



MISSISSIPPI DIVISION OF  
**MEDICAID**

**MISSISSIPPI  
Family Planning Medicaid Waiver Section 1115 Demonstration Annual Report  
11-W-00157/4**

January 1, 2024 – December 2024

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Submitted March 28, 2025

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## MONITORING REPORT

### FAMILY PLANNING SECTION 1115 DEMONSTRATION

**State:** Mississippi

**Demonstration Reporting Period:** January 1, 2024, to December 31, 2024

**Demonstration Year:** 21

**Approved Start and End Date of the Demonstration:** Jan. 1, 2018, to Dec. 31, 2027

The Mississippi Family Planning Section 1115(a) Medicaid demonstration, effective through December 31, 2027, continues to expand the provision of family planning services and family planning related services to women and men, ages 13 through 44, who are capable of reproducing. Participants must be limited to an income of no more than 194% of the federal poverty level (FPL) (post Modified Adjusted Gross Income (MAGI) conversion) and are not enrolled in Medicaid, Medicare, the Children's Health Insurance Program (CHIP), or any other creditable coverage that includes family planning services.

#### A. Executive Summary

##### 1. Synopsis of Information Contained in the Report

The Family Planning Waiver (FPW) annual report is an overview of the progress made in achieving the following goals:

- Ensure access to and utilization of family planning services and family planning related services for individuals not otherwise eligible for Medicaid;
- Improve birth outcomes and/or maintain health outcomes for the target population as a result of access to family planning services and family planning related services; and
- Increase the overall savings attributable to providing family planning services and family planning-related services.

To accomplish the stated goals, the Centers for Medicare & Medicaid Services (CMS) and the Mississippi Division of Medicaid (DOM) expect this demonstration program will promote the FPW program objectives by:

- Improving access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.
- Improving access to and use of Medicaid family planning services by women and men who are not otherwise eligible for Medicaid.

- Improving birth outcomes (e.g., low birthweight) and the health of women in the demonstration population.
- Increasing the child spacing interval among women in the demonstration population.
- Reducing the number of unintended pregnancies among women in the demonstration population.
- Reducing overall pregnancy among teenage women in the demonstration population.
- Reducing the number of repeat births among teenage women in the demonstration population.
- Decreasing the number of Medicaid paid deliveries, which will reduce annual expenditures for prenatal, delivery, and newborn services.
- Increasing the overall savings attributable to providing family planning services by covering women for one year postpartum.

In accordance with the Standard Terms and Conditions (STCs), this Annual Monitoring Report will provide the status of the demonstration's various operational areas, and an analysis of program data collected for the period of January 1, 2024, through December 31, 2024. The information reflected in this report represents the most current information available at the time that it was compiled.

## 2. Program Updates – Current Trends or Significant Program Changes

During Demonstration Year (DY) 21, DOM continued to see a downward trend in the total enrollment numbers for the FPW, starting at 26,346 in Q1, then 25,636 in Q2, 22,875 in Q3, and ending at 22,508 in Q4. The decline in number of beneficiaries enrolled in the FPW was due to DOM's Office of Eligibility continuing the unwinding process that was started June 2023. Members that were no longer eligible for the FPW were removed. The unwinding process continued through May 2024.

There have been no administrative or operational changes to the demonstration, such as changes in the health care delivery, benefits, quality of care, or payment rates, that would impact the FPW demonstration program. There were no changes in service utilization or provider participation during this reporting period. DOM has not had any audits, investigations, or lawsuits that would have an impact on the FPW demonstration.

## 3. Policy Issues and Challenges

DOM has not experienced any operational challenges or issues during DY 21. DOM is not considering any new policies related to legislative/budget activity or amendments to the current approved demonstration.

## B. Utilization Monitoring

**Table 1: Utilization Monitoring Measures**

Topic	Measure [Reported for each month included in the annual report]
<b>Utilization Monitoring</b>	Unduplicated Number of Enrollees by Quarter
	Unduplicated Number of Beneficiaries with any Claim by Quarter (by key demographic characteristics such as age, sex, and income level)
	Utilization by Primary Method and Age Group
	Total number of beneficiaries tested for any sexually transmitted disease
	Total number of female beneficiaries who obtained a cervical cancer screening
	Total number of female beneficiaries who received a clinical breast exam

**Table 2: Unduplicated Number of Enrollees by Quarter DY 21\***

	Number of Female Enrollees by Age and Quarter				
	13-14	15-19	20-29	30-44	Total Unduplicated Female Enrollment
Quarter 1	10	952	11,264	9,817	22,043
Quarter 2	12	1,161	10,814	9,492	21,479
Quarter 3	11	1,249	9,603	8,436	19,299
Quarter 4	10	1,212	9,386	8,361	18,969
	Number of Males Enrollees by Age and Quarter				
	13-14	15-19	20-29	30-44	Total Unduplicated Male Enrollment
Quarter 1	5	237	2,066	1,995	4,303
Quarter 2	5	300	1,997	1,855	4,157
Quarter 3	5	305	1,788	1,478	3,576
Quarter 4	5	284	1,822	1,428	3,539

Source: Medicaid Enterprise System Assistance (MESA) Cognos Report 3 COE29 who Receive FPW service report

\*CMS table template altered for age grouping to capture data for teen population without inclusion of ages 20 and above.

**Table 3: Unduplicated Number of Beneficiaries with any Claim by Age Group and Sex per Quarter DY 21**

	Number of Female Who Utilize Services by Age and Quarter					
	13-14	15-19	20-29	30-44	Total Female Users	Percentage of Total Unduplicated Female Enrollment
Quarter 1	2	284	2,496	1,893	4,675	21.7%
Quarter 2	5	361	2,255	1,622	4,243	19.8%
Quarter 3	2	381	2,292	1,686	4,361	22.6%
Quarter 4	4	308	2,144	1,607	4,063	21.4%
	Number of Males Who Utilize Services by Age and Quarter					
	13-14	15-19	20-29	30-44	Total Male Users	Percentage of Total Unduplicated Male Enrollment
Quarter 1	0	26	151	78	255	5.9%
Quarter 2	1	33	145	82	261	6.3%
Quarter 3	0	42	123	68	233	6.5%
Quarter 4	0	28	108	47	183	5.2%

Source: MESA Cognos Report 3 COE 29 who received FPW service report

**Table 4: Utilization by Primary Method and Age Group DY 21**

Primary Method	Total Users					Percent of All Users
	13-14	15-19	20-29	30-44	Total	
Female Sterilization Tubal	0	0	3	5	8	0.1%
Male Sterilization Vasectomy	0	0	1	0	1	0.01%
Emergency Contraceptives	0	0	0	0	0	0%
Intrauterine Device (IUD)	0	2	50	18	70	1.0%
Hormonal Implant	0	28	140	98	266	3.8%
1-Month Hormonal Injection	0	0	0	0	0	0%
3-Month Hormonal Injection	6	340	1,399	1,077	2,822	40.1%
Oral Contraceptive	2	331	1,318	756	2,407	35.0%
Contraceptive Patch	0	89	341	103	533	7.7%
Vaginal Ring	0	13	92	51	156	2.3%
Diaphragm	0	0	8	0	8	0.1%
Sponge	0	0	0	0	0	0%
Female Condom	0	0	12	2	14	0.2%
Male Condom	0	15	84	29	128	1.4%

Source: MESA Cognos Report: Drug Utilization by DOS and Plan ID & W0100650 Refreshable by Procedure and DOS Paid and Denied COE 029.

**Table 5: Number of Beneficiaries Tested for any STD for DY 21**

	Female Tests		Male Tests		Total Tests	
	Number	% Of Total	Number	% Of Total	Number	% Of Total Enrolled
Unduplicated Number of Beneficiaries who Obtained an STD Test	4,509	15.7%	499	8.8%	5,008	14.6%

Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams

**Table 6: Total Number of Female Beneficiaries who obtained a Cervical Cancer Screening**

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries who obtained a cervical cancer screening	1,563	5.5%

Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams

**Table 7: Breast Cancer Screening**

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries who obtained a breast cancer screening	N/A	N/A

Note: Breast cancer screenings are not a FPW covered service, therefore, no data is reported in Table 7.

**Table 8: Clinical Breast Exam**

Screening Activity	Number	Percent of Total Enrolled Females
Total number of female beneficiaries who received a clinical breast exam	1,795	6.3%

Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams

Note: The utilization monitoring measures listed in Table 1 of the STCs, requests the total number of female beneficiaries who received a clinical breast exam, however the template provided did not include a table to report the data. The information is provided in Table 8 above.

## C. Program Outreach and Education

### 1. General Outreach and Awareness

DOM coordinates outreach and education activities with the Mississippi State Department of Health (MSDH) to improve Family Planning Waiver (FPW) enrollment and participation. During DY 21, MSDH partnered with coordinators from other MSDH Health Services' programs who organized outreach events and health fairs with community partners to increase awareness and improve access to family planning services. During DY 21, approximately 2,537 clients participated in outreach and health fair events, where a total of 3,760 brochures were distributed. This included 1,688 FPW brochures and 2,084 brochures on other educational topics. MSDH Office of Family Planning distributed an additional 837 brochures to districts and health departments, including 828 on FPW and 9 on other educational topics, for further distribution to clients.

MSDH Family Planning website is consistently updated under the agency's guidelines and continues to promote and provide educational resources on Family Planning services for the clients who visit the site. The main Family Planning webpage garnered 5,144 views, while the FPW received 2,638.

Additional MSDH outreach conducted telephonically and through mailings is outlined in the following table.

**Table 9: MSDH FPW Promotion and Education**

Quarter	Promotion/Education					Appointment Reminders/Notifications					
	Number of Educational Materials Distributed		Number of FPW Call and /or Letters			Appointment Reminder		Missed Appointment		Renew FPW Notifications	
	FPW	Other Brochures	Calls to Clients	Letters to Clients	Calls From Clients	Calls	Letters	Calls	Letters	Calls	Letters
First	708	910	2,703	752	368	6,310	468	1,953	547	298	282
Second	214	340	1,743	507	443	6,526	508	2,100	499	274	238
Third	409	345	2,851	427	517	7,442	491	2,973	630	322	216
Fourth	357	489	1,242	387	373	8,019	691	2,088	666	635	371
<b>Total</b>	<b>1,688</b>	<b>2,084</b>	<b>8,539</b>	<b>2,073</b>	<b>1,721</b>	<b>28,297</b>	<b>2,158</b>	<b>9,114</b>	<b>2,397</b>	<b>1,529</b>	<b>1,107</b>

DOM and MSDH developed a FPW fact sheet that is available in English, Spanish, and Vietnamese. The fact sheets are included in the reminder notifications that are sent to clients when it is time to renew eligibility for the FPW program and are available on the MSDH website.

DOM's Outreach Team actively participated in various community health fairs, conferences, and Medicaid member and provider workshops to increase awareness of programs such as the Family Planning Waiver (FPW) program. Through these events, the team provided education on FPW services and engaged in discussions with providers about their vital role in educating patients and guiding them to DOM for enrollment assistance.

During DY 21, DOM's Outreach Team attended 58 events, providing FPW education and outreach information to 4,881 individuals, including Medicaid Regional Office staff, beneficiaries, providers, and other health professionals.

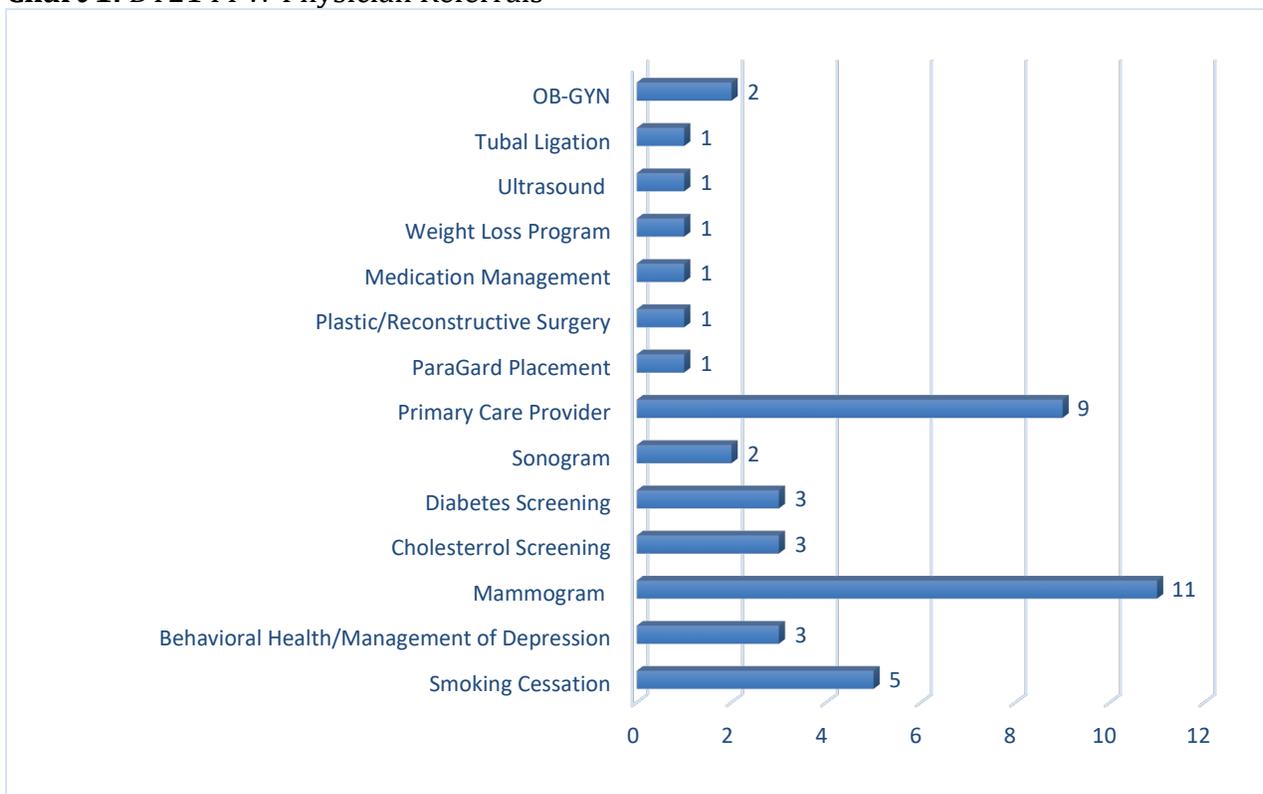
2. Target Outreach Campaign(s)

The MSDH continued targeted efforts to assist beneficiaries in renewing their coverage to prevent loss of benefits under the "Operation Going Gold" initiative. The goal of the initiative is to increase enrollment in the FPW program. MSDH staff educate clients on the benefits offered by the FPW program, assist clients with completing the FPW Medicaid application, and follow-up with the client to ensure all required information is provided to DOM to complete the enrollment process. Each health department has a reminder system in place to notify beneficiaries when it's time to renew their FPW eligibility. A notification letter is mailed, along with a copy of the FPW Fact Sheet, to the beneficiaries 2-3 months prior to the expiration of their benefit period, as a reminder to complete a new application to continue eligibility for the program. During DY 21, a total of 7,949 FPW applications state-wide were submitted to DOM under the "Operation Going Gold" initiative, with 27% (2,126) of the applications approved.

## D. Program Integrity

DOM's Office of Medical Services is responsible for monitoring providers who are reimbursed for family planning and family planning related services. Desk audits are performed by registered nurses (RNs) to ensure provider documentation supports the services reimbursed under the FPW program, participants are receiving appropriate medical care, and referrals are made for primary care and other services which are not family planning related. During DY21, the Office of Medical Services audited a total of 372 medical records for 17 FPW providers. Physician referrals documented in the medical records are depicted in Chart 1 below.

**Chart 1: DY21 FPW Physician Referrals**



## E. Grievances and Appeals

During DY 21, DOM's Office of Appeals received one appeal request for a beneficiary enrolled in the FPW demonstration program. The provider requested a review of a denied inpatient stay for psychiatric treatment. The denial was upheld as the findings indicated the services billed were not family planning related.

## **F. Annual Post Award Public Forum**

The FPW Annual Public Forum was held Thursday, July 11, 2024. The Public Notice that was posted is listed below.

June 10, 2024

Public Notice

Annual Public Forum

Mississippi Section 1115(a) Family Planning Demonstration

Pursuant to 42 C.F.R. Section 431.420(c), a Public Forum is required annually after the implementation of the Division of Medicaid's Family Planning Waiver. This Public Forum provides stakeholders the opportunity to provide meaningful comments on the progress of the Family Planning Waiver. The Family Planning Waiver operates under the authority of an 1115(a) waiver approved by the Centers for Medicare and Medicaid Services (CMS) effective January 1, 2018, through December 31, 2027. This Public Forum will be held from 9 a.m. until 10 a.m. on Thursday, July 11, 2024, in the Auditorium at Central High School, 259 N. West Street, Jackson, MS 39201. There will be an opportunity for public comment at the forum. To join the teleconference, dial 1-769-230-0549 and enter the conference ID: 230 096 590#.

## **G. Budget Neutrality**

DOM certifies the accuracy of reporting the state's budget neutrality expenditure limits for FPW enrollees/participants (Refer to the FPW Budget Neutrality Workbook submitted to CMS on March 28, 2025).

## H. Demonstration Evaluation Activities and Interim Findings

**Table 10:** FPW Goals and Objectives

<b>Mississippi Family Planning Waiver Demonstration Objectives</b>	
<b>Goal 1: Ensure access to and utilization of family planning and/or family planning-related services for individuals not otherwise eligible for Medicaid.</b>	
<b>Objective 1:</b>	Improving the access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.
<b>Objective 2:</b>	Improving the access to and use of Medicaid family planning-related services by women and men who are not otherwise eligible for Medicaid.
<b>Goal 2: Improve or maintain health outcomes for the target population as a result of access to family planning services and family planning-related services.</b>	
<b>Objective 3:</b>	Improving birth outcomes (e.g., low birthweight) and the health of women in the demonstration population.
<b>Objective 4:</b>	Increasing the child spacing interval among female FPW enrollees.
<b>Objective 5:</b>	Reducing the number of unintended pregnancies among women enrolled in the FPW.
<b>Objective 6:</b>	Reducing overall pregnancy among teenage women in the demonstration population.
<b>Objective 7:</b>	Reducing the number of repeat births among teenage women in the demonstration population.
<b>Goal 3: Increase the overall savings attributable to providing family planning services.</b>	
<b>Objective 8:</b>	Decreasing the number of Medicaid deliveries which will reduce the annual expenditures for prenatal, delivery and newborn services.
<b>Objective 9:</b>	Increasing the overall savings attributable to providing family planning services by covering women for one-year postpartum.

**Evaluation Question:** How did beneficiaries utilize covered services?

**Goal 1: Ensure access to and utilization of family planning and/or family-related services for individuals not otherwise eligible for Medicaid.**

- **Objective 1:** Improving the access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.

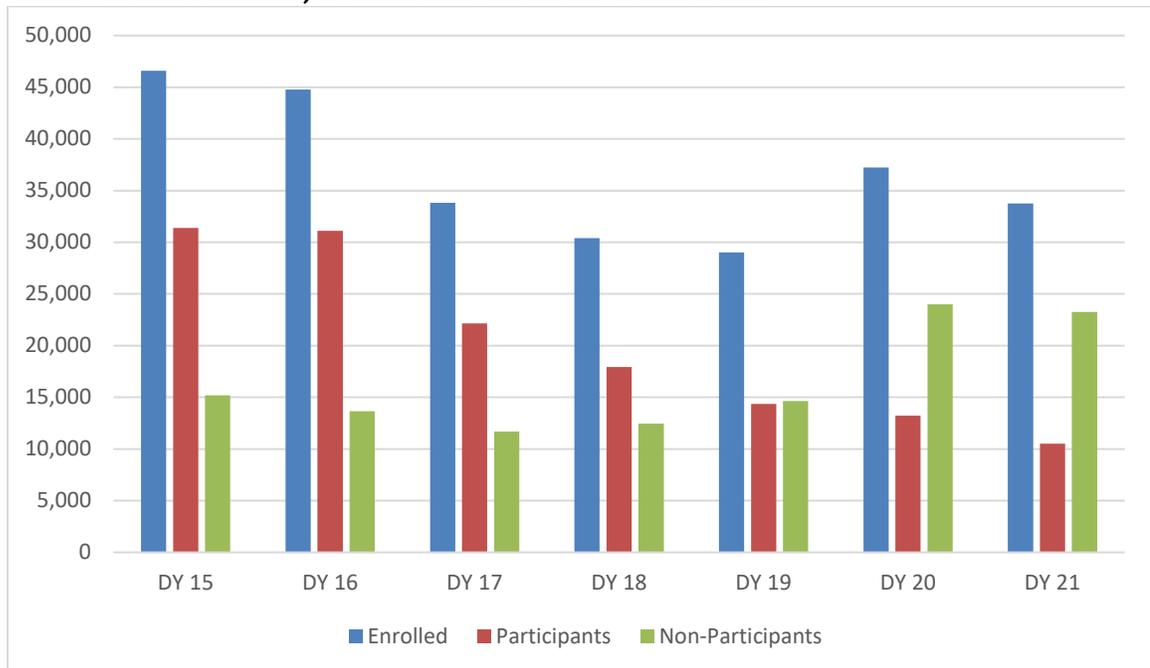
During DY 21, 4,338 females accessed and utilized family planning and family planning related services compared to 4,202 in DY 20, a 3.2% increase from DY20 to DY21, and a 56.2% overall decline between DYs 15 and 21.

- **Objective 2:** Improving the access to and use of Medicaid family planning-related services by women and men who are not otherwise eligible for Medicaid.

During DY 21, 33,766 women and men were enrolled in the FPW demonstration compared to 37,219 in DY 20, a 9.2% decrease from DY20 to DY21, and a 24.7% overall decline between DYs 15 and 21, as depicted in Chart 2 below. The change in enrollment percentage between DY 20 and DY 21 was calculated by comparing the total unduplicated enrollments for each year, spanning January 1 to December 31.

Of the 33,766 women and men enrolled, 10,508 had at least one family planning or family planning related service encounter during DY 21, compared to 13,223 in DY 20, a 20.5% decrease in service utilization from DY20 to DY21, and a 66.5% decline between DYs 15 and 21, as depicted in Chart 2 below. FPW utilization has continued to trend downward when comparing previous demonstration years.

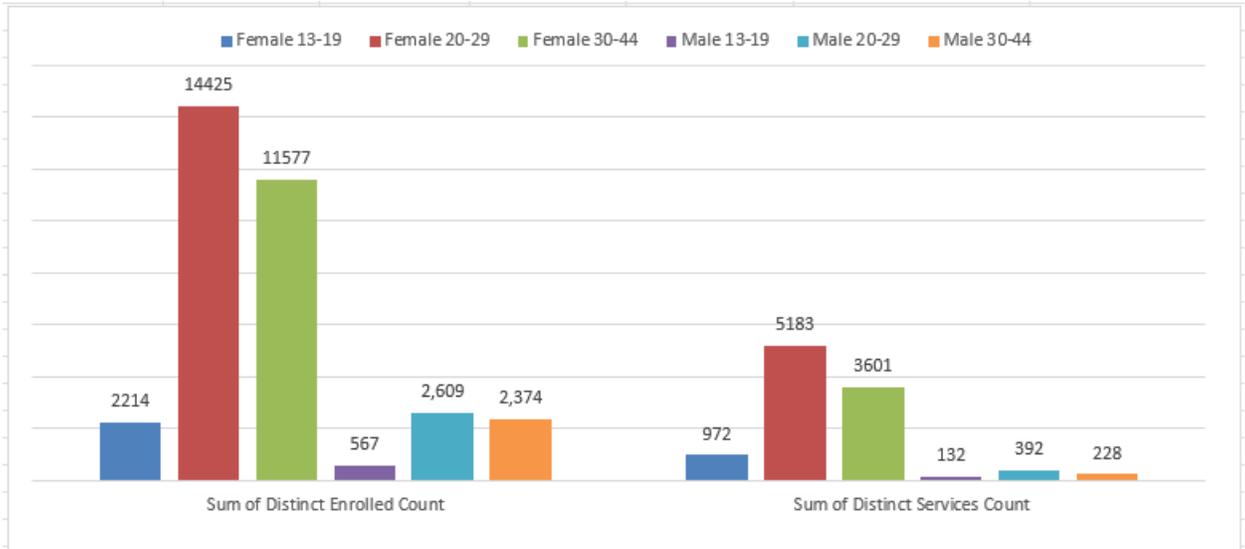
**Chart 2: Enrollment, Utilization and Non-Utilization**



Source: MESA Cognos: Report 3 COE29 who received FPW service report

**Measure/Outcome:** The number of females and males by age group utilizing FPW services. During DY 21, 31.1% of FPW enrollees utilized family planning services and family planning-related services compared to 35.5% in DY 20, a 12.4% decrease. Chart 3 depicts the number of females and males by age group that utilized FPW services.

**Chart 3:** Number Enrolled by Sex and Age and Utilization of FPW Services

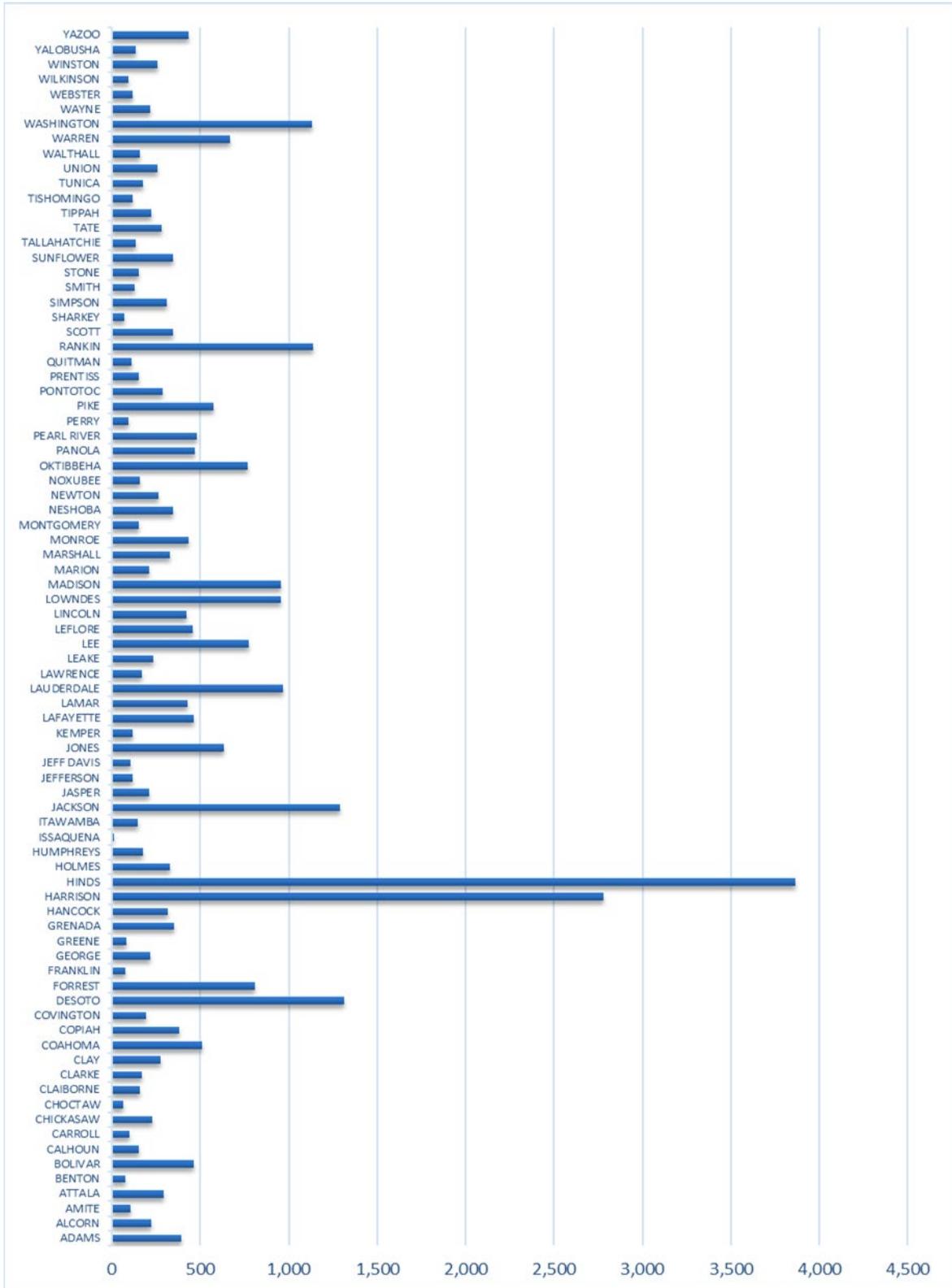


Source: Source: MESA Cognos: Report 3 COE29 who received FPW service report

**Measure/Outcome:** The number of beneficiaries by county of residence. Chart 4 depicts enrollment by county for DY 21. The top 10 counties with the highest enrollment in the FPW demonstration include:

- Hinds (3,863);
- Harrison (2,778);
- DeSoto (1,313);
- Jackson (1,289);
- Rankin (1,137);
- Washington (1,130);
- Lauderdale (967);
- Lowndes (955);
- Madison (953); and
- Forrest (811);

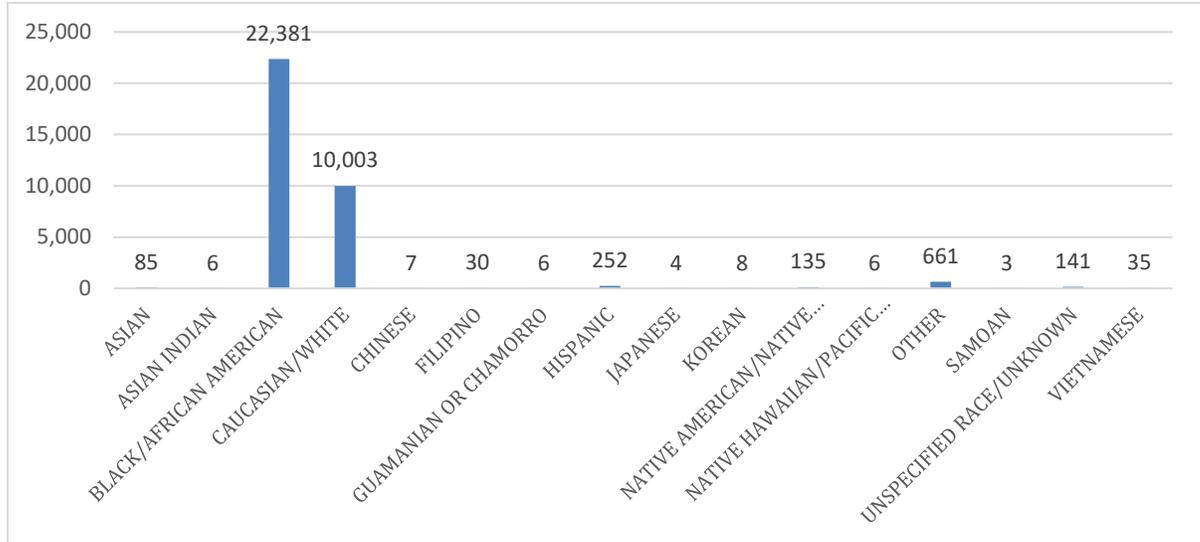
**Chart 4. Enrollment by County of Residence**



(Source: MESA Cognos W0214317 FPW Enrollment)

**Measure/Outcome:** The number of FPW beneficiaries by race. Chart 5 depicts the number of FPW beneficiaries by race during DY 21.

**Chart 5:** FPW Beneficiaries by Race



(Source: MESA Cognos Report 3 COE 029 who received FP service by race and sex)

**Measure/Outcome:** The number of female and male sterilizations. During DY 21, 8 females and 1 male selected sterilization as a permanent method of contraception to prevent pregnancy, compared to 12 females in DY 20, a 33.3% decrease, and 4 males in DY 20, a 75.0% decrease.

(Source: MESA Cognos Report WO100650 Refreshable by Procedure and DOS Paid and Denied COE 029).

**Measure/Outcome:** The number of females who utilized a contraceptive method in the year. During DY 21, 6,945 FPW female beneficiaries utilized a contraceptive method compared to 5,331 in DY 20, a 30.3% increase in contraceptive utilization.

(Source: MESA Cognos Drug Utilization by Date of Service and Plan ID & WO100650 Refreshable by Procedure and DOS Paid and Denied COE 029)

**Measure/Outcome:** The number of female beneficiaries who utilized a long-acting reversible contraceptive (LARC) method. During DY 21, 336 females enrolled in the FPW demonstration utilized a LARC method to prevent pregnancy, compared to 253 in DY 20, a 33.0% increase in utilization.

(Source: MESA Cognos Drug Utilization by Date of Service and Plan ID & WO100650 Refreshable by Procedure and DOS Paid and Denied COE 029)

**Measure/Outcome:** The number of beneficiaries tested for any sexually transmitted disease (STD). During DY 21, 5,008 FPW beneficiaries received testing for STDs, compared to 4,883 in DY 20, a 2.6% increase in STD testing. Of the 5,008 beneficiaries tested for STDs, 1,648 (32.9%) had a claim for a STD related drug/treatment.

(Source: MESA Cognos Reports Number of beneficiaries tested for STDs, Pap Smear and Breast Exam and Pharmacy to 029 and STD or STI).

**Measure/Outcome:** The number of female beneficiaries who obtained a cervical cancer screening. During DY 21, 1,563 female beneficiaries were screened for cervical cancer, compared to 1,743 in DY 20, a 10.3% decrease in cervical cancer screening and a 51.5% overall decline between DYs 15 and 21.

*(Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams).*

**Measure/Outcome:** The number of female beneficiaries who received a clinical breast exam. During DY 21, 1,795 female FPW beneficiaries received a clinical breast exam compared to 1,187 in DY 20, a 51.2% increase in clinical breast exams and a 27.2% overall decline between DYs 15 and 21.

*(Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams).*

**Evaluation Question:** Do beneficiaries maintain coverage long-term (12 months or more)?

**Measure/Outcome:** The number of beneficiaries who completed one spell of 12-month coverage. During DY 21, 24,003 enrolled beneficiaries completed one spell of 12-month period of coverage, compared to 25,817 in DY 20, a 7.0% decrease.

*(Source: MESA Cognos Report WO214317 FPW Enrollment).*

**Measure/Outcome.** The number of beneficiaries re-enrolled for at least a second spell of coverage. During DY 21, 16,209 FPW beneficiaries reenrolled and/or maintained coverage long-term compared to 9,377 in DY 20, a 72.9% increase from the previous year.

*(Source: MESA Cognos Report WO214317 FPW Enrollment)*

**Evaluation Question:** Does the demonstration improve health outcomes?

**Goal 2: Improve or maintain health outcomes for the target population as a result of access to family planning and family planning-related services.**

- **Objective 3:** Improving birth outcomes (e.g., low birthweight) and health of women in the demonstration population.

**Measure/Outcome:** The number of low-birthweight babies born to FPW beneficiaries. During DY 21, 34 low-birthweight babies were born to FPW beneficiaries compared to 37 in DY 20, an 8.1% decrease from the previous year and a 47.7% overall decrease between DYs 15 and 21.

*(Source: MESA Cognos Report WO200480 Early Pre-term Births and LBW).*

**Measure/Outcome:** The number of premature babies born to FPW beneficiaries. During DY 21, 22 premature babies were born to FPW beneficiaries, compared to 24 in DY 20, an 8.3% decrease from the previous year and a 38.9% overall decrease between DYs 15 and 21.

*(Source: MESA Cognos Report WO200480 Early Pre-term Births and LBW)*

- **Objective 4:** Increasing the child spacing interval among female FPW enrollees.

**Measure/Outcome:** The number of FPW females with a second pregnancy less than 18 months of a previous birth. During DY 21, there were 13 reported FPW female beneficiaries with a claim indicating a second pregnancy less than 18 months of a previous birth compared to 19 in DY 20, a 31.6% decrease from the previous year.

*(Source: MESA Cognos Report 2 088 to 029 then gave birth 18 months after 029)*

- **Objective 5:** Reducing the number of unintended pregnancies among women enrolled in the FPW.

**Measure/Outcome:** The number of unintended pregnancies among females 13-44. During DY 21, there were no unintended pregnancy reported among FPW females, compared to one (1) in DY 20, a 100% decrease from the previous year.

*(Source: MESA Cognos Report W0214317 Termination of Pregnancy).*

- **Objective 6:** Reducing overall pregnancy among teenage women in the demonstration population.

**Measure/Outcome:** The number of pregnancies to FPW females ages 13-19. During DY 21, 45 FPW females ages 13-19 became pregnant, compared to 29 in DY 20, a 55.2% increase from the previous year, and a 76.6% overall decline between DYs 15 and 21.

*(Source: MESA Cognos Report 4 Count of beneficiaries from COE 029 to 088 and 088 to 029)*

- **Objective 7:** Reducing the number of repeat births among teenage women in the demonstration population.

**Measure/Outcome:** The number of FPW females ages 13-19 with a repeat birth. During DY 21, there were 23 FPW females ages 13-19 with a repeat birth compared to 25 in DY 20, an 8.0% decrease from the previous year, and a 54.9% overall decrease between DYs 15 and 21.

*(Source: MESA Cognos Report 5 gave birth twice 13-19)*

**Evaluation Question:** Does the demonstration reduce the number of Medicaid deliveries?

**Goal 3: Increase the overall savings attributable to providing family planning services.**

- **Objective 8:** Decreasing the number of Medicaid deliveries, which will reduce the annual expenditures for prenatal, delivery, and newborn services.

**Measure/Outcome:** The number of Medicaid deliveries. During DY 21, the total number of Medicaid deliveries was, 23,341 compared to 24,477 in DY 20, a 4.6% decrease in Medicaid deliveries. The total number of women ages 13-44 enrolled in

Medicaid was 233,447, which is 10.0% of Medicaid deliveries among women ages 13-44 years enrolled in State Plan Medicaid.

*(Source: MESA Report WO13740 Women Enrolled in Medicaid)*

The number of FPW Medicaid deliveries. During DY 21, the number of FPW Medicaid deliveries was 428 compared to 348 in DY 20, a 22.9% increase from previous year, and an 86.6% overall decline among FPW beneficiaries between DYs 15 and 21.

*(Source: MESA Cognos Report Demonstration Years WO230817)*

In comparing the percentage of births for FPW enrollees (1.49%), to the percentage of births for the State Plan Medicaid population (10.0%), the FPW enrollees have a lower percentage of births.

**Table 11 Paid Deliveries for FPW Beneficiaries**

	Cost of FPW Medicaid Deliveries	FPW Births	Average Cost of Medicaid Funded Births <sup>1</sup>
<b>DY 15</b>	\$31,231,940.50	3,203	\$9,750.84
<b>DY 16</b>	\$26,054,612.80	2,788	\$9,345.27
<b>DY 17</b>	\$24,047,389.10	2,734	\$8,795.68
<b>DY18</b>	\$29,392,508.50	2,111	\$13,923.50
<b>DY19</b>	\$11,012,360.67	587	\$18,760.41
<b>DY 20</b>	\$6,611,297.04	348	\$18,997.98
<b>DY 21</b>	\$7,651,060.68	428	\$17,876.31

*(Source: MESA Cognos Report Demonstration Years WO230817)*

- **Objective 9:** Increasing the overall savings attributable to providing family planning services by covering women for one-year postpartum.

**Measure/Outcome:** Medicaid expenditures related to prenatal, delivery and newborn services. During DY 21, 9,201 women were enrolled in the FPW program postpartum. Of the 9,201 postpartum women enrolled, 1524 had a claim indicating a pregnancy within the year and 7,677 postpartum women did not have a claim for pregnancy within the one-year postpartum period, attributing to a cost savings of \$137,236,431.87 based on the average cost of a Medicaid funded birth.

*(Source: MESA Cognos Report RB705 Family Planning annual Enrollment Report and Report 4 Count of beneficiaries from COE 029 to 088 and 088 to 029)*

There were 23,341 Medicaid funded deliveries in Mississippi during DY 21. The total expenditures were \$429,605,991.88, which includes prenatal, delivery, postpartum and newborn services (infant care 0-12 months).

*(Source: MESA Demonstration Years WO230817 and Cost of Medicaid Funded Births)*

**Evaluation Question:** Are beneficiaries satisfied with services?

During each FPW demonstration year, DOM uses a survey to evaluate FPW enrollees'/participants' satisfaction with the services offered through the FPW demonstration. A subpopulation of FPW beneficiaries is surveyed to determine the impact of the FPW demonstration. Results of the survey are depicted in Table 12 below.

**Table 12: FPW Survey Outcomes**

	#Surveys Mailed	#Surveys Undeliverable	#Surveys Returned	Response Rate
<b>DY18</b>	3515	560	104	3%
<b>DY19</b>	3612	522	48	1.3%
<b>DY 20</b>	0	0	0	0
<b>DY 21</b>	3815	305	168	4.4%

*(Source: FPW Survey) The evaluation design was not approved in time to conduct surveys prior to DY 18.)*

*Note: One survey was returned with no responses.*

**Measure/Outcome:** Number of respondents who accessed family planning services and family planning related services in the past 6 months. Of the 167 respondents, 64.7% received FPW related services in the past six months, 34.7% indicated they did not access services, and 0.6% were unresponsive.

*(Source: FPW Survey Question 2)*

**Measure/Outcome:** Number of respondents who were pleased with the care received. Of the 167 respondents, 95.2% indicates they were pleased with the FPW care received, 4.2% were not, and 0.6% were unresponsive.

*(Source: FPW Survey Question 10)*

**Measure/Outcome:** Number of respondents who reported they received an appointment for care (FPW) as soon as they needed too. Of the 167 respondents, 88% indicated they received an appointment as soon as needed, 10.8% indicated they never received an appointment as soon as needed, and 1.2% were unresponsive.

*(Source: FPW Survey Question 6)*