

EIDP-LHD PROGRAM - 2010

Program Boundary Statement

Program Quality Criteria

Program Objectives

2010 Program Boundary Statement

Early Intervention and Detection of Pregnancy Services Capacity/Infrastructure In Local Health Departments

For each performance-based contract program, the Division of Public Health has identified a boundary statement. The boundary statement sets the parameters of the program within which the Local Health Department (LHD) will need to set its objectives. The boundaries are intentionally as broad as federal and state law permits to provide maximum flexibility. However, if there are objectives or program directions that the program is not willing to consider, those are included in the boundary statement.

Program Boundary Statement:

The purpose of the early intervention and detection (EIDP) program is to provide intervention for early detection of pregnancy and early prevention of unintended pregnancy, appropriate for the individual circumstances and pregnancy plans of reproductive-age women.

The goals of the EIDP program are:

- Early pregnancy detection
- Early identification of pregnancy-related risks
- Timely and appropriate pregnancy-related care
- Prevention of unintended pregnancy
- Preconceptional health (planning and preparation for healthy pregnancy, and pregnancy spacing)
- Safe, effective, timely, and successful contraception to prevent unintended pregnancy
- Expanded access to Medicaid programs (including Healthy Start and the Family Planning Waiver)

Services supporting the above goals are to be provided in coordination with reproductive health and family planning services.

Long-term Program Goals:

- Reduce unintended pregnancies among women of all reproductive ages
- Reduce adolescent pregnancy
- Decrease inter-conception intervals less than 2 years

Annual Program Goals:

- Increase Medicaid Family Planning Waiver outreach and enrollment
- Increase access to emergency contraception
- Increase access to contraceptive services and supplies.

Populations:

- Low-income, under-insured or uninsured women at risk of unintended pregnancy
- Sexually-active adolescents

References:

DPH Family Planning/Reproductive Health Clinical and Program Administration Guidelines:
http://www.hcet.org/resource/states/wi/QAguidelines/WI_DPH_FPRH.asp?name=provider

State of Wisconsin Statutes:

Medicaid Family Planning Administrative Rules: HFS 105.36 <http://www.legis.state.wi.us/rsb/code/hfs/hfs105.pdf>

Wisconsin Family Planning Statutes: s. 253.07

http://folio.legis.state.wi.us/cgi-bin/om_isapi.dll?clientID=34156287&infobase=stats.nfo&j1=253.07&jump=253.07&softpage=Browse_Frame_Pg

Program Policies:

Division of Public Health, Reproductive Health and Family Planning Program Quality Criteria

Optimal or Best Practice Guidance:**EIDP Required Objective:**

The organization must establish and maintain the capacity to provide appropriate activities that support the purpose and goals of EIDP, including:

- Directly provide pregnancy tests, education and counseling, referral, and appropriate short-term care coordination
- Provide information, and timely and appropriate access to emergency contraception for women who suspect recent exposure to possible unintended pregnancy
- Provide timely and appropriate access to contraceptive services
- Directly provide presumptive enrollment into Medicaid Healthy Start and Family Planning Waiver

EIDP services are to be provided in coordination with reproductive health and family planning services available within the community.

Unacceptable Proposals:

The following activities are not allowable when providing EIDP services:

- Sub-contracting for services under this grant award rather than developing internal capacity and infrastructure.
- Providing and paying for services for people who are eligible for Medicaid when services are covered by Medicaid: (that is, Title V and GPR is the payer of last resort).

Relationship to State Health Plan: *Healthiest Wisconsin 2010*

Access to Primary and Preventive Health Services: Increase the percent of the population with health insurance for all of the year.

2010
Program Quality Criteria
Early Intervention and Detection of Pregnancy Services (EIDP)
Capacity/Infrastructure in Local Health Departments

Generally high program quality criteria for the delivery of quality and cost-effective administration of health care programs have been, and will continue to be required in each public health program to be operated under the terms of this contract. Contractees should indicate the manner in which they will assure each criteria is met for this program. Those criteria include:

Assessment and surveillance of public health to identify community needs and to support systematic, competent program planning and sound policy development with activities focused at both the individual and community levels.

- a. EIDP services must be part of a community plan or strategy to ensure reasonable accessibility and availability of EIDP and Family Planning/Reproductive Health services for the community, and to ensure effective outreach to patients eligible for services under the Wisconsin Medicaid Family Planning Waiver, and Health Start.

Delivery of public health services to citizens by qualified health professionals in a manner that is family centered, culturally competent, and consistent with the best practices; and delivery of public health programs for communities for the improvement of health status.

- a. Overview
 - 1) EIDP Program goals include:
 - early detection of pregnancy and pregnancy-related risks;
 - timely intervention and continuity of care appropriate for patient pregnancy status pregnancy plans (including pregnancy and contraceptive services); and
 - access to Medicaid programs (including Healthy Start and the Family Planning Waiver)
 - 2) The purpose of this EIDP grant allocation is to support capacity and infrastructure in local health departments (LHD) to promote and protect reproductive health in the reproductive-age population. This capacity establishes LHD as a credible source of accurate and reliable information, and as an access point (entry point) into community services.
 - 3) EIDP Capacity and Infrastructure means that an agency is organized and prepared to engage in an active assurance role to:
 - increase awareness and understanding about family planning/reproductive health and pregnancy-related health care needs and services,
 - promote (outreach) the Family Planning Waiver, regular Medicaid services, Badger Care, and Healthy Start services,
 - enroll eligible women into the Family Planning Waiver as well as Healthy Start,
 - directly provide pregnancy testing services, and
 - ensure *timely* and appropriate access to emergency and on-going contraception.

b. To engage in an active EIDP assurance role, the agency must develop and maintain the following capability:

- 1) Agency will maintain complete and accurate, evidence-based information about family planning (including emergency and on-going contraception), reproductive health, preconception, and pregnancy-related health needs, available for distribution and dissemination to agency clients and other women of reproductive age in the community.
 - Agency staff will have access to current evidence-based information.
 - Information will be incorporated into ongoing client education, community education and public information activities.
- 2) Agency will maintain complete and accurate information about the Family Planning Waiver, Healthy Start, Badger care and regular Medicaid services and enrollment, available for distribution and dissemination to agency clients and other women of reproductive age in the community.
 - Agency staff will have access to current information.
 - Information about these programs and benefits will be incorporated into ongoing client education, community education and public information activities.
- 3) Agency will maintain Medicaid certification for Presumptive Eligibility to enroll eligible women in Healthy Start and the FP Waiver: providing a community entry point for access to services and care.
 - Agency staff will have the knowledge and skills to screen and properly enroll eligible women, and to inform enrolled women about how and where to obtain covered services and supplies.
 - Agency will establish and maintain linkages with the economic support office to facilitate efficient enrollment and re-enrollment.
- 4) Agency will be a source for pregnancy tests in the community: providing an entry into either Healthy Start and pregnancy-related care, or contraceptive services through Waiver enrollment and referral.
- 5) Agency will maintain linkages with community health care providers to enable clients to obtain services and supplies in a timely manner, appropriate to client circumstances. Agency will not be required to directly provide contraceptive supplies.
 - Agency will maintain information about community pharmacy policies and practices – including emergency contraception availability, and services under the Family Planning Waiver.
 - Agency will maintain arrangements with community family planning program(s) and other providers for timely and appropriate access to services and supplies.

- c. Pregnancy testing services must be provided in conjunction with:
- Risk assessment, timely and appropriate referral for pregnancy or contraceptive care, and timely follow-up;
 - Patient education and anticipatory guidance sufficient for clients to make informed choices and decisions;
 - Presumptive eligibility enrollment in the Medicaid Family Planning Waiver and Healthy Start Programs (as needed); and
 - Short-term care coordination services to manage identified needs.
- d. EIDP services must include intervention to prevent unintended pregnancy *as well as* intervention to promote early pregnancy-related care. Therefore, EIDP services must also be available to women *at risk of* an unintended pregnancy *or who suspect* they could become (or could have recently become) pregnant.
- 1) EIDP services must ensure timely and appropriate access to emergency hormonal contraception and on-going contraceptive services and supplies. Among women who suspect they are at risk of an unintended pregnancy (within the past 72 hours), emergency contraception must be accessible as an early intervention. Information about EC as an alternative to waiting until a pregnancy test can be performed, and the risk of unintended pregnancy must be provided.
 - 2) Emergency contraception (EC) must be accessible to patients, consistent with evidence on EC's timing and effectiveness following exposure to an unintended pregnancy. Patients must receive information on the role of EC as a back-up method of contraception, and recommended use for maximum effectiveness in preventing unintended pregnancy.
- e. EIDP services must:
- 1) Be delivered under the supervision of a registered nurse;
 - 2) Ensure access to "reproductive health services" (appropriate for individual client health needs and circumstances), including:
 - Reproductive health screening and assessment services (including cervical cancer screening); and
 - Sexually transmitted disease screening and assessment, diagnosis and treatment, and disease intervention services.
- f. EIDP services must assure that the *content of patient care and the provision of services* comply with current established policies, and are consistent with professional standards and guidelines within the field of family planning involving pregnancy testing, and patient education and counseling.

g. Relevant standards and guidelines include:

- Title X Program Guidelines (http://opa.osophs.dhhs.gov/titlex/2001guidelines/ofp_guidelines_2001.html),
- DHFS's Guidelines for Perinatal Care: Preconceptional Health Services (<http://www.hcet.org/wfpp/sandr/sandg.html#hbg>)
- "Patient Rights and Provider Responsibilities: Privacy and Confidentiality Issues for Family Planning and Reproductive Health Services - A Resource Guide for the Wisconsin Family Planning Program (<http://www.hcet.org/wfpp/sandr/conf.htm>) to assure patient privacy rights and consumer confidence in confidentiality safeguards for all patient information;
- American Academy of Obstetricians and Gynecologists (ACOG) Women's Health Guidelines (http://sales.acog.com/acb/stores/1/product1.cfm?SID=1&Product_ID=246) and
- Contraceptive Technology (<http://www.contraceptiveupdate.com/>).

3. **Record keeping** for individual focused services that assures documentation and tracking of client health care needs, response to known health care problems on a timely basis, and confidentiality of client information.

a. EIDP services must:

- 1) protect and safeguard reproductive health patient privacy and confidentiality rights in compliance with HIPAA privacy requirements (<http://www.cms.hhs.gov/hipaa/hipaa2/regulations/privacy/default.asp>), and
- 2) comply with regulations and guidelines defining chart requirements for the content of patient records including Wisconsin Family Planning Medicaid Program requirements (<http://www.legis.state.wi.us/rsb/code/hfs/hfs105.pdf>), and Title X requirements (http://opa.osophs.dhhs.gov/titlex/2001guidelines/ofp_guidelines_2001.html).

Information, education, and outreach programs intended to address known health risks in the general and certain target populations to encourage appropriate decision making by those at risk and to affect policy and environmental changes at the community level.

- a. EIDP services must be part of public information and education, and outreach activities to increase awareness and understanding among all reproductive-age women of family planning and related reproductive health care issues, key knowledge areas, and where to obtain services.
- b. EIDP services must place particular emphasis on reaching population segments who lack access, are at higher relative risk of unintended pregnancy and reproductive health morbidity, and other population segments appropriate to the county.

Coordination with related programs to assure that identified public health needs are addressed in a comprehensive, cost-effective manner across programs and throughout the community.

- a. EIDP services must be coordinated and integrated with other state and local programs and initiatives, including the Medicaid Family Planning waiver, Adolescent Pregnancy Prevention Program; Healthy Start; Prenatal Care Coordination, WIC, etc., to facilitate timely and appropriate continuity of care.

A referral network sufficient to assure the accessibility and timely provision of services to address identified public health care needs.

- a. EIDP services must be integrated into community referral networks that provide effective access for essential services and that facilitate timely continuity of patient care. For example, networks established through memoranda of understanding with other providers for appropriate referral of clients.

Provision of guidance to staff through program and policy manuals and other means sufficient to assure quality health care and cost-effective program administration.

- a. EIDP service policies and practices must reflect current standards and guidelines recognized in the field of family planning/reproductive health, be periodically reviewed and updated, and have quality assurance safeguards to ensure compliance with contract requirements and standards.**

Financial management practices sufficient to assure accurate eligibility determination, appropriate use of state and federal funds, prompt and accurate billing and payment for services provided and purchased, accurate expenditure reporting, and, when required, pursuit of third-party insurance and Medicaid coverage of services provided.

- a. EIDP services must screen all patients for third party health coverage (private and Medicaid including Badger Care, Healthy Start and the Family Planning Medicaid Waiver), and submit claims for third party reimbursement (*if* reimbursable services are directly provided).
- b. EIDP services must establish reasonable requirements for patient charges based on a sliding fee (discount) schedule using the most current Poverty Income Guidelines (*if* clients are charged for services).

Data collection, analysis, and reporting to assure program outcome goals are met or to identify program management problems that need to be address.

- a. Agencies providing LHD-EIDP services must collect client information for the required deliverables (that correspond to the activities under 2.a.1-5), and other client information necessary to meet the DHFS LHD-EIDP contract reporting requirements.
- b. Agencies must submit data in the format required by DPH, using the DPH SPHERE data system to meet the reporting requirements.

EIDP-Local Health Department Capacity/Infrastructure

Please Note: 2010 is last year this template objective will be available

- A. During the contract period, all women of reproductive age who receive services through the *{name}* **County Health Department** will be provided with appropriate information about family planning and reproductive health, pregnancy related health, and Medicaid services including the Family Planning Waiver and Healthy Start.
- B. An agency generated report to document the number of women of reproductive age served by the *{name}* **County Health Department**, and the number of those women who received specific early intervention and detection of pregnancy services capacity (infrastructure) services; including the number who received: 1) information about family planning and reproductive health and pregnancy related health and services, 2) information about Medicaid services including the Family Planning Waiver and Healthy Start, 3) enrollment into Healthy Start or enrollment in the Family Planning Waiver through the agency, 4) pregnancy tests, and 5) contraceptive services (directly or through referral), including emergency contraception (directly or through referral).
- C. All women of reproductive age shall receive information about: family planning and reproductive health and pregnancy related health; the availability of family planning supplies and services, and how and where to obtain these services; and information about Medicaid services including the Family Planning Waiver and Healthy Start. All women of reproductive age shall receive other early intervention and detection of pregnancy intervention services as appropriate to their circumstances and decisions. Early intervention and detection of pregnancy intervention services provided shall include Medicaid Family Planning Waiver and Healthy Start presumptive eligibility enrollment, emergency and on-going contraceptive services, and pregnancy testing. Coordination shall occur with the county's family planning agency(ies) to ensure timely and convenient access to contraceptive supplies and services. There is no designated value range for this objective.
- D. Data Source for Measurement for each of the five points specified in the Contract Deliverable: 1) SPHERE Community Report to include the data from the following screens: Community Activity (all appropriate fields including Audience Focus, Methods to Support Intervention, Intervention: Outreach and Sub-intervention: (check appropriate box - Family Planning and Reproductive Health and/or Pregnancy-related Health and Services - no detail screens for the subinterventions); or an agency generated report summarizing the total number (i.e., individual client detail is not required). 2) SPHERE Community Report to include the data from the following screens: Community Activity (all appropriate fields including Audience Focus, Methods to Support Intervention, Intervention: Outreach and Subintervention: (check appropriate box - Family Planning Medicaid Waiver or Healthy Start - no detail screens for the subinterventions); or an agency generated report summarizing the total number (i.e., individual client detail is not required). 3) SPHERE Individual/Household Report to include the MCH Required Demographic Data and data from the following screen: Intervention: Case Finding and Subintervention: Presumptive Eligibility for Family Planning Medicaid Waiver or Presumptive Eligibility for Healthy Start (no detail screens for subinterventions); or agency generated report. 4) SPHERE Individual/Household Report to include the MCH Required Demographic Data and data from the following screen: Pregnancy Test (CPT office visit code dependent on service provided and V72.4 Diagnosis Code); or agency generated report. 5) SPHERE Individual/Household Report to include the MCH Required Demographic Data and data from the following screen: Contraceptive Service (if providing directly) (CPT office visit code dependent on service provided and any V25 Diagnosis Code) or Referral and Follow-up/Results (through referral); or agency generated report.
- E. Goals of this EIDP allocation for capacity and infrastructure in local health departments are to: 1) **increase awareness** about family planning and pregnancy-related health care needs and services, 2)

promote (outreach) the Medicaid Family Planning Waiver, regular Medicaid services, BadgerCare, and Healthy Start services, 3) **enroll eligible women** into the Medicaid Family Planning Waiver and Healthy Start, 4) **directly provide** pregnancy testing services, and 5) **ensure** *timely* and appropriate access to on-going and emergency contraception.

EIDP – LHD: Increased Access (Optional Transitional Objective)

- A. By December 31, 2010, (#) of unduplicated women of reproductive age receiving prenatal care coordination services (Medicaid or MCH) will receive post-partum contraceptive supplies prior to delivery (as part of their post partum contraceptive plan) from [**choose: the {name} County Health Department Reproductive Health Program**] - or – {*name of provider*}] in {*name*} County (Counties).
- B. A report to document: 1) the number of unduplicated women receiving prenatal care coordination services; 2) the number of the unduplicated prenatal care coordination clients receiving post-partum contraceptive information in their third trimester; 3) the number of unduplicated prenatal care coordination clients receiving, in their third trimester, a supply (for postpartum use) of emergency contraception, condoms, and 4) the number of unduplicated women prenatal care coordination clients receiving their primary contraceptive method supplies (with starting instructions) prior to delivery—or with arrangements made with their prenatal care provider prior to delivery for provider-assisted methods (such as depo shots)..
- C. The context for this EIDP-RH objective is expand access to contraceptive services and supplies: contraceptive services and supplies, dual protection, and Medicaid Family Planning Waiver outreach and enrollment. This objective directly relates to the “early intervention” component of EIDP: to prevent the circumstances requiring the need for pregnancy tests, i.e., to prevent unintended pregnancy. This objective, while expanding access, also provides outreach for the Family Planning Program. This objective implements “Women’s Health: Now and Beyond Pregnancy” contraceptive service guidelines, and requires close coordination with PNCC, MCH prenatal care coordination projects, and WIC.
- D. SPHERE Individual/Household Report to include MCH required demographic data and data from the following screens: Contraceptive Services (CPT office visit code dependent on service provided and any V25 Diagnosis code), **or agency generated report**.
- E. Only information entered into the Division of Public Health GAC-Web application will be used to evaluate the extent to which this objective is met. Women’s Health: Now and Beyond Pregnancy contraceptive service guidelines and educational materials and messages are available.