

**Family Planning Medicaid Waiver Evaluators Conference Call
MINUTES**

March 10, 2008, 1:00-2:00 pm EDT

Participants

Evaluators: Mario Ariet (FL), Janet Bronstein (AL), Molly Carpenter (VA), Kim Dauner (SC), Bo Martin (NC), Dave Murday (SC), Jeff Roth (FL), and Kathy Vetter (IL)

State Staff: Danni Atkins (FL), Susan Barber (TN), Tysha David (NC), Karen Jackson (FL), Lois Lockett (LA), Marie Melton (FL), Bernie Operario (NC), Janet Sheridan (SC), and Marcia Swartz (NC)

Sheps Center: Julie DeClerque, Priscilla Guild, and Ellen Shanahan

Others: Meredith Robertson (CMSO) and Adam Sonfield (Guttmacher)

Not on the Call

Evaluators: Paul Buescher (NC), Rajeeb Das (FL), Holly Felix (AR), Nancy Hardt (FL), Andrea Johnson (NC), Kathy Langlois (MS), Mike Resnick (FL), Farida Reyes (FL), Ila Sarkar (MS), and Catherine Sreckovich (NC)

State Staff: Sydney Atkinson (NC), Sondra Burns (LA), Kellie Caswell (FL), Bonnie Cox (GA), Geneva Fearington (NC), Joe Holliday (NC), George Johnston (NC), Margaret Major (TN), Catherine McGrath (FL), Traci Perry (LA), Margaret Rankin (FL), Tahirah Rashadeen (LA), Bill Sappenfield (FL), Cliff Schmidt (FL), Lynn Smith (FL), Janet Temkin (FL), Cindy Thames (MS), Tri Tran (LA), Linda Wheal (IL), and Ron Young (LA)

Sheps Center: No one

Others: Nancy Dieter (CMSO), Kathleen Farrell (CMSO), Tonya Moore (CMSO), and Paul Youket (CMSO)

The meeting began with the introduction of two new participants from Illinois. Linda Wheal, who could not be on this call, is with the Illinois Department of Healthcare and Family services. She used to be with Title X but is now with the Medicaid office. Kathy Vetter is their evaluator who is with the Department of Community Health Services at the University of Illinois School of Public Health..

The topic of today's conference call was a continuation of last month's topic on the "Collection of Comparable Data on a Set of Medicaid Family Planning Waiver Indicators." A week ago Pris sent out a draft form that she and Dave Murday worked on to collect the data for the indicators. Just prior to the call both she and Ellen sent copies of material from Adam Sonfield on estimating the eligible population and the use of effective contraceptive methods that Adam, Dave Murday, Janet Bronstein, Bo Martin, and Kim Dauner worked on since the last call.

Discussion began with the form to collect the data for the indicators.

- There was some more discussion about whether we could define a comparable method for all states to use to calculate their baseline fertility rate (item A on the draft form). For a number of reasons, including the fact that CMS wants states to stay with their initial calculation of this rate, we are going to ask states to provide whatever baseline rate they sent to CMS.
- After discussion about what was meant by "Total cost of Medicaid family planning waiver services" (item H on the draft form) it was decided that we want to collect data on the total Medicaid expenditures for family planning waiver claims (both the CMS cost and the state match costs). This should NOT include administrative costs. It is also not the total cost to serve this population.
- For items C, D, E, and F, this should be an unduplicated count of the enrollees or participants for the year specified.
- By service in items D, E, and F, we mean any of these services that are Medicaid reimbursed.
- Regardless of the population each state has chosen to serve, for comparability purposes we want to define this population consistently for items B, C, D, E, and F. It was agreed that we would use the female population from 19 through 44 years of age.

A revised draft survey form is attached.

The document on “Estimating Eligible Population” was then discussed. Adam then walked us through the proposed steps for doing this.

- 1) Use national survey data (either the Current Population Survey, CPS, or the American Community Survey, ACS) to estimate the number of state residents of the appropriate sex, age and income. To ease comparison across states, estimate women aged 19-44 (which is the "lowest common denominator" among states). The income cut-off should be set at the appropriate cut-off for each state's waiver (133%, 185% or 200% of the federal poverty level).
- 2) Use the CPS to estimate the proportion of those people who are uninsured (because individuals with Medicaid or private insurance coverage are not eligible for state waiver programs).
- 3) Adjust the CPS estimate of uninsurance, so that it represents people uninsured at any point during the year (to parallel states' data on enrollment, which include people enrolled at any point during the year). Use the factor of 1.54, developed by the Guttmacher Institute in an August 2006 report estimating the potential impact of a nationwide Medicaid family planning expansion that used a methodology similar to the one we are proposing here. A description of that adjustment can be found on pages 35 and 36 of the report at <http://www.guttmacher.org/pubs/2006/08/16/or28.pdf>

Discussion then moved to whether the CPS alone or the combination of the ACS and CPS should be used. Although CPS alone is the simplest method, since the data are based on using three year moving averages to get reasonable estimates at the state-level, the best estimates are one-year behind. That is to say, one would have to wait until data for 2007 are available in order to get a 2006 estimate that is equivalent to the 2005 estimate. For now we agreed that all states would use the CPS estimation procedures alone. It is not felt that either of these surveys know whether or how many undocumented Hispanics they are including. Since the National Survey for Family Growth has the best estimates of fecund female population and this survey does not include a large enough sample size to get these estimates on a state-level nor are data produced each year, this will not be considered in our eligible population estimates.

Each state was asked to produce numbers prior to Monday, April 7th for data items B, C, and D, for 2006 defined as follows:

- B) Estimated number of women (age 19-44) eligible for the FP Waiver using the 2004–2006 average and the CPS only method,
- C) Number (unduplicated) of women age 19-44 enrolled in the waiver during 2006, and
- D) Number (unduplicated) female participants age 19-44 who received any Medicaid waiver covered service during 2006.

and send them to Priscilla Guild. She will produce the following indicators and send them out by the end of the week:

- 1) Percent of the eligible population enrolled,
- 2a) Percent of the enrolled population seen for any Medicaid waiver covered service, and
- 3) Percent of the eligible population seen for any Medicaid waiver covered service.

The next call will follow-up on the following issues related to the survey:

- Comparison of data from the states for the above three indicators for 2006
- Method to define “effective” contraceptive methods (Adam Sonfield, Bo Martin, and Kim Dauner), and
- Choosing dates and time periods to use.

Next Call: April 14th from 1 until 2 PM EDT. The call-in number for all the calls is (919) 962-2740.