

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

January 1, 2020 - December 2020

March 25, 2021

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The Mississippi Division of Medicaid responsibly provides access to quality health coverage for vulnerable Mississippians.

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MONITORING REPORT

FAMILY PLANNING SECTION 1115 DEMONSTRATION

State: Mississippi
Demonstration Reporting Period: January 1, 2020 to December 31, 2020
Demonstration Year: <u>17</u>
Approved Start and End Date of the Demonstration: Jan. 1, 2018 to Dec. 31, 2027

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; and
- Increasing the overall savings attributable to providing family planning services by covering women for one year postpartum.

The current 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 otherwise enrolled in Medicaid, Medicare, the Children's Health Insurance Program (CHIP), or any other creditable coverage that includes family planning services.

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, 2020 to December 31, 2020.

- 2. Program Updates Current Trends or Significant Program Changes
 During Demonstration Year (DY) 17, DOM reports no administrative or operational changes to the demonstration. DOM was prohibited from disenrolling beneficiaries from the FPW waiver during the public health emergency (PHE) due to the COVID related maintenance of effort (MOE), which impacted the eligibility and redetermination processes. There have been no changes in the health care delivery, benefits, quality of care, or payment rates that would impact the FPW demonstration program. There are no changes in enrollment, service utilization or provider participation during this reporting period. DOM does not have any reporting of 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 17. 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]			
	Unduplicated Number of Enrollees by Quarter			
	Unduplicated Number of Beneficiaries with any Claim by Quarter (by key			
	demographic characteristics such as age, gender, and income level)			
Utilization	Utilization by Primary Method and Age Group			
Monitoring	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 17*

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	Number of Female Enrollees by Age and Quarter					
	≤14	15-19	20-29	30-44	Total Unduplicated Female Enrollment	
Quarter 1	4	3,023	17,655	6,564	27,246	
Quarter 2	4	2,550	16,000	6,463	25,017	
Quarter 3	4	2,460	15,687	6,711	24,862	
Quarter 4	4	2,442	15,576	7,042	25,064	
	Number of Males Enrollees by Age and Quarter					
	≤14	15-19	20-29	30-44	Total Unduplicated Male Enrollment	
Quarter 1	0	228	648	370	1,246	
Quarter 2	1	225	733	508	1,467	
Quarter 3	1	235	836	638	1,710	
Quarter 4	1	254	1,001	815	2,071	

Source: Report 10: Distinct counts for those enrolled in category of eligibility (COE) 029

^{*}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 Gender per Quarter DY 17

		Number of Female Who Utilize Services by Age and Quarter					
	≤14	15-19	20-29	30-44	Total Female Users	Percentage of Total Unduplicated Female Enrollment	
Quarter 1	3	1,165	8,409	2,952	12,529	46.0%	
Quarter 2	0	930	7,425	2,771	11,126	44.5%	
Quarter 3	0	743	6,899	2,722	10,364	41.7%	
Quarter 4	2	520	6,600	2,818	9,940	39.7%	
	Number of Males Who Utilize Services by Age and Quarter						
						Percentage of	
	≤14	15-19	20-29	30-44	Total Male Users	Total Unduplicated Male Enrollment	
Quarter 1	≤14 0	15-19 30	20-29	30-44		Total Unduplicated	
Quarter 1 Quarter 2					Users	Total Unduplicated Male Enrollment	
	0	30	114	54	Users 198	Total Unduplicated Male Enrollment 15.9%	

Source: Report 10: Distinct counts for those enrolled in COE 029 & who received FP services

Table 4: Utilization by Primary Method and Age Group DY 17

	Total Users					
Primary Method		15-19	20-29	30-44	Total	Percent of All Users
Female Sterilization Tubal	0	0	36	26	62	0.57%
Male Sterilization Vasectomy	0	0	0	0	0	0%
Emergency Contraceptives	0	0	0	0	0	0%
Intrauterine Device (IUD)	0	18	147	64	229	2.10%
Hormonal Implant	0	21	198	59	278	2.55%
1-Month Hormonal Injection	0	0	0	0	0	0%
3-Month Hormonal Injection	0	494	2,619	1,142	4,255	39.02%
Oral Contraceptive	1	541	3,123	1,070	4,735	43.42%
Contraceptive Patch	0	145	790	121	1,056	9.68%
Vaginal Ring	0	11	186	94	291	2.67%
Diaphragm	0	0	0	0	0	0%
Sponge	0	0	0	0	0	0%
Female Condom	0	0	0	0	0	0%
Male Condom	0	0	0	0	0	0%

Source: Cognos Drug Utilization by DOS, PTC, COE, Plan ID 500 & WO100650 Procedures

Table 5: Number of Beneficiaries Tested for any STD for DY 17

	Fema	le Tests	Male Tests		*Tot	*Total Tests	
	Number	% of Total	Number	% of Total	Number	% of Total	
Unduplicated							
Number of							
Beneficiaries	7,858	24.91%	177	7.72%	*8,056	23.81%	
who Obtained							
an STD Test							

Source: Cognos Beneficiaries with STD Claim *21 claims gender not identified.

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	3,168	10.04%
who obtained a cervical cancer screening	,	

Table 7: Breast Cancer Screening

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries	N/A	N/A
who obtained a Breast cancer screening	IN/A	IN/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	4.448	14.1%
received a clinical breast exam	4,440	14.170

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, this 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 enrollment and participation. Additionally, DOM's Office of Client Relations hosts various education activities to increase awareness of family planning waiver services among hard-to-reach populations and to educate providers and increase awareness of the benefits and services offered. MSDH staff continues to integrate preconception health

messages into the various outreach activities through community health forums, health fairs, and member and provider workshops.

During DY 17, MSDH provided education and information to more than 90 agency providers, community health and rural health centers, college health centers, other providers of family planning services, beneficiaries, community organizations and staff. MSDH's County Health Department offices helped distribute three hundred fifty-six (356) FPW brochures to FPW clients and made/received 786 phone calls related to the FPW. The Novel Coronavirus (COVID-19) outbreak during calendar year 2020 directly impacted outreach efforts and events resulting in numerous cancellations.

MSDH's Communication Department continuously updates and develops FPW informational posters and brochures, to reach more potential FPW eligible participants served through MSDH public health clinics and agency providers. The posters and brochures are disseminated throughout the state and are used in all public health departments, to increase awareness for beneficiaries and the public about FPW program benefits.

2. Target Outreach Campaign(s)

During DY 17, DOM's Office of Client Relations' outreach team attended 22 events and provided FPW education and outreach information to 2,135 Medicaid staff, beneficiaries, and providers. DOM's Office of Client Relations' outreach team experienced a significant decline in outreach activities due to the COVID-19 outbreak.

D. Program Integrity

DOM's Office of Medical Services is responsible for monitoring providers who are reimbursed for family planning services 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 referred for primary care and other services which are not family planning related (see chart 1 below).

During DY 17, the Office of Medical Services audited 149 medical providers and reviewed 3,432, records. Chart 1 depicts the physician referrals documented for the reporting period. DOM experienced a decrease in the number of provider audits and records monitored for compliance of family planning and family planning related services due to the COVID-19 pandemic and the subsequent Executive Order issued by the Governor of Mississippi, mandating all non-essential workers stay-at home for the months of March 2020 through June 2020.

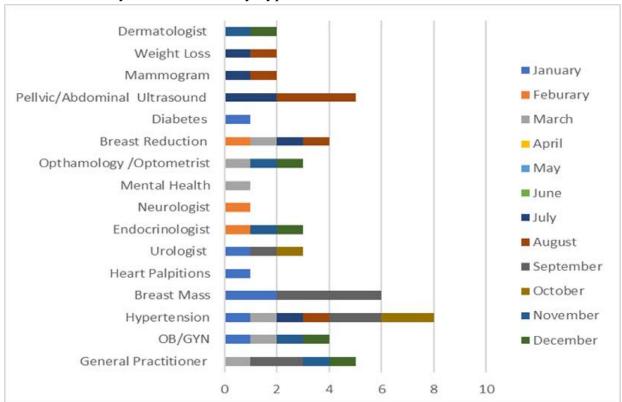


Chart 1: FPW Physician Referrals by Type and Month DY 17

E. Grievances and Appeals

During DY 17, DOM did not have any reported grievances or appeals related to the FPW.

F. Annual Post Award Public Forum

Annual Post Award Forum

The FPW Annual Public Forum was held Wednesday, September 30, 2020 at 10 a.m. via teleconference.

August 28, 2020
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 an1115(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 at 10 a.m. on Wednesday, September 30, 2020. Due to the public health emergency, the Public Forum will be held via teleconference at 888-822-7517, access code: 4282244. There will be an opportunity for public comment during the forum. During DY 17, FPW Annual Public Forum, there were no public comments.

G. Budget Neutrality

DOM certifies the accuracy of reporting the state's budget neutrality expenditure limits for FPW enrollees/participants (Refer FPW Budget Neutrality Workbook submitted to CMS on March 11, 2021).

H. Demonstration Evaluation Activities and Interim Findings

Table 9: FPW Goals and Objectives

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Mi	Mississippi Family Planning Waiver Demonstration Objectives					
	Goal 1: Ensure access to and utilization of family planning and/or family planning-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.					
Objective 2:	Dbjective 2: Improving the access to and use of Medicaid family planning-related services by women and men who are not otherwise eligible for Medicaid.					
_	ove or maintain health outcomes for the target population as a result ily planning services and family planning-related services.					
Objective 3:	Improving birth outcomes (e.g., low birthweight) and the health of women in the demonstration population.					
Objective 4:	: Increasing the child spacing interval among female FPW enrollees.					
Objective 5:	Reducing the number of unintended pregnancies among women enrolled in the FPW.					
Objective 6:	Reducing overall pregnancy among teenage women in the demonstration population.					
Objective 7	Objective 7 Reducing the number of repeat births among teenage women in the demonstration population.					
Goal 3: Increaservices.	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.					
Objective 9:	Increasing the everall cavings attributable to providing family planning					

Evaluation Question: How did beneficiaries utilize covered services?

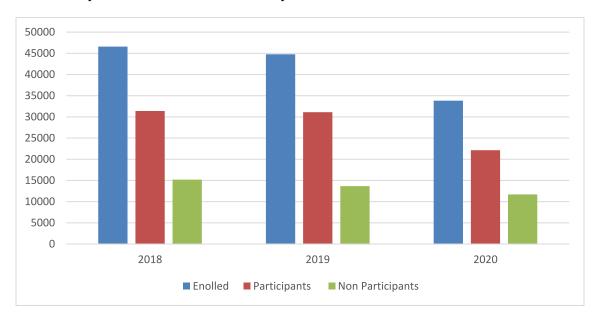
Goal 1: Ensure access to and utilization of family planning and/or family - related services for individuals not otherwise eligible for Medicaid.

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

Measure/Outcome: During DY 17, 15,525 beneficiaries moved from category of eligibility (COE) 088 (pregnant) to COE 029 (FPW), an increase of 14.07% between demonstration years 15 and 17. Of the 15,525 women who received a Medicaid pregnancy related service, 9,595 (61.8%) had a paid family planning and/or family planning-related service in DY 17.

• **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.

Measure/Outcome: During DY 17, 33,831 women and men were enrolled in the FPW demonstration compared to 44,772 in DY 16, and 46,591 in DY 15, a 27.4% decrease in enrollment between DY15 and DY17. Of the 33,831 women and men enrolled, 22,139 (65.43%) had a family planning and/or family planning related service encounter during DY 17, compared to 31,104 in DY 16 and 31,396 in DY 15. This represents a 29.5% decrease in utilization between DY 15 and DY 17. The changes in enrollment, utilization and non-utilization are the causative impact of COVID-19 pandemic for CY 2020, as depicted in **Chart 2**.



Measure/Outcome: The number of females and males by age group utilizing family planning waiver services. Chart 3 depicts the number of females and males by age group utilizing FPW services.

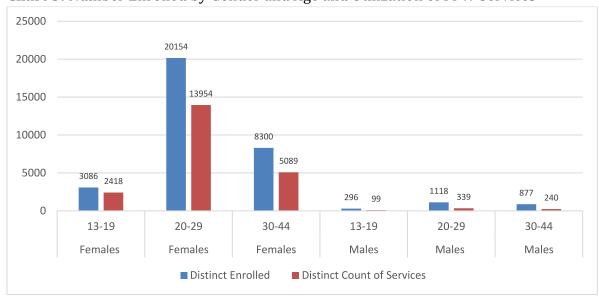


Chart 3: Number Enrolled by Gender and Age and Utilization of FPW Services

Measure/Outcome: The number of beneficiaries by county of residence. Chart 4 depicts enrollment by county for DY 17.

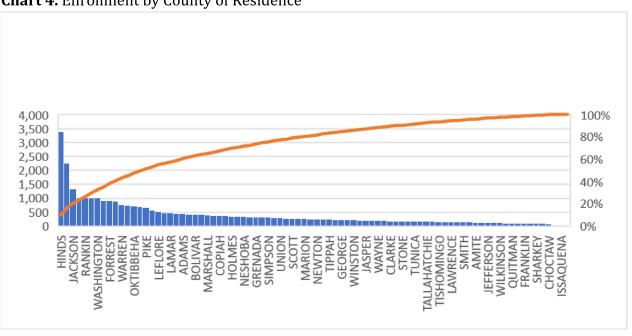


Chart 4. Enrollment by County of Residence

Measure/Outcome: The number of FPW beneficiaries by race. Chart 5 depicts the number of FPW beneficiaries by race for DY 17.

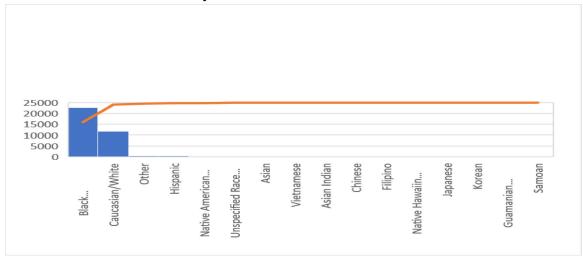


Chart 5: FPW Beneficiaries by Race

Measure/Outcome: The number of female and male sterilizations. During DY 17, 62 females chose sterilization as a permanent method to prevent pregnancy, compared to 126 in DY 16 and 136 in DY 17, a 54.4% decrease. During DY 17, there were no claims for male sterilizations compared to 2 in DY 16 and 16 in DY 15.

Measure/Outcome: The number of females who utilized a contraceptive method in the year. Thirty-four and fifty-eight percent of females utilized a contraceptive method during DY 17.

Measure/Outcome: The number of females beneficiaries who utilized a long-acting reversible contraceptive (LARC) method. During DY 17, 507 (1.61%) females in the FPW demonstration utilized a LARC method.

Measure/Outcome: The number of beneficiaries tested for any sexually transmitted disease (STD). During DY 17, 8,056 (23.81%) FPW beneficiaries received testing for STDs. Of the 8,056 beneficiaries tested for STDs 3,795 received treatment.

Measure/Outcome: The number of female beneficiaries who obtained a cervical cancer screening. During DY 17, 3,168 (10.04%) female beneficiaries were screened for cervical cancer.

Measure/Outcome: The number of female beneficiaries who received a clinical breast exam. During DY 17, 4,448 (14.1%) received a clinical breast exam.

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 17, 2,598 (7.67%) enrolled beneficiaries completed one spell of 12-month period of coverage.
- **Measure/Outcome.** The number of beneficiaries re-enrolled for at least a second spell of coverage. During DY 17, 10,927 (32.3%) beneficiaries re-enrolled for at least their second spell of coverage.

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 (i.e., low birthweight) and health of women in the demonstration population.

Measure/Outcome: The number of low-birthweight babies born to beneficiaries. During DY17, 165 (6.03%) low-birthweight babies were born to beneficiaries.

Measure/Outcome: The number of premature babies born to beneficiaries. During DY 17, 88 (3.21%) premature babies were born to beneficiaries.

• **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 17, 22 (0.07%) FPW females had a second pregnancy less than 18 months of a previous birth.

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

Measure/Outcome: The number of unintended births among females 13-44. The number of unintended births among female beneficiaries was 11. Seven beneficiaries had a diagnosis of an elective termination and 4 had a diagnosis of problems related to an unwanted pregnancy.

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

Measure/Outcome: The number of babies born to FPW females ages 13-19 years. During DY 17, 152 babies were born to FPW females ages 13-19 years, compared to 191 in DY 16, and 192 in DY 15. This represents a 20.8% decrease between DY 15 and DY 17.

• **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 years with a second pregnancy less than 18-months of a previous birth. During DY 17, there were 187 repeat births among FPW females ages 13-19 years compared to 223 in DY 16, and 163 in DY 15. This represents a 14.7% increase between DY 15 and DY 17.

Evaluation Question: Are beneficiaries satisfied with services?

Measure/Outcome: DOM did not receive approval for the FPW evaluation until December 16, 2020; therefore, the FPW satisfaction surveys for DYs 15 and 16 were not completed. DOM is working with the fiscal agent to mail out surveys to obtain consumer satisfaction with the FPW program for DY 17. Survey results for DY 17 will be reported in the next annual report.

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. The number of FPW Medicaid deliveries was 2,734 or (8.66%) of female FPW enrollees ages 13-44 years during DY 17, compared to 2,788 in DY 16 and 3,203 in DY 15. A 14.64% decrease in the number of Medicaid deliveries among FPW beneficiaries between DY 15 and DY 17.

Table 10 Paid Deliveries for FPW Beneficiaries

	Cost of FPW Medicaid Deliveries	FPW Births	Average Cost of Medicaid Funded Birth
DY 15	\$31,231,940.50	3,203	\$9,750.84
DY 16	\$26,054,612.80	2,788	\$9,345.27
DY 17	\$24,047,389.10	2,734	\$8,795.68

• **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 17, 15,525 women were covered under the FPW program for one-year postpartum. Of the 15,525 postpartum women 3,193 had a claim indicating a pregnancy within the year. Twelve thousand, three hundred thirty-two (12,332) women did not have a claim indicating a pregnancy within one-year postpartum attributing to a cost savings of \$108,468,326.00 based on the average cost of a Medicaid funded birth.

Table 11: Average Cost of Medicaid Funded Births

Average Cost of a Medicaid Funded Births	
DY 15	\$9,750.84
DY 16	\$9,345.27
DY 17	\$8,795.68