

Family PACT

Planning • Access • Care • Treatment

Preliminary Program Report FY 2010-11



Bixby Center
for Global
Reproductive
Health

UCSF

University of California San Francisco

To obtain a copy of this document in an alternate format, please contact:

California Department of Public Health
Office of Family Planning
Family PACT Program
1615 Capitol Avenue
P.O. Box 997420, MS 8400
Sacramento, CA 95899-7420
Telephone: (916) 650-0414 • Fax: (916) 650-0454

Please allow at least 10 working days to coordinate alternate format services.

This report was prepared by the University of California, San Francisco (UCSF), Bixby Center for Global Reproductive Health and was supported by funds from the State of California, Department of Public Health, Office of Family Planning. All analyses, interpretations, or conclusions reached are those of UCSF, not the State of California.

Email: FamPACT@cdph.ca.gov
Contract #10-95221
© Copyright 2011



**Family PACT Preliminary
Program Report
FY 2010-11**

A Report to the State of California
Department of Public Health
Office of Family Planning

November 1, 2011

Table of Contents

Introduction.....	2
Program Overview	3
Enrolled Clinician Providers	4
Clients.....	5
Family Planning Services	6
Sexually Transmitted Infection Testing Services	8



Bixby Center
for Global
Reproductive
Health



University of California San Francisco

This report was prepared by staff of the Bixby Center for Global Reproductive Health in the Department of Obstetrics, Gynecology & Reproductive Sciences at the University of California, San Francisco.

Philip Darney, MD, MSc
Principal Investigator

Claire Brindis, DrPH
Co-Principal Investigator

Heike Thiel de Bocanegra, PhD, MPH
Director
UCSF Family PACT Evaluation

Michael S. Policar, MD, MPH
Medical Director
UCSF Family PACT Evaluation

Editor

Diane Swann

Authors

Mary Bradsberry
Joan Chow, MPH, DrPH
Michael Howell, MA
Yunín Ludeña, MS

Contributors

Marina Chabot, MSc
Denis Hulett, MS
Carrie Lewis, MPH
Fran Maguire
Mary Menz, PHN, BSN
Sandy Navarro
Shantha Rao
Leslie Watts, MS

Support Staff

Mariah Crail
Tanya Farrar

Consultants

Carol Wright Illustration &
Graphic Design

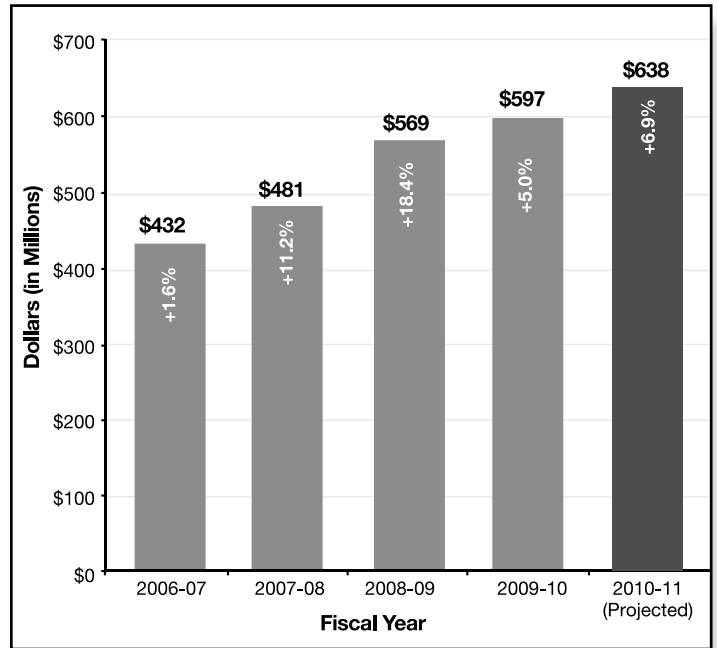
Each year the Bixby Center for Global Reproductive Health produces two reports on the Family PACT (Planning, Access, Care, and Treatment) Program, administered by the California Department of Public Health, Office of Family Planning. The Preliminary Program Report summarizes key program data on the most recently ended fiscal year (FY) and is based on data estimated to be 88-92% complete. It is made available four months after the end of the fiscal year to allow policy makers an early snapshot of program monitoring measures. The final Family PACT Program Report, based on data estimated to be 99% complete, is made available twelve months after the end of the fiscal year.

This year's preliminary report uses enrollment and paid claims data available as of June 30, 2011 for dates of service beginning July 1, 2010 and ending June 30, 2011. Projections have been made to provide a picture of what results will show when all claims for FY 2010-11 have been processed. Projections are extrapolations based on preliminary data, combined with analysis of the accuracy of past projections. Unless otherwise noted, results are projections.

Summary of Findings:

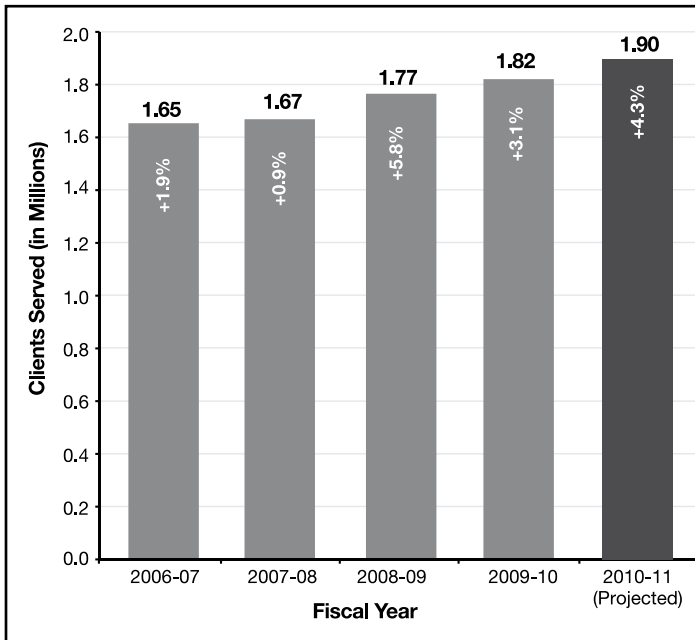
- Preliminary data show that the Family PACT Program served 1.79 million clients in FY 2010-11. When all claims have been processed, this number is expected to increase to 1.90 million.
- A 4.3% increase in the number of clients served is projected for FY 2010-11. This follows a 3.1% increase in the previous year.
- Preliminary data show that total reimbursement to providers is \$576 million for services provided in FY 2010-11. When all claims have been processed, this number is expected to grow to about \$638 million.
- A 6.9% increase in reimbursement is projected for FY 2010-11. This follows a 5.0% increase in the previous year.
- Average reimbursement per client is projected to be \$336, a 2.5% increase from FY 2009-10. This follows a 1.8% increase in the previous year.
- Sixty-two percent (62%) of the total growth in reimbursement in FY 2010-11 is due to the increase in the number of clients served, with the remaining 38% due to changes in cost and service utilization.

**Total Reimbursement
(in Millions of Dollars)**



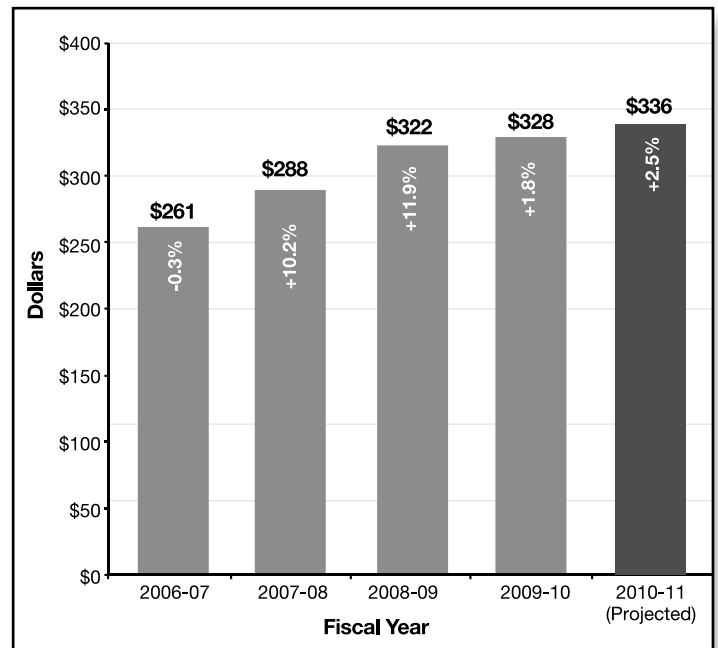
Source: Family PACT Enrollment and Claims Data

**Growth in the Number of Clients Served
(in Millions)**



Source: Family PACT Enrollment and Claims Data

Average Reimbursement per Client



Source: Family PACT Enrollment and Claims Data

Summary of Findings:

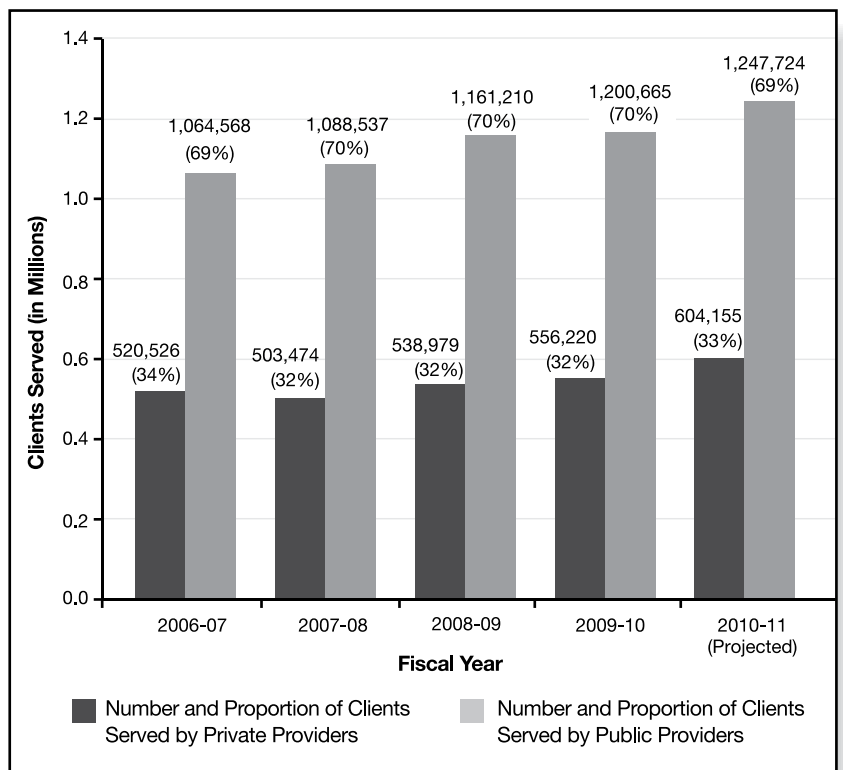
- Preliminary data show that 2,152 enrolled clinician providers were reimbursed for Family PACT services in FY 2010-11. When all claims have been processed, this number is expected to increase to 2,215.
- The projected number of the total enrolled delivering providers in FY 2010-11 (2,215) represents a 1% increase over the previous fiscal year (2,183). The net increase in the number of providers since FY 2006-07 is projected to be 106 providers.
- By provider type, the number of private providers is expected to decrease 0.6% and the number of public providers is expected to increase 4.2% over the previous fiscal year.
- Public providers serve the vast majority of clients. In FY 2010-11, public providers are projected to serve 69% of clients, compared to 33% of clients projected to be served by private providers. The distribution of clients by provider type had been constant over the prior three years (70% vs. 32%).

Trend in the Number of Enrolled Clinician Providers Delivering Family PACT Services

Fiscal Year	Provider Sector							
	Private			Public			Total	
	No.	% of Total	Change over Previous Year	No.	% of Total	Change over Previous Year	No.	Change over Previous Year
2006-07	1,312	62%	-1.0%	797	38%	3.0%	2,109	1.0%
2007-08	1,321	61%	0.7%	831	39%	4.3%	2,152	2.0%
2008-09	1,221	59%	-7.6%	854	41%	2.8%	2,075	-3.6%
2009-10	1,257	58%	2.9%	926	42%	8.4%	2,183	5.2%
2010-11 (Projected)	1,250	56%	-0.6%	965	44%	4.2%	2,215	1.5%

Source: Family PACT Enrollment and Claims Data

Trend in the Number of Family PACT Clients Served by Enrolled Clinician Providers by Provider Sector



Note: The percentages add to more than 100% because some clients were served by both public and private providers.

Source: Family PACT Enrollment and Claims Data

Summary of Findings:

Preliminary data show that the Family PACT Program had 2.71 million clients enrolled for part or all of FY 2010-11, up from 2.68 million at the same time in FY 2009-10. Of these enrolled clients, 1.79 million have been served. When final data are complete 1.90 million clients are expected to be served. This number represents 78,000 more clients, an increase of 4.3% over FY 2009-10, when the number of clients served was 1.82 million.

- Growth in the number of males is expected to be 10.4%, similar to that in FY 2009-10. This is relatively strong growth compared to females (+3.3%). Males are expected to remain at 14% of the Family PACT population. Approximately 26,000 more male clients are expected to be served in FY 2010-11 than in FY 2009-10. The number of female clients is expected to increase by about 52,000.
- The number of adolescent clients is expected to remain about the same (-0.2% change) as it was in FY 2009-10 at 307,000. The proportion of all clients who are adolescents is expected to be 16%, the lowest proportion since program inception.
- The number of adults is expected to increase by 5.2%, a higher rate than in FY 2009-10. Age limits were eliminated in April 2011 when the program converted from a Medicaid Waiver program to a State Plan Amendment (SPA). As a result, data show that for the first time the program is serving a small number of clients over age 60.
- All racial/ethnic groups are expected to increase in number. The growth rate among Latinos is increasing from 1.8% in FY 2009-10 to an expected 4.4%, while the growth rate among Whites is slowing from 4.6% to an expected 2.4%. This pattern is the reverse of that seen in FY 2009-10, when Whites grew more rapidly than Latinos. The racial/ethnic composition of the client population is expected to show little change.
- The proportion of clients reporting English as their primary language is projected to increase from 54% to 55% as part of a continuing shift in the language characteristic of clients from Spanish to English. The proportion reporting Spanish as their primary language is expected to decline to 41% in FY 2010-11. In the first eight years of the program the majority of clients reported Spanish as their primary language.
- The proportion of female clients with zero parity is expected to be 50% in FY 2010-11, continuing a steady increase up from 39% in FY 1998-99.

Demographic Profile of Clients Served

	FY 2009-10		FY 2010-11 (Projected)	
	No.	%	No.	%
Number of Clients Served	1,820,850		1,898,742	
By Sex				
Female	1,571,497	86%	1,623,425	86%
Male	249,353	14%	275,317	14%
By Age				
<18	124,677	7%	124,886	7%
18-19	182,850	10%	181,950	10%
20-24	518,129	28%	531,478	28%
25-29	381,506	21%	398,006	21%
30-34	241,661	13%	255,802	13%
35-39	167,553	9%	175,630	9%
40-44	110,112	6%	122,156	6%
45-49	64,558	4%	73,116	4%
50-54	24,741	1%	29,632	2%
55-60	5,063	<1%	5,986	<1%
Over 60 ^a	N/A	N/A	101	<0.01%
By Ethnicity				
Latino	1,145,308	63%	1,195,202	63%
White	377,724	21%	386,875	20%
African American	116,519	6%	124,072	7%
Asian/Pacific Islander	121,190	7%	129,281	7%
Other/Native American	60,106	3%	63,312	3%
By Primary Language				
Spanish	774,782	43%	787,068	41%
English	978,335	54%	1,042,699	55%
Other	67,730	4%	68,974	4%
By Parity				
No Births	777,002	49%	814,117	50%
1 Birth	282,919	18%	285,742	18%
2 Births	259,220	17%	263,616	16%
3-9 Births	251,236	16%	258,881	16%
Missing/Unknown	1,120	N/A	1,069	N/A

^a The State Plan Amendment (SPA) implemented in April 2011 eliminated age limits. Prior to the SPA, the age limit was 55 for females and 60 for males.

Source: Family PACT Client Enrollment and Claims Data

Change in the Number of Clients Served by Sex, Age and Race/Ethnicity

	FY 2006-07		FY 2007-08		FY 2008-09		FY 2009-10		FY 2010-11 (Projected)	
	No.	Change over Previous Year	No.	Change over Previous Year	No.	Change over Previous Year	No.	Change over Previous Year	No.	Change over Previous Year
Total	1,653,719	1.9%	1,668,896	0.9%	1,765,556	5.8%	1,820,850	3.1%	1,898,742	4.3%
Males	196,176	6.7%	197,945	0.9%	227,265	14.8%	249,353	9.7%	275,317	10.4%
Females	1,457,543	1.3%	1,470,951	0.9%	1,538,291	4.6%	1,571,497	2.2%	1,623,425	3.3%
Adolescents ^a	305,244	-0.7%	305,061	-0.1%	314,115	3.0%	307,527	-2.1%	306,836	-0.2%
Adults	1,348,474	2.5%	1,363,835	1.1%	1,451,441	6.4%	1,513,323	4.3%	1,591,906	5.2%
Latino	1,071,068	2.3%	1,072,676	0.2%	1,125,088	4.9%	1,145,308	1.8%	1,195,202	4.4%
White	329,757	1.6%	337,391	2.3%	361,181	7.1%	377,724	4.6%	386,875	2.4%
African American	98,566	1.1%	101,133	2.6%	108,952	7.7%	116,519	6.9%	124,072	6.5%
Asian/Pacific Islander	104,880	-0.7%	106,447	1.5%	114,033	7.1%	121,190	6.3%	129,281	6.7%
Other/Native American	49,447	2.4%	51,249	3.6%	56,300	9.9%	60,106	6.8%	63,312	5.3%

^a Age 19 and under.

Source: Family PACT Client Enrollment and Claims Data

Contraceptive Services for Females

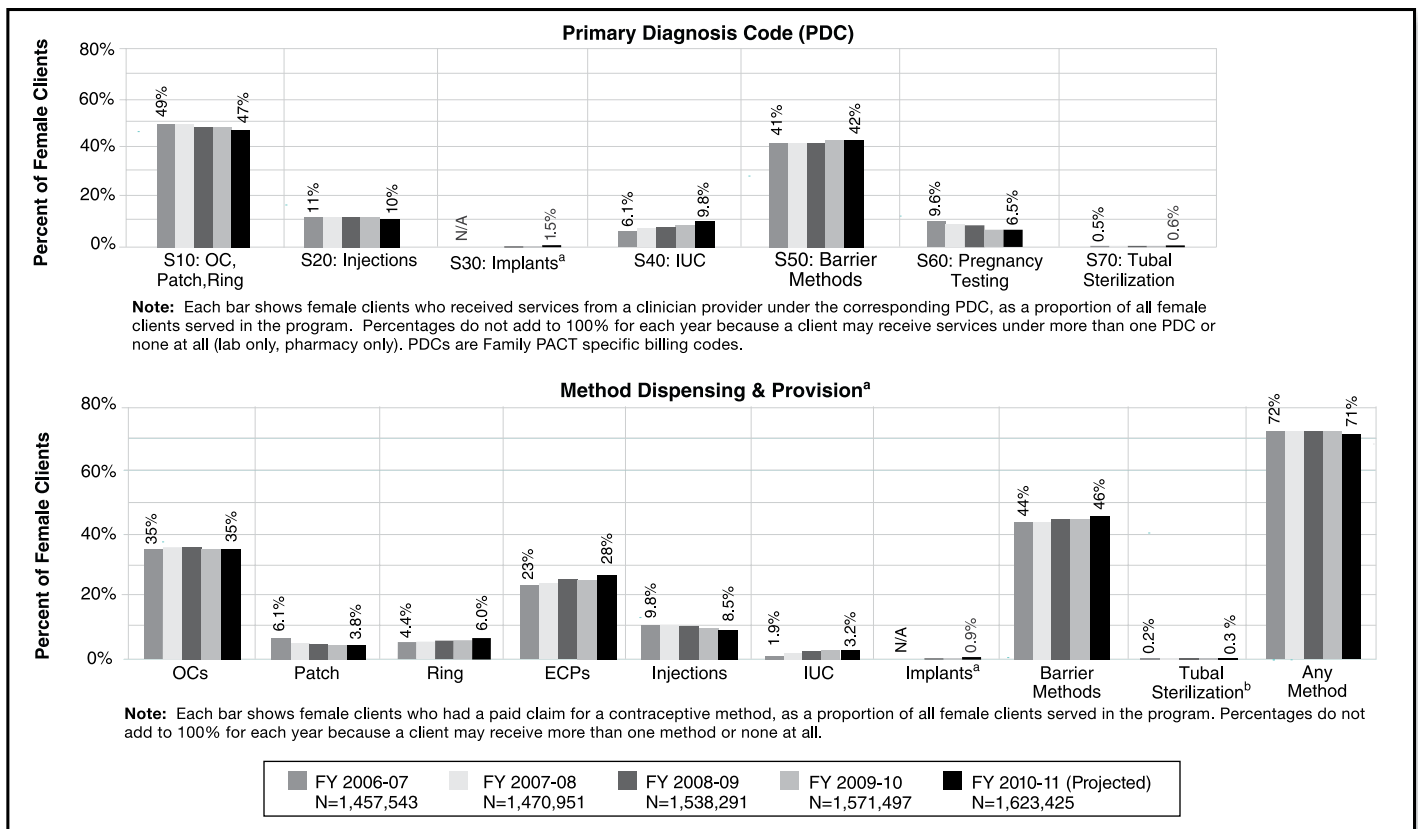
In Family PACT claims, Primary Diagnosis Codes¹ (PDCs) designate the primary purpose of a clinician visit. Based on projections for this year, the Oral Contraception/Patch/Ring (S10) PDC continues to be the most frequently utilized PDC for female clients served (47%) followed by S50 – Barrier Methods (42%). Services received, as indicated by PDCs, are shown in the upper half of the graph below. Method dispensing is shown in the lower half of the graph. There is some anticipated discordance between methods dispensed and services received. For example, during a visit a client may receive services for a vaginal ring, yet be dispensed condoms (or she may receive both methods). This chapter focuses more on method dispensing than services received.

Although observed changes in the percentage of clients receiving services or being dispensed a particular contraceptive method are small, the number of female clients has grown over the past five years. Thus, a small change in the percentage can represent a relatively large change in number. In the graph below one percentage point in FY 2010-11 represents about 16,200 female clients compared to 14,600 in FY 2006-07. Because year-to-year comparisons may show relatively little change, five-year comparisons are noted to demonstrate the magnitude and direction of trends in utilization.

For method dispensing and provision, the following trends were observed:

- Overall 1.15 million female clients are projected to be dispensed a contraceptive method in FY 2010-11 compared to 1.04 million in FY 2006-07. The proportion of female clients dispensed a contraceptive method remains almost the same (71% in FY 2010-11; 72% in FY 2006-07).
- Thirty-five percent (35%) of female clients are projected to receive oral contraceptives (OC), the same percentage as in FY 2006-07. The number of women projected to receive OCs in FY 2010-11 is 563,000 up from 512,000 in FY 2006-07.
- The contraceptive patch was added to the Family PACT benefits package in FY 2002-03. After an initial marked increase in the percentage of women who received the patch, there was a steep decline, which has leveled off in FY 2010-11. When all data is complete 3.8% of female clients (62,000) are projected to receive the patch in FY 2010-11, compared to 3.9% in women in FY 2009-10 and 6.1% of women in FY 2006-07.

Trends in the Percentage of Female Family PACT Clients Served with Family Planning Methods/Services



^a No implant device was available from FY 2005-06 to FY 2007-08.
^b Essure, added in FY 2008-09, is included in Tubal Sterilization counts. A total of 1,200 women showed a paid claim for Essure in FY 2010-11 preliminary data, 32% of all female sterilizations.

Source: Family PACT Client Enrollment and Claims Data

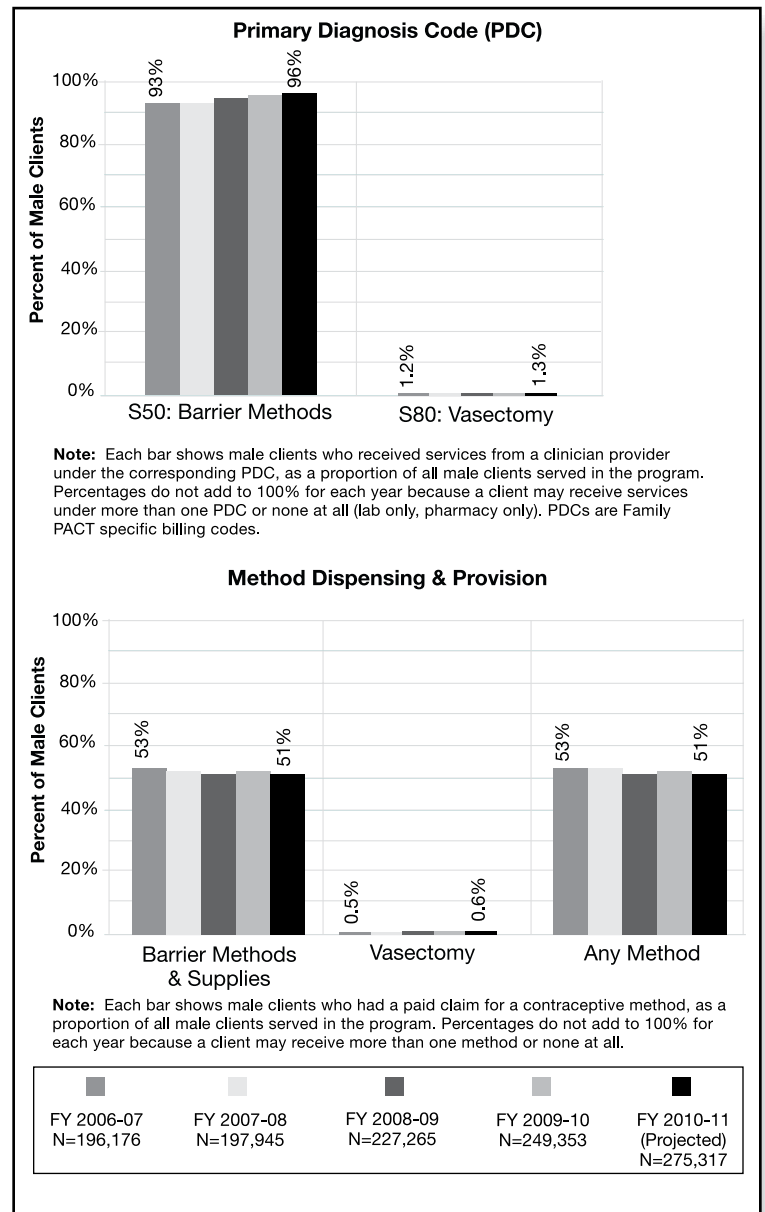
¹ Of the nine original PDCs specific to Family PACT, only seven are shown on the chart on this page. Vasectomy (S80) PDC applies to males only and is shown on page 7. The PDC for Fertility Evaluation (S90) was eliminated from the program as of August 1, 2006. Thus, monitoring of this PDC ended with the Family PACT Program FY 2006-07 report.

- A projected 6.0% of female clients are expected to be dispensed the vaginal ring, up from 4.4% in FY 2006-07. This represents an increase from 65,000 women to 97,000 women dispensed the ring.
- A higher percentage of female clients (28%) are projected to be dispensed emergency contraceptive pills (ECP) this year than in FY 2006-07 (23%). This increase represents a change from about 341,000 females to 459,000 females.
- The proportion of women projected to receive a contraceptive injection (8.5%) is down from 9.8% in FY 2006-07. This difference represents minimal change in the number of females receiving a contraceptive injection (138,000 in FY 2010-11; 143,000 in FY 2006-07).
- While 1.9% of female clients received an intrauterine contraceptive (IUC) method in FY 2006-07, 3.2% are projected to receive an IUC this fiscal year. This change represents an increase from about 28,000 to 51,000 women. Additionally, the proportion of women with IUC-related visits (PDC S40) is estimated to be nearly four percentage points higher (6.1% in FY 2006-07; 9.8% in FY 2010-11). A PDC S40 visit can involve counseling in regard to IUCs without dispensing of the method.
- The Implanon contraceptive implant system was added to the Family PACT benefits on July 1, 2008, thus five-year comparisons cannot be made. Projections show that nearly 14,000 female clients (0.9%) are expected to receive this contraceptive method in FY 2010-11 representing a 66% increase over the number of women who received this method in FY 2009-10.
- The Essure female sterilization system – a non-surgical option for permanent tubal occlusion – was also added to Family PACT benefits on July 1, 2008. Preliminary data for FY 2010-11 show nearly 1,200 clients with paid claims for the Essure procedure, up from 944 last year – a 27% increase in the number of women with this method. Use of Essure has grown markedly among women choosing female sterilization. While Essure comprised 10% of female sterilizations three years ago, in preliminary data for FY 2010-11 it accounted for 32% of all female sterilizations.
- Forty-six percent (46%) of females are projected to receive barrier method supplies in FY 2010-11. This percentage has been relatively stable. The number of women receiving barrier methods is projected to increase from about 638,000 in FY 2006-07 to 744,000 in FY 2010-11. About three-quarters of women who received barrier method supplies received an additional birth control method in the fiscal year.

Contraceptive Services for Males

- Among male clients, each percentage point represents about 2,800 clients in FY 2010-11 compared to 2,000 in FY 2006-07. The most frequently utilized PDC is for Barrier Methods (S50); 96% of male clients are projected to be served under this PDC up from 93% in FY 2006-07. The proportion of male clients served under Vasectomies (PDC S80) is projected to be similar to previous years at 1.3%.
- The percentage of male clients receiving barrier method supplies has varied slightly over time and is projected to be 51% in FY 2010-11, down from 53% in FY 2006-07. However, given the growth in clients, this percentage represents an increase in the number of men receiving barrier methods from about 104,000 males five years ago to 139,000 this year.

Trends in the Percentage of Male Family PACT Clients Served with Family Planning Methods/Services



Source: Family PACT Client Enrollment and Claims Data

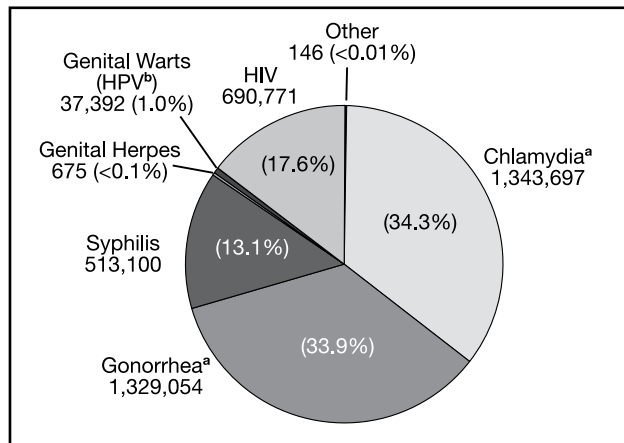
Summary of Findings:

As with family planning services, we note changes observed since the previous year in sexually transmitted infection (STI) testing services as well as five-year changes to more clearly demonstrate longer term trends.

- Preliminary data for FY 2010-11 show that over 3.4 million STI tests were reimbursed under Family PACT. When final data are complete, this number is expected to increase to more than 3.9 million, higher than the 3.6 million STI tests reimbursed in FY 2009-10 and up from 2.81 million tests in FY 2006-07.
- Sixty-eight percent (68%) of STI tests are expected to be for chlamydia and gonorrhea, slightly lower than the 69% in FY 2009-10 and the 70% in FY 2006-07.

- HIV tests are expected to comprise 18% of STI test volume, slightly higher than the 17% for FY 2009-10 and the 15% in FY 2006-07.
- Sixty-eight percent (68%) of Family PACT clients are expected to receive STI testing, compared to 62% in FY 2006-07 representing an increase of 268,700 clients.¹
- Sixty-five percent (65%) of female clients and 80% of male clients are expected to receive STI testing this year, compared to 60% and 71%, respectively, in FY 2006-07.
- Sixty-eight percent (68%) of adolescent female clients are expected to receive chlamydia testing in FY 2010-11, compared with 58% in FY 2006-07. The projected rate for adult females was 60%, compared with 56% in FY 2006-07.

Number of STI Tests in Family PACT, FY 2010-11 (Projected)
N=3,914,834 Tests



^a Includes 10,812 paid claim lines (tests) for combined test code for gonorrhea & chlamydia (CPT code: 87800). Code 87800 was added to the Family PACT benefits package on February 15, 2003. These claim lines (tests) were counted twice: once under chlamydia tests and once under gonorrhea tests as this test screens for both infection types.

^b Human Papillomavirus

Source: Family PACT Enrollment and Claims Data

Percent of Family PACT Clients Served with STI Tests by Sex, FY 2010-11 (Projections)

	Percent of Female Clients Served (projected) N=1,508,312	Percent of Male Clients Served (projected) N=271,565	Percent of Total Clients Served (projected) N=1,779,877
Any STI Test	65.3%	80.0%	67.5%
Chlamydia ^a	61.5%	74.9%	63.5%
Gonorrhea ^a	60.3%	74.2%	62.5%
HIV	30.3%	65.6%	35.7%
Syphilis	22.4%	51.8%	26.9%
HPV ^b	2.5%	0.0%	2.1%
Genital Herpes	<0.1%	0.1%	<0.1%
Other STI Test	0.0%	<0.1%	<0.01%

^a Includes 10,812 paid claim lines (tests) for combined test code for gonorrhea & chlamydia (CPT code: 87800). Code 87800 was added to the Family PACT benefits package on February 15, 2003. These claim lines (tests) were counted twice: once under chlamydia tests and once under gonorrhea tests as this test screens for both infection types.

^b Human Papillomavirus

Source: Family PACT Enrollment and Claims Data

¹ All denominators in this chapter exclude clients served only with pregnancy tests (S60) and/or pharmacy services.

Conclusion

Preliminary findings for FY 2010-11 indicate that the program continues to grow at a strong rate. Specifically,

- Growth rates of clients and reimbursement show increases over the previous year.
- Growth in the number of male clients still exceeds growth in the number of female clients.
- Although the number of private providers is declining slightly, the total number of providers shows an increase this year.

- The number of adolescents is expected to remain about the same as in the previous year and compared to five years earlier. The proportion of all clients who are adolescents is the lowest since program inception.
- The use of IUCs is continuing its upward trend, although at a slower rate than before. The two more recently added long-term contraceptives, Essure and Implanon, show strong increases in utilization.
- STI testing continues to grow and an increasing proportion of clients are tested for STIs.