

**NC Department of Health and Human Services** 

# Family Planning Annual Report FPAR 2.0 Introduction

NC Division of Public Health,
Women, Infant, and Community Wellness
Section

September 2022

## **Title X Family Planning Program**

- Provides comprehensive and confidential family planning services and preventive health services
- Data is required of all Title X family planning services grantees and are used to:
  - ✓ monitor compliance with statutory requirements;
  - ✓ comply with accountability and federal performance reporting requirements for Title X family planning funds;
  - ✓ guide strategic and financial planning;
  - ✓ respond to inquiries from policy makers and Congress about Title X.



#### Goals of FPAR 2.0

Improve quality, access, and equity in Title X family planning services



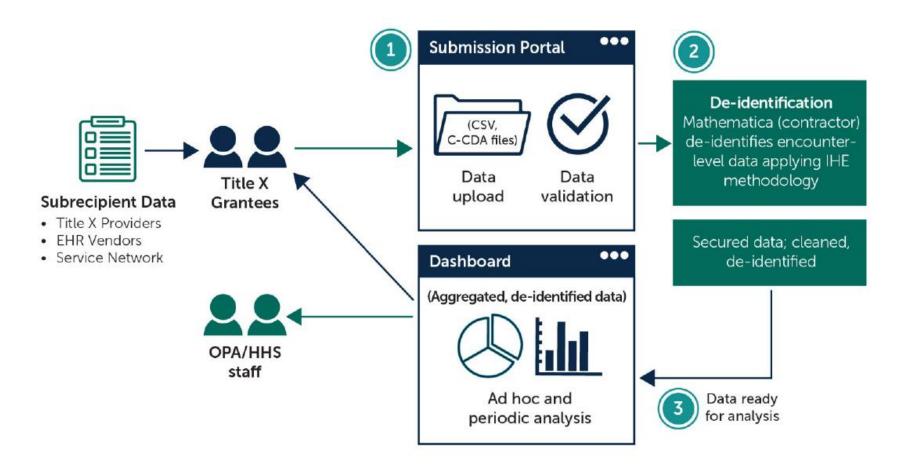
- ✓ The data will assist in determining:
  - ✓ What services are delivered for different populations.
  - ✓ Whether communities with the greatest need are receiving services
  - ✓ Settings that need additional support to ensure the provision of quality care

#### **FPAR 2.0**

- Change from summarized data collection to encounter-level data collection
- 43 total data elements
- Not all data elements are required for each encounter, but are expected when clinically indicated
- 3 Main Categories
  - Demographic Information
  - Clinical Encounter Information
  - Lab Information



## **Patient Confidentiality**



## **Demographic Data Elements**



*	Facility Identifier	
*	Attending Physician National Provider Identifier	
	Provider Role	
*	Patient Identifier	
*	Visit Date	
	Birth Date	
	Sex at Birth	

	Gender Identity
	Limited English Proficiency
*	Ethnicity
*	Race
	Annual Household Income
	Household size [#]
	Payer for Visit

#### **Encounter Data Elements**



*	Do you want to talk about contraception or pregnancy prevention during your visit today	
*	Pregnancy Status	
*	Pregnancy Intention	
	Sexual Orientation	
*	Contraceptive method reported at intake	
*	Reason for no contraceptive method use Reported – at intake	
*	Contraceptive method at exit	
*	Reason for no contraceptive method use reported –at exit	

*	How contraceptive method was provided
*	Was contraceptive counseling provided
*	Was counseling to achieve pregnancy provided
$\bigstar$	Systolic blood pressure
*	Diastolic blood pressure
*	Body Height
*	Body Weight
*	Tobacco Smoking Status

#### **Lab Data Elements**



	Pap test performed	*	Gonorrhea test performed
*	Pap test result		Gonorrhea test result
*	HPV test performed	*	HIV test performed
	HPV test result		HIV test result
*	Chlamydia test performed		Syphilis test performed
	Chlamydia test result	*	Syphilis test result

#### **Timeline**

May 2022

OPA Releases Final FPAR 2.0 Documents

June – August 2022

- State Preparation
- Start EHR Vendor communication

September 2022

- LHD Intro Webinar
- FPAR 2.0 Data Elements Shared with EHR Vendors

December 2022

 FPAR 2.0 Informational Webinar/Resource Documents Released

January 2023

- FPAR 1.0 Self-Report Data Due to state
- Collection of FPAR 2.0 Begins

July 2023

· State Forms to be Updated

January 2024

FPAR 2.0 2023 Data Reported to OPA

Ongoing technical assistant to LHD's and EHR Vendors

## Local Health Department – Health Systems Analysis (LHD-HSA)

**Patient Master** 

 Client Demographic Characteristics

Service Record

Clinical Information

Family Planning Program (P1)

 Program Specific Information

## **Encounter Types**

- The P1 is required for <u>every</u> Family Planning Patient and <u>every</u> type of visit
- Female and Male patients
- Telehealth visits during COVID



**Provider Visits** 

**Nurse Visits** 

**Pregnancy Tests** 

Supply Visit

**Problem Visit** 

**Emergency Contraception** 

## **Putting It All Together**



### **Questions?**

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