

2008 Program Quality Criteria Family Planning/Reproductive Health Services

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:

1. 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. Family planning/reproductive health programs **must** have (or be part of) a *written* community plan **that is based** upon a Community Health Improvement Plan (CHIP).
- b. The plan **must** address:
 - 1) Reasonable accessibility and availability of EIDP and Family Planning/Reproductive Health Services for the community;
 - 2) Effective outreach to patients eligible for services under the Wisconsin Medicaid Family Planning Waiver, and efficient and convenient enrollment;
 - 3) Effective community pathways and referrals for essential services, as required by s. 253.07, for timely and appropriate comprehensiveness and continuity of care;
 - 4) Measurement of effectiveness, using indicators accepted within the field of family planning, to evaluate the community system of services; and
 - 5) On-going surveillance to evaluate progress in the community.

2. 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. Family Planning and Reproductive Health Programs **must** provide:
 - 1) **Contraceptive services** (both emergency and ongoing methods), and
“Contraceptive patients are defined as patients with an office visit having an ICD-9 code of v.25 (contraceptive management) as the primary or secondary diagnosis code within the current calendar year”
 - 2) **“Related reproductive health services”**, which **must** include the following components:
 - a) Reproductive health screening and assessment services (including cervical cancer screening),
 - b) Sexually transmitted disease screening and assessment, diagnosis and treatment, and disease intervention services;
 - c) Pregnancy testing, risk assessment, and early pregnancy care services, timely appropriate care and follow-up (See EIDP);
 - d) Patient education and anticipatory guidance;
 - e) Enrollment into Medicaid Healthy Start, Family Planning Waiver, and other Medicaid Program; and

- f) Short-term care coordination services including follow up testing, assessment, and referral and follow up on any abnormal findings *for which* further diagnosis and treatment is recommended (ie pap, breast mass)
- 3) Contraceptive and related reproductive health services (*patient care and program services*) **must** comply with Wisconsin DPH-Family Planning Program Guidelines, (or a DPH-approved alternative set of guidelines that are recognized in the field of family planning as evidence-based or best practice), HFS 105.36, and Wisconsin Medicaid Family Planning rules, and must incorporate **evidence-based or best practices consistent with professional practices** and guidelines recognized within the field of family planning. reference: **Wisconsin DPH Family Planning Program Guidelines.**
- 4) **Contraceptive and related reproductive health services must:**
- a) be under the supervision of a registered nurse;
 - b) directly provide **the following services on-site:**
 1. pregnancy testing services,
 2. emergency contraception (in advance of actual need and on an emergency basis),
 3. immediate prescription contraception with the option to defer medical/laboratory services;
 4. prescription supplies;
 5. non-prescription supplies, and
 6. sexually transmitted disease testing and treatment
 7. Family planning Waiver and Healthy Start enrollment
 - c) ensure reasonable access and waiting period for provision of physical examinations and laboratory tests—whether services are provided on-site or off-site.
 - d) submit pap smears, and STD testing and treatment for all patients receiving clinical services to the Wisconsin State Laboratory of Hygiene or request approval in writing to use other laboratories that assure equivalent quality standards.
 - e) provide emergency contraception ⁱ and “dual protection” ⁱⁱ supplies and education.
- 5). Family planning/reproductive health programs **must** provide **Early Intervention and Detection of Pregnancy** ⁱⁱⁱ (EIDP) services **to prevent unintended pregnancy as well as intervention to promote early pregnancy-related care.** ^{iv}
- 1) EIDP must comply with Wisconsin DPH Family Planning Program Guidelines.
 - 2) EIDP services must support the following goals:
 - a) Early detection of pregnancy and pregnancy-related risks;
 - b) Timely intervention and continuity of care appropriate the pregnancy status and pregnancy plans of a patient (including pregnancy and contraceptive services), and
 - c) Access to Medicaid programs (including Healthy Start and the Family Planning Waiver)

- 3) EIDP services **must** be available to women *at risk of an unintended pregnancy or who suspect* they could become (or could have become) pregnant.
- a) Emergency contraception must be available for distribution as an early intervention for women who have had unprotected sexual activity within the past 120 hours).
- b) Evidence-based information must be provided about emergency contraception as an alternative to waiting until a pregnancy test can be performed.

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. Family planning/reproductive health programs **must establish and maintain record keeping and information management-related policies** and procedures to:

- 1) protect patient information and safeguard family planning patient privacy and confidentiality rights, and
- 2) ensure compliance with Wisconsin DPH Family Planning Program Guidelines and other regulations and guidelines (including HIPAA) that establish requirements for patient health care records and information.

4. 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. Family planning/reproductive health programs must provide appropriate, evidence-based **information and education**, based on Wisconsin DPH family Planning Program Guidelines, to increase awareness and understanding among all women of child bearing age of family planning and related reproductive health care issues,

b. Family planning/reproductive health programs must engage in **outreach** activities, based on the community plan in Section 1, to reach population segments who lack access, who are at higher relative risk of unintended pregnancy and reproductive health morbidity, and other population segments identified in the community plan (in Section 1).

5. 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. Family planning/reproductive health programs must coordinate and establish formal linkages with other state and local programs and initiatives (as required under Section 1.b.3) to ensure access and to ensure timely continuity of care for patients.

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

- a. Family planning/reproductive health programs must coordinate and establish formal linkages with other state and local programs and initiatives (as required under Section 1.b.3) to ensure access and to ensure timely continuity of care for patients.

7. 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. Family planning/reproductive health programs must establish and maintain written policy and program information available to staff *in manuals*:
 - 1) Policies and protocols **must** comply with the Wisconsin DPH Family Planning Program Guidelines, and must contain evidence-based or best practices recognized in the field of family planning.
 - 2) Medical and administrative policy and procedures **must** be reviewed and updated periodically.
- b. Family planning/reproductive health programs must establish and maintain quality assurance mechanisms (reviews including chart audits) that comply with Wisconsin DPH Program guidelines.
 - 1) Quality Assurance reviews must be performed periodically to measure compliance with established policies.
 - 2) Quality Assurance reviews must provide feedback to staff, and establish a plan and time-frame for corrective action involving any exceptions identified.
- c. Annual staff training plan should be developed to include training offered by HCET and the DPH Family Planning Program as well as other appropriate continuing education sessions.
- d. Programs must have a Medical Director under formal agreement, responsible for providing or exercising supervision over all medical and related services provided to patients.

8. 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.

Family planning/reproductive health programs must:

- a. Develop and implement financial management practices in accordance with the DPH-FPRH Guidelines.

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

- a. Family planning/reproductive health programs must collect patient information (patient demographic, need/problem-related information, and visit/service information), necessary to meet the DHFS Reproductive Health/Family Planning Program contract reporting requirements.

- b. Programs must submit data in the format required by DPH, using either the DPH SPHERE data system or another data system, to meet the reporting requirements.
- c. Programs must prepare and submit an annual narrative performance report. The following must be included in the narrative reports: 1) a summary of progress within each of the performance indicators (identified in the family planning/reproductive health contract); and 2) a description and summary of the agency's quality assurance review, addressing plans for any corrective action.

Endnotes

ⁱ Emergency contraception is a backup method of birth control, which contain the same hormonal ingredients as regular oral contraceptive pills, to be taken as soon as possible after a contraceptive failure or no contraception.

ⁱⁱ “Dual protection” means choosing a family planning method *and* making decisions about one's sexual behavior *at the same time*, as recommended by the World Health Organization. “Anyone with a risk factor for sexually transmitted infections (STIs) should use dual protection...”World Health Organization

ⁱⁱⁱ EIDP Pregnancy Testing is defined as a pregnancy test performed under circumstances in which pregnancy is suspected. CPT/ICD-9 Coding: an office visit including a pregnancy test (CPT Code 81025) with a v72.4 ICD-9 Code (pregnancy examination or test).

EIDP services do not include patients receiving pregnancy tests that are routinely performed (defined by practice or protocol) for the purposes of “ruling-out” a possible pregnancy – prior to a medical intervention, such as medication or hormonal contraception. CPT/ICD-9 Coding: a pregnancy test (procedure code 81025) with a v82.8 ICD-9 Code (special screening for other specified conditions).

^{iv} EIDP is an adjunct service to family planning and reproductive health services, and includes activities to:

- **increase awareness** about family planning 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.