

### MISSISSIPPI Family Planning Medicaid Waiver Section 1115 Demonstration Annual Report 11-W-00157/4

January 1, 2023 - December 2023

March 25, 2024

550 High Street, Suite 1000 Jackson, Mississippi 39201 Website: medicaid.ms.gov

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#### MONITORING REPORT

#### **FAMILY PLANNING SECTION 1115 DEMONSTRATION**

State: Mississippi
<b>Demonstration Reporting Period:</b> January 1, 2023, to December 31, 2023
Demonstration Year: 20
Approved Start and End Date of the Demonstration: Jan 1 2018 to Dec 31 2027

### A. Executive Summary

- 1. Synopsis of Information Contained in the Report
  The Family Planning Waiver (FPW) annual report is an overview of the progress
  made in achieving the following goals:
  - Ensure access to and utilization of family planning services and family planning related services for individuals not otherwise eligible for Medicaid.
  - Improve birth outcomes and/or maintain health outcomes for the target population as a result of access to family planning services and family planning related services; and
  - Increase the overall savings attributable to providing family planning services and family planning-related services.

To accomplish the stated goals, the Centers for Medicare & Medicaid Services (CMS) and the Mississippi Division of Medicaid (DOM) expect this demonstration program will promote the FPW program objectives by:

- Improving access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.
- Improving access to and use of Medicaid family planning services by women and men who are not otherwise eligible for Medicaid.
- Improving birth outcomes (e.g., low birthweight) and the health of women in the demonstration population.
- Increasing the child spacing interval among women in the demonstration population.
- Reducing the number of unintended pregnancies among women in the demonstration population.
- Reducing overall pregnancy among teenage women in the demonstration population.

- Reducing the number of repeat births among teenage women in the demonstration population.
- Decreasing the number of Medicaid paid deliveries, which will reduce annual expenditures for prenatal, delivery, and newborn services.
- Increasing the overall savings attributable to providing family planning services by covering women for one year postpartum.

The current Mississippi Family Planning section 1115(a) Medicaid demonstration, effective through December 31, 2027, continues to expand the provision of family planning services and family planning related services to women and men, ages 13 through 44, who are capable of reproducing. Participants must be limited to an income of no more than 194% of the federal poverty level (FPL) (post Modified Adjusted Gross Income (MAGI) conversion) and are not otherwise enrolled in Medicaid, Medicare, the Children's Health Insurance Program (CHIP), or any other creditable coverage that includes family planning services.

In accordance with the Standard Terms and Conditions (STCs), this Annual Monitoring Report will provide the status of the demonstration's various operational areas and an analysis of program data collected for the period of January 1, 2023, through December 31, 2023.

During Demonstration Year (DY) 20 Mississippi Senate Bill 2212 was signed into law extending postpartum Medicaid coverage from 60 days to 12 months. This change eliminates automatic enrollment of women ages 13 to 44, who are eligible for Medicaid maternity services and have reached the end of their 60-day postpartum period. DOM's Office of Eligibility, at the end of the 12-month postpartum period, will conduct a redetermination of eligibility for the FPW, or other eligible aid categories. With the March 31, 2023, expiration of the continuous enrollment condition authorized by the Families First Coronavirus Response Act (FFCRA), DOM's Office of

2. Program Updates – Current Trends or Significant Program Changes

individuals who are no longer eligible.

There have been no administrative or operational changes to the demonstration, such as changes in the health care delivery, benefits, quality of care, or payment rates, that would impact the FPW demonstration program. There were no changes in service utilization or provider participation during this reporting period. DOM has not had any audits, investigations, or lawsuits that would have an impact on the FPW demonstration.

Eligibility restarted Medicaid eligibility renewals and terminations of coverage for

3. Policy Issues and Challenges
DOM has not experienced any operational challenges or issues during DY 20. DOM is
not considering any new policies related to legislative/budget activity or
amendments to the current approved demonstration.

## **B.** Utilization Monitoring

**Table 1: Utilization Monitoring Measures** 

Topic	Measure [Reported for each month included in the annual report]						
	Unduplicated Number of Enrollees by Quarter						
	Unduplicated Number of Beneficiaries with any Claim by Quarter (by key						
demographic characteristics such as age, gender, and income level)							
Utilization Utilization by Primary Method and Age Group							
Monitoring	Total number of beneficiaries tested for any sexually transmitted disease						
	Total number of female beneficiaries who obtained a cervical cancer						
	screening						
	Total number of female beneficiaries who received a clinical breast exam						

Table 2: Unduplicated Number of Enrollees by Quarter DY 20\*

Tuble 1. chauphoused number of 2m onces by Quarter 2.1.20									
		Number of Female Enrollees by Age and Quarter							
	13-14	15-19	20-29	30-44	Total Unduplicated Female Enrollment				
Quarter 1	10	831	12,802	8,692	22,335				
Quarter 2	13	893	12,790	8,826	22,522				
Quarter 3	14	1,098	13,806	10,152	25,070				
Quarter 4	15	1,198	12,953	9,785	23,951				
	Number of Males Enrollees by Age and Quarter								
	13-14	15-19	20-29	30-44	Total Unduplicated Male Enrollment				
Quarter 1	5	116	2,084	1,874	4,079				
Quarter 2	5	125	2,210	1,986	4,326				
Quarter 3	9	207	2,368	2,088	4,672				
Quarter 4	8	273	2,191	1,955	4,427				

Source: Medicaid Enterprise System Assistance (MESA) Cognos Report 3 COE29 who Receive FPW service report

<sup>\*</sup>CMS table template altered for age grouping to capture data for teen population without inclusion of ages 20 and above.

Table 3: Unduplicated Number of Beneficiaries with any Claim by Age Group and Gender per Quarter DY  $20\,$ 

_		Number	of Female Who	Utilize Servi	es by Age and (	Quarter			
	13-14	15-19	20-29	30-44	Total Female Users	Percentage of Total Unduplicated Female Enrollment			
Quarter 1	2	286	2,888	1,733	4,909	21.9%			
Quarter 2	5	287	2,677	1,613	4,582	20.3%			
Quarter 3	6	350	3,133	2,076	5,565	22.2%			
Quarter 4	5	422	3,183	2,080	5,690	23.8%			
	Number of Males Who Utilize Services by Age and Quarter								
	13-14	15-19	20-29	30-44	Total Male Users	Percentage of Total Unduplicated Male Enrollment			
Quarter 1	1	12	201	98	312	7.6%			
Quarter 2	0	12	125	92	229	5.3%			
Quarter 3	1	18	156	112	287	6.1%			
Quarter 4	0	25	174	75	274	6.2%			

Source: MESA Cognos Report 3 COE 29 who received FPW service report

Table 4: Utilization by Primary Method and Age Group DY 20

		Total Users								
Primary Method	13-14	15-19	20-29	30-44	Total	Percent of All Users				
Female Sterilization Tubal	0	0	2	1	3	0.1%				
Male Sterilization Vasectomy	0	0	1	0	1	0.0%				
Emergency Contraceptives	0	0	0	0	0	0%				
Intrauterine Device (IUD)	0	2	26	30	58	1.1%				
Hormonal Implant	0	7	121	67	195	3.7%				
1-Month Hormonal Injection	0	0	0	0	0	0%				
3-Month Hormonal Injection	4	134	1102	941	2181	40.9%				
Oral Contraceptive	1	180	1281	796	2258	42.4%				
Contraceptive Patch	0	60	313	104	477	8.9%				
Vaginal Ring	0	3	94	56	153	2.9%				
Diaphragm	0	0	2	3	5	0.1%				
Sponge	0	0	0	0	0	0%				
Female Condom	0	0	0	0	0	0%				
Male Condom	0	0	0	0	0	0%				

Source: MESA Cognos Report: Drug Utilization by DOS, PTC, COE, PB 500 & WO100650 Procedures

Table 5: Number of Beneficiaries Tested for any STD for DY 20

	Female Tests		Mal	le Tests	Total Tests		
	Number	% Of Total	Number	% Of Total	Number	% Of Total	
	Number	70 OI 10tai	Number	70 OI 10tai	Number	Enrolled	
Unduplicated Number of Beneficiaries who Obtained an STD Test	4,489	14.2%	394	7.0%	4,883	13.1%	

Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams

Table 6: Total Number of Female Beneficiaries who obtained a Cervical Cancer Screening

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries	1,743	5.5%
who obtained a cervical cancer screening	1,/43	ე. <u>ე</u> %

Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams

**Table 7: Breast Cancer Screening** 

Screening Activity	Number	Percent of Total Enrolled Females
Unduplicated number of female beneficiaries	N/A	N/A
who obtained a breast cancer screening	N/A	N/A

Note: Breast cancer screenings are not a FPW covered service, therefore, no data is reported in Table 7.

**Table 8: Clinical Breast Exam** 

Screening Activity	Number	Percent of Total Enrolled Females	
Total number of female beneficiaries who	1,187	3.8%	
received a clinical breast exam	1,107	3.070	

Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams

Note: The utilization monitoring measures listed in Table 1 of the STCs, requests the total number of female beneficiaries who received a clinical breast exam, however the template provided did not include a table to report the data. The information is provided in Table 8 above.

### C. Program Outreach and Education

#### 1. General Outreach and Awareness

DOM coordinates outreach and education activities with the Mississippi State Department of Health (MSDH) to improve Family Planning Waiver (FPW) enrollment and participation. During DY 20, MSDH reached 2,074 individuals who participated in health fairs. Outreach provided at the health fairs included education and counseling, and screening for sexually transmitted infections (STIs). During the community engagement events, special outreach efforts were directed toward male participants encouraging them to apply for FPW benefits and services. Additional MSDH outreach conducted telephonically and through mailings is outlined in the following table.

**Table 9: MSDH FPW Promotion and Education** 

	Promotion/Education					Appointment Reminders/Notifications					
Quarter	Number of Educational Materials Distributed		Number of FPW Call and /or Letters		Appointment Reminder		Missed Appointment		Renew FPW Notifications		
	FPW	Other Brochures	Calls to Clients	Letters to Clients	Calls From Clients	Calls	Letters	Calls	Letters	Calls	Letters
First	505	392	184	0	90	0	0	0	0	0	0
Second	231	253	962	507	333	2,748	622	1,098	315	138	150
Third	191	286	707	412	494	3,074	557	1,959	469	254	101
Fourth	462	490	1,246	471	460	2,840	538	1,320	477	172	406
Total	1,389	1,421	3,099	1,390	1,377	8,662	1,717	4,377	1,261	564	657

DOM and MSDH developed a FPW fact sheet that is available in English, Spanish, and Vietnamese. The fact sheets are included in the reminder notifications that are sent to clients when it is time to renew eligibility for the FPW program and are available on the MSDH website.

DOM's Office of Client Relations hosted various community activities and participated in Medicaid beneficiary workshops to increase awareness of the FPW program and provide education on the services that are offered under the waiver. DOM continues to have discussions with providers on how they can play a major role in educating patients about the waiver and assisting or directing them to DOM for enrollment. During DY 20, DOM's Office of Client Relations' outreach team attended 79 events and provided FPW education and outreach information to 9,760 individuals, including Medicaid Regional Office staff, beneficiaries, Medicaid providers, and other health professionals.

#### 2. Target Outreach Campaign(s)

MSDH implemented a new program called "Operation Going Gold" in 2022. The goal of the program is to increase enrollment in the FPW program. MSDH staff educate clients on the benefits offered by the FPW program, assist clients with completing the FPW Medicaid application, and follow-up with the client to ensure all required information is provided to Medicaid to complete the enrollment process. Each health department has a reminder system in place to notify beneficiaries when it's time to renew their FPW eligibility. A notification letter is mailed, along with a copy of the FPW Fact Sheet to the beneficiaries 2-3 months prior to the expiration of their benefit period, as a reminder to complete a new application to continue eligibility for the program. During DY 20, 6,907 FPW applications state-wide were submitted to the Division of Medicaid (DOM) under the "Operation Going Gold" project with 27.3% (1,885) of the applications approved.

### D. Program Integrity

DOM's Office of Medical Services is responsible for monitoring providers who are reimbursed for family planning and family planning related services. Desk audits are performed by registered nurses (RNs) to ensure provider documentation supports the services reimbursed under the FPW program, participants are receiving appropriate medical care, and referrals are made for primary care and other services which are not family planning related.

During DY 20, the Office of Medical Services audited 27 private medical providers and 30 MSDH clinics. Chart 1 depicts physician referrals for the reporting period.

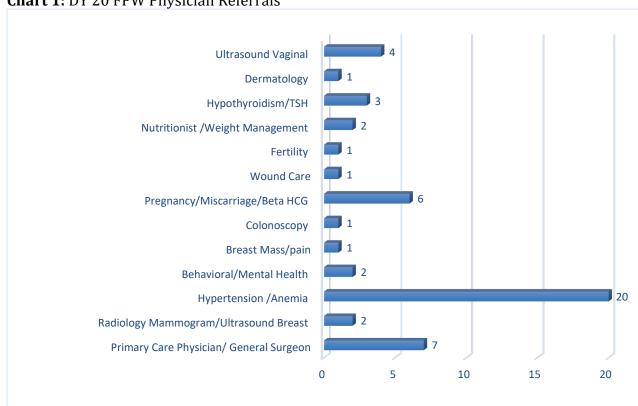


Chart 1: DY 20 FPW Physician Referrals

### E. Grievances and Appeals

During DY 20, The Office of Appeals received one appeal request for a beneficiary enrolled in the FPW demonstration program. The provider requested a retrospective review for denied outpatient services based on medical necessity. The denial was upheld as the findings indicated the services billed were not family planning related.

#### F. Annual Post Award Public Forum

#### **Annual Post Award Forum**

The FPW Annual Public Forum was held Monday, July 13, 2023. The Public Notice is listed below.

June 13, 2023
Public Notice
Annual Public Forum
Mississippi Section 1115(a) Family Planning Demonstration

Pursuant to 42 C.F.R. Section 431.420(c), a Public Forum is required annually after the implementation of the Division of Medicaid's Family Planning Waiver. This Public Forum provides stakeholders the opportunity to provide meaningful comments on the progress of the Family Planning Waiver. The Family Planning Waiver operates under the authority of an1115(a) waiver approved by the Centers for Medicare and Medicaid Services (CMS) effective January 1, 2018, through December 31, 2027. This Public Forum will be held from 9 a.m. until 10 a.m. on Thursday, July 13, 2023, in room 145 at the Woolfolk Building, 501 N. West Street, Jackson, MS 39201. There will be an opportunity to for public comment at the forum. To join the teleconference, dial 1-769-230-0549 and enter the Conference ID: 453 133 127#.

# **G.** Budget Neutrality

DOM certifies the accuracy of reporting the state's budget neutrality expenditure limits for FPW enrollees/participants (Refer to the FPW Budget Neutrality Workbook submitted to CMS on March 25, 2024.

# H. Demonstration Evaluation Activities and Interim Findings

**Table 10:** FPW Goals and Objectives

	ssissippi Family Planning Waiver Demonstration Objectives					
	Goal 1: Ensure access to and utilization of family planning and/or family planning-related services for individuals not otherwise eligible for Medicaid.					
Objective 1:	Improving the access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.					
Objective 2: Improving the access to and use of Medicaid family planning-related services by women and men who are not otherwise eligible for Medicaid.						
_	ove or maintain health outcomes for the target population as a result amily planning services and family planning-related services.					
Objective 3:	Improving birth outcomes (e.g., low birthweight) and the health of women in the demonstration population.					
Objective 4:	Increasing the child spacing interval among female FPW enrollees.					
Objective 5:	Reducing the number of unintended pregnancies among women enrolled in the FPW.					
Objective 6:	Reducing overall pregnancy among teenage women in the demonstration population.					
Objective 7	Reducing the number of repeat births among teenage women in the demonstration population.					
Goal 3: Increaservices.	Goal 3: Increase the overall savings attributable to providing family planning services.					
Objective 8:	Decreasing the number of Medicaid deliveries which will reduce the annual expenditures for prenatal, delivery and newborn services.					
Objective 9:	Increasing the overall savings attributable to providing family planning services by covering women for one-year postpartum.					

**Evaluation Question:** How did beneficiaries utilize covered services?

## Goal 1: Ensure access to and utilization of family planning and/or family-related services for individuals not otherwise eligible for Medicaid.

• **Objective 1:** Improving the access to and use of Medicaid family planning services by women who have received a Medicaid pregnancy related service.

During DY 20, 4,202 females accessed and utilized family planning and family planning related services compared to 4,485 in DY 19, a 6.3% decrease and a 57.6% overall decline between DYs 15 and 20.

• **Objective 2**: Improving the access to and use of Medicaid family planning-related services by women and men who are not otherwise eligible for Medicaid.

During DY 20, 37,219 women and men were enrolled in the FPW demonstration compared to 29,001 in DY 19, a 28.3% increase and a 20.1% overall decline between DYs 15 and 20, as depicted in chart 2 below.

Of the 37,219 women and men enrolled, 13,223 had at least one family planning or family planning related service encounter during DY 20, compared to 14,352 in DY 19, a 7.8% decrease in service utilization, and a 57.8% decline between DYs 15 and 20, as depicted in chart 2 below. FPW utilization continues to trend downward compared to previous demonstration years.

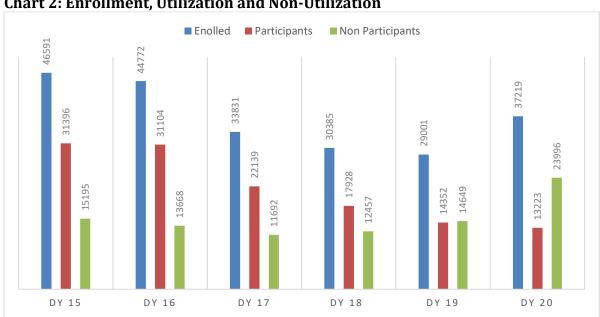
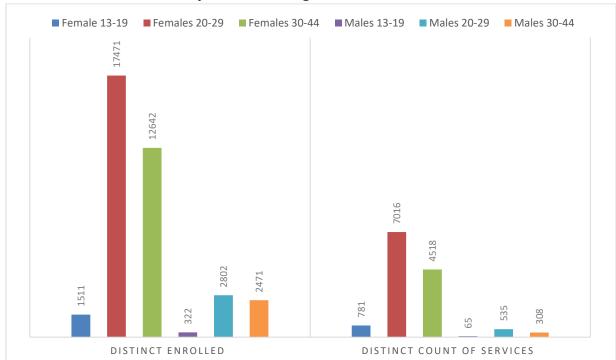


Chart 2: Enrollment, Utilization and Non-Utilization

Source: MESA Cognos: Report 3 COE29 who received FPW service report

**Measure/Outcome:** The number of females and males by age group utilizing FPW services. During DY 20, 35.5% of FPW enrollees utilized family planning services and family planning-related services compared to 50.2% in DY 19, a 18.3% decrease. Chart 3 depicts the number of females and males by age group that utilized FPW services.



**Chart 3:** Number Enrolled by Gender and Age and Utilization of FPW Services

Source: Source: MESA Cognos: Report 3 COE29 who received FPW service report

**Measure/Outcome:** The number of beneficiaries by county of residence. Chart 4 depicts enrollment by county for DY 20. The counties with the highest enrollment in the FPW demonstration include Hinds, Harrison, Jackson, DeSoto, and Lauderdale and Washington.

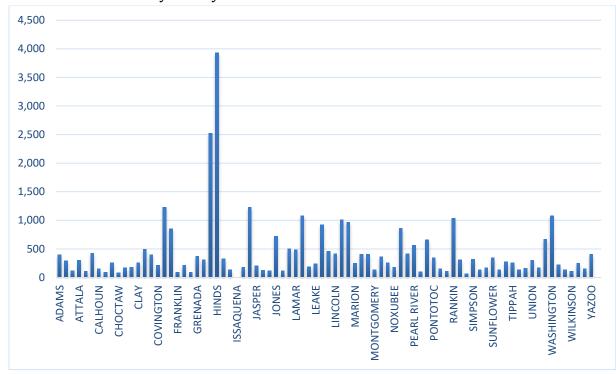


Chart 4. Enrollment by County of Residence

(Source: MESA Cognos WO214317 FPW Enrollment)

Measure/Outcome: The number of FPW beneficiaries by race. Chart 5 depicts the number of FPW beneficiaries by race during DY 20.

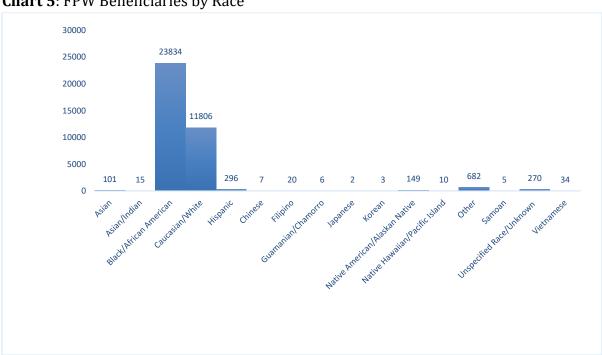


Chart 5: FPW Beneficiaries by Race

(Source: MESA Cognos Report 3 COE 029 who received FP service by race and gender

**Measure/Outcome:** The number of female and male sterilizations. During DY 20, 3 females and 1 male selected sterilization as a permanent method of contraceptive to prevent pregnancy, compared to 14 females in DY 19, a 78.6% decrease and 1 male in DY 19, no change in comparison to the previous DY.

(Source: MESA Cognos Report W0100650 Refreshable by Procedure and DOS Paid and Denied COE 029).

**Measure/Outcome**: The number of females who utilized a contraceptive method in the year. During DY 20, 5,331 FPW female beneficiaries utilized a contraceptive method compared to 5,094 in DY 19, a 4.7% increase in contraceptive utilization and a 64.8% overall decline between DYs 15 and 20.

(Source: MESA Cognos Drug Utilization by DOS, PTC, COE, PB 500 & WO100650

**Measure/Outcome**: The number of female beneficiaries who utilized a long-acting reversible contraceptive (LARC) method. During DY 20, 253 females enrolled in the FPW demonstration utilized a LARC method to prevent pregnancy, compared to 326 in DY 19, a 22.4% decline in utilization and a 78.8% overall decline in LARCs between DYs 15 and 20.

(Source: MESA Cognos Report Drug Utilization by DOS, PTC, COE, Plan ID 500 & WO100650 Procedures)

**Note:** This substantial downward trend in contraceptive method utilization among FPW beneficiaries is the result of the decline in the number of beneficiaries auto enrolled in the FPW. During the PHE, postpartum women maintained their full coverage category and were not changed to a limited coverage category. In DY 15, there were 31,396 participants compared to 13,223 in DY 20, which is a 57.9% decrease in participants.

**Measure/Outcome:** The number of beneficiaries tested for any sexually transmitted disease (STD). During DY 20, 4,883 FPW beneficiaries received testing for STDs, compared to 6,042 in DY 19, a 19.2% decrease in STD testing. Of the 4,883 beneficiaries tested for STDs, 3,057(62.6%) had a claim for a STD related drug/treatment.

(Source: MESA Cognos Report Pharmacy claim count of those beneficiaries in COE 029 with a claim for a STD, or STI

**Measure/Outcome:** The number of female beneficiaries who obtained a cervical cancer screening. During DY 20, 1,743 female beneficiaries were screened for cervical cancer, compared to 2.394 in DY 19, a 27.2% decrease in cervical cancer screening and a 45.2% overall decline between DYs 15 and 20.

(Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams).

Measure/Outcome: The number of female beneficiaries who received a clinical breast exam. During DY 20, 1,187 female FPW beneficiaries received a clinical breast exam compared to 1,641 in DY 19, a 27.7% decrease in clinical breast exams and a 22.4% overall decline between DYs 15 and 20.

(Source: MESA Cognos Report Number of beneficiaries tested for STDs, Pap Smears, and Breast Exams).

**Evaluation Question:** Do beneficiaries maintain coverage long-term (12 months or more)?

**Measure/Outcome:** The number of beneficiaries who completed one spell of 12month coverage. During DY 20, 25,817enrolled beneficiaries completed one spell of 12-month period of coverage, compared to 25,743 in DY 19, a 0.3% increase. (Source: MESA Cognos Report WO214317 FPW Enrollment).

**Measure/Outcome.** The number of beneficiaries re-enrolled for at least a second spell of coverage. During DY 20,9,377 of FPW beneficiaries reenrolled and/or maintained coverage long-term compared to 12,458 in DY 19, a 24.7% decrease from the previous year.

(Source: MESA Cognos Report WO214317 FPW Enrollment)

**Evaluation Question:** Does the demonstration improve health outcomes?

Goal 2: Improve or maintain health outcomes for the target population as a result of access to family planning and family planning-related services.

• **Objective 3:** Improving birth outcomes (e.g., low birthweight) and health of women in the demonstration population.

Measure/Outcome: The number of low-birthweight babies born to FPW beneficiaries. During DY 20, 37 low-birthweight babies were born to FPW beneficiaries compared to 90 in DY 19, a 58.9% decrease from the previous year and a 43.1% overall decrease between DYs 15 and 20.

(Source: MESA Cognos Report WO200480 Early Pre-term Births and LBW).

**Measure/Outcome:** The number of premature babies born to FPW beneficiaries. During DY 20, 24 premature babies were born to FPW beneficiaries, compared to 39 in DY 19, a 38.5% decrease from the previous year and an 33.3% overall decrease between DYs 15 and 20.

(Source: MESA Cognos Report WO200480 Early Pre-term Births and LBW).

• **Objective 4:** Increasing the child spacing interval among female FPW enrollees.

**Measure/Outcome:** The number of FPW females with a second pregnancy less than 18 months of a previous birth. During DY 20 there were 19 reported FPW female beneficiaries with a claim indicating a second pregnancy less than 18 months of a previous birth compared to no reported second pregnancies in DY 19 or DY 18.

(Source: MESA Cognos Report 2 088 to 029 then gave birth 18 months after 029).

• **Objective 5:** Reducing the number of unintended pregnancies among women enrolled in the FPW.

**Measure/Outcome:** The number of unintended pregnancies among females 13-44. During DY 20, there was one unintended pregnancy reported among FPW females. There was no change from the previous demonstration years 19 and 18 of one reported unintended pregnancy.

(Source: MESA Cognos Report W0214317 Termination of Pregnancy).

• **Objective 6:** Reducing overall pregnancy among teenage women in the demonstration population.

**Measure/Outcome**: The number of pregnancies to FPW females ages 13-19. During DY 20, 29 FPW females ages 13-19 became pregnant, compared to 30 in DY 19 and, a 3.3% decrease from the previous year, and an 84.9% overall decline between DYs 15 and 20.

(Source: MESA Cognos Report 4 Count of beneficiaries from COE 029 to 088 and 088 to 029).

• **Objective 7:** Reducing the number of repeat births among teenage women in the demonstration population.

**Measure/Outcome:** The number of FPW females ages 13-19 with a repeat birth. During DY 20, there were 25 repeat births among FPW females ages 13-19 compared to 35 in DY 19, a 28.6% decrease from the previous year, and an 80.9% overall decrease between DYs 15 and 20.

(Source: MESA Cognos Report 5 gave birth twice 13-19).

**Evaluation Question:** Are beneficiaries satisfied with services?

During each FPW demonstration year, DOM uses a survey to evaluate FPW enrollees'/participants' satisfaction with the services offered through the FPW demonstration. A subpopulation of FPW beneficiaries is surveyed to determine the impact of the FPW demonstration. Due to unforeseen circumstances, there has been a delay in mailing the satisfaction surveys for FPW Demonstration DY 20. We anticipate these to be mailed late March or April of 2024. The surveys can then be assessed throughout the year for the next reporting period of the Annual Report. At the end of the FPW demonstration a total of all surveys for the end of the waiver will be compiled and assessed for the final summation report.

**Table 11: FPW Survey Outcomes** 

	#Surveys #Surveys		#Surveys	Response Rate
DY18	Mailed 3515	Undeliverable 560	Returned 104	3%
DY19	3612	522	48	1.3%
DY 20	0	0	0	0

(Source: FPW Survey) The evaluation design was not approved in time to conduct surveys prior to DY 18.)

The following measures were unable to be completed due to unforeseen circumstances:

**Measure/Outcome:** Number of respondents who accessed family planning services and family planning related services in the past 6 months.

Measure/Outcome: Number of respondents who were pleased with the care received.

**Measure/Outcome:** Number of respondents who reported they received an appointment for care (FPW) as soon as they needed too.

**Evaluation Question:** Does the demonstration reduce the number of Medicaid deliveries?

#### Goal 3: Increase the overall savings attributable to providing family planning services.

• **Objective 8:** Decreasing the number of Medicaid deliveries, which will reduce the annual expenditures for prenatal, delivery, and newborn services.

Measure/Outcome: The number of Medicaid deliveries. During DY 20, the total number of Medicaid deliveries was, 24,477 compared to 24,744 in DY 19, a 1.1% decrease in Medicaid deliveries. The total number of women ages 13-44 enrolled in Medicaid was 260,005 which is 9.4% of Medicaid deliveries among women ages 13-44 years enrolled in State Plan Medicaid.

(Source: MESA Report W013740 Women Enrolled in Medicaid)

In comparing the FPW Medicaid deliveries to the State Plan Medicaid deliveries for age 13-44, there was an 8.3% variance in the number of Medicaid deliveries for female not enrolled in the FPW.

The number of FPW Medicaid deliveries. During DY 20, the number of FPW Medicaid deliveries was 348 compared to 587 in DY 19, a 40.7% decrease from previous year, and an 89.1% overall decline among FPW beneficiaries between DYs 15 and 20 (Source: MESA Cognos Report Demonstration Years W0230817)

Table 12 Paid Deliveries for FPW Beneficiaries

	Cost of FPW Medicaid Deliveries	FPW Births	Average Cost of Medicaid Funded Births <sup>1</sup>
DY 15	\$31,231,940.50	3,203	\$9,750.84
DY 16	\$26,054,612.80	2,788	\$9,345.27
DY 17	\$24,047,389.10	2,734	\$8,795.68
DY18	\$29,392,508.50	2,111	\$13,923.50
DY19	\$11,012,360.67	587	\$18,760.41
DY 20	\$6,611,297.04	348	\$18,997.98

(Source: MESA Cognos Report Demonstration Years W0230817)

**Objective 9:** Increasing the overall savings attributable to providing family planning services by covering women for one-year postpartum.

Measure/Outcome: Medicaid expenditures related to prenatal, delivery and newborn services. During DY 20, 10,389 women were enrolled in the FPW program for one-year postpartum. Of the 10,389 postpartum women enrolled, 1,456 had a claim indicating a pregnancy within the year and 8,933 postpartum women did not have a claim for pregnancy within the one-year postpartum period, attributing to a cost savings of \$169,708,955.34 based on the average cost of a Medicaid funded birth. (Source: MESA Cognos Report 4 Count of Beneficiaries from 029 to 088 and 088 to 029)

There were 24,477 Medicaid funded deliveries in Mississippi during DY 20. The total expenditures were \$465,013,649.60 related prenatal, delivery, postpartum and newborn services, including infant care 0-12 months.

(Source: MESA) Demonstration Years W0230817 Cost of Medicaid Funded Births; Report W013740 Women Enrolled in Medicaid)

**Note**: The decrease in the number of FPW births was impacted by the decline in the number of beneficiaries auto enrolled in the FPW. During the PHE, postpartum women maintained their full coverage category and were not changed to a limited coverage category.

<sup>&</sup>lt;sup>1</sup>Medicaid Funded Births includes expenditures for all Medicaid enrolled women ages 13-44 for prenatal, delivery, postpartum, and newborn services for infant care 0-12 months costs.