

FPAR Reporting Criteria:

A summary for Title X family planning
program directors.



Developed by TRAINING 3, Family Planning Council, Inc,
the DHHS Region III Family Planning Training Center .
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FPAR Reporting Criteria

Does the Program meet FPAR criteria?

(This is determined by the Grantee)

- ❑ The clinical or education project is described within the scope of the Grantee's approved grant application;
- ❑ The program service site(s) is a designated Title X site (e.g., site is included in the Grantee's approved application); and
- ❑ At least some of the encounters provided at the site(s) meet the requirements of a family planning encounter.

Does the Client meet FPAR criteria?

- ❑ The client had at least one *family planning encounter* in the reporting period. In other words, there was at least one visit where the purpose was to avoid an unintended pregnancy or achieve an intended pregnancy and therefore included clinical or educational services related to contraception, infertility, or sterilization as defined in the *Program Guidelines for Project Grants for Family Planning Services*.
- ❑ The client record documents the services provided and contains sufficient information to identify/contact the client and report all the required FPAR data elements.

Does the Encounter meet FPAR criteria?

- ❑ The encounter was face-to-face;
- ❑ Encounter/visit was provided at a Title X designated site;
- ❑ The encounter included clinical or education services described in the *Program Guidelines for Project Grants for Family Planning Services*;
- ❑ Laboratory services were accompanied by family planning education or counseling;
- ❑ The visit was reported as provided by a primary provider that meets the FPAR provider definition (e.g., Clinical Service Provider or a Non Clinical Services Provider); and
- ❑ There is a written record of the actual services provided during the encounter

Clients do not count in the FPAR if...

- *none of the visits in the reporting period were to avoid an unintended pregnancy or achieve and intended pregnancy, such as with State funded Breast and Cervical Cancer Screening Programs.*
- *the only encounter(s) were for stand alone laboratory services. Lab services alone do not constitute a family planning encounter.*
- *there was no formal record of service or not all required FPAR data was collected and reported.*
- *none of the encounters were face-to-face.*

REQUIRED FPAR DATA ELEMENTS

The following data elements are required for FPAR reporting. The grantee/delegate data systems and/or reporting documents must capture the following for all clients, as applicable:

Client Demographic Data Elements	Mechanism for Reporting (e.g. data form, CVR, internal report, etc.)
Client unique identifier (to count unduplicated users)	
Age	
Gender (male or female)	
Race (American Indian; Alaska Native; Asian; Black or African American; Native Hawaiian or other Pacific Islander; White; Unknown/Not Reported). <i>Note: client <u>must</u> be able to check more than one race on race collection form.</i>	
Ethnicity (Hispanic/Latino or Unknown/Not Reported)	
Income and Family Size (Used to determine the following income brackets: 100% FPL; 101%-150% FPL; 151%-200% FPL; 201%-250% FPL; over 250%; Unknown/Not Reported)	
Insurance coverage: Public health insurance covering primary care; Private health insurance covering primary care; Uninsured; Unknown/Not Reported	
Limited English Proficiency (yes or no)	

Client Service Data Elements	Mechanism for Reporting (e.g. data form, internal report, etc.)
Primary contraceptive method: <u>Females:</u> sterilization; IUD; hormonal implant; 1 month injection; 3 month injection; oral contraceptives; contraceptive patch; vaginal ring; cervical cap/diaphragm; contraceptive sponge; female condom; spermicides; FAM; abstinence; male condom; vasectomy; other method; method unknown; pregnant or seeking pregnancy; other reason for no method <u>Males:</u> vasectomy; male condom; FAM; abstinence; rely on female method; other method; method unknown; partner pregnant or seeking pregnancy, other reason for no method	
Pap test performed	
Pap test with ASC or higher result	
Pap test with HSIL or higher result	
Clinical breast exam received	
Referral for further evaluation from CBE	
Chlamydia test performed	
Gonorrhea test performed	
Syphilis test performed	
HIV test performed (anonymous)	
HIV test performed (confidential)	
HIV positive test results (confidential)	
Encounter by provider type (Clinical Services Provider; Non Clinical Services Provider)	

Other Required Reporting Elements	Mechanism for Reporting (e.g. data form, internal report, etc.)
Number of FTEs: Physicians PA/NP/CNM Other clinical services providers	
Total Amount of Federal Grants: Title X amount BPHC amount Other Federal grants amounts	
Total amount of client collections/self pay	
Total amount of collections from third party payers: Medicaid amount; Medicare amount; State CHIP amount; Other public health insurance amount Other private health insurance amount	
Total Other Revenue: Title V amount; Title XX amount; TANF amount; Local government grants and contracts amount; Other amounts	

Optional FPAR Reporting	Mechanism for Reporting (e.g. data form, internal report, etc.)
Private health insurance has Coverage for all or some family planning services Coverage for no family planning services Coverage unknown for family planning services	