning setting.
- Treatment of major complications arising from a family planning procedure such as:
 - Treatment of a perforated uterus due to an intrauterine device insertion;
 - Treatment of severe menstrual bleeding caused by a Depo-Provera injection requiring a dilation and curettage; or
 - Treatment of surgical or anesthesia-related complications during a sterilization procedure.

• *Provider Participation*

Currently, 272 unique providers have submitted claims during the first quarter time period. DOM has conducted two webinars for the provider community since January 1, 2015. The webinar content can be viewed at http://www.medicaid.ms.gov/wp-content/uploads/2015/01/012915_Family-Planning-Waiver-Webinar.pdf .

Program Outreach Awareness and Notification

The DOM has coordinated outreach and education approaches with the MS State Department of Health to improve family planning participation. Specific activities include:

- Develop and publish a brochure which outlines the covered family planning and family planning related services to be made available at all local public services offices.
- Revise other outreach tools for informing the target population which will include, but not be limited to flyers, posters, fact sheets, news releases that will be scripted using consistent messages.

- Continue to provide outreach and education for family planning through radio and television public service announcements (PSAs), direct mail promotion, telephone hotline, community outreach partners, website and newsletters, etc.

Program Evaluation, Transition Plan and Monitoring

- DOM continues quality assurance and monitoring activities in the form of on-site provider audits. Since January 1, 2015 staff members have focused educational activities on waiver changes to the provider community.

Quarterly Expenditures

- The state provides quarterly expenditure reports using the Form CMS-64 to report expenditures for services provided under the demonstration in addition to administrative expenditures. DOM has previously submitted this information.

Activities for Next Quarter

- Conduct the Post Award Forum to afford the public the opportunity to provide comment on the progress of the demonstration.
- Continue Quality Assurance on-site provider audits.
- Continue to conduct outreach and education approaches with the MS State Department of Health.