

# Required Family Planning Annual Report (FPAR) Tables

January 2024

### **FPAR Table 9, 13, 14**

- Along with CVR data, part of the reporting program requirements from NYSDOH and the federal Office of Population Affairs
- Required reports outside of client-level encounter data
- Tables
  - Table 9: Abnormal Cervical Cancer Screening Results
  - Table 13: Utilization of Clinical Services Providers
  - Table 14: Revenue report
- All for the calendar year Jan 1, 2023 Dec 31, 2023



#### **FPAR Table 9**

Report the following information on cervical cancer screening activities:

- Number of Pap tests with an ASC or higher result according to the 2001 Bethesda System.
- Number of Pap tests with an HSIL or higher result according to the 2001 Bethesda System.

SCREENING ACTIVITY		Number of Tests (A)
		BUDGET PERIOD 1/1/23 - 12/31/23
1	Number of Pap tests with an ASC or higher result	
2	Number of Pap tests with an HSIL or higher result	



#### FPAR Table 13

Report the following provider staffing data:

Number of full-time equivalent (FTE) family planning Clinical Services
 Providers, by type of provider.

TABLE 13

#### NUMBER OF FULL TIME EQUIVALENT (FTE) STAFF BY CLINICAL SERVICES PROVIDER TYPE

	CLINICAL SERVICES PROVIDER TYPE	Number of FTEs
		BUDGET PERIOD 1/1/23 - 12/31/23
1	Physicians	
2	Physician assistants/nurse practitioners/ certified nurse midwives	



#### **FPAR Table 14**

Report on all funding received/earned or anticipated to be received/earned and used to support activities provided within the scope of your NYS Family Planning Program services contract during the time period. This does not include revenue received in your contract base award or related additional amounts.

	i	Title X Budget Peri	od: 1/1/23 - 12/31/23	
Sub-Recipient Agency	Name:			
PAYMENT FOR SERVICES:			Agency name Select your agency	
Client Collections/Self-Pay ("Client Fees")		\$	name from the	
Third Party Payers			drop-down list.	
2. Medicaid (Title XIX) Managed Care [Pre-paid]		\$	-	
3. Medicaid (Title XIX) Fee-for-Service [Not Pre-paid]		\$	-	
Total M	edicaid	\$		-
4. Medicare (Title XVIII) Managed Care [Pre-paid]		\$	-	
5. Medicare (Title VIII) Fee-for-Service [Not Pre-paid]		\$	-	
Total Me	edicare	\$	-	
6. State Children's Health Insurance Program (CHIP) [Pre-paid]		\$	-	



### **2023 Annual Reports**

- Narrative Annual Report and CPEP Report due at the end of each year
  - Speak to the four main performance topics:
    - Access to Services
    - Clinical Quality
    - Administrative Capacity and Oversight
    - Community Engagement



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# NYS FPP Updated Report Templates

- Updated 2023 Annual Report Template and Community Participation Education and Promotion Report Template
  - See emailed attachments or access on the <u>NYSFPTC Resources page</u> under FPP Data Collection and Reporting

	New York State Department of Health Comprehensive Family Planning and Reproductive Health Program  2023 Annual Narrative Report				
year. If y the com	Report on activities that took place in the Family Planning Program during the 2023 calendar year. If you have any questions, contact your Program Manager for assistance. Please submit the completed report to the Family Planning Program mailbox: <a href="mailto:bwhfpp@health.ny.gov">bwhfpp@health.ny.gov</a> by February 14, 2024.				
Agency Name o	Name:  f Person Completing the Report:				
1) Pro	ogram Structure & Staffing				
a)	Describe any challenges that your program encountered and what actions were taken to address those challenges. What assistance can DOH provide to help you overcome/work through these challenges?				



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# **2023 CPEP Report Updates**

Minor changes to the CPEP template:

**Question 7.** Describe your process for operating the Information & Education (I&E) Committee and incorporating community voice into your work. Please include the number of individuals on your committee, how they represent your community, how often they meet, how they review the materials and any committee goals, challenges, and accomplishments this year.

**Question 11.** New Question: What challenges have you encountered when conducting in-person or virtual educational and outreach programming? What additional training opportunities and/or resources are needed to overcome these challenges?

Guidance Documents Available on the NYSFP Training Center Website FPP Implementation Tools



# **2023 Annual Report Updates**

**Section 2 Fiscal Sustainability Part C:** Describe your agency's process for developing and updating your schedule of discounts (SOD), including how you determine your full fee charges. How does the program ensure the SOD is applied appropriately so that patient fees are reasonable for their respective income (i.e., considering those who fall into the lower end of the next level of Federal Poverty Level), so that cost is not a real or perceived barrier to patients?

Section 5 Quality Improvement and Quality Assurance Activities: Describe how your agency collects patient experience surveys (Well IQ, Press Ganey, GoogleForm, other). How many total (or percentage of) patient surveys were collected in 2023? Please provide metrics on how clients rated the quality of FPP services and describe two examples of how you have/will incorporate this feedback. If able to, please send a copy of your patient survey as an attachment to your annual report.

**Section 7 Annual Updates Part B:** If your program experienced a security threat(s) and/or violence during the year, describe the incident(s) and how the program responded. What support do you need from DOH to help you prevent and/or respond to these incidents?

