

STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Bureau for Public Health

Bill J. Crouch Cabinet Secretary Office of Maternal, Child and Family Health

Ayne Amjad, MD, MPH Commissioner & State Health Officer

INFORMATION UPDATE

To: Family Planning Program Clinic Administrators

From: Deena Ellison, Director

WV Family Planning Program

Date: August 20, 2021

Re: Program Changes and Updates

The West Virginia Family Planning Program (FPP) issues this Information Update to provide necessary guidance for program changes and updates.

WV Family Planning Program Guidelines

The FPP guidelines assist providers in defining family planning services, identify family planning clients, highlight the special needs of adolescent clients, serve as clinical protocols, and encourage the use of the family planning visit to provide selected preventive health services for clients, in accordance with the recommendations issued by the Institute of Medicine and adopted by the U.S. Department of Health and Human Services. Attached is an updated issuance of the guidelines, effective September 1, 2021, which includes changes to:

- SECTION 1.11.1 ORDERING SUPPLIES
 - New availability and instructions for ordering of pharmaceuticals and devices that are not included on the FPP formulary (provided on page 3 of this update).
- SECTION 2.3 QUALITY FAMILY PLANNING (QFP) RECOMMENDATIONS
 A new focus on a client-centered approach to counseling and education for contraceptive method selection.
- SECTION 2.4 STAFF TRAINING
 Update of staff training requirements change in requirement timeline, and addition of new Reproductive Health National Training Center (RHNTC) training requirements.
- SECTION 2.7 CLIENT ENROLLMENT, PATIENT CHARTS, AND FORMS

 Note that all mandatory program forms must be used for all clients who meet the definition of a

 Title X patient, regardless of pay source, and a change in the name of a mandatory program form.

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• SECTION 2.9 PROCEDURAL OUTLINE

Change in name of a mandatory program form (more information below).

- SECTION 3.2.2 INTIMATE PARTNER VIOLENCE Information on a CDC screening tool.
- SECTION 3.2.4 TOBACCO USE, E-CIGARETTE, AND VAPE Inclusion of vape use into this section.
- SECTION 3.2.6 DEPRESSION AND ANXIETY Inclusion of anxiety into this section and new information for both.
- SECTION 3.2.7 HEIGHT, WEIGHT, AND BODY MASS INDEX Inclusion of physical activity recommendations.
- SECTION 3.3.1 IMMUNIZATIONS RELATED TO REPRODUCTIVE HEALTH Inclusion of HPV information and updated information for age parameters.
- SECTION 3.5 CONTRACEPTIVE SERVICES

 Program form title change and a specific note that pelvic exams are not necessary before beginning most methods of contraception.
- SECTION 3.6 CONTRACEPTIVE METHODS

 Updated in the time of efficacy for Mirena and updated contraceptive definitions/descriptions.
- SECTION 4.3 MAMMOGRAPHY Updated information on the age parameters for testing.
- SECTION 5.1 CHARGES AND COLLECTIONS Changes to the Sliding Fee Scale information.
- SECTION 5.1.2 PROGRAM INCOME
 Changes to reporting information, including requiring specific federal reports annually.
- SECTION 5.2.2 PATIENT DATA FORM INSTRUCTIONS
- Change in name of a mandatory program form.

Memorandum of Understanding

In July 2003, the WV Family Planning Program (FPP) began use of a Memorandum of Understanding (MOU) format to establish and maintain agreements with partnering entities. A current MOU must be on file in order to continue participating with the FPP. Attached is an updated MOU which includes changes to program forms usage, training requirements, Patient Data Form submission requirements, and mandatory financial reporting. Please note the changes and complete the signature page in its entirety and return via email to Penny Fortner at penny.l.fortner@wv.gov by September 30, 2021.

Sliding Fee Scale

The FPP sends all clinics an annual Sliding Fee Scale each July which provides a schedule of discounts for individuals with family incomes between 101% and 250% of the Federal Poverty Level (FPL). Patients at or below 100% of the FPL should not be charged. The provider agency will be reimbursed the difference between the amount the client was charged and the FPP's maximum allowable charge for the service provided. This issuance of the Sliding Fee Scale also lists the fair market, or reasonable, cost of services for all patients over 250% of the FPL. This is the maximum amount that can be charged for any client who meets the definition of a Title X patient, regardless of pay source. This updated Sliding Fee Scale is effective September 1, 2021.

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Mandatory Program Forms

The FPP has changed the name of the "Basic Data Form" to the "Patient Information Form." It is still one of the mandatory program forms for the patient medical record which also include the Patient Data Form, Reproductive Life Plan, Client Education and Counseling Checklist, Medical History Form, Progress Notes and Order Sheet. The Patient Information Form has an updated layout, some changes in requested information, and notices of confidentiality, voluntary services, consent for services, and confidential services.

Off-Formulary Order Form

Clinics now have an option for ordering pharmaceuticals that are not available on the FPP formulary. If a patient requests, or the clinician determines, a pharmaceutical or device is needed, and it is not available through the FPP's regular stock, the Off-Formulary Order Form may be submitted to request the item(s). This form is submitted directly to the program instead of to the warehouse.

Supplies and pharmaceuticals stocked in the Materials Management warehouse must still be ordered using the Supply Request Form. Devices ordered for a different insertion provider must still be ordered using the Supply Referral Request Form. Please note, devices cannot be transported by either clinic staff or the patient. The 340B Drug Discount Program policy prohibits transporting devices via the patient due to chain of custody regulations. If a device is transported by a patient outside the control of clinic staff, it becomes impossible to provide assurance of efficacy. Damaged devices may also cause other harm to the patient, as well. All devices and pharmaceuticals must be shipped from the warehouse directly to the provider of service.

Upcoming

In the next few weeks, you will be receiving two surveys. One will have questions regarding your clinic information and knowledge of the program and the second will have questions regarding your interest in potential program activities. It is very important that you answer each of these so your information is updated, important training needs can be addressed, and your thoughts and opinions are included in program decisions.

If you have questions or concerns, please feel free to contact FPP staff at 304-558-5388 or dhhromcfhfamplan@wv.gov.

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