

New York State Family Planning Program Annual Data and Narrative Reporting FAQ

This document presents common questions related to New York State Family Planning Program (NYSFPP) Family Planning Annual Report (FPAR) data reporting, the Annual Report, and Community Participation Education and Program Promotion (CPEP) Report. These questions were originally discussed during the January 14, 2025 webinar, [NYSFPP Annual Data and Narrative Reporting: Frequently Asked Questions and Live Q&A](#).

Required Family Planning Annual Report (FPAR) Tables

What data do NYSFPP-funded agencies report to NYSDOH for federal reporting requirements?

Each month NYSFPP-funded agencies report Client Visit Records (CVR) via Ahlers to NYSDOH. NYSDOH is able to prepare the majority of the required FPAR report from CVRs. In addition, FPAR Tables 9, 13, and 14 must be completed by NYSFPP-funded agencies and returned by email to bwhfpp@health.ny.gov and with the subject line: FPAR 2024.

What are Tables 9, 13, and 14 for?

Tables 9, 13, and 14 are required reports outside of client-level encounter data submitted via the CVR submissions to Ahlers. These tables are as follows:

- Table 9: Abnormal Cervical Cancer Screening Results
- Table 13: Utilization of Clinical Services Providers
- Table 14: Revenue Report

Instructions for each table were included in the email (Subject: "NYS Family Planning Provider: FPAR Data and Tables Due 1/15/2024") from 12/19/24 from bwhfpp@health.ny.gov. The resources can also be found on the New York State Family Planning Training Center website, [Provider Resources page](#) under FPP Data Collection and Reporting.

What were the updates made to the FPAR tables?

Table 9 now uses the 2014 Bethesda System for reporting cervical cytology (consistent with OPA's change). There were no changes made to the reporting of Table 13 or 14.

How should these tables be reported?

Data should be reported *in aggregate* i.e. one combined number for every contract funded through the NYSFPP.

What format should agencies send NYSDOH the required FPAR tables?

Send Table 9 and 13 to NYSDOH in a Microsoft Word document. Send Table 14 in Microsoft Excel. If data is sent in a different format, NYSDOH will request the information be re-submitted in the correct format.

What time range is the report for?

The report is for the calendar year, January 1, 2024 - December 31, 2024.

What should be reported in 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 2014 Bethesda System.
- Number of Pap tests with an HSIL or higher result according to the 2014 Bethesda System.

These numbers should be reported in aggregate across all NYSFPP funded clinics.

What should be reported in FPAR Table 13?

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

What should be reported in 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 the agency's NYSFPP services contract during the time period. This does not include revenue received in the contract base award or related additional amounts.

What if an agency is having trouble submitting accurate data?

NYSDOH is hopeful for a timely submission of FPAR data. If an agency has concerns about their ability to submit timely data, they should reach out to NYSDOH to coordinate.

What if an agency wants to report on a clinic that is not currently part of the FPP?

If an agency oversees a clinic that is not currently reporting family planning visits but sees family planning patients, the agency should reach out to their NYSDOH Program Manager to discuss the possibility of a Change of Scope.

Annual Narrative, and Community Participation Education and Program Promotion (CPEP) reports

What is the focus of the narrative Annual Report and CPEP Report?

These reports are due at the end of each year and they capture data related to the NYS FPP's four primary areas of performance: Access to Services; Clinical Quality; Administrative Capacity and Oversight; and Community Engagement. These reports are used when developing upcoming trainings and TA efforts. They are also used in narratives to federal funders and state-level leadership.

Where are the updated 2024 Annual Report and CPEP Report templates?

See emailed attachments (Sent January 14, subject line "NYS FPP 2024 Annual/CPEP/Q4 Reports / Due 1/31 & 2/14") from bwhfpp@health.ny.gov. Or download the attachments from the [Resources page of the NYSFPTC website](#) under FPP Data Collection and Reporting.

What were the updates made to the 2024 Annual Report?

New language was added to several questions:

- Question 1A: Agencies should highlight how they are recruiting and retaining staff that represents the community they serve.
- Question 1D: Agencies should highlight onboarding trainings or practices that support the delivery of culturally responsive, accessible and inclusive care.
- Question 5B: Agencies should highlight the impact of quality improvement/quality assurance activities on priority groups.
- Question 5C: Agencies should describe how clients rate their patient experience, including any ways these ratings differ by demographics. Agencies should send a copy of their patient satisfaction surveys to NYSDOH.

Two questions were edited for clarity:

- Question 1B: Agencies should ensure NYSDOH has current contact information.
- Question 2C: Agencies should describe how they determine full fee charges.

What were the updates made to the 2024 CPEP template?

New language was added to several questions:

- Question 3: Agencies should describe staff's ability to conduct outreach and educational activities that are accessible to priority populations.
- Question 6: Agencies should describe community partnerships that advance health equity.
- Question 7: Agencies should describe policies and practices that ensure members can equitably engage in the committee.
- Question 9: Agencies should highlight marketing that engages priority populations.

Should all of the information in the annual report be new, or can it include information from prior reports (ex. quarterly reports)?

Agencies should prioritize new information but can incorporate information provided previously to provide context and/or added detail.

Where can agencies find guidance on CPEP?

See the [Resources page of the NYSFPTC website](#) under FPP Implementation Tools.

Who should be filling out these reports?

Any role can fill out the CPEP and Annual Report, and it is encouraged that multiple staff contribute to the report to ensure the report is comprehensive and accurate.

Is there anything that should be elevated in a report?

Agencies should highlight work they are proud of, and especially work that advances health equity and reproductive justice.

What training is required for staff working in FPP-funded settings?

Please refer to the [NYSFPP Training Guidance Handout](#).