

BENEFITS PACKAGE DOCUMENTATION

PHD OUT OF STATE BIRTH CERTIFICATE PROCESS

Event Id (if applicable): PHDL1B

Version: 1.0

EXECUTIVE SUMMARY OF THE INITIATIVE

Applicants must provide documentation of U.S. citizenship to be eligible for FPEP (Family Planning Expansion Project), Oregon's family planning Medicaid waiver. FPEP applicants born in Oregon may request an electronic search for their birth record by submitting a Birth Information Form to their local clinic. In March 2008, the Women's and Reproductive Health Section implemented a process to purchase birth certificates for non-Oregon born citizens in an effort to provide equity of access. Since the launch of this program, Oregon has received \$278,545 in federal matching funds for providing family planning services to 939 women who had been born out of Oregon but did not present with a birth certificate (non-documented visits do not qualify for federal match). Additionally, the process enabled continued provision of services to 313 of those women who may have been turned away after one initial exception visit because they presented at non-Title X clinics.

IMPROVEMENT SUMMARY

Without citizenship documentation, clinics can only offer applicants a single 'one-time exception visit' that must be fully paid for with General Fund (GF). Providing birth certificates ensures that this one-time exception is resolved so that FPEP can draw the 90% federal matching funds and applicants can be made eligible for a full year of service. GF budget allocated for one-time exception visits can be freed to provide additional coverage for family planning services.

Process Overview:

Client completes an authorization form and the state-specific request for a birth certificate. The clinic sends this form to the Women's and Reproductive Health Section where payment is generated and the request mailed to the appropriate state. The birth certificate is received by the Women's and Reproductive Health Section. The birth certificate is mailed to the originating clinic for record keeping, and client citizenship status is updated in the FPEP Eligibility database. The birth certificate is released to the client *only* if the client requests copy of medical records. The client completes a clinic-specific release of medical information form. The clinic makes a photocopy of the birth

certificate to keep in the client's medical records before releasing the original birth certificate.

We are now monitoring the process for sustainability and ongoing improvement opportunities in order to ensure maximized utilization throughout the state.

BENEFIT/OUTCOME DESCRIPTION

From March 1, 2008 through February 28, 2009, the following quantitative benefits have occurred:

- 939 clients have become eligible for a full year of family planning services. This translates to ~1,878 visits per year at an average of two visits per client per year. Clients are not programmatically limited to two visits per year.
- We have received \$278,545 in Federal Medicaid matching funds (at 90% rate) for family planning that we would not have been eligible to pull down if we had not obtained the birth certificates for those 939 clients born in a state other than Oregon.

Implementing the process for obtaining out of state birth certificates for Oregon residents allows clinics to directly obtain increased revenue. Without this revenue source, clinics would be dependent upon limited Title X funds and county General Funds for second or subsequent visits by applicants who are unable to provide documentary proof of their U.S. citizenship.

Cost Savings/Productivity

- OOS birth certificate process has led to a ~ 6 percentage point increase in resolution for one-time exception visits (resolution average increased from 57% in the quarter before the process was introduced to 63% afterwards)
- \$278,545: State reimbursement from federal matching funds for serving 939 clients (at average of two visits each) for whom the state was able to obtain an out-of-state birth certificate, thereby establishing eligibility for services.
- \$33,845: State share (~40%) of the Medicaid Cost of unintended pregnancy-related healthcare saved by providing contraceptive services to 939 women and assuming 13 would have had an unwanted pregnancy if this program did not exist.

Service:

- The ~1/3 of the clients we can assume presented at non-Title X clinics were able to return for a second visit.

People:

- Client satisfaction at being served.
- Provider satisfaction at being able to serve clients rather than turning them away.

LOGIC DESCRIPTION

Cost Savings/Productivity

- Federal matching funds cover 90% of the \$140 reimbursement for the visit, or \$126, + 90% of the average \$30 supply cost for each FPEP visit, or \$27. The fee for birth certificate (average \$7.80 in GF) offsets the benefit for that first visit. Subsequent FPEP visits receive the full \$153 matching fee. Approximately 60% of FPEP visits annually are for new clients (who might require a birth certificate) while 40% of visits are for returning clients. Therefore the net monetary impact per Birth Certificate obtained is estimated at \$148.32 by the following calculation:

$0.6 * (\text{fed match for visit and supplies} - \text{cost of BC}) + 0.4 * (\text{fed match for visit and supplies})$

or

$$(0.6 * (\$153 - \$7.80)) + (0.4 * (153)) = \$148.32$$

- The state share (~40%) of the Medicaid Cost of unintended pregnancy-related healthcare is calculated as \$2,640 (estimated taxpayer savings in prenatal, labor and delivery, and infant health care costs for every unintended birth prevented) x 13 (unintended births averted for potential clients who would have been turned away if the program did not exist).

ATTACHMENTS:

- Data Spreadsheet
- Reinvestment Plan
- McKinsey FPEP Business Case (June 19, 2008)

BENEFITS PACKAGE DOCUMENTATION

L1.B

SEA-ORH001-PHD

INCREASING FPEP ELIGIBILITY AND RECOVERY RATE FOR FAMILY PLANNING COULD HAVE NET IMPACT OF \$1.5-2M

Benefit	Size	Source	Cost	Size	Source	Barrier	Solution
Total visits per year	\$197K	FP data	Increased admin costs to implement billing efficiencies*	\$240-370K	County survey	<ul style="list-style-type: none"> Will require significant support from LPHDs Prohibitive costs for some LPHDs 	<ul style="list-style-type: none"> Make business case Encourage shared services
Total reimbursement per visit	\$170	FP data					
Percent shifted from Title X to FPEP	4.4-5.3%	FP data, estimate	<p>Total cost \$240-370K</p> <p>Note: shared or outsourced costs could be lower</p>	<p>Total opportunity \$1.9-2.2M</p>	<p>Net impact = \$1.5-2.0M</p> <p>Increased immunization rates</p>	<p>Implementation ideas</p> <ul style="list-style-type: none"> Begin FPEP paperwork for everyone and obtain verification later Educate clients about citizenship eligibility requirements 	<p>Achievability = 7</p>
Percent extra recovered	1.2%	LPHD survey, estimate					

* Scaling FP admin cost increase to Immunizations cost increase
Source: PHD data, LPHD survey