

**State of Oregon
Oregon ContraceptiveCare**

**Medicaid Section 1115 Waiver
Project # 11-W-00142/0**

**Narrative and Data Report for Quarter 1, 2016
(January through March 2016)**

**The report also includes enrollment data for the third quarter of
Demonstration Year 17 (November 2015 – January 2016)**

Clients Enrolled and Claims Paid

Calendar Year

The number of clients newly enrolled in Oregon Contraceptive Care (CCare) during the first quarter of calendar year 2016 was 3,362. A total of 6,630 clients received services during the quarter. The number of clients with active enrollment status during any part of the quarter was 31,777. Including both service and supply reimbursements, the total amount paid in claims for the first quarter of 2016 was \$2,039,858.18.

Demonstration Year

The number of clients newly enrolled in CCare during the fourth quarter of Demonstration Year 17 (DY17) was 3,613. A total of 7,659 clients received services during the quarter. The number of clients with active enrollment status during any part of the quarter was 34,295. Including both service and supply reimbursements, the total amount paid in claims for the third quarter of DY17 was \$2,071,996.09.

The CCare provider network currently has 146 registered clinic sites.

Outreach

Ongoing CCare outreach activities included:

- Continued development and posting of new content to the CCare Facebook and web sites.
- Increased the CCare Facebook fan base of 12,136 followers.
- Produced and placed new Facebook advertisements, reaching 238,112 individuals.
- CCare Facebook posts reached 56,571 individuals with information about contraception and related reproductive health topics.
- Continued tracking and monitoring of Facebook Insights metrics.
- Continued meeting with key partners in the Portland-area African-American community to advance collaboration on a project to reduce reproductive health disparities and promote access to and utilization of

contraceptive services among the women and communities served by the Healthy Birth Initiative.

- Continued to participate in Oregon's Region X Infant Mortality Collaborative Innovation and Improvement Network to contribute to strategies to reduce unintended pregnancy through increased access to contraceptive services and long-acting reversible contraceptives.
- Continued participation in the African American AIDS Awareness Action Alliance to address the reproductive and sexual health needs of Portland Area African-American community.
- Tabled at the Portland Community College Women's Resource Center Wellness Fair to raise awareness of CCare services among young women of color attending Community College.
- Tabled at the Oregon Museum of Science and Industry's After Dark: Sex and Love event of 2,000 attendees to promote long acting reversible contraceptives and raise awareness of their availability through CCare.

Agency Training and On-site Consultations

- Delivered program news, policy updates, training opportunities, and other information to providers via the biweekly *RH Update* newsletter.
- Held four training webinars, attended by a total of 92 RH providers (across all four webinars).
- Provided relevant health system transformation information and resources to providers via the RH Program's electronic listserv, as needed.
- Provided technical assistance on a variety of topics including CCare services, eligibility requirements, billing and income verification via email and telephone to multiple agencies upon request.
- Provided reproductive health orientation to 2 agencies and one orientation for a new Reproductive Health Coordinator.

- Distributed clinical information/research articles to all Reproductive Health Coordinators and providers at Oregon Health and Sciences University (OHSU).

Program Audit Activities

On-going audit activities included:

- Review of CCare billing and data reports.
- Review of data showing rejected Clinic Visit Records (CVRs) and reasons for rejection.
- Work with individual agencies on specific billing or CVR rejection issues identified from monthly report review.
- Follow-up with agencies on previously identified issues to ensure that billing changes have occurred.
- Monitoring of supply prices charged by provider agencies against invoices from suppliers and Prime Vendor 340 B quarterly price list.
- Notification of supply price changes and other audit-related issues to providers via the biweekly *RH Update* newsletter.
- On-going duplicate claims audit process to identify and correct duplicate claims inadvertently submitted to and paid by CCare.

The following audit-related activities also took place this quarter:

- Review of five provider agencies for eligibility screening practices, enrollment form completeness, and chart documentation of a contraceptive management visit. Citizenship verification information and other paper documents were verified against the CCare Eligibility Database as part of this process.

Policy Issues

- RH Program staff conducted the 1115 waiver renewal public comment and tribal notification requirements between February 5th and March 7th. Minimal comments were received and incorporated into the application.
- The RH Program Policy Analyst monitored relevant proposed legislation during the 2016 short legislative session. The legislative session convened on February 1st and adjourned March 6th.
- The RH Program completed the Guttmacher Institute's Survey on Public Expenditures for Reproductive Health Services in January, detailing CCare's expenditures.
- The RH Program Research Analyst continued to monitor CCare client caseload numbers post January 1, 2014 ACA implementation, including CCare clients transitioning to the state's Medicaid program, the Oregon Health Plan (OHP). As a result of ACA implementation, and most significantly, OHP expansion, CCare client numbers dropped in early 2014. However, monthly client enrollment numbers have begun to level-off and ongoing tracking of the data will determine whether this steady state will remain.
- The RH Program Policy Analyst participated in monthly Public Health Division, Health System Transformation Team meetings in order to better coordinate public health's involvement in state and local health care reform efforts.
- RH Program staff continued to staff the Oregon Preventive Reproductive Health Advisory Council (OPRHAC) to develop standards and metrics for the provision of quality contraceptive services.

Staffing

- The new RH Program Health Education Coordinator began work with the RH Program in late February 2016.
- The Research Analyst 2 left the RH Program in mid-February to move out of state. The RH Program has posted the position and expects to hire a replacement during the second quarter of 2016.

Evaluation

- RH Program staff continued their collaboration their OHSU research partner to develop research protocols related to the provision of publicly-funded contraceptives services in the state.
- The RH Program continued to monitor CCare evaluation objectives and the data sources used to measure progress toward those objectives.