

North Carolina
Department of
Health and Human Services
Division of Medical Assistance

North Carolina
Be Smart Family Planning Waiver
Waiver Year Three
Interim Annual Data Analysis Report

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**North Carolina Family Planning Waiver
Waiver Year Three Interim Data Analysis Report**

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Summary

In July 2007, Navigant Consulting, Inc. provided the North Carolina Department of Health and Human Services (DHHS) with a Baseline Fertility Report that established the baseline fertility rates for the Family Planning Waiver. This interim annual data analysis report provides an update to the Baseline Fertility Report provided to DHHS last year. In this report we provide estimates of the Waiver Year Three enrollment, participation, fertility rate and the budget neutrality cost savings calculation. This report was required to be completed two months after the end of Waiver Year Three; therefore, claims from Waiver Year Three that have not been submitted or paid as of October 16, 2008 are not reflected in this analysis. We chose not to project Waiver Year utilization because the claims data represented all 12 months of the year.

We used the following data to estimate results for Waiver Year Three:

- Participant claims data for dates of service from October 1, 2007 through September 30, 2008.
- Prenatal, delivery and postnatal claims data for the most recent 12 months of participation, for the period from September 2007 through August 2008. Deliveries that would result from participation during Waiver Year Three would begin to occur during the second quarter of 2008. Due to the limited availability of birth data for Waiver Year Three, we will include birth data from Waiver Year Two to predict costs based on a full 12-month period.
- Enrollment data from October 1, 2007 through September 30, 2008.

We used the above data to estimate results for fertility and budget neutrality. The results provided in this report are preliminary estimates for Waiver Year Three. We will update these analyses in the Waiver Year Three Annual Report when data for services through the end of Waiver Year Three are available.

The enrollment data file provided a complete listing of Waiver Year Three enrollees. The enrollment numbers for Waiver Year Three included any individual who was enrolled in the Family Planning Waiver for any period of time during Waiver Year Three. Enrollment figures that can be found in the Quarterly Narratives report the number of enrollees as of a certain date or at a point in time. The enrollment number reported in this report will be higher than a point in time count of enrollees because it will include an accumulation of individuals who begin or end enrollment during the period of October 1, 2007 through September 30, 2008, rather than only those individuals enrolled on a given day.

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Through our analysis of Waiver Year Three of North Carolina's Be Smart Family Planning Waiver, we observed the following:

- The State enrolled 46,160 females and 7,407 males in Waiver Year Three. This represents a 9.3 percent enrollment rate for women from an estimated 497,223 potential female enrollees across the State and a 1.8 percent enrollment rate for men from an estimated 415,694 potential male enrollees.¹ Compared to Waiver Year Two, enrollment rates increased for females and decreased slightly for males.
- The number of men and women eligible for the Family Planning Waiver in Waiver Year Three decreased by 1.3 percent and 1.8 percent, respectively, compared to Waiver Year Two. At the same time, there was an increase in the percentage of women enrolled in the Waiver program and a slight decrease in the percentage of men enrolled in the Waiver program.
- Among the Waiver's enrollees, we estimated that the Waiver provided services to 16,905 females and 156 male participants during Waiver Year Three. The participation rates were 36.6 percent among women and 2.1 percent among men. Compared to Waiver Year Two, participation rates decreased for females (from 38.4 percent to 36.6 percent) and increased for males (from 1.7 percent to 2.1 percent).
- We projected that the Be Smart Family Planning Waiver would be budget neutral for Waiver Year Three with respect to federal expenditures. We projected that the reduced costs associated with an estimated 1,302 – 1,327 averted births for Waiver Year Three would offset the costs of the Waiver by an estimated \$12.8 million to \$13.2 million.
- The Family Planning Waiver expenditures were \$5.3 million for Waiver Year Three, October 1, 2007 to September 30, 2008.
- We reviewed the types of providers who served participants in Waiver Year Three. We found the most common provider specialty was health departments. Appendix A provides a summary of the number and location of provider specialties that provided services to Family Planning Waiver participants during Waiver Year Three.

¹ We used the American Community Survey (ACS) 2007 data to estimate counts of potential enrollees.

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In the sections that follow, we report our Waiver Year Three estimates for enrollment, participation, fertility rate and the budget neutrality cost savings calculation.

Enrollment and Participation Rate Updates

We used the enrollment file provided by the Division of Medical Assistance (DMA) on November 7, 2008, to count the number of individuals with an enrollment period that overlapped with Waiver Year Three. We included in the counts for Waiver Year Three, individuals who began enrollment in Waiver Years One and Two and continued to be enrolled in Waiver Year Three. Also, we counted anyone with an enrollment period that began in Waiver Year Three. We reported the unique count of individuals who met these criteria in the enrollment numbers reported for Waiver Year Three.

Finally, we reviewed the types of providers who served participants in Waiver Year Three. We counted the number of visits to each provider by county. We found the most common provider specialties were health departments, hospitals and the physician specialties of obstetrics and gynecology and general family practice. Appendix A provides a summary of the number and location of provider specialties that provided services to Family Planning Waiver participants during Waiver Year Three.

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Objective C.1.1: Short-term Outcome – Increase the number of eligible men and women enrolled.

Measure Definition: Unduplicated count of clients enrolled divided by unduplicated count of eligible clients.

Hypothesis: Increased proportions of eligible men and women will be enrolled in the Waiver each year.

Data Sources: MMIS Claims and enrollment files; American Community Survey (ACS)

Calculation: We calculated the unduplicated count of enrollees in the Waiver from MMIS as a percentage of estimates of eligible clients from ACS.

Annual Results: The following tables show the measure results for all women and men in the age category that defines eligibility and by five age categories.

Table C.1.1.1: Female Enrollee Rate, by Waiver Year

	Waiver Year 1	Waiver Year 2	Waiver Year 3	Waiver Year 4	Waiver Year 5
19 – 55	5.2%	8.2%	9.3%		
19 – 39	7.6%	12.0%	13.3%		
Age Category					
19 – 24	11.7%	17.3%	19.4%		
25 – 29	8.1%	12.4%	14.8%		
30 – 34	5.0%	8.4%	10.1%		
35 – 39	3.7%	6.3%	6.2%		
40 – 55	1.4%	2.1%	2.3%		

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Table C.1.1.2: Male Enrollee Rate, by Waiver Year

	Waiver Year 1	Waiver Year 2	Waiver Year 3	Waiver Year 4	Waiver Year 5
19 – 60	1.3%	1.9%	1.8%		
19 – 39	1.7%	2.6%	2.4%		
Age Category					
19 – 24	2.0%	3.0%	2.4%		
25 – 29	1.7%	2.6%	2.6%		
30 – 34	1.7%	2.4%	2.6%		
35 – 39	1.3%	1.9%	2.0%		
40 – 60	0.8%	1.0%	1.0%		

Discussion: The numbers we report for this measure are actual results for Waiver Year Three. The enrollment numbers that we report for Waiver Year Three include any individual who was enrolled in the Family Planning Waiver for any period of time during Waiver Year Three.²

The enrollment rate among women of all ages was 9.3 percent, or 46,160 enrollees of 497,223 women eligible in North Carolina. The enrollment rate among women ages 19 – 39 was 13.3 percent, or 41,983 enrollees of 314,640 women eligible in North Carolina. The enrollment rate was highest for the youngest age category, 19 – 24 year old women. We overstated the number of eligible women in North Carolina because this estimate of 497,223 women includes women who are pregnant and women who cannot become pregnant: neither group would qualify for family planning Waiver services.³ We provided the enrollment rate for 19 – 39

² This number will be higher than a point in time count of enrollees because it will include individuals who begin or end eligibility during the period of October 1, 2007, through September 30, 2008, rather than just those individuals eligible on a given day.

³ The data available through the American Community Survey from 2007, used to estimate the eligible population in North Carolina, does not allow us to separate fertile, non-pregnant women from women who might be pregnant or who might be infertile. Therefore the estimate of the eligible female population is overstated because it includes women who would not qualify for the Family Planning Waiver.

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year olds to show that there was a higher enrollment rate for women who we would expect to have higher fertility rates.

The enrollment rate among men of all ages was 1.8 percent, or 7,407 enrollees of 415,694 men eligible in North Carolina.⁴ The enrollment rate among men ages 19 – 39 was 2.4 percent, or 5619 enrollees of 231,872 men eligible in North Carolina. The enrollment rate was highest for 30 – 34 year old men.

Evaluation: We observed a decrease in the number of men and women eligible for the Family Planning Waiver in Waiver Year Three, as compared to Waiver Year Two. We also observed a decrease in the population of potential eligibles based on the population data extracted from ACS for 2007. At the same time, there was an increase in the percentage of women enrolled in the Waiver program and a slight decrease in the percentage of men enrolled in the Waiver program, which may suggest a need to investigate options to increase enrollment among men. In Waiver Year Three, there was an increase of 11 percent in the number of women enrolled and decrease of six percent in the number of men enrolled.

⁴ The data available through the American Community Survey from 2007, used to estimate the eligible population in North Carolina, does not allow us to separate fertile men from men who might be infertile. Therefore the estimate of the eligible male population is overstated because it includes men who would not qualify for the Family Planning Waiver.

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Objective C.1.2: Short-term Outcome – Increase the number of women receiving services.

Measure Definition: Unduplicated count of enrollees receiving services in the last 12 months (participants).

Hypothesis: More low-income women who are enrolled in the Waiver will receive family planning services.

Data Source: MMIS Claims

Calculation: We divided the count of female participants by the count of female enrollees.

Annual Results: The following table shows the measure results for all women in the age category that defines eligibility and by five age categories.

Table C.1.2: Female Participation Rate, by Waiver Year

	Waiver Year 1	Waiver Year 2	Est. Waiver Year 3	Waiver Year 4	Waiver Year 5
19 – 55	37.7%	38.4%	36.6%		
Age Category					
19 – 24	45.0%	44.9%	40.5%		
25 – 29	39.4%	39.7%	39.8%		
30 – 34	33.2%	35.3%	33.8%		
35 – 39	28.6%	29.6%	29.4%		
40 – 55	18.2%	18.8%	21.7%		

Discussion: The numerator of Objective C.1.1, number of female enrollees, became the denominator of this measure. The participation rate among female enrollees was estimated to be 36.6 percent overall, or a projected 16,905 participants of the 46,160 female enrollees.

We note that this objective is measured in terms of the percentage of enrollees. A larger number of enrollees without a

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corresponding increased participation among them could cause this measure to fall rather than to rise.

Evaluation: Comparing Waiver Years Two and Three, we observed a decrease of two percent for the overall participation rate for females. For Waiver Year Three the number of female participants increased by six percent, as compared to Waiver Year Two.

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Objective C.1.3: Short-term Outcome – Increase the number of men receiving services.

Measure Definition: Unduplicated count of enrollees, participants and vasectomies.

Hypothesis: More low-income men who are enrolled in the Waiver will receive family planning services.

Data Source: MMIS Claims

Calculation: We divided the count of male participants by the count of male enrollees.

Annual Results: The first table shows the measure results for all men in the age category that defines eligibility and by five age categories. The second table shows the number of men who had a vasectomy.

Table C.1.3.1: Male Participation Rate, by Waiver Year

	Waiver Year 1	Waiver Year 2	Est. Waiver Year 3	Waiver Year 4	Waiver Year 5
19 – 60	1.8%	1.7%	2.1%		
Age Category					
19 – 24	0.8%	0.8%	1.3%		
25 – 29	3.1%	2.8%	2.1%		
30 – 34	3.1%	2.7%	3.4%		
35 – 39	2.5%	2.6%	3.3%		
40 – 60	0.8%	0.9%	1.6%		

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Table C.1.3.2: Number of Vasectomies, by Waiver Year

	Waiver Year 1	Waiver Year 2	Est. Waiver Year 3	Waiver Year 4	Waiver Year 5
19 – 60	27	54	34		

Discussion: The numerator of Objective C.1.1, number of male enrollees, became the denominator of this measure. The participation rate among male enrollees was projected at 2.1 percent overall, or a projected 156 participants of the 7,407 male enrollees. The male participation rate was highest for men in the 30 – 34 year age category. The 25 – 29 year age group was the only age group that did not see an increase in the participation rate compared to Waiver Year Two.

We counted 156 unique male participants compared to 130 male participants in Waiver Year Two.

The number of vasectomies in Waiver Year Three was 34 compared to 54 in Waiver Year Two. This means that 22 percent of the 156 male participants had a vasectomy.

The rate of male participation continues to be much lower than the rate of female participation.

We note that this objective is measured in percentage terms of enrollees. A larger number of enrollees without a corresponding increased participation among them could cause this measure to fall rather than to rise.

Evaluation: Although the overall rate of participation increased by only four tenths of a percent for males, we observed that the number of male participants increased by an estimated 20 percent. Based on our estimates, the number of vasectomies decreased by an estimated 37 percent as compared to Waiver Year Two; however, these data may be incomplete due to claims that might not be submitted or paid for Waiver Year Three.

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Review of Baseline Fertility Rate Calculations

Budget neutrality is determined by a formula that compares the reduced costs for health care services associated with a reduced fertility rate among Waiver participants, relative to a baseline fertility rate prior to the Waiver, against the increased costs for family planning services to Waiver participants.

The baseline fertility rate for potential Waiver participants in the budget neutrality formula must be calculated from public survey data about women in North Carolina and from the State’s MMIS claims data for all Medicaid participants.⁵ The baseline fertility rate cannot be calculated from data about the specific women who would have been potentially eligible, enrolled or participated in the Waiver during the baseline year, as these women cannot be identified prior to the year that the Waiver began.

The baseline fertility rate is calculated as the estimated number of births per 1,000 women who would have participated in the Waiver Program in North Carolina if the Waiver Program had been operating during calendar year 2003:

$$\text{Baseline fertility rate} = \frac{\text{Number of births to "participating women" in NC in 2003} * 1,000}{\text{Number of "participating women" in NC in 2003}}$$

We calculated the baseline fertility rate for all women below 185 percent of the FPL. Table 1 below shows the results of the baseline fertility rate calculation. As required in the evaluation plan for the Waiver, we present the fertility rates in age groups.

Table 1: Baseline Fertility Rate

Measure	Ages 19 – 24	Ages 25 – 29	Ages 30 – 34	Ages 35 – 39	Ages 40 – 55	Ages 19 – 55
Baseline Fertility Rate	154.8	157.9	61.2	31.1	3.31	78.1

The baseline fertility rate for the 19-55 age group means that approximately seventy—eight women out of every one thousand women in this age group, and below 185 percent of the FPL, had a live birth in 2003. Women in younger age groups tend to have a higher fertility rate.

⁵ An example of public survey data is the decennial census. We use other public survey data from the U.S. Bureau of the Census that are from sample surveys conducted in the years between the censuses.

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Waiver Year Three Fertility Rate and Cost Savings Estimates

Using the data that was available from Waiver Year Three, we present estimates of the Waiver Year Three fertility rate and cost savings. As described above, the fertility rate is the ratio of participant births to total participants. To develop the fertility rate estimate for Waiver Year Three, we used estimates of the total number of births by participants from Waiver Year Two and estimates of the total number of female participants from Waiver Year Three. We will update these analyses in the Waiver Year Three Annual Report upon the availability of data for services through the end of Waiver Year Three.

To project births, we had only three months of data available from Waiver Year Three, for the period from June 2008 through August 2008. Rather than simply projecting nine months of deliveries based on three months of data, we used a linear regression model (method of least squares) using data from Waiver Years Two and Three to develop a range of birth counts using two approaches:⁶

- Approach 1: Use most recent 15 months of deliveries, starting from June 2007 through August 2008.
- Approach 2: Use the last nine months of deliveries, starting from December 2007 through August 2008.

The results of our estimates provided us with a range of fertility rates and ultimately a range of the count of births averted and cost savings. Approach 1 provided the lower range of the estimates for births and fertility rate while Approach 2 provided the higher estimate of births and fertility rate.⁷ Estimates for averted births were higher for Approach 1 and lower for Approach 2. We report our range of estimates in Table 2 on the next page.

⁶ To assist us to validate the results of our two approaches, we also looked at an approach that we expected to provide results that fell within the range of Approach 1 and 2. We verified that using the last 12 months of deliveries, for the period from September 2006 through August 2007, provided results within the range of Approach 1 and 2.

⁷ Approach 1 provided lower estimates overall because it included months early in the Waiver that reflected lower rates of participation.

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Table 2: Summary of Waiver Year Three Fertility Rate and Averted Birth Estimates

	Baseline Fertility Rate (per 1,000)	Range of Estimated Annual Births by Participants	Estimated Total Participants	Range of Estimated Waiver Year 3 Fertility Rate (per 1,000)	Range of Estimated Averted Births Rate (per 1,000)	Range of Estimated Averted Births
All ages	n/a	796 – 821	16,905	n/a	78.5 – 77.0	1,302 – 1,327
19 – 24	154.8	450 – 468	8,057	55.9 – 58.1	96.7 – 98.9	779 – 797
25 – 29	157.9	231 – 237	4,405	52.4 – 53.7	104.2 – 105.5	459 – 465
30 – 34	61.2	76 – 80	2,235	34.1 – 35.6	25.6 – 27.1	57 – 60
35 – 39	31.1	32 – 33	1,300	24.3 – 25.4	5.7 – 6.8	7 – 9
40 – 55	3.31	4 – 7	908	4.0 – 7.9	0	0

The estimates of fertility rates for Waiver Year Three were generally lower compared to the results from Waiver Year Two. Overall, the decrease in fertility rates resulted in an increase in the estimate of averted births for Waiver Year Three, as compared to Waiver Year Two (1,204 averted births). The estimated Waiver Year Three fertility rate for the age group 40 – 55 was higher than the baseline fertility rate, which resulted in no births averted for this age group.

Since the overall estimate of averted births for Waiver Year Three was slightly higher than it was in Waiver Year Two, estimated cost savings were slightly higher in comparison to cost savings in Waiver Year Two (\$12.4 million). As reported in Table 3, our estimates for cost savings ranged from \$12.8 million to \$13.2 million for Waiver Year Three. The decrease in participation rates and the increase in estimated fertility rates affected the Waiver Year Three estimate of cost savings. The estimated average birth costs increased by less than one percent from Waiver Year Two to Waiver Year Three, \$13,877 to \$13,926, respectively.

Table 3: Summary of Waiver Year Three Estimated Cost Savings

Estimated Averted Births	Estimated Average Birth Costs ⁸	Range of Estimated Averted Medicaid Costs	Waiver Year 3 Program Expenditures	Range of Estimated Overall Medicaid Cost Savings
1,302 – 1,327	\$13,926	\$18,126,000 – \$18,482,000	\$5,304,000	\$12,821,000 – \$13,177,000

⁸ The Medicaid costs of a birth include prenatal, delivery, postnatal, newborn and infant care.

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Table 4 provides a comparison of births averted and Medicaid cost savings for the three Waiver Years. We are projecting that Waiver Year Three will continue the trend of increased numbers of births averted and increased cost savings for Medicaid.

Table 4: Comparison of Averted Births and Cost Savings Across Waiver Years

Measure	Waiver Year 1	Waiver Year 2	Est. Waiver Year 3	Waiver Year 4	Waiver Year 5
Estimated Age-Adjusted Averted Births Rate (per 1,000)	89.2	75.5	77.0 – 78.5		
Estimated Averted Births ⁹	876	1,204	1,302 – 1,327		
Estimated Overall Medicaid Cost Savings	\$9,506,000	\$12,423,000	\$12,821,000 – \$13,177,000		
Budget Neutral	Yes	Yes	Yes		

It is important to recognize that there is a positive relationship between the number of participants and the cost savings. This positive relationship occurs because the averted birth rate is multiplied by the estimated number of participants for calculation of the estimated number of averted births. A higher estimated number of participants correspond to a higher estimated number of averted births and a larger estimated amount of averted Medicaid costs. Therefore, if our estimate of participation is higher than actual Waiver Year Three participation, our estimate of cost savings will also be higher than actual savings. In turn, if our estimate of participation is lower than actual participation, our estimate of costs savings will be lower than actual cost savings.

⁹ The averted births are estimated because only three months of birth data were available at the time of analysis for the third Waiver Year. We will update the count of averted births when complete data are available for the third Waiver Year.

Appendix A
Count and Location of Provider Specialties
Providing Services to Waiver Year Three
Participants, by County

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COUNTY	ANESTHESIOLOGY	CARDIOLOGY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	DERMATOLOGY	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GENERAL FAMILY PRACTICE
ALAMANCE	4	1			9		3
ALEXANDER							
ALLEGHANY							1
ANSON							
ASHE							6
AVERY							3
BEAUFORT	1						
BERTIE							
BLADEN							
BRUNSWICK	4						17
BUNCOMBE	2						11
BURKE	4						5
CABARRUS	4		1				20
CALDWELL	1						3
CAMDEN							5
CARTERET							5
CASWELL					8		
CATAWBA	2					1	5
CHATHAM					17		13
CHEROKEE							
CHOWAN	1						
CLAY							2
CLEVELAND	4						
COLUMBUS							1
CRAVEN	1					2	
CUMBERLAND	4		3		2		14
CURRITUCK							3
DARE	1						3
DAVIDSON	3						23

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COUNTY	GENERAL THORACIC SURGERY, PROCTOLOGY	HEALTH DEPARTMENT DEVELOPMENTAL EVALUATION CENTER (DEC)	HOSPITALS	INDEPENDENT LABORATORY	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE
ALAMANCE		83	3	179			
ALEXANDER		26					
ALLEGHANY		2					
ANSON		46					
ASHE	3	5	1				
AVERY		27			10		
BEAUFORT		79	14		5	14	
BERTIE		34					
BLADEN		57	5				
BRUNSWICK		61	2				
BUNCOMBE		163	5				3
BURKE		118					
CABARRUS		81	6		4	2	
CALDWELL		61	1				
CAMDEN		13					
CARTERET	2	111	2				
CASWELL		47					
CATAWBA		266	3				
CHATHAM		10			2		
CHEROKEE		8					
CHOWAN		50					
CLAY		2					
CLEVELAND		228	5				
COLUMBUS	1	78	14		12	4	
CRAVEN		91	7		6		
CUMBERLAND		50	63		29	4	
CURRITUCK							
DARE		20	1				
DAVIDSON		77	6				

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COUNTY	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	PATHOLOGY	PEDIATRICS	PHARMACIES	RURAL HEALTH CLINIC (RHC)	UROLOGY
ALAMANCE	3	24			236		5
ALEXANDER					124	1	
ALLEGHANY					22		
ANSON					86		
ASHE	1	4			48		
AVERY					120		
BEAUFORT		5			249		
BERTIE					57		
BLADEN	4	23			152	10	
BRUNSWICK		34			394		
BUNCOMBE	3	78			459		
BURKE		53			292		
CABARRUS		70	3		368		
CALDWELL	1	43			187		5
CAMDEN					21		
CARTERET	5	156			401		
CASWELL	1				93		
CATAWBA		9	198		600		8
CHATHAM					67		
CHEROKEE					79		
CHOWAN	1	23			89		
CLAY					8		
CLEVELAND	3	13			213		2
COLUMBUS	2	36			411		
CRAVEN		18			164	20	
CUMBERLAND	1	332			1196		1
CURRITUCK					15		
DARE		10			117		
DAVIDSON		84			391		

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COUNTY	ANESTHESIOLOGY	CARDIOLOGY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	DERMATOLOGY	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GENERAL FAMILY PRACTICE
DAVIE							1
DUPLIN					22		1
DURHAM							6
EDGEcombe							4
FORSYTH	3						50
FRANKLIN							2
GASTON							29
GATES							
GRAHAM							
GRANVILLE							2
GREENE					5		
GUILFORD	4		3				5
HALIFAX					6		
HARNETT					9		
HAYWOOD							3
HENDERSON	1				3		3
HERTFORD							3
HOKE							6
HYDE							
IREDELL	4		1				5
JACKSON							2
JOHNSTON							24
JONES							
LEE							9
LENOIR					4		
LINCOLN							
MACON							1
MADISON							
MARTIN							

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COUNTY	GENERAL THORACIC SURGERY, PROCTOLOGY	HEALTH DEPARTMENT DEVELOPMENTAL EVALUATION CENTER (DEC)	HOSPITALS	INDEPENDENT LABORATORY	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE
DAVIE		48	1			1	
DUPLIN		41	2				
DURHAM		74	11		1	5	
EDGEcombe		65					
FORSYTH	2	146	83	2		16	
FRANKLIN		87					
GASTON		516	33				
GATES		9					
GRAHAM		3					
GRANVILLE		40					
GREENE		54					
GUILFORD		390	10	78	1	2	
HALIFAX	3	92	3				
HARNETT		33	1		7		
HAYWOOD		140					
HENDERSON		28	3		1	3	
HERTFORD		10	1				
HOKE		26					
HYDE		5					
IREDELL		62	3		1	15	
JACKSON		5	1		3		
JOHNSTON		77	8		1		
JONES		3				1	
LEE		21	4				
LENOIR		49					
LINCOLN		4	1				
MACON		53	1				
MADISON		2					
MARTIN		40	3		1		2

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Appendix A: Count and Location of Provider Specialties Providing Services To Waiver Year Three Participants, by County

COUNTY	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	PATHOLOGY	PEDIATRICS	PHARMACIES	RURAL HEALTH CLINIC (RHC)	UROLOGY
DAVIE					80		
DUPLIN	1	29			125		
DURHAM		11		3	522		
EDGEcombe					164	2	
FORSYTH		90		1	1046		
FRANKLIN					154		1
GASTON	10	21			455		1
GATES					30		
GRAHAM					15		
GRANVILLE		42			150	8	
GREENE					37		
GUILFORD	3	141	39		983		6
HALIFAX	1	67			341	2	
HARNETT		19			217		2
HAYWOOD		4	31	2	155		
HENDERSON	1	8			102		
HERTFORD		27			237		
HOKE		1			103		
HYDE					0		
IREDELL	1	41			519		
JACKSON		4			84		3
JOHNSTON	1	77			667		
JONES					14		
LEE		29			243		
LENOIR		14			238		
LINCOLN		28			211		4
MACON					103		
MADISON					37		
MARTIN		25			42		

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COUNTY	ANESTHESIOLOGY	CARDIOLOGY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	DERMATOLOGY	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GENERAL FAMILY PRACTICE
MCDOWELL							1
MECKLENBURG	13		1	3	58		34
MITCHELL							1
MONTGOMERY							1
MOORE	1		2				2
NASH	4						3
NEW HANOVER	4				19		81
NORTHAMPTON					1		
ONSLow	3		3				4
ORANGE					6		1
OUT-OF-STATE <= 40 MILES	1		1				1
PAMLICO							
PASQUOTANK							15
PENDER							
PERQUIMANS							
PERSON							2
PITT							63
POLK							
RANDOLPH				1			25
RICHMOND	2						1
ROBESON	4				42		
ROCKINGHAM	4						3
ROWAN	1						8
RUTHERFORD							6
SAMPSON	2				18		
SCOTLAND	1						3
STANLY	2						
STOKES							4

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Appendix A: Count and Location of Provider Specialties Providing Services To Waiver Year Three Participants, by County

COUNTY	GENERAL THORACIC SURGERY, PROCTOLOGY	HEALTH DEPARTMENT DEVELOPMENTAL EVALUATION CENTER (DEC)	HOSPITALS	INDEPENDENT LABORATORY	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE
MCDOWELL		87	5				
MECKLENBURG		95	117	17	31	3	
MITCHELL		3				1	
MONTGOMERY		14					
MOORE		45					
NASH		70	8	3		8	
NEW HANOVER		55	86		8	4	
NORTHAMPTON		55					
ONSLOW		65	2			1	
ORANGE		11	3		2	12	
OUT-OF-STATE <= 40 MILES			5	9			
PAMLICO		1					
PASQUOTANK		81					
PENDER		59	1				
PERQUIMANS		22					
PERSON		50					
PITT		48	4		2	98	
POLK		3					
RANDOLPH		36	3		4		
RICHMOND		37	6				
ROBESON		82	7				
ROCKINGHAM		40	2				
ROWAN		36	3		1		
RUTHERFORD		49	4				2
SAMPSON		114	5			7	
SCOTLAND		93	2				
STANLY		54	4		2		
STOKES		35					

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COUNTY	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	PATHOLOGY	PEDIATRICS	PHARMACIES	RURAL HEALTH CLINIC (RHC)	UROLOGY
MCDOWELL	5	5			169		
MECKLENBURG		48	5	2	1068		
MITCHELL					87		
MONTGOMERY					155		
MOORE		55			108		
NASH	4	26			330		3
NEW HANOVER	1	47	127		610		2
NORTHAMPTON					33		
ONSLOW	3	71			314	1	7
ORANGE		6			101		
OUT-OF-STATE <= 40 MILES	1	7	2		54		
PAMLICO					10		
PASQUOTANK	3	45			232		
PENDER					95		
PERQUIMANS					52		
PERSON		8			50		
PITT		4	70	3	450		3
POLK	2				36		
RANDOLPH		20			258	1	
RICHMOND		61		1	207		
ROBESON	3	78	1		724	10	6
ROCKINGHAM	1	91			405		
ROWAN	6	8	8		232		2
RUTHERFORD		11			122		
SAMPSON	2	17			306		
SCOTLAND		22			189		
STANLY	3	106			348	1	1
STOKES					104		

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SURRY	3						2
SWAIN							
TRANSYLVANIA							2
TYRRELL							
UNION							22
VANCE	1						9
WAKE	8				27		10
WARREN							
WASHINGTON							
WATAUGA							
WAYNE	2				1		6
WILKES							1
WILSON					2		1
YADKIN		1					
YANCEY							10
TOTAL	104	2	15	4	259	3	621

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SURRY		55	3	1			
SWAIN		1	4				
TRANSYLVANIA		6	4				
TYRRELL		18					
UNION		138	49				
VANCE		42	1				
WAKE		557	22	12	1	11	
WARREN		2					
WASHINGTON		71					
WATAUGA	1	6					
WAYNE		251	6				
WILKES		19	3				
WILSON		62	16				
YADKIN		21			4		
YANCEY		24					
TOTAL	12	6630	682	301	139	212	7

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COUNTY	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	PATHOLOGY	PEDIATRICS	PHARMACIES	RURAL HEALTH CLINIC (RHC)	UROLOGY
SURRY		16			145		4
SWAIN					24		
TRANSYLVANIA					46		
TYRRELL					13		
UNION		12			287		
VANCE		14			310	52	
WAKE	8	104		29	1531		
WARREN					40		
WASHINGTON					50		
WATAUGA		2			52		
WAYNE	2	10		1	295		2
WILKES		19			114		
WILSON		130			159		
YADKIN					72		
YANCEY					132		
TOTAL	87	2736	484	42	23852	108	68