



MISSISSIPPI DIVISION OF
MEDICAID

MISSISSIPPI
Medicaid Family Planning 1115 Annual Report
Demonstration Waiver 11-W-00157/4
January 1, 2019 – December 2019

April 6, 2020

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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, 2019 to December 31, 2019

Demonstration Year: 16

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: (1) to ensure access to and utilization of family planning services and family planning related services for individuals not otherwise eligible for Medicaid, (2) 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 (3) 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 the access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.
- Improving the 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 program.
- 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 that are capable of reproducing, ages 13 through 44, with 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, 2019 to December 31, 2019.

2. Program Updates – Current Trends or Significant Program Changes

During Demonstration Year (DY) 16, DOM reports no administrative or operational changes to the demonstration. There have been no changes within eligibility enrollment, redetermination processes, 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 16. 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]
Utilization Monitoring	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 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 16*

	Number of Female Enrollees by Age and Quarter				
	≤14	15-19	20-29	30-44	Total Unduplicated Female Enrollment
Quarter 1	4	2,859	17,330	5,948	26,141
Quarter 2	4	2,902	17,148	5,966	26,020
Quarter 3	4	2,838	16,785	5,856	25,483
Quarter 4	3	2,940	17,443	6,258	26,644
	Number of Male Enrollees by Age and Quarter				
	≤14	15-19	20-29	30-44	Total Unduplicated Male Enrollment
Quarter 1	0	180	520	208	908
Quarter 2	0	186	545	203	934
Quarter 3	0	198	560	220	978
Quarter 4	0	212	583	263	1,058

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 16

	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	0	1,137	8,562	2,876	12,575	48.1%
Quarter 2	0	1,070	8,128	2,788	11,986	46.1%
Quarter 3	1	1,140	8,132	2,784	12,057	47.3%
Quarter 4	3	1,110	8,317	2,868	12,298	46.2%
	Number of Males Who Utilize Services by Age and Quarter					
	≤14	15-19	20-29	30-44	Total Male Users	Percentage of Total Unduplicated Male Enrollment
Quarter 1	0	29	79	31	139	15.3%
Quarter 2	0	22	99	33	154	16.5%
Quarter 3	0	25	108	49	182	18.6%
Quarter 4	0	20	94	43	157	14.8%

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 16

Primary Method	Total Users					Percent of All Devices
	≤14	15-19	20-29	30-44	Total	
Female Sterilization Tubal	0	0	75	51	126	0.29%
Male Sterilization Vasectomy	0	0	1	1	2	0
Emergency Contraceptives	0	0	0	0	0	0
Intrauterine Device (IUD)	0	26	213	82	321	0.74%
Hormonal Implant	0	76	682	117	875	2.0%
1-Month Hormonal Injection	0	0	0	0	0	0
3-Month Hormonal Injection	0	1,318	7,302	2,874	11,494	26.34%
Oral Contraceptive	1	2,119	16,552	5,618	24,290	55.66%
Contraceptive Patch	0	664	3,471	676	4,811	11.02%
Vaginal Ring	0	62	1,046	615	1,723	3.95%
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 & W0100650 Procedures

Table 5: Number of Beneficiaries Tested for any STD for DY 16

	Female Tests		Male Tests		*Total Tests	
	Number	% of Total	Number	% of Total	Number	% of Total
Unduplicated Number of Beneficiaries who Obtained an STD Test	8,599	20.1%	128	8.2%	*8,748	28.1%

Source: Cognos Beneficiaries with STD Claim

* Total STD tests by FPW participants identified by gender are 8,727. The gender of 21 participants tested and included in the total number of tests shown in Table 5 is unknown.

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	3,298	8.1%

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 covered under the MS FPW 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	4,307	10.6%

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. There was no table included in the template to capture the requested information.

C. Program Outreach Education

1. General Outreach and Awareness

DOM coordinates outreach and education activities with the MS State Department of Health (MSDH) to improve family planning waiver enrollment and participation. DOM provider and beneficiary relation staff utilize various education activities to increase awareness of family planning waiver services among hard-to-reach populations, educate providers and increase awareness of the benefits and services offered. 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 16, MSDH provided education and information to agency providers, community health and rural health centers, college health centers, other providers of family planning services, beneficiaries, community organizations and staff.

MSDH Communication Department developed informational posters and brochures, related to the Medicaid Family Planning Waiver demonstration program to reach more of the FPW population served through MSDH public health clinics and agency providers. The posters and brochures are disseminated throughout the state for use in all public health departments, for beneficiaries, and the general public to increase awareness related to the FPW program benefits.

2. Target Outreach Campaigns

During DY 16, DOM Provider and Beneficiary Relation Outreach team attended 169 events in various settings and provided FPW education and outreach information to 14, 479 Medicaid beneficiaries and providers.

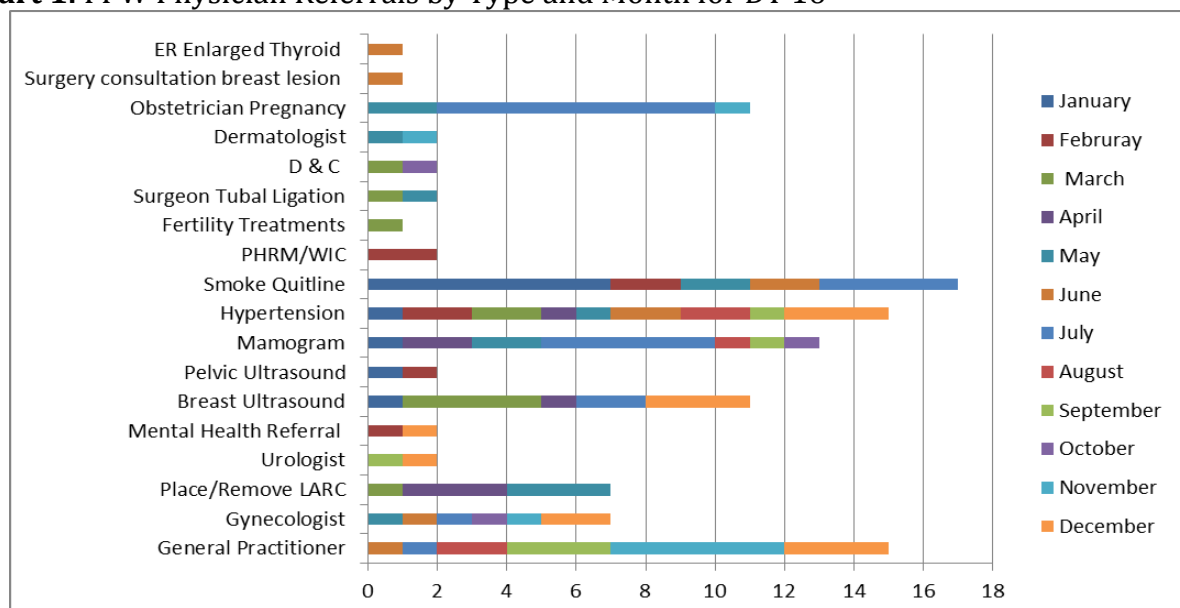
Through the MSDH Office of Family Planning Comprehensive Reproductive Health outreach efforts, the agency provided FPW education and information to 62 vendors/providers sub-recipients, 2,427 individuals from area high schools, community centers and university health centers. They also disseminated 1,637 FPW brochures, assisted 188 people in completing the FPW application and provided 940 condoms to attendees.

D. Program Integrity

The Office of Medical Services within DOM is responsible for the monitoring of providers who are reimbursed for family planning services and family planning related services. Desk audits are performed by registered nurses to ensure provider documentation supports the services that have been reimbursed under the FPW program. This ensures 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 16, there were 179 medical providers audited and 4, 278 records reviewed. Chart 1 depicts the physician referrals documented for the reporting period.

Chart 1: FPW Physician Referrals by Type and Month for DY 16



E. Grievances and Appeals

During DY 16, DOM did not have any reported grievances made by providers or the public. There was one appeal for the denial of eligibility due to the monthly income limit. The denial was upheld based on evidence that the applicant's monthly income exceeded the maximum income allowed to qualify for the FPW program.

Annual Post Award Forum

The FPW Annual Public Forum was held Friday, August 30, 2019, at 10 a.m. at the Woolfolk Building, 501 N. West Street Room 145 Jackson, MS 39201. There were no public comments to report during the annual post-award forum. See the public notice listed below.

July 22, 2019

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 at 10 a.m. on Friday, August 30, 2019, in room 145 at the Woolfolk Building, 501 N. West Street, Jackson, MS 39201. There will be an opportunity for public comment at the forum.

F. Budget Neutrality

DOM certifies the accuracy of reporting the state's budget neutrality expenditures limits for the FPW enrollees/participants (Refer to the FPW Budget Neutrality Workbook submitted to CMS on April 2, 2020).

G. Demonstration Evaluation Activities & Interim Findings

Table 10: FPW Goals and Objectives

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

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.	
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:	Reducing the number of repeat births among teenage women in the demonstration population.
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 overall savings attributable to providing family planning services by covering women for one-year postpartum.

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.

Progress: During DY 16, 12,562 beneficiaries moved from COE 088 (pregnant) to COE 029, a 7.7% decrease compared to DY 15, 13,614. A total of 6,790 postpartum women utilized family planning services and/or family planning- related services.

- **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.

Progress: During DY 16, 42,117 women and men were enrolled in the FPW demonstration compared to DY 15, 46,591, a 9.6% decrease in enrollment. Of the 42,117 women and men enrolled, 24,997 (59.3%) accessed family planning services and/or family planning-related services, a 20.4% decline in utilization compared to DY 15.

The number of family planning services utilized by FPW enrollees included:

- 17.3% for treatment of a family planning-related problem identified and/or diagnosed during a routine or periodic family planning visit.
- 64.0% of women and men utilized an effective or most effective contraceptive method to prevent pregnancy.
- 3.9% of females in the FPW demonstration utilized a long-acting reversible contraceptive (LARCs).
- 28.1% FPW beneficiaries received testing for sexually transmitted disease(s) (STDs) (refer to table 5).
- Of the total number of females (40,573) enrolled in the FPW demonstration, 8.1% were screened for cervical cancer and 10.6% received a clinical breast exam during an annual wellness visit (refer to Tables 6 and 7).
- 32.4% of beneficiaries completed one 12-month period of coverage; and
- 13.2% of beneficiaries re-enrolled for at least their second period of coverage.

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

Progress: Women enrolled in the FPW demonstration experiencing a pregnancy gave birth to 71 low birthweight babies (2.5% of FPW births) and 46 early preterm births (1.6% of FPW births) compared to the general Medicaid population 1,658 (6.2% low birthweight) and 755 (2.8% preterm births).

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

Progress: During DY 16, there were a total of 2,788 women enrolled in the FPW program who became pregnant with a second live birth, 291 experienced a second birth at an interval of 18 months or longer (Refer to Chart 11).

Table 11: Birth Outcomes

	Measure	DY 15	% Births	DY 16	% Births
Numerator	Number of second live births for the FPW population that occurred at an interval of 18 months or longer	356	11.1%	291	10.4%
Denominator	Total number of second live births for the FPW population	3,203		2,788	
Numerator	Number of low birth weight (less than 2500 grams) babies born to Medicaid beneficiaries	1,778	6.5%	1,729	6.5%
Denominator	Total number of babies born to Medicaid beneficiaries	27,183		26,769	
Numerator	Number of premature (less than 37 weeks) babies born to Medicaid beneficiaries	859	3.2%	801	3.0%
Denominator	Total number of babies born to Medicaid beneficiaries	27,183		26,769	

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

Progress: During DY 16, 3,729 distinct FPW beneficiaries became pregnant while on the FPW program. A 2.5% decrease compared to the 3,823 beneficiaries who became pregnant in the previous demonstration year. The 3,729 pregnancies among FPW beneficiaries resulted in 2,788 births in DY 16 compared to 2,777 births in DY 15. *Once the Draft Evaluation Design has been approved, DOM will survey beneficiaries who experience a pregnancy while enrolled in the FPW to determine whether the pregnancies were unintended.*

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

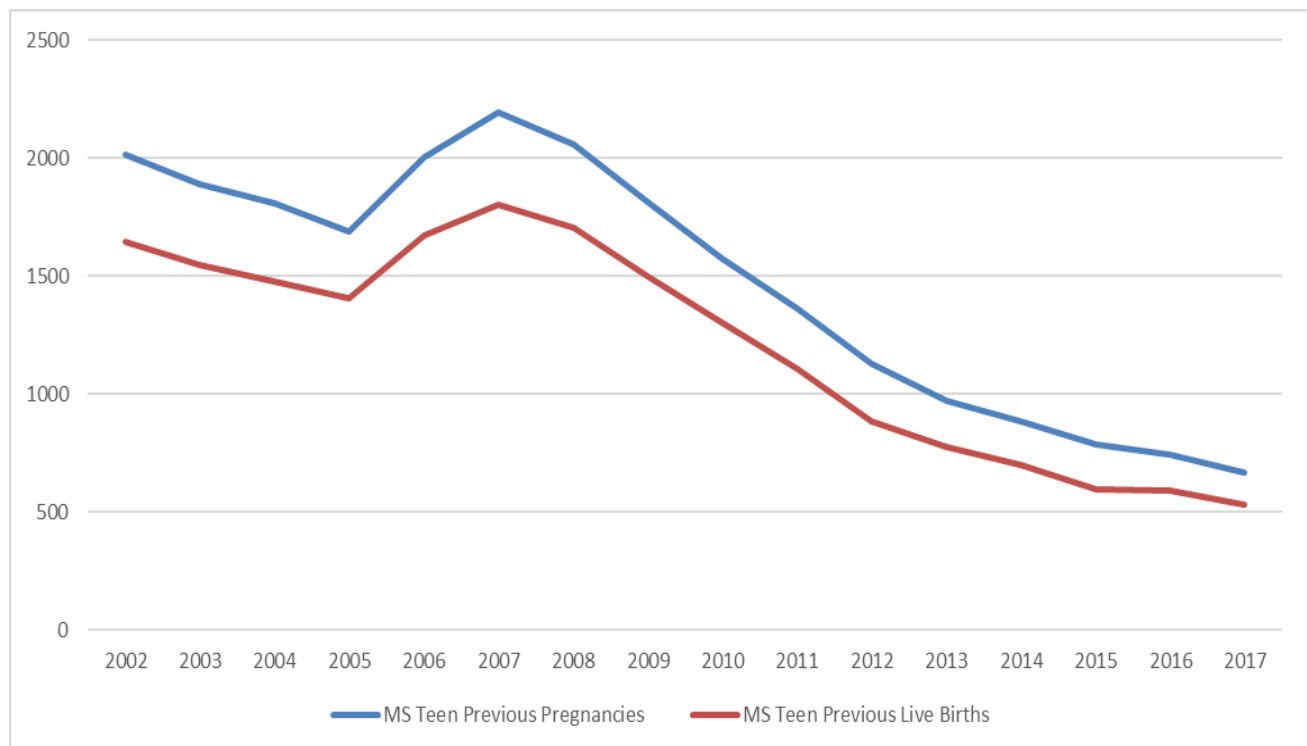
Progress: During DY 16, 920 FPW demonstration females, ages 13-19 years enrolled in the FPW after the postpartum period, a 2.3% decrease compared DY 15, 942. Of the 920 females, 191 became pregnant while on the FPW demonstration, a 0.5% decrease compared to 192 during DY 15.

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

Progress: During DY 16, there were 223 repeat births among FPW females' ages 13-19 years, a 36.8% increase compared to DY 15, 163 repeat births.

Despite an increase of repeat births among FPW females' ages 13-19 years, overall adolescent pregnancies and births in the state of Mississippi continue to trend downward. From 2008-2017 the number of repeat pregnancies and births in the state of Mississippi, continues to move in the same direction as depicted in the graph below. The MS Family Planning Waiver Demonstration is one probable factor to this change, along with FPW enrollees having access to more effective contraceptive methods, and the availability of family planning providers in multiple care settings, continues to have a positive impact in preventing unwanted pregnancies and subsequent births among this subpopulation of females.

Chart 2: Mississippi Teenage Previous Pregnancies



Source: MS Department of Public Health (MSDH) Vital Statistics 2002-2017

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.

Progress: During DY 16, the number of Medicaid paid births decreased by 1.5% and the cost of Medicaid paid deliveries declined by 5.6% in comparison to DY 15. A saving of \$14,893,458.60 in Medicaid expenditures averting costs for pre- and postnatal care, labor and delivery, and medical care for a baby's first year of life (Refer to Table 12).

Table 12: Medicaid Funded Births

	Cost of Medicaid Funded Births	#of Medicaid Funded Births	Average Cost of a Medicaid Funded Births
DY 15	\$265,057,105.93	27,183	\$9,750.84
DY 16	250,163,647.33	26,769	\$9,345.27

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

Progress: During DY 16, 12,562 women were covered under the FPW program for one-year postpartum. Of the 12,562 postpartum women 2,784 had a claim indicating a pregnancy within the year. Nine thousand seven hundred eighty (9,777) women did not have a claim indicating a pregnancy within one-year postpartum attributing to a cost savings of \$91,368,704, the average cost of a Medicaid funded birth.