

# Office of Family Planning

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## Information & Education Program Orientation August 18, 2011

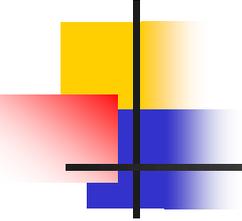
Laurie Weaver, Chief  
Office of Family Planning  
California Department of Public Health



# Welcome!

- Office of Family Planning
- ETR
- UCSF
- I&E Grantees



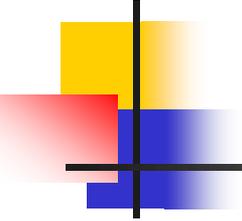


# Office of Family Planning

## OFP Programs

- Family PACT (Family Planning, Access, Care & Treatment) Program
- Teen Pregnancy Prevention Program (TPP)
  - Personal Responsibility Education Program
  - Information & Education Program



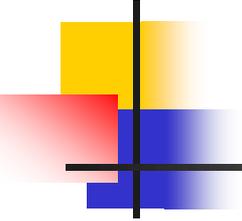


# California's Budget 2011-12

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- Family PACT ~ no changes
- TPP ~ big changes ...
  - Redirection of \$20 M in TANF funding to Cal WORKS
  - \$6.5 M in Title V funding appropriated for PREP in FFY 10/11
  - \$2 M in Title XIX and State General Fund (50/50) for I&E





# Family PACT 1115 Waiver

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## Family PACT 1115 Waiver – Demonstration Project 12/1/99 -11/20/04

- Extended 12/1/04 through 3/31/11
- Negotiations with CMS resulted in:
  - Eligibility Criteria; No Upper Age Limits & Medical Necessity (at risk of pregnancy or causing pregnancy)
  - Minor eligibility; Excludes parental income
  - Retroactive Eligibility for New Family PACT Clients
- SPA approved March 24, 2011



# So...What Is A SPA??

- Family Planning State Plan Amendment (SPA) authorized in Section 2303 of the Affordable Care Act (“Health Care Reform”)
- Based upon success of federal “1115 family planning waivers” in 27 states
- Contraceptive and family planning services available to persons not eligible for Medicaid (Medi-Cal)
- Optional for states to choose to convert to SP (or not); may convert existing 1115 Waiver to SP (or not)
- Programs operate side-by-side with Title X grants
- CMS released guidance (7/10) but not final regulations



# Family Planning SPA: Client Eligibility

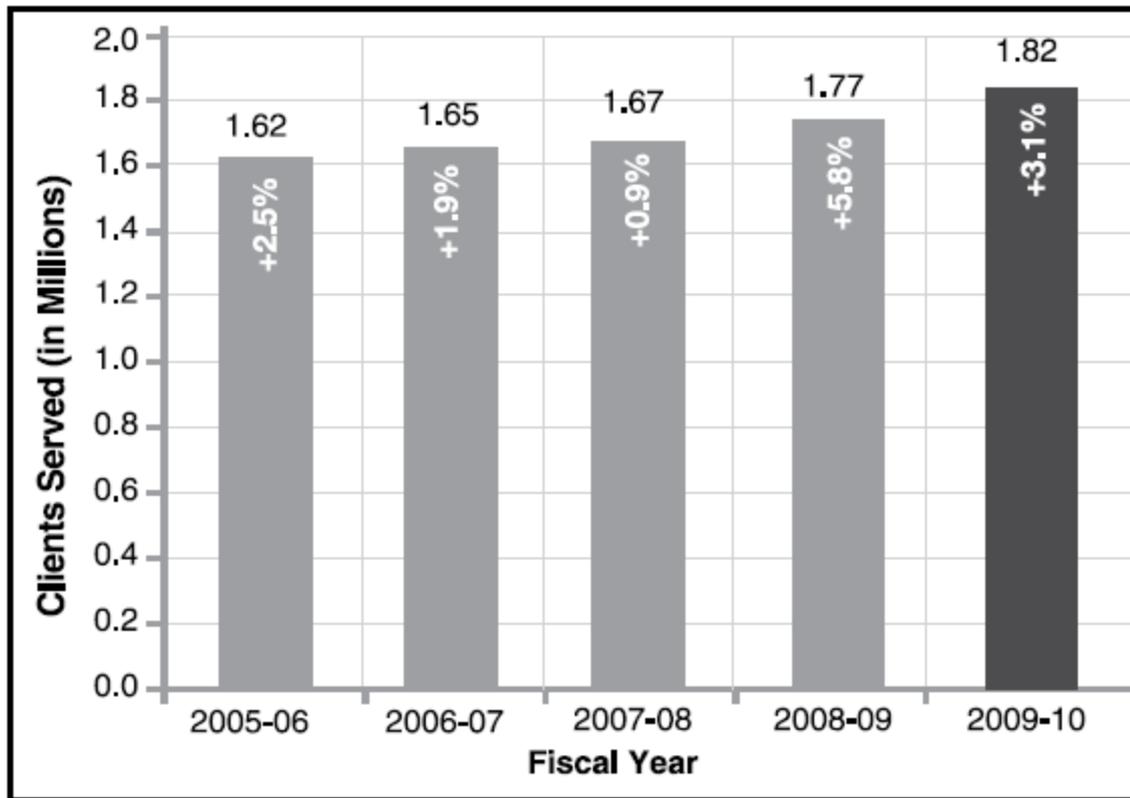
- Both women and men of all ages must be covered
- Medicaid rules relating to citizenship and immigration
  - California exercised option to keep eligibility as it existed on January 1, 2007



# Family PACT Annual Report FY09/10

## Growth in Number of Clients Served (in Millions)

Trend in Number of Clients Served by Family PACT



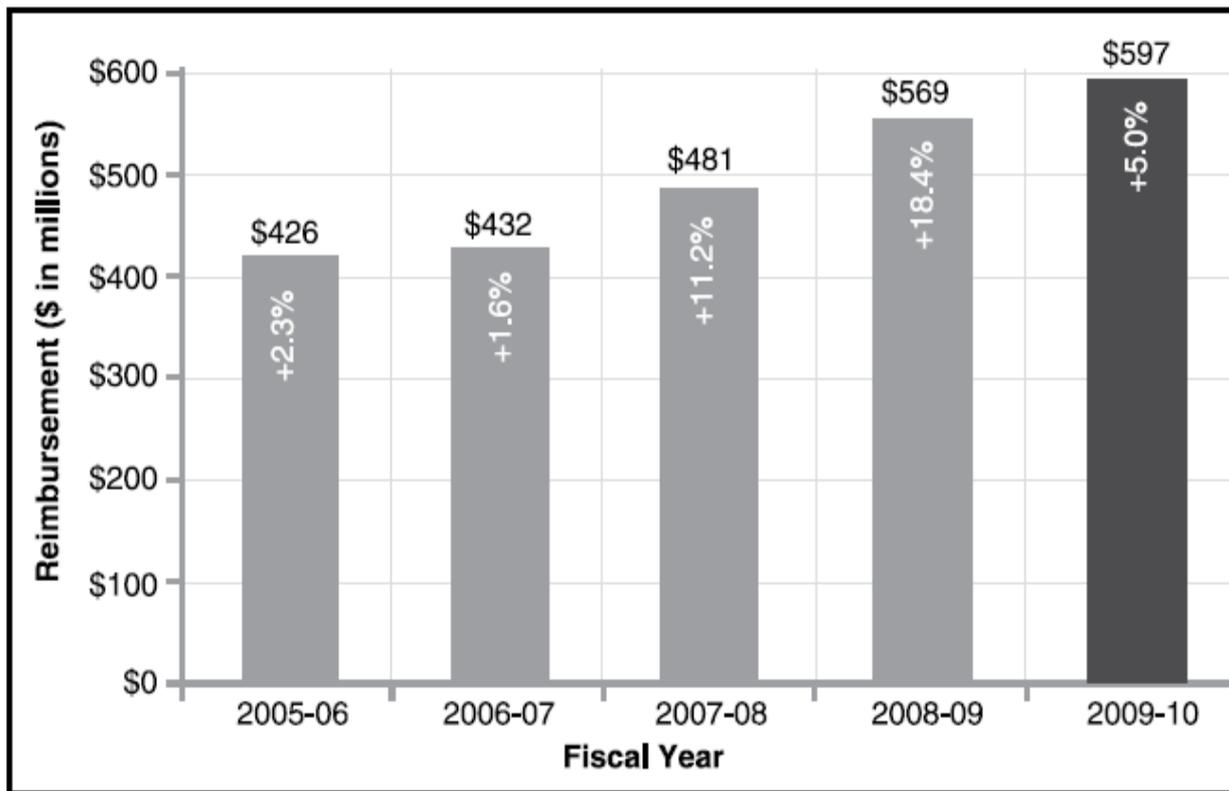
Bixby Center for Global Reproductive Health. University of California, San Francisco. *Family PACT Program Report, FY 09/10*. Sacramento, CA. 2011.



# Family PACT Annual Report FY09/10

## Total Reimbursement (in Millions of Dollars)

Total Provider Reimbursement for Family PACT Services



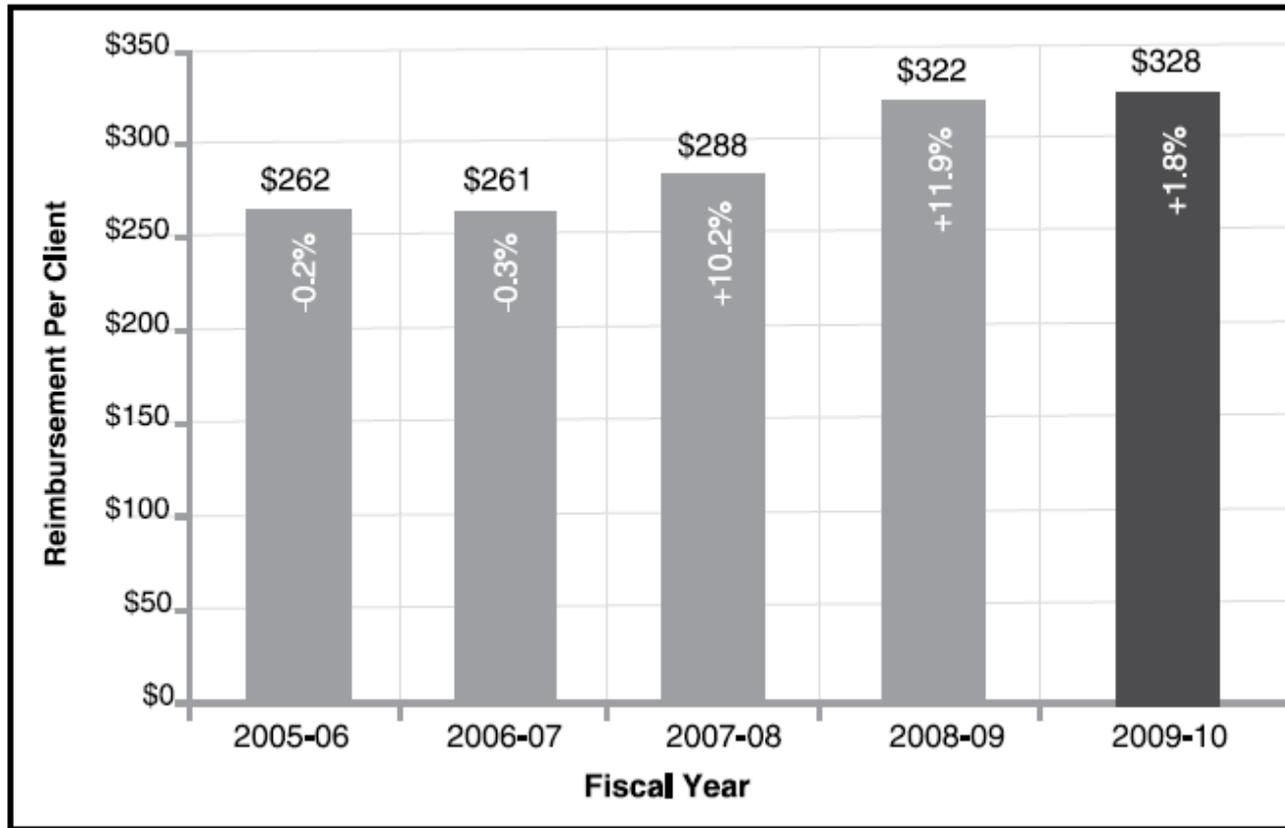
Bixby Center for Global Reproductive Health. University of California, San Francisco. *Family PACT Program Report, FY 09/10*. Sacramento, CA. 2011.



# Family PACT Annual Report FY09/10

## Average Reimbursement per Client

Average Reimbursement per Family PACT Client Served



Bixby Center for Global Reproductive Health. University of California, San Francisco. *Family PACT Program Report, FY 09/10*. Sacramento, CA. 2011.



# Demographic Profile of Clients Served

Total Number of Clients Served	FY 2008-09		FY 2009-10	
	No.	% <sup>d</sup>	No.	% <sup>d</sup>
<b>By Sex</b>				
Female	1,538,291	87%	1,571,497	86%
Male	227,265	13%	249,353	14%
<b>By Age</b>				
<18	129,223	7%	124,677	7%
18-19	184,892	10%	182,850	10%
20-24	504,386	29%	518,129	28%
25-29	367,329	21%	381,506	21%
30-34	235,041	13%	241,661	13%
35-39	160,535	9%	167,553	9%
40-44	101,386	6%	110,112	6%
45-49	58,101	3%	64,558	4%
50-54	20,714	1%	24,741	1%
55-60	3,949	0%	5,063	0%
Missing/Unknown	1	NA		
<b>By Ethnicity</b>				
Latino	1,125,088	64%	1,145,308	63%
White	361,181	20%	377,724	21%
African American	108,952	6%	116,519	6%
API <sup>a</sup>	114,033	6%	121,190	7%
Other & Native American	56,300	3%	60,106	3%
Missing/Unknown			3	NA
<b>By Primary Language</b>				
Spanish	789,437	45%	774,782	43%
English	909,812	52%	978,335	54%
Other	66,305	4%	67,730	4%
Missing/Unknown	2	NA	3	NA
<b>By Income</b>				
0-50% of FPG <sup>b</sup>	765,130	43%	837,964	46%
>50-100% of FPG	590,875	33%	613,321	34%
>100-150% of FPG	312,601	18%	272,968	15%
>150-200% of FPG	96,947	5%	96,590	5%
Missing/Unknown	3	NA	7	NA
<b>By Family Size</b>				
1 person	880,973	50%	936,352	51%
2 to 4 persons	696,482	39%	697,978	38%
5 or more person	188,098	11%	186,513	10%
Unknown	3	NA	7	NA
<b>By Parity<sup>c</sup></b>				
none	743,867	48%	777,002	49%
1 birth	284,149	18%	282,919	18%
2 births	258,999	17%	259,220	17%
3-9 births	250,043	16%	251,236	16%
Missing/Unknown	1,233	NA	1,120	NA

Bixby Center for Global Reproductive Health. University of California, San Francisco. *Family PACT Program Report, FY 09/10*. Sacramento, CA. 2011.



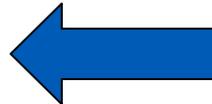
**a** Asian and Pacific Islander.  
**b** Federal Poverty Guideline, formerly Federal Poverty Level.  
**c** Includes females only.  
**d** Percentages may not add to 100% due to rounding.



# Change in the Number of Clients Served by Sex, Age and Race/Ethnicity

Change in the Number of Clients Served by Sex, Age and Race/Ethnicity

	FY 05/06		FY 06/07		FY 07/08		FY 08/09		FY 09/10	
	No.	Change over Previous Year								
<b>Total</b>	1,622,709	2.5%	1,653,719	1.9%	1,668,896	0.9%	1,765,556	5.8%	1,820,850	3.1%
<b>Males</b>	183,781	4.3%	196,176	6.7%	197,945	0.9%	227,265	14.8%	249,353	9.7%
<b>Females</b>	1,438,928	2.3%	1,457,543	1.3%	1,470,951	0.9%	1,538,291	4.6%	1,571,497	2.2%
<b>Adolescents<sup>a</sup></b>	307,535	0.3%	305,244	-0.7%	305,061	-0.1%	314,115	3.0%	307,527	-2.1%
<b>Adults</b>	1,315,174	3.1%	1,348,474	2.5%	1,363,835	1.1%	1,451,441	6.4%	1,513,323	4.3%
<b>Latino</b>	1,046,764	2.6%	1,071,068	2.3%	1,072,676	0.2%	1,125,088	4.9%	1,145,308	1.8%
<b>White</b>	324,587	1.8%	329,757	1.6%	337,391	2.3%	361,181	7.1%	377,724	4.6%
<b>African American</b>	97,467	4.5%	98,566	1.1%	101,133	2.6%	108,952	7.7%	116,519	6.9%
<b>API<sup>b</sup></b>	105,606	1.7%	104,880	-0.7%	106,447	1.5%	114,033	7.1%	121,190	6.3%
<b>Other/Native American</b>	48,285	3.4%	49,447	2.4%	51,249	3.6%	56,300	9.9%	60,106	6.8%



<sup>a</sup> Age 19 and under.

<sup>b</sup> Asian and Pacific Islander

Source: Family PACT Client Enrollment and Claims Data

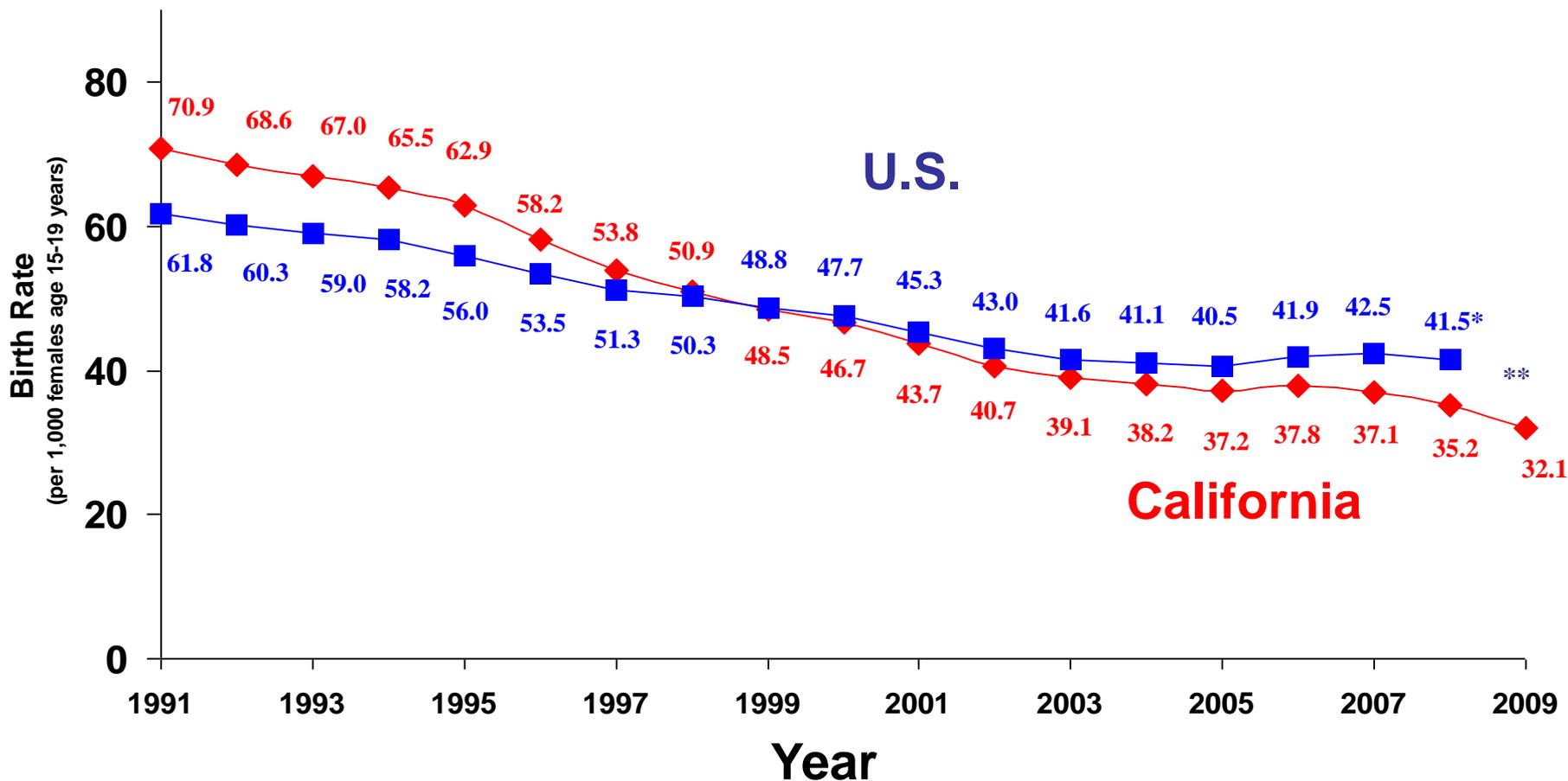


# The Family PACT Program is Cost-Saving!

- **Compared to a previous cost-benefit analysis conducted in 2002, cost avoidance nearly doubled in 2007**
  - Increased public sector cost per pregnancy
  - More pregnancies averted per client
  - Decreased Family PACT expenditures per client
- **Family planning services are not *merely* cost effective, they are cost saving. “Return on investment” is \$9 and change for every dollar invested.**



# California and U.S. Teen Birth Rates, 1991-2009

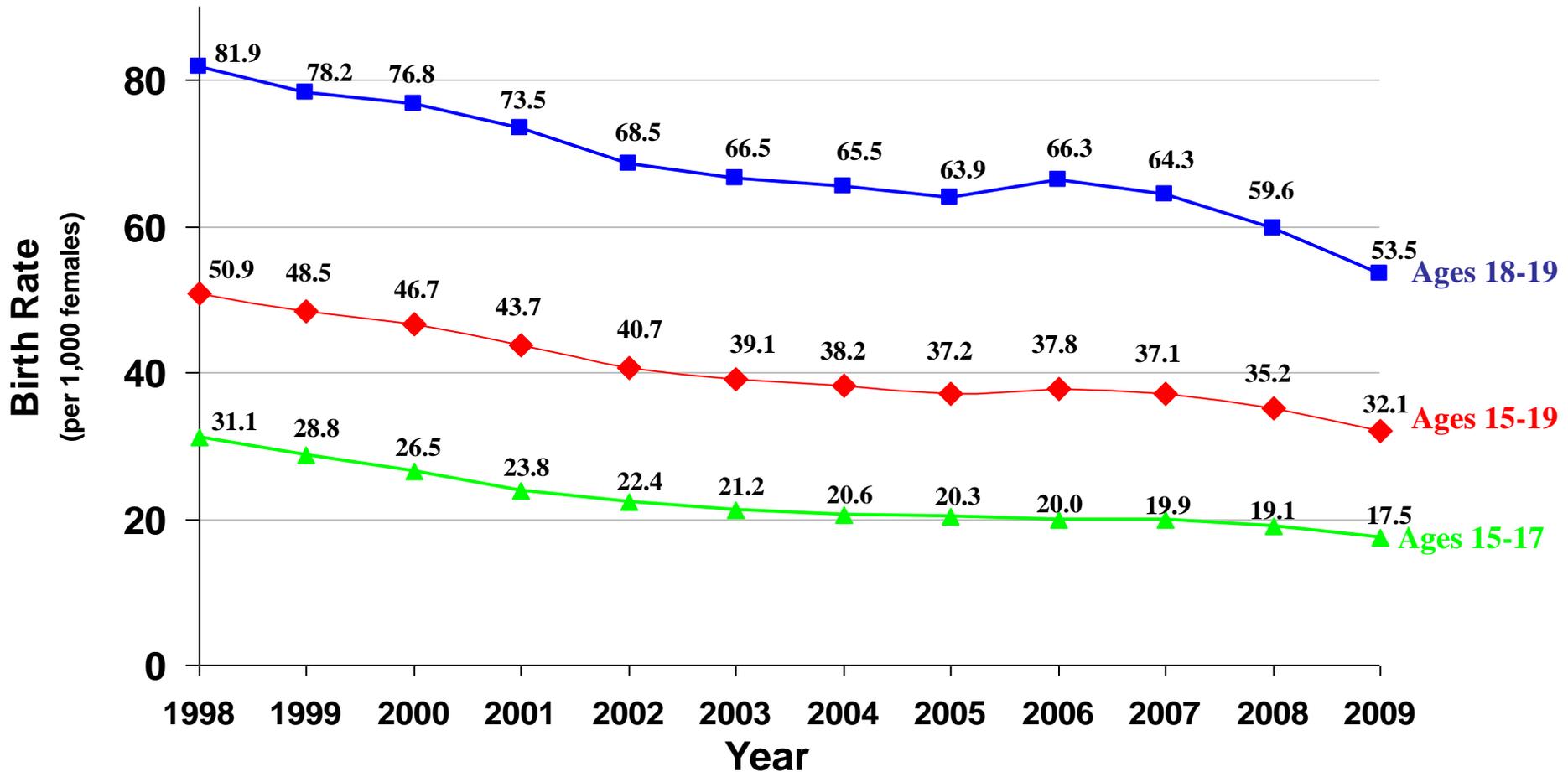


Sources: Teen births: Birth Statistical Master File, years 1991-2009, Office of Health and Information Research. Teen population: Years 1991-1999, State of California, Department of Finance, *Race/Ethnic Population with Age and Sex Detail, 1990-1999*. Sacramento, CA, May 2004. Years 2000-2009, State of California, Department of Finance, *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, July 2007. U.S. data sources: years 1991-2007 - National Vital Statistics Report, Vol. 58, No. 24, August, 2010; year 2008 - Births: Preliminary data for 2008. National Vital Statistics Report, Vol. 58 No. 16, April, 2010. \*U.S. data for 2008 is preliminary. \*\*U.S. data for 2009 is not available.

Prepared by: California Department of Public Health, Center for Family Health, Office of Family Planning, August, 2010.



# California Teen Birth Rates, 1998-2009

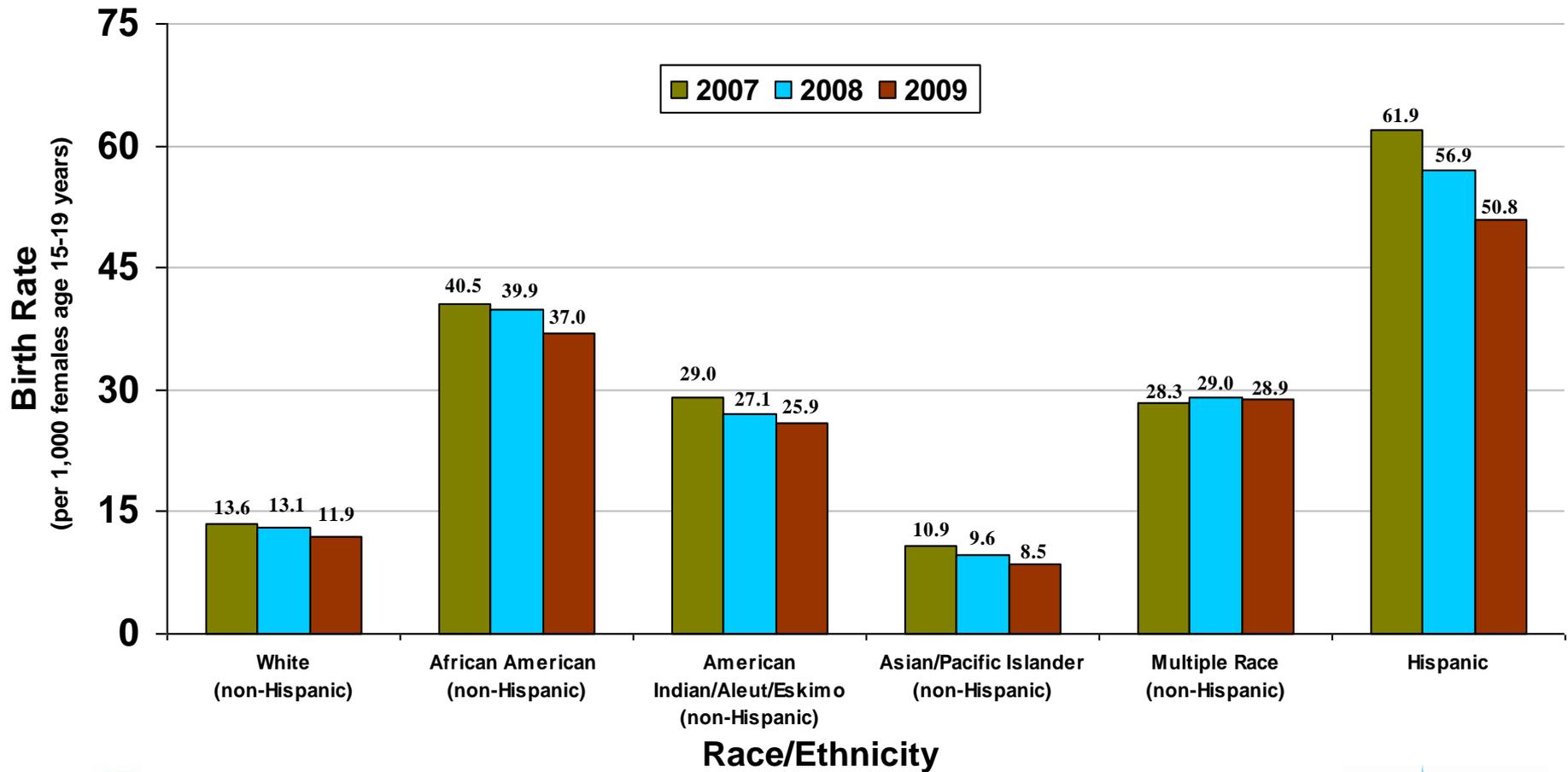


Sources: Teen births: Birth Statistical Master File, years 1998-2009, Office of Health and Information Research. Teen population: Years 1998-1999, State of California, Department of Finance: *Race/Ethnic Population with Age and Sex Detail, 1990-1999*. Sacramento, CA, May 2004. Years 2000-2009, State of California, Department of Finance: *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, July 2007.

Prepared by: California Department of Public Health, Center for Family Health, Office of Family Planning, August, 2010.



# California Teen Birth Rates by Race/Ethnicity & Year, 2007-2009



Sources: Teen births: Birth Statistical Master File, years 2007-2009, Office of Health and Information Research. Teen population: State of California, Department of Finance: *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, July 2007, years 2007-2009. Births to mothers identified as "other" or "unknown" race are excluded from the analysis. For 2007 they comprised 0.98% of teen births, 1.1% in 2008 and 1.2% in 2009.

Prepared by: California Department of Public Health, Center for Family Health, Office of Family Planning, August 2010.



# 19 California Counties With 3-Year Average Teen Birth Rates\* Significantly HIGHER Than the 3-Year Average State Teen Birth Rate, 2007-2009\*\*, Highest to Lowest

- Kern (62.8)
- Tulare (62.1)
- Kings (59.5)
- Madera (57.7)
- Imperial (55.5)
- Monterey (54.8)
- Fresno (54.4)
- Merced (51.0)
- Glenn (45.3)
- San Bernardino (44.6)
- Colusa (44.6)
- Del Norte (44.4)
- Tehama (43.1)
- Santa Barbara (42.3)
- Yuba (41.9)
- Lake (41.8)
- San Joaquin (41.6)
- Stanislaus (40.6)
- Riverside (39.0)

Sources: Teen births: Birth Statistical Master File, years 2007-2009, Office of Health and Information Research. Teen population: State of California, Department of Finance: *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, July 2007.

\*Teen birth rate is per 1,000 females age 15-19 years. \*\*The number of teen births and the teen female population for 3 years (2007-2009) were combined to produce more stable rates. County rates were tested for statistical significance against the state rate after subtracting the county's contribution to the rate. County rates not statistically significantly different from the remaining state rate include Inyo, Mendocino, Modoc, Sacramento, San Benito, Santa Cruz, Shasta, Siskiyou, Sutter, Trinity, and Ventura. Stable rates could not be computed for Alpine and Sierra (fewer than 20 births).

Prepared by: California Department of Public Health, Center for Family Health, Office of Family Planning, August, 2010.



## 26 California Counties With 3-Year Average Teen Birth Rates\* Significantly LOWER Than the 3-Year Average State Teen Birth Rate, 2007-2009\*\*, Highest to Lowest

- Los Angeles (33.9)
- San Diego (33.1)
- Solano (29.5)
- Humboldt (28.3)
- Lassen (27.8)
- Butte (27.6)
- Tuolumne (26.5)
- Orange (25.7)
- Alameda (25.7)
- Napa (24.9)
- Santa Clara (23.8)
- Sonoma (23.2)
- San Francisco (22.2)
- Amador (21.6)
- Contra Costa (21.4)
- Calaveras (21.4)
- Plumas (21.2)
- San Mateo (20.9)
- Yolo (20.6)
- San Luis Obispo (20.0)
- Mariposa (19.6)
- Mono (16.7)
- El Dorado (16.0)
- Nevada (14.5)
- Placer (13.5)
- Marin (12.0)

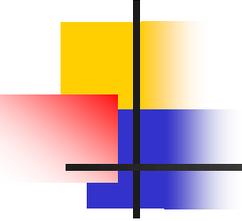
Sources: Teen births: Birth Statistical Master File, years 2007-2009, Office of Health and Information Research. Teen population: State of California, Department of Finance: *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, July 2007.

\*Teen birth rate is per 1,000 females age 15-19 years. \*\*The number of teen births and the teen female population for 3 years (2007-2009) were combined to produce more stable rates. County rates were tested for statistical significance against the state rate after subtracting the county's contribution to the rate. County rates not statistically significantly different from the remaining state rate include Inyo, Mendocino, Modoc, Sacramento, San Benito, Santa Cruz, Shasta, Siskiyou, Sutter, Trinity, and Ventura. Stable rates could not be computed for Alpine and Sierra (fewer than 20 births).

Prepared by: California Department of Public Health, Center for Family Health, Office of Family Planning, August, 2010.







# 2009 California Teen Birth Rates (females age 15-19 years)

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In California in 2009, there were 3,893 fewer teen births than if the 2008 teen birth rate had remained the same.

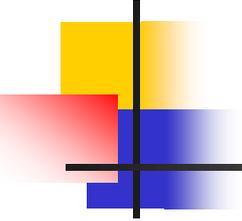
These 3,893 fewer teen births saved California taxpayers over \$112 million.



Source for costs: Public Health Institute's Spring 2010 *No time for Complacency* Method for Calculating Rates and Estimating Taxpayer and Societal Cost which is based on the 2008 update of the *Kids having kids* (2nd ed.) by Hoffman and Maynard. Taxpayer costs include tax revenue costs on parents' income and consumption, public assistance direct and administrative costs such as welfare and medical assistance, costs for increased foster placement and incarceration of children, and tax revenue costs based on children's incomes and consumption when they reach young adulthood compared to costs for 20-21 year old mothers. This estimate used the 2004 original cost and adjusted for inflation using the U.S. Bureau of Labor Statistics Consumer Price Index inflation calculator.

Prepared by: California Department of Public Health, Center for Family Health, Office of Family Planning, August 2010.





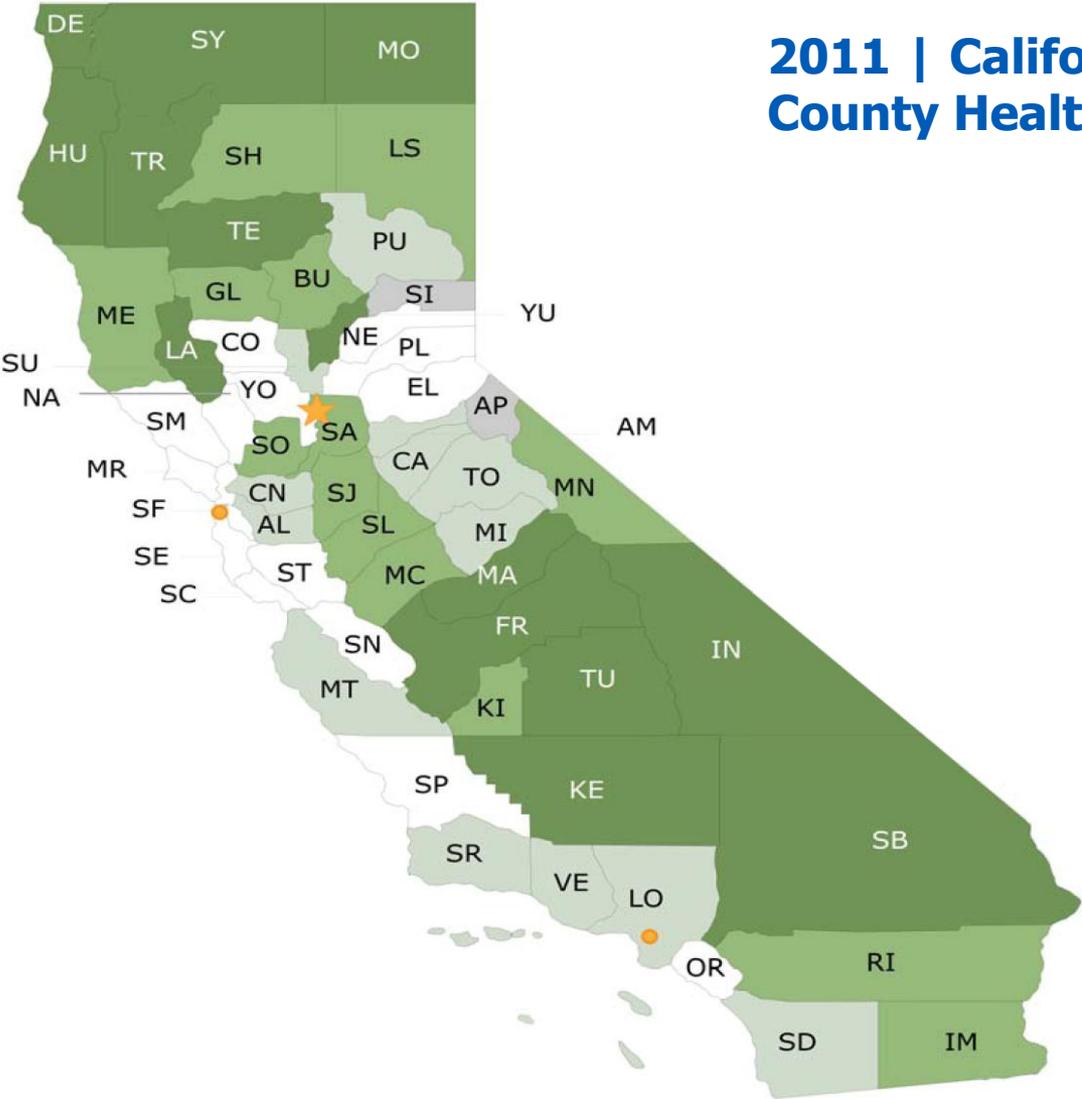
# County Health Data

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- 2011 County Health Rankings
- 2007-2009 Teen Birth Rates
- 2009 STI Rates
- 2006-07 Access to Publicly-Funded Family Planning Services
- 2009-10 Family PACT Data
- Cost-Benefit by County



# 2011 | California County Health Rankings



Rank 1-14	Rank 15-28	Rank 29-42	Rank 43-56	Not Ranked
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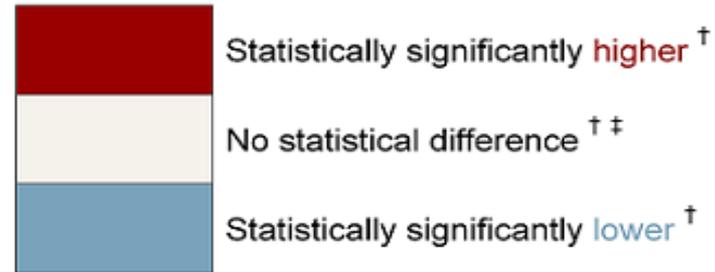


Source: University of Wisconsin Population Health Institute. County Health Rankings 2011.  
 Accessible at [www.countyhealthrankings.org](http://www.countyhealthrankings.org).

# Teen Birth Rate\* by County, 2007-2009\*\*



In Comparison to California



- \* Number of births per 1,000 females ages 15-19.
- \*\* Three years of teen data (births and population counts) were combined to produce more stable rates.
- † After subtracting the county's contribution to the state rate.
- ‡ Or too few births to produce a stable rate (Alpine & Sierra).

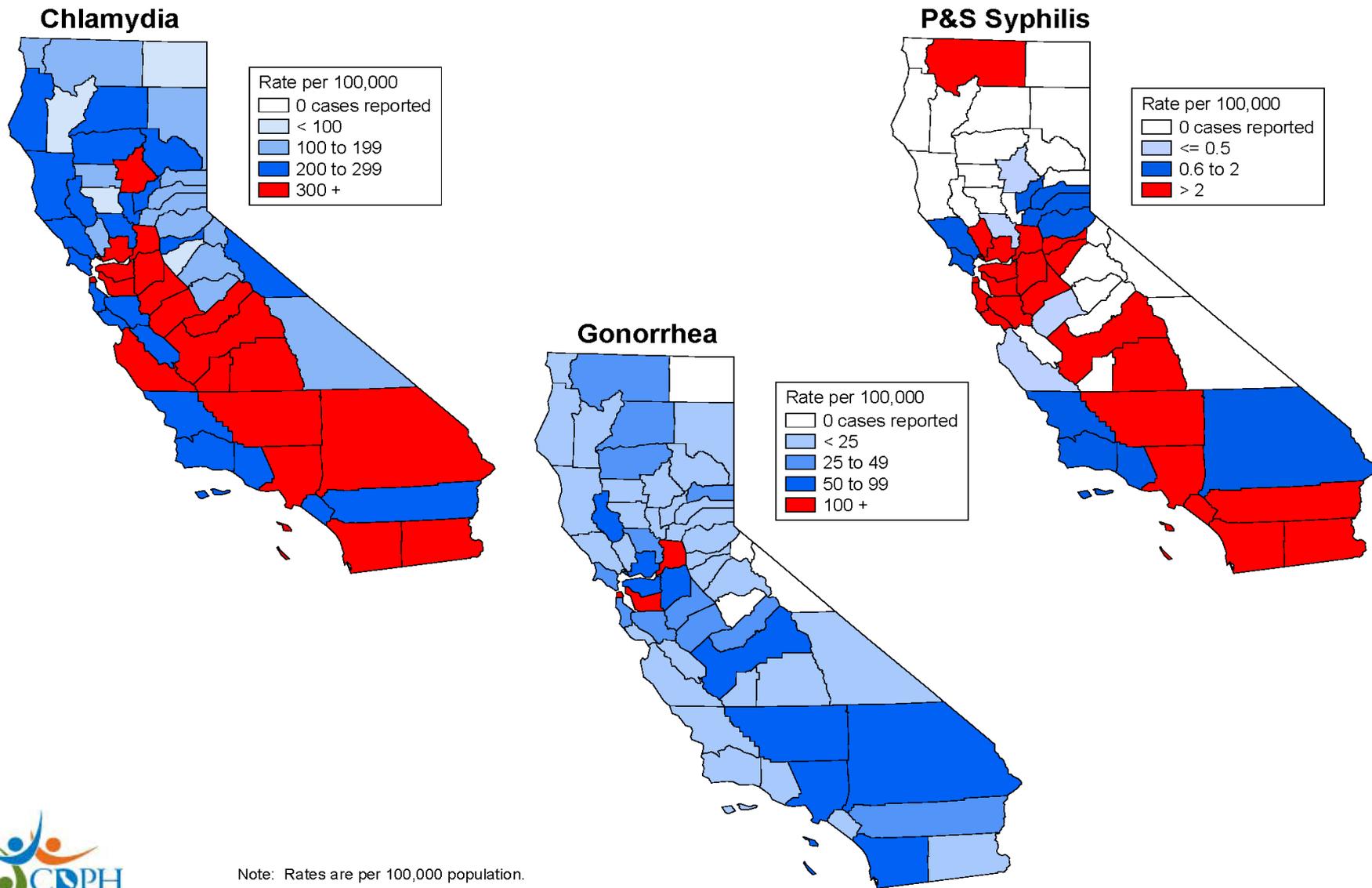


Sources: Birth Statistical Master Files, 2007-2009, Office of Health and Information Research. Teen population: Years 2007-2009, State of California, Department of Finance: *Race/Ethnic Population with Age and Sex Detail, 2000-2050*. Sacramento, CA, July 2007.

Prepared by: The Bixby Center for Global Reproductive Health, University of California, San Francisco, for California Department of Public Health, Center for Family Health, Office of Family Planning, August, 2010.



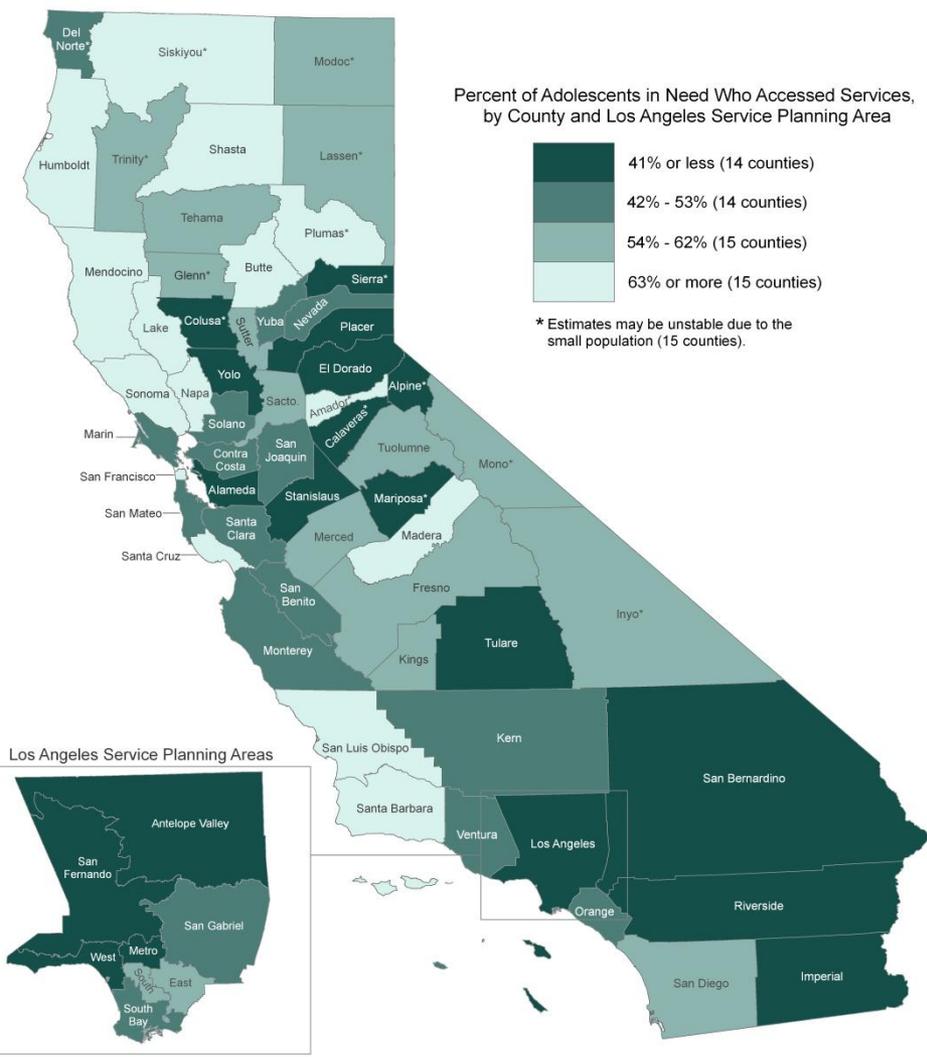
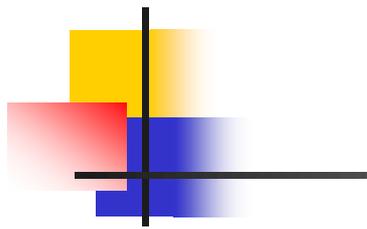
# California – Chlamydia, Gonorrhea, and P&S Syphilis Rates by County, 2009



Note: Rates are per 100,000 population.

Source: California Department of Public Health, STD Control Branch

## Access to Publicly-Funded Family Planning Services<sup>a</sup> Among Adolescent Women Ages 15-19 at Risk of Unintended Pregnancy<sup>b</sup>



<sup>a</sup> Publicly-funded family planning services are provided by Medi-Cal and the Family PACT Program.  
<sup>b</sup> Includes all sexually experienced adolescent women regardless of parental income.



# 2009-10 Family Pact Annual Report Data

- County Populations
- County Growth Rates
- Client Demographics
- Provider Sector
- Reimbursement Patterns
- Access to Contraceptive Services



# Cost-Benefit by County



Bixby Center  
for Global  
Reproductive  
Health

UCSF

University of California San Francisco

## Prevention of Unintended Pregnancies in California

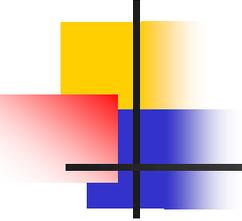
CALIFORNIA CONGRESSIONAL DISTRICTS

October 2010

**In 2007, Family PACT's contraceptive services averted 286,700 unintended pregnancies among its female clients,**

**The Family PACT (Planning, Access, Care and Treatment) Program** was established by the California legislature in 1996 and implemented in 1997 to provide family planning and reproductive health services at no cost to California's low-income residents of reproductive age. Since December 1999, the federal government has provided additional funding for the program. The program offers family planning services including contraception, sterilization, and pregnancy testing. Additionally, reproductive health services such as testing and treatment for specific sexually transmitted infections and limited cancer screening services are available. The program does not provide pregnancy care or abortion-related services. By serving California residents at or below 200 percent of the federal poverty level and with no other source of coverage for family planning services, Family PACT fills a critical gap in health care. Family PACT's provider network includes both public and private clinician providers. This unique provider mix increases access to services and improves client choice.



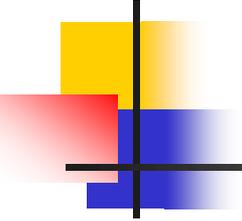


# Dollars and Sense!

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- Unintended pregnancy places an enormous fiscal burden on federal, state and local tax dollars
- The financial consequences of unintended pregnancy are over **4** times the cost of prevention
- Investments in prevention pay huge dividends!





# California's Challenges

## Many California adolescents remain in need of family planning services

- Vast disparities in access across the state
- Increased demand for family planning and reproductive health services due to population growth
- Competition for limited resources



# Access to Family Planning Services is Critical

- Develop a comprehensive referral network for family planning services
- Meet regularly with Family PACT provider staff to ensure services are “teen friendly” and accessible (e.g. Saturday Teen Clinics)
- Encourage Family PACT providers to ask clients “How did you hear about our services?” and to share this data with you.



# It's a New Day!

- I&E Program Funding Title XIX/SGF
- Repeal of Administrative Relief
- Split of Department of Health Services
- The Economy
- Loss of Funding Steams
- Reduction in CA's Teen Birth Rate
- Data, Data, Data



# Diffusion of Innovations Theory

- **Diffusion of Innovations Theory** addresses how new ideas, products, and social practices spread within an organization, community, or society, or from one society to another.
  - Stages of Innovation: Knowledge, Persuasion, Decision, Implementation, Confirmation
  - Characteristics: Relative advantage, Compatibility, Complexity, Trialability, Observability
  - Adopter Categories and Rate of Adoptions
    - (1) Innovators – 2.5%
    - (2) Early adopters – 13.5%
    - (3) Early majority – 34%
    - (4) Late majority – 34%
    - (5) Laggards – 16%
  - Roles: Opinion leaders, Change agents, Change aids



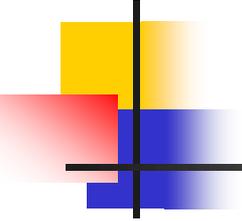
<http://www.youtube.com/watch?v=fW8amMCVAJQ>



# WORDS MATTER!!!

- OFP responsibilities
  - Be clear
  - Be concise
  - Ask questions to ensure understanding
- Grantee responsibilities
  - Be clear
  - Be concise
  - Ask questions to ensure understanding





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**The difference between the almost  
right word and the right word is  
really a large matter— it's the  
difference between the lightning bug  
and the lightning.**

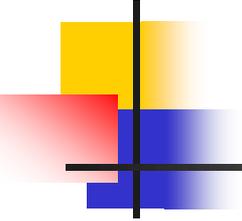
*Mark Twain*



# Take Home Messages

- Use data to leverage support in your community!
- It's a new day!
- Words Matter!
- Be a family planning champion!
  - Ensure access to family planning services!





# Got Questions??

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- Office of Family Planning
  - 916-650-0414
  - Email [ofpmailbox@cdph.ca.gov](mailto:ofpmailbox@cdph.ca.gov)
- Laurie Weaver
  - [laurie.weaver@cdph.ca.gov](mailto:laurie.weaver@cdph.ca.gov)

Thank you for participating!

