

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

*Medicaid Be Smart Family Planning Waiver*  
*Waiver Year Four*  
*Primary Care Referrals*  
*Report on Female and*  
*Male Participant Surveys*

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## EXECUTIVE SUMMARY

Navigant Consulting, Inc. (NCI) mailed 1,298 surveys to men and women participants of the Medicaid Be Smart Family Planning Waiver Program in July 2009 to assess primary care referrals during Waiver Year Four (October 1, 2008 – September 30, 2009). For women, this was a change from earlier Waiver years where focus groups were used to assess primary care referrals.

Due to continued low participation in the female focus groups, the Centers for Medicare and Medicaid Services (CMS) approved replacing focus groups which collected information from female participants with a survey similar to the survey used for men. The use of surveys increased the number of responses collected from female participants as well as eliminated a number of logistical barriers that hindered both recipient participation as well as data collection that were present for focus groups. The result was a survey that reached a broader demographic of female participants compared with the focus groups and provided a statewide perspective on experiences with the Waiver. However, as a result of a change in the data collection methodology for women, information collected from Waiver Years One through Three were not directly comparable to Waiver Year Four.

A total of 1,253 surveys were mailed to women, and 45 surveys mailed to men. Thirty-three percent of the female sample population responded to the survey, and 98 percent of those surveys were suitable for analysis. Forty-four percent of the male sample population responded to the survey, and 85 percent were suitable for analysis. NCI received responses from a representative cross-section of the entire participating population. Below is a summary of the major findings and recommendations related to the survey results.

- **A large majority of female participants use a contraceptive method, but the use of a highly effective method was low.**

Among the 91 percent of respondents who reported using a contraceptive method, the primary method used by female respondents was birth control pills or oral contraceptives (48 percent), followed by condoms (30 percent) and Depo-provera or other injectables (22 percent). Use of the more highly effective methods such as sterilization and IUDs was relatively low, three percent and nine percent, respectively.

Since 49 percent of respondents reported that they use a birth control method that was recommended based on advice from a health care provider, there may be an opportunity for DHHS to promote the use of more highly effective methods when health care providers meet with Waiver participants. Education of health care providers about which methods are highly effective

might encourage providers to offer more highly effective methods to their patients.<sup>1</sup>

- **A majority of male participants seek vasectomies.**

Male survey respondents reported they received Waiver services primarily for birth control purposes; 82 percent of respondents used a method of birth control. A majority (79 percent) of the respondents indicated that their method of birth control was a vasectomy/sterilization. Half of the men who reported using a method of birth control cited discussion with their partner/spouse as the reason they chose their method.

- **Female participants were more likely to complete an initial physical examination when enrolling in the Waiver.**

Eighty percent of female respondents reported they had an initial exam upon enrollment and 80 percent of these women returned for additional Waiver services. Seven of the male survey respondents (41 percent) reported receiving an initial yearly exam; four of the respondents (57 percent) also reported having one or more additional visits each year.<sup>2</sup>

- **Of those participants who did not have access to affordable primary care, many were successful at obtaining a referral for primary care services.**

Among female respondents who reported they had a medical condition or issue that needed care outside of the Waiver, 48 percent received a primary care referral; 22 percent of these women had existing access to free or affordable primary care.

Fifty-nine percent of male survey respondents reported access to a primary care provider and 30 percent of these respondents received care that was free or low cost.

Almost half of the female survey respondents who reported that they needed a referral reported receiving a referral for additional services and among those 92 percent made an appointment to the referral provider. As a result of

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<sup>1</sup> CMS approved Implanon as a contraceptive method for the Waiver in November 2009. Until this time if a Waiver participant requested Implanon, County Health Departments used Title X funds, if available, to cover the costs of Implanon since it was not covered by the Waiver. Some rural counties could not afford to provide Implanon to its Waiver participants without funding from Medicaid; therefore these counties were limited to prescribing approved contraceptive methods.

<sup>2</sup> As a condition of the Waiver, all participants are required to have a physical examination prior to receiving prescriptions or other services. These results rely on the respondent remembering whether they had an initial exam.

the referral, 67 percent of respondents reported being satisfied with the referral. One male survey respondent indicated receiving a referral for primary care services and succeeded in making and keeping an appointment with this provider.

The percentage of referrals for primary care services for Waiver Year Four appeared to increase from Waiver Year Three for female respondents. There was only one male who received a referral in Waiver Year Four, so no conclusions can be drawn about the “increase.”

The report that follows describes the objectives of the female and male surveys; the methodology for selection of survey respondents as well as findings and issues and potential solutions identified from the survey process.

## SECTION I: INTRODUCTION

### Overview

The evaluation plan approved by the Centers for Medicare and Medicaid Services (CMS) for the Medicaid Be Smart Family Planning Waiver (the Waiver) includes a quality of care indicator to measure whether an increased proportion of Waiver participants who lack a source of primary care at the time of enrollment in the Waiver are referred to an appropriate source of primary care. Although the Waiver Evaluation Plan specified the use of focus groups to address this measure, participation in focus groups has been less than optimal, and CMS approved the state's use of surveys to measure male participants' referrals to primary care services in Year Two of the Waiver, and the use of surveys to measure females' referrals in Year Four of the Waiver. Navigant Consulting (NCI) developed a survey for female participants, with questions similar to those posed during focus group sessions. In addition, this survey was similar to the one used for male participants.

This report provides Waiver Year Four results of the female and male participant mail surveys and a comparison to the Waiver Years One, Two and Three findings.

### Evaluation Objectives

The Waiver Evaluation Plan sets forth the hypotheses to be tested to determine if the Waiver program meets the established objectives. The evaluation plan approved by CMS was designed to measure the overall impact of the Waiver. The overall evaluation includes a retrospective cohort study and a process evaluation. The retrospective cohort study involves secondary analyses of information routinely obtained at the State Center for Health Statistics as well as from Medicaid claims data. The process evaluation includes a standard set of quality of care indicators. One of the specific process and quality indicators was represented as Hypothesis D.1.2.:

“Increased proportion of Waiver participants lacking a source of primary care at the time of their enrollment in the Waiver will be referred to an appropriate source of care: To evaluate the extent of participants' follow-up on primary care referrals received from their family planning providers, we will report results from at least 4 focus groups held annually with enrollees participating in the program for at least 6 months. The composition of the focus groups will be based on the demographic and geographic distribution of enrollees. We will explore their experiences in obtaining primary care referrals from their family planning providers, their success in following up on the referrals, barriers they may have encountered in either process and their satisfaction with the referral process.”

## SECTION II: METHODOLOGY

In this section, NCI describes:

- The decision to use surveys instead of focus groups for female waiver participants
- The design of the survey
- The process used to identify female and male participants
- The process used to distribute surveys and to encourage participants to complete the survey
- The characteristics of the survey respondents
- The limitations of the survey

### **Use of the Survey Instrument to Replace Female Focus Groups**

Waiver Year Four is the first time period for which a female survey was used. CMS approved the use of the survey to obtain information about primary care referrals in place of focus groups because of the declining rate of participation in focus groups. Compared to the qualitative data that was collected in focus groups, the data collected using a survey allows for further quantitative data, which can be comparatively analyzed for a series of years or compared by gender, showing recipient trends and changes. Most notable of the survey strengths was the number of variables measured by each survey, 49 questions in the male survey and the 54 questions in the female survey. Each survey participant can be analyzed by each variable and can easily be cross-analyzed for multiple variables. Although a survey may be limited by the types of questions asked, the number of responses provides for a more systematic approach to measuring a participant's perspective and use of the Waiver. The number of female responses received in Waiver Year Four (413) was 23 times greater than then the number of focus group participants for Waiver Year Three (17). The increased number of responses allowed for a population analysis which was more reflective of the entire Waiver participant pool.

### **Design of the Survey**

For Waiver Year Four, NCI based the mail survey for women on the survey used for male participants for Waiver Years Two and Three, and modified it somewhat to capture information analogous to what was obtained through the free-flowing discussion in the focus groups. For example, the survey asked questions about the individual's background, experiences with receiving primary care referrals, barriers encountered in either receiving or following up on the referrals and the level of satisfaction with the process. Although the objective of the survey was to assess referrals to primary care services, NCI also asked other questions about the Waiver

program to develop a context for questions about primary care referrals. NCI included optional space on the survey for the individual to include his or her name and contact information, if desired, for any follow-up questions or clarification of responses.

In Waiver Year Four, both female and male participants received surveys which were designed to:

- Inquire about the participant's knowledge of the availability of and general issues related to the primary care referral process
- Request information regarding participants' existing access to primary care services and the location where those services were received
- Ask about participant health status, to give context regarding the need for primary care referrals

The surveys and the percentage of responses for each question and answer are available for closer review in Appendices A and B. Each survey summarizes the responses to each question.

### **Selection of Survey Participants**

NCI examined Medicaid Management Information System (MMIS) claims and enrollment data to select female and male participants, who were enrolled in the Waiver for at least six months and had at least one family planning claim. To be considered in the sample of individuals to be selected to complete a survey, NCI obtained enrollment data through April 2009 (the most complete data at the time the sample was identified) and identified individuals who were enrolled in the waiver for at least six months and who had a North Carolina mailing address. NCI then matched these individuals, using Medicaid ID numbers, to paid claims data for the same period to identify individuals with at least one valid family planning claim in the prior six months. In total, NCI identified 5,782 females and 45 males who met the criteria for inclusion in the survey.

### **Survey Distribution**

NCI mailed the surveys to all 45 males, and selected the female sample through a simple random sampling approach. NCI randomized the universe of female participants for sampling, and generated a random sample of 1,253 female participants from the universe of the 5,782 female participants. NCI assumed that the response rate for the population would be approximately 30 percent and determined that 1,253 surveys should be mailed to collect at least 376 valid responses, to yield a sample size that would be representative of the universe of female participants.<sup>3</sup>

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<sup>3</sup> NCI determined sample size using a 95 percent confidence interval and 5 percent precision.

NCI began mailing the surveys on July 1, 2009, requesting responses within two weeks of receipt and offering a \$25 Wal-Mart gift card for the first 100 returned surveys received. To encourage people to open the envelope with the survey, NCI mailed them in large white envelopes that advertised the opportunity to receive a \$25 Wal-Mart gift card on the outside of the envelope. NCI began receiving survey responses on July 7, 2009, and accepted responses through August 31, 2009. At the time of the original two week deadline, NCI had received 413 surveys from female participants and 13 surveys from male participants. Because NCI achieved the target number (376) of female surveys, a follow-up survey was not sent to this group. NCI mailed a second survey to non-responsive male participants on July 17, 2009 to solicit the return of the remaining surveys by July 30, 2009, and received 7 additional surveys, for a total of 20 male surveys.

### Female and Male Survey Respondents

NCI received 413 female responses out of the 1,253 mailed (33 percent of mailings) and 20 male responses out of the 45 surveys sent (45 percent of mailings). Table 1, below, details the number of female and male participants, the sample size of the mailing and total number of Waiver participants in the sampling universe.

**Table 1: Waiver Year Four (October 1, 2008-September 30, 2009) Female and Male Participation**

Gender	Total Participants	Sample		Total Responses Received		Total Valid Responses Received	
		Number	Percent of Participants	Number	Percent of Sample	Number	Percent of Sample
Female	12,412	1,253	10%	413	33%	405	32%
Male	166	45	27%	20	44%	17	38%
<b>Total</b>	<b>12,578</b>	<b>1,298</b>	<b>10%</b>	<b>433</b>	<b>33%</b>	<b>422</b>	<b>33%</b>

Six female respondents and two male respondents indicated that they were enrolled in the Waiver for less than six months. Furthermore, one male respondent did not use Waiver services between October 1, 2008 and March 30, 2009 and two female respondents included demographic information which was inconsistent with the claims data. NCI did not include the responses from these eight female surveys and three male surveys in our analysis, thus analyzing only the 405 valid female surveys and 17 male surveys.

The 405 female and 17 male survey respondents varied in terms of racial backgrounds and ages. The following pages provide details about the demographics for the female and male survey respondents.

As Exhibit 1 on the next page demonstrates, participation was distributed over all age groups, but the majority of the women participating in the surveys were between the ages of 19 and 29 (65 percent). The ages of the female survey respondents were relatively representative of the female participant population as a whole, with women in the age group 19–24 underrepresented at 37 percent compared to 48 percent in the entire population. Men participating in the surveys were distributed across all age groups, with most male respondents between the ages of 25 and 34 (53 percent). Men in the age group 40–55 responded at a rate (24 percent) that was higher than the proportion they represented in the entire population (17 percent).

**Exhibit 1: Age Distribution of Female and Male Survey Respondents and Total Participant Population**

Age Group	Number				Percent			
	Female		Male		Female		Male	
	Respondents	Participants	Respondents	Participants	Respondents	Participants	Respondents	Participants
<b>19-24</b>	150	5,973	2	24	37%	48%	12%	14%
<b>25-29</b>	115	3,155	4	39	28%	25%	24%	24%
<b>30-34</b>	72	1,685	5	45	18%	14%	29%	27%
<b>35-39</b>	41	934	2	30	10%	8%	12%	18%
<b>40-55</b>	23	665	4	28	6%	5%	24%	17%
<b>Blank</b>	4	-	0	-	1%	0%	0%	0%
<b>Total</b>	<b>405</b>	<b>12,412</b>	<b>17</b>	<b>166</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

The distribution of female respondents was relatively consistent with the distribution of female participants across counties; however, among the counties with higher numbers of participants, Cumberland County was slightly underrepresented. Table 2, below, provides the top five counties according to percentage of female participants compared to the percentage of female respondents. Male participants were only distributed across 60 percent of the counties in North Carolina; the counties with higher numbers of participants were not all among the larger counties in the State. Buncombe, Union and New Hanover were the counties with the most participants. There was more than one male survey respondent in only Buncombe County.

**Table 2: Five Counties with Highest Percentage of Female Participants**

County	Participants	Respondents
Mecklenburg	7%	7%
Wake	6%	6%
Cumberland	5%	3%
Guilford	4%	3%
Buncombe	4%	4%

The majority of female and male survey respondents were White as shown in Exhibit 2 on the following page; White female respondents were slightly overrepresented and African American female respondents were slightly underrepresented compared to the participant population. Among male respondents, the racial group American Indian or Alaskan Native was slightly overrepresented, while African Americans were slightly underrepresented.

No female respondents reported Hispanic ethnicity; one male survey respondent reported Hispanic ethnicity.

**Exhibit 2: Racial Background of Female and Male Survey Respondents and Total Participant Population**

Racial Group	Number				Percent			
	Female		Male		Female		Male	
	Respondents	Participants	Respondents	Participants	Respondents	Participants	Respondents	Participants
African American	164	5,693	3	33	40%	46%	18%	20%
White/Caucasian	194	5,664	13	126	48%	46%	76%	76%
Asian	4	130	0	1	1%	1%	0%	<1%
American Indian or Alaskan Native	8	234	1	3	2%	2%	6%	2%
Pacific Islander or Hawaiian Native	0	12	0	0	0%	<1%	0%	0%
Other/Unknown	10	679	0	3	2%	5%	0%	2
Blank	25	-	0	-	6%	0%	0%	0%
<b>Total</b>	<b>405</b>	<b>12,412</b>	<b>17</b>	<b>166</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

## **Survey Limitations**

The survey allows NCI to quantify participant responses and provide detailed statistics that were not possible through the focus group process. However, the survey does not allow for the additional follow-up questions and discussion that provide a deeper understanding of participant experiences. The survey was also limited by inconsistent and unclear responses, as discussed later in the report, despite efforts to clarify questions as much as possible.

## SECTION III: FINDINGS

Below NCI presents the findings from the female and male participant surveys. This section describes findings related to objectives of the Waiver and provides a summary of overall findings.<sup>4</sup>

### Responses to Survey Questions

To protect participant and provider confidentiality, the summary of responses excludes discussion by age, racial/ethnic background and geographic area.

1. *Have enrollees indicated that they heard about Waiver services from one or more sources?*

#### Female Survey Respondents

Forty-seven percent of survey respondents reported hearing about the Waiver from one or more sources, with 42 percent of these respondents reporting more than one source. A majority of the female survey respondents indicated that they heard about the Waiver services from the Case Manager (42 percent), followed by County Health Department Staff (32 percent) and family or friends (16 percent). Sources such as health care providers (11 percent), new enrollee letter (10 percent) and posters or brochures (3 percent) were referenced less frequently and five percent of respondents did not remember how they found out about the Waiver. In addition, of the eight percent of respondents who found out about the Waiver from another source, over half (53 percent or 18 respondents) wrote-in that they heard about the Waiver through the Division of Social Services. In Waiver Year One, County Health Department Staff were the primary source of information about the Waiver, followed by case managers. Consistent with results from Waiver Year Four, case managers were the primary source of Waiver information during Waiver Years Two and Three; 71 percent of participants in both Waiver Year Two and Three reported receiving information from a case manager, followed by County Health Department Staff and health care providers. Although the percent of recipients receiving information from a case manager was lower in Waiver Year Four than in previous years, the results from Waiver Year Four were based on a greater number of responses that were representative of the participant population.

#### Male Survey Respondents

Ninety-four percent (16 respondents) of survey respondents reported hearing about the Waiver from one or more sources, with 18 percent of these respondents reporting more than one source. Male survey respondents indicated that they heard about the Waiver services from the County Health Department Staff (47 percent), followed by their case managers (35 percent) and family or friends (35 percent). Other sources such as the new enrollee letter and brochure or posters

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<sup>4</sup> In some cases, survey respondents did not answer every survey question. We have reported the percentages related to each survey question based on the number of individuals who answered that specific question.

were each identified once each (6 percent). Similar to the female participants, male survey participants in Waiver Years Two and Three also reported that case managers were a primary source of information pertaining to the Waiver. Table 3 highlights the three primary resources for Waiver information in Waiver Years Two through Four, County Health Department staff, case managers and family or friends. Changes from previous years show an increasing trend of Waiver information received from resources in addition to case managers.

**Table 3: Percent of Male Participants Receiving Waiver Information by Source**

Source	Waiver Year Two <sup>5</sup>	Waiver Year Three <sup>6</sup>	Waiver Year Four <sup>7</sup>
County Health Department Staff	24	30	47
Case manager	32	24	35
Family or Friends	18	18	35

2. *Are participants less likely to be lost to follow-up?*

Female Survey Respondents

A majority of female respondents (80 percent) reported having an initial/yearly examination from a health care provider when first enrolling in the Waiver and, of those respondents, 80 percent indicated returning to their family planning providers for a yearly check-up or periodic visit or both after their initial/yearly examination. Nineteen percent of female respondents indicated that they did not have an initial/yearly examination when first enrolling in the Waiver and one percent did not respond to this question. Although the Waiver requires that every enrollee have an initial exam at the onset of participation, there are some exceptions. Also, survey results rely on the survey respondent remembering whether or not they had an exam.

Although there was no direct comparison for the percentage of women who had an initial/yearly examination from the focus group data, the majority of women who participated in the focus groups during Waiver Years One through Three reported that they were motivated to make and keep follow-up appointments as these were their only source of health care.

Male Survey Respondents

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<sup>5</sup> In Waiver Year Two, NCI received survey responses from 30 male participants.

<sup>6</sup> In Waiver Year Three, NCI received survey responses from 33 male participants.

<sup>7</sup> In Waiver Year Four, NCI received survey responses from 17 male participants.

Seven of the male respondents (41 percent) reported having an initial/yearly examination from a health care provider when first enrolling in the Waiver. Of the men who received an initial exam upon enrollment, four respondents (57 percent) indicated returning for a yearly check-up or periodic visits to their family planning providers. Ten respondents (59 percent) indicated that they did not have an initial/yearly examination when first enrolling in the Waiver. Compared to previous waiver years, as seen in Table 4 below, the percentage of men who had an initial/annual exam during Waiver Year Four was consistent with results from Waiver Year Two after a decline in Waiver Year Three. There was a similar decrease for Waiver Year Three in the percentage of men who reported attending periodic visits and a large increase in the percentage for Waiver Year Four. Survey results rely on the survey respondent remembering whether or not they had an exam.

**Table 4: Percentage of Male Survey Respondents Who Had an Initial/Annual Exam and Periodic Visits**

	Waiver Year Two	Waiver Year Three	Waiver Year Four
Percentage who had an initial/annual exam	43	24	41
Percentage who had periodic visits	40	13	57

3. *Are participants more likely to report continuous use of a contraceptive method? Are participant women more likely to report use of a highly effective method of contraception?*

Female Survey Respondents

A large majority of female survey respondents reported use of a contraceptive method (91 percent).<sup>8</sup> As displayed in Table 5, on the following page, Waiver Year Four results were consistent with the results from previous waiver years.

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<sup>8</sup> From the total population of 405 female respondents, 370 reported using birth control; 30 reported they did not use birth control and 5 did not respond.

**Table 5: Percentage of Women Using Contraception, by Waiver Year**

	Waiver Year One <sup>9</sup>	Waiver Year Two <sup>10</sup>	Waiver Year Three <sup>11</sup>	Waiver Year Four <sup>12</sup>
<b>Percentage using a method of contraception</b>	100	92	94	91

Among respondents who reported using a contraceptive method, the most common contraception choices were birth control pills (48 percent), condoms (30 percent) and Depo-Provera or other injectables (22 percent). Other contraceptive use varied using each of the following methods: IUD (9 percent), Nuva-ring (6 percent), Withdrawal (5 percent), Patch (4 percent), sterilization of respondent or their partner (3 percent), periodic abstinence (2 percent) and spermicidal foam/cream/film/suppository, female condom and other were each used by one percent of the respondent population. Emergency contraception and chance were used by less than one percent of the respondents. The contraceptive methods that are considered to be highly effective, e.g., sterilization, IUDs, were less prevalent (12 percent) among respondents than less effective methods such as birth control pills.<sup>13</sup>

A majority of female respondents (68 percent) who indicated that they currently use a contraceptive method also indicated that they used a method prior to joining the Waiver. When these female respondents were asked whether they changed their method of birth control when they joined the Waiver, 43 percent responded “Yes.” There were 53 percent who answered “No” and four percent who did not respond to the question.

Ninety percent of women who reported that they use a birth control method indicated they were given a choice by their health care provider as to which type of birth control to use.<sup>14</sup> Also, 49 percent cited that their decision was based on advice from a health care provider. The second most common factor contributing to women’s decisions regarding their method of birth control was convenience (22 percent). DHHS is aware that some counties were limited to prescribing certain contraceptive methods because methods such as Implanon were not allowed under the Waiver and required other funding streams to be able to prescribe them to participants.

<sup>9</sup> In Waiver Year One, NCI conducted focus groups with 38 female participants.

<sup>10</sup> In Waiver Year Two, NCI conducted focus groups with 14 female participants.

<sup>11</sup> In Waiver Year Three, NCI conducted focus groups with 17 female participants.

<sup>12</sup> In Waiver Year Four, NCI received survey responses from 405 female participants.

<sup>13</sup> Since eligibility for the program is discontinued once sterilization occurs, the number of respondents who are sterilized is expected to be small.

<sup>14</sup> Most of the women who indicated they were not given a choice stated that they had already decided which type of birth control they wanted to use prior to visiting the health care provider.

Of the eight percent of women who do not use a method of birth control, 67 percent of respondents provided a specific reason why they did not use birth control, eight respondents (26 percent) cited that they were either pregnant or trying to conceive and other respondents did not think they needed birth control at this time.

Male Survey Respondents

Fourteen male survey respondents (82 percent) reported using a method of birth control to prevent pregnancy. When asked about the type of birth control method, 11 male respondents (79 percent) reported having a vasectomy. In response to a later survey question, one additional male, who stated that he did not use birth control, reported either being sterile or that his partner was sterilized. As seen in Table 6, below, responses for Waiver Year Four were consistent with responses from Waiver Year Two, while there was a decrease in the percentage of men who used a method of contraception in Waiver Year Three.

**Table 6: Percentage of Men Using Contraception, by Waiver Year**

	Waiver Year Two	Waiver Year Three	Waiver Year Four
Percentage using a method of contraception	83	64	82
Percentage who had a vasectomy	92	100	79

NCI asked men whether they changed their method of birth control when they joined the Waiver. There were three men (18 percent) who answered “No” to that question, and one who also reported being sterile or that he had a partner who was sterilized. Of the 11 men who changed their method of birth control upon enrollment in the Waiver, four reported having a vasectomy.

Three respondents indicated that they did not use birth control prior to joining the Waiver. Two of these respondents indicated they or their partner was sterile or that their partner took care of birth control. Of the 12 men who reported using birth control prior to joining the Waiver, nine men (75 percent) indicated they changed their birth control when they joined the Waiver; eight of these men reported having a vasectomy. In determining which type of birth control to use, seven of the 14 men (50 percent) who reported using a method of birth control cited a discussion with their partner/spouse as the reason they chose their method. The second most common factor contributing to men’s decisions regarding their method of birth control was convenience (3 out of 14 men who used birth control, or 21 percent).

Five of the men who reported that they use a birth control method (36 percent) indicated they were seeking a vasectomy and did not receive information about other birth control methods by their health care provider. All five of these men (100 percent) reported that they were later able to attain the vasectomy or were sterilized.

4. *Are there longer inter-pregnancy intervals among Waiver participants? Are there lower unintended pregnancies among Waiver participants or their partners?*

#### Female Survey Respondents

NCI asked women about the age difference between their children and 26 percent reported birth intervals of less than 2 years between the first born and second born child. This question did not specify that the respondent should report about children who were born since the women enrolled in the Waiver.

A majority of female survey respondents (65 percent) reported that they had at least one unplanned pregnancy during their lifetime. Forty-eight percent of these respondents had one unplanned pregnancy, 30 percent had two unplanned pregnancies and 17 percent had three or more unplanned pregnancies. Five percent of respondents who reported having unplanned pregnancies did not report the number of unplanned pregnancies. Six percent of respondents (26 women) reported an unplanned pregnancy since enrolling in the Waiver; of these women, 12 percent reported more than one unplanned pregnancy while enrolled in the Waiver. Among the focus group participants from Waiver Years One through Three, no one reported an unplanned pregnancy while enrolled in the program. Based on the estimates of fertility for the Waiver population, six percent of respondents having unplanned pregnancies appears to be slightly higher than the annual percentage of births to Waiver participants (approximately 4.6 percent) that NCI has observed over the course of the Waiver.

#### Male Survey Respondents

Eleven (65 percent) of the male survey respondents reported they have been responsible for an unplanned pregnancy prior to participation in the Waiver. Two of these men (18 percent) reported they were responsible for one pregnancy, seven (64 percent) reported they were responsible for two pregnancies and two (18 percent) reported they were responsible for three or more pregnancies. None of the respondents reported being responsible for an unplanned pregnancy since enrolling in the Waiver; in comparison, in previous waiver years, men reported one to three unplanned pregnancies since enrolling in the Waiver.

5. *What are Waiver participants' experiences in obtaining primary care referrals from family planning providers?*

The evaluation plan requires measurement of whether the number of individuals lacking a source of primary care at the time of enrollment who are referred to an appropriate source of

care is increasing.<sup>15</sup> Therefore, the surveys attempt to assess referrals for all individuals lacking a source of primary care. NCI reports the referral status of all respondents, regardless of whether they have access to primary care, because some individuals report receiving a referral even though they had an existing source of care. A participant's health status and need for a referral are also important to consider when evaluating the participant's success in obtaining a referral. A participant who is in generally good health might not seek healthcare services or need a referral. Thus, NCI presented the referral information gathered through the surveys stratified by whether the participant had an existing source of primary care, and whether the participant sought healthcare services that were not covered by the Waiver and, therefore, would have required a referral to an appropriate source of care. Tables 7 and 8 provide information regarding female and male respondent experiences with primary care referrals.

Using a survey instrument for female respondents provided a parallel dataset to the male survey data, allowing for improved analysis by gender group. The surveys used for men in Waiver Years Three and Four and for women in Waiver Year Four allowed NCI to better identify the number of respondents who were eligible to receive a primary care referral and then count the number of referrals received by these respondents.<sup>16</sup>

Fifty-one female survey respondents (13 percent of all female respondents) and one male survey respondent (6 percent of all male respondents) reported receiving primary care referrals.

### Female Survey Respondents

Among the 107 respondents who reported that they had a medical condition or issue that should be taken care of outside of the Waiver, 51 women (48 percent) received referrals from their family planning provider, 43 percent did not receive referrals and seven percent were unsure. More than 50 percent of female survey respondents reported having an existing source for primary care services, but only 13 percent of these respondents indicated that their primary care providers offered care that was either free or low-cost. Table 7 on the following page outlines female experiences with primary care referrals.<sup>17</sup>

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<sup>15</sup> Navigant Consulting interprets the term "appropriate source of care" to be "free or affordable" care.

<sup>16</sup> Respondents who were eligible for a primary care referral answered "Yes" to the question: "At your last family planning visit, did the doctor or nurse tell you that you had any other medical problems that should be taken care of that were not covered by the Medicaid Be Smart Family Planning Program?"

<sup>17</sup> Waiver program language states that "When medical conditions/problems indicated by history, physical examination, or laboratory and clinical tests are discovered that are outside the scope of the Family Planning Waiver and the provider has no mechanism to make services financially affordable, a referral to a primary care "safety net" provider must be made. If the provider offers free or affordable care for services outside the scope of the Family Planning Waiver, then no referral is necessary. The provider should continue medical care." May 2006 Special Bulletin, *Family Planning Waiver "Be Smart."* Available on-line: <http://www.dhhs.state.nc.us/dma/bulletin/FPW.pdf>

**Table 7: Primary Care Referrals for Female Survey Respondents**

Pre-Referral Care Access		Received Referral		Unsure or No Response	Percent Receiving a Referral
		Yes	No		
Participants reporting existing access to free or affordable primary and diagnostic care	Sought care services outside the scope of the waiver program	11	0	2	84%
	Did not seek additional care services	3	4	2	33%
Participants reporting limited or no access to primary and diagnostic care	Sought care services outside the scope of the waiver program	14	1	1	88%
	Did not seek additional care services	23	41	5	33%
<b>Total Respondents</b>		<b>51</b>	<b>46</b>	<b>10</b>	<b>48%</b>

Table 8 provides a comparison of primary care referral results across the waiver years. The results for the female survey that indicate that 48 percent of respondents received a primary care referral, provide perhaps the best estimate to date for the prevalence of primary care referrals among female Waiver participants. This is the case primarily because the sample of individuals who were asked to respond to the survey was chosen at random and was representative of the entire universe of Waiver participants. In addition, many women who did not receive a referral indicated that they did not need the referral because they already had a health care provider who could provide the needed service. This information suggests that the availability of primary care services to this population is greater than originally determined.

**Table 8: Comparison of Female Participant Primary Care Referral Experiences from Waiver Years One through Four**

	Focus Groups			Female Survey
	Waiver Year One	Waiver Year Two	Waiver Year Three	Waiver Year Four
Total Respondents	38	14	17	107
Number Who Obtained a Primary Care Referral	22	2	6	51
Number Who Did Not Obtain a Primary Care Referral or Were Unsure	16	12	11	53
No Response	-	-	-	3
Percent of Respondents Who Obtained a Primary Care Referral	58%	14%	35%	48%

Male Survey Respondents

Only one male respondent stated that he had a medical condition or issue that should be taken care of outside of the Waiver. He reported that he has free or affordable care from his health care provider. Fifty-nine percent of male survey respondents reported having an existing source for primary care services and, among this group, 30 percent indicated that the provider offered free or low-cost care. Table 9 on the following page outlines male experiences with primary care referrals.

**Table 9: Primary Care Referrals for Male Survey Respondents**

Pre-Referral Care Access		Received Referral		Unsure or No Response	Percent Receiving a Referral
		Yes	No		
Participants reporting existing access to free or affordable primary and diagnostic care <sup>18</sup>	Sought care services outside the scope of the waiver program	1	0	0	100%
	Did not seek additional care services	0	0	0	0%
Participants reporting limited or no access to primary and diagnostic care <sup>19</sup>	Sought care services outside the scope of the waiver program	0	0	0	0%
	Did not seek additional care services	0	0	0	0%
<b>Total Respondents</b>		<b>1</b>	<b>0</b>	<b>0</b>	<b>100%</b>

In the analysis of Waiver Year Two results, NCI recognized that the male surveys were limited in their ability to probe more fully regarding referrals and existing access to health care providers. To respond to this limitation, for Waiver Year Three, NCI updated the survey to include additional questions related to existing access to health care providers who offered free or affordable medical care and this same approach was used for Waiver Year Four. The responses to the questions allowed NCI to report the number of respondents who perhaps did not need a referral because they already had access to a primary health care provider. Results from the Waiver Year Four survey reveal that men primarily used the Waiver to obtain access to services related to a vasectomy or sterilization and a majority of these men (59 percent) had an existing primary care provider. Therefore, men who seek services through the Waiver were likely to report that they do not need additional health care services or were already addressing their health care needs through an existing provider. This reflects the disparity of male and female needs of individuals enrolled in the Waiver. While a number of female participants rely on the Waiver as a gateway for additional health services, male participants tend to use the Waiver for specific services and often do not require additional care.

<sup>18</sup> If a respondent indicated “Yes” to question 14 and 15 of the survey, they were counted here. We used the response to Question 21 to indicate whether the respondent received a referral and question 27 to indicate whether additional care was sought.

<sup>19</sup> If a respondent indicated “Yes” to question 17 of the survey, they were counted here. We used the response to Question 21 to indicate whether the respondent received a referral and question 27 to indicate whether additional care was sought.

Table 10 provides a summary of the number of primary care referrals obtained by male survey respondents. The basis for the total respondents changed between Waiver Year Two and Waiver Year Three due to the addition of a survey question to specify whether the respondent had a medical issue that required a referral. In Waiver Year Two, all respondents were included in the measure. With so few men in the sample, the percentage of primary care referrals will vary each year depending upon who chooses to respond to the survey. In Waiver Year Four, one respondent needed and received a primary care referral.

**Table 10: Comparison of Primary Care Referrals from Waiver Years Two through Four from Survey Results**

	Male Survey		
	Waiver Year Two	Waiver Year Three	Waiver Year Four
Total Respondents <sup>20</sup>	30	2	1
Number Who Obtained a Primary Care Referral	1	0	1
Number Who Did Not Obtain a Primary Care Referral or Were Unsure	27	2	0
No Response	2	0	0
Percent of Respondents Who Obtained a Primary Care Referral	4%	0%	100%

6. *How successfully do Waiver participants follow up on primary care referrals obtained from family planning providers?*

### Female Survey Respondents

Of the 51 respondents who received a referral, 49 percent reported that they made appointments to see a health care provider. Ninety-two percent of respondents who made an appointment reported going to the appointment. For women who did not make an appointment to see the referral provider, 92 percent indicated that they could not afford to pay for the cost of services, eight percent indicated that they could not find child care, eight percent did not have time to get services and four percent did not have any transportation. Those individuals who did not make appointments also indicated as reasons that they did not think they needed the services, they needed care sooner, they did not know where to get services and they could not find a provider. Two women reported making appointments that they did not

<sup>20</sup> For Waiver Years Three and Four surveys, total respondents represents the number of respondents who were eligible for a primary care referral based upon their response to the question: *“At your last family planning visit, did the doctor or nurse tell you that you had any other medical problems that should be taken care of that were not covered by the Medicaid Be Smart Family Planning Program?”*

keep. Focus group participants from prior waiver years reported higher rates of follow-up with referrals.

### Male Survey Respondents

One male survey respondent (6 percent) who received a referral indicated that he made an appointment with the provider to whom he was referred and went to the appointment. This was consistent with results from prior waiver years where respondents reported making appointments based on the referral.

7. *What are the barriers faced by Waiver participants in obtaining primary care referrals from family planning providers?*

### Female Survey Respondents

In Waiver Year Four, NCI included an open-ended question in the survey to ask respondents who indicated that they had a medical condition or issue that should be taken care of but who did not receive a referral, what they perceived to be the reason why they did not receive a referral. The most common reasons cited were that the women already had access to primary care so a referral was not needed or they thought that their lack of insurance coverage was a factor. Fifteen women (22 percent) did not know why they did not receive a referral. It was not clear from their answers if respondents were aware that their family planning providers should provide referrals when a medical condition or issue was discovered that was not covered by the Waiver. In previous waiver years, women reported that they were not aware that a referral should have been provided to them; however, this was not frequently cited by Waiver Year Four respondents.

### Male Survey Respondents

The male survey for Waiver Year Four also included an open-ended question that asked respondents what they perceived was the reason for not receiving a referral. No respondents answered this question. Based on the lack of responses to the questions related to primary care referrals, it was unclear whether respondents understood the difference between what might be covered by the Waiver and what might require a referral; this may limit the respondent's ability to report their referral experience.

8. *What is the level of satisfaction of Waiver participants in obtaining primary care referrals from family planning providers?*

### Female Survey Respondents

Among the respondents who received a referral, 67 percent were satisfied with the referral process, 27 percent were not satisfied and six percent were unsure. This level of satisfaction

was consistent with focus group results from previous years where most women were generally satisfied with the process. Some respondents offered suggestions for improving the referral process; the most common suggestion was to provide a list of providers with prices.

### Male Survey Respondents

One male respondent received a referral and did not respond whether he was satisfied with the referral.

### **Summary of Findings and Recommendations**

The number of female respondents in the Waiver Year Four participant analysis significantly increased due to the use of surveys in place of focus groups. The survey was able to reach more female participants than the focus groups and provided a statewide perspective on experiences with the Waiver. NCI randomly selected the women to survey allowing for analysis that can be generalized to the larger female population of participants.

Thirty-three percent of the female sample population responded to the survey, of which 98 percent met the criteria for analysis. Approximately 44 percent of the surveys sent were completed by male participants and returned; 85 percent of returned surveys met the criteria of the analysis. NCI received responses from a representative cross-section of the entire participating population. Major findings and recommendations related to the survey results are described below.

- **A large majority of female participants use a contraceptive method; however, the use of a highly effective method was low.**

Among the 91 percent of respondents who reported using a contraceptive method, the primary method used by female respondents was birth control pills or oral contraceptive (48 percent), followed by condoms (30 percent) and Depo-provera or other injectables (22 percent). The more highly effective methods such as sterilization and IUDs were three percent and nine percent of responses, respectively.

Since 49 percent of respondents reported that they use a birth control method that was recommended based on advice from a health care provider, there may be an opportunity for DHHS to promote the recommendation of more highly effective methods when health care providers meet with Waiver participants. Education of health care providers about which methods are highly effective might encourage providers to offer more highly effective methods to their patients.

- **A majority of male participants seek vasectomies.**

Male survey respondents reported they received Waiver services primarily for birth control purposes; 82 percent of respondents used a method of birth control. A

majority (79 percent) of the respondents indicated that their method of birth control was a vasectomy/sterilization. Half of the men who reported using a method of birth control cited discussion with their partner/spouse as the reason they chose their method.

- **Female participants are more likely to complete an initial physical examination when enrolling in the Waiver.**

Eighty percent of female respondents had an initial exam upon enrollment and 80 percent of these women returned for additional Waiver services. Seven of the male survey respondents (41 percent) reported receiving an initial yearly exam; four of the respondents (57 percent) also reported having one or more additional visits each year.<sup>21</sup>

- **Of those participants who did not have access to affordable primary care, many were successful at obtaining a referral for primary care services.**

Fifty-one percent of female respondents who have access to a primary health care provider reported having no or limited access to affordable primary care services. Among female respondents who reported they had a medical condition or issue that needed care outside of the Waiver, 48 percent received a primary care referral; 22 percent of these women had existing access to free or affordable primary care.

Fifty-nine percent of male survey respondents reported access to a primary care provider and 30 percent of these respondents received care that was free or low cost.

Almost half of the female survey respondents who reported that they needed a referral reported receiving a referral for additional services and among those, 92 percent made an appointment to the referral provider. As a result of the referral, 67 percent of respondents reported being satisfied with the referral. One male survey respondent indicated receiving a referral for primary care services and succeeded in making and keeping an appointment with this provider.

It appears that the percentage of women who receive referrals to primary care services increased in Waiver Year Four. However, due to the change in data collection methods, other factors may have contributed to this difference, such as the number of respondents and a broader range of experiences because there were more respondents.

There was only one male who received a referral in Waiver Year Four, so no conclusions can be drawn about the “increase”. Since many factors contribute to

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<sup>21</sup> As a condition of the Waiver, all participants are required to have a physical examination prior to receiving prescriptions or other services. These results rely on the respondent remembering whether they had an initial exam.

whether a participant receives a referral, including the participant's health status and existing access to primary care, it was difficult to determine conclusively why primary care referrals still remain relatively low. Possible factors might include the relative healthy status of individuals who choose to return the survey, in comparison to health status overall, thus lessening the need for referrals; a lack of understanding by the respondent of when an appointment might be a referral; and a lack of provider familiarity with the Waiver's referral requirements. Although some factors are outside of the control of DHHS, the Agency may want to consider targeting the areas in which it does have the potential to affect the rate of primary care referrals, such as providing technical assistance or education to providers regarding Waiver referral requirements.

## SECTION IV: LESSONS LEARNED AND RECOMMENDATIONS FOR IMPROVING THE SURVEY APPROACH

In this section, NCI discusses some of the suggestions made in the Waiver Year Three report and whether these suggestions improved the approach in Waiver Year Four. NCI has also identified a number of additional “lessons learned” about the survey approach and recommendations related to improving the approach for Year Five of the Waiver evaluation.

In Waiver Year Four, DHHS agreed with NCI’s recommendation to proceed with a mail survey for female Waiver participants as well as male participants. As a result, DHHS approved the development and use of parallel female and male surveys. The logistical issues that persisted in focus groups for Waiver Year One through Waiver Year Three were eliminated by the implementation of mail surveys for female participants.

In the Waiver Year Three report, NCI identified several challenges related to the mail survey and offered potential solutions to implement in Waiver Year Four. Table 11 below summarizes the suggestions and the results of their implementation.

**Table 11: Waiver Year Three Male Participant Survey Issues, Potential Solutions and Waiver Year Four Results**

Issue	Description	Results
<b>Lack of primary care experiences among respondents</b>	The Waiver Year Four survey questions were rearranged to ask question about primary care referrals earlier in the survey to improve the likelihood that the primary care referral questions were not skipped due to respondent fatigue.	In Waiver Year Four, one male respondent reported needing a referral and receiving a referral, while 107 female respondents reported needing a referral with 51 respondents receiving a referral.  More than half of female (51 percent) and male respondents (59 percent) reported having a primary care provider, and therefore may not have required a referral.
<b>Certain questions prompted inconsistent responses</b>	In Waiver Year Three, male respondents who reported they did not use birth control also reported having a vasectomy, which, for the purposes of the report, was considered birth control.  For Waiver Year Four, the question was rephrased to provide examples of birth control, listing condoms, spermicidal foam and vasectomy.	In Waiver Year Four, only one male respondent who did not use birth control reported that he or his partner was sterilized. For Waiver Year Five, NCI suggests revising the option to read only that “My partner is sterilized” to provide a more accurate response.

Table 12 describes the challenges NCI experienced with the Waiver Year Four participant surveys and the proposed solutions.

**Table 12: Year Four Participant Survey Issues and Potential Solutions/Additional Challenges**

Issue	Description	Potential Solutions/Additional Challenges for Year Five Male Survey Results
<p><b>Some respondents did not associate sterilization as a form of birth control.</b></p>	<p>The Waiver Year Four survey results indicated a potential gap in how respondents might define birth control and whether sterilization was included in that definition.</p>	<p>NCI recommends adding some definition of sterilization and sterile to the survey to clarify this point.</p>
<p><b>Questions related to birth interval do not specify reporting birth intervals within the Waiver timeframe.</b></p>	<p>The female participant survey contains questions about birth intervals but did not specify that the respondent should report about children who were born since the women enrolled in the Waiver.</p>	<p>NCI recommends adding a follow-up question to the existing questions regarding birth intervals to attempt to collect information specific to birth occurring after Waiver participation.</p>

**APPENDIX A**  
**Female Participant Survey**

# Medicaid “Be Smart” Family Planning Program Survey

## Would you like to receive a \$25 Wal-Mart Gift Card?

Complete this survey and return it by July 31, 2009 using the enclosed self-addressed, stamped envelope. If your survey is one of the first 100 that we receive, we will mail you a \$25 Wal-Mart Gift Card within 2 weeks of receiving your completed survey.

The North Carolina Division of Medical Assistance (Medicaid) records show that you used family planning services through the Medicaid “Be Smart” Family Planning Program some time from **October 1, 2008 to March 30, 2009**. By answering the questions in this survey, we hope to learn about your experiences using the Medicaid Be Smart Family Planning Program for your family planning needs. Please be assured that we will keep your individual responses confidential.

- Please do your best to answer all of the questions by checking the box to the left of your answer, like this:

Yes

or

Yes

No

No

- You are sometimes asked to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

Yes    →    **Go to Question 3**

No

In this example, if you answered “yes” to this question, you would skip the next question and go to question 3. If you answered “no” to this question, you would answer the next question on the survey. You do not need to answer the questions if you are told to skip them.

- When you finish answering all of the questions in the survey, put the survey in the enclosed self-addressed stamped envelope.
- Seal the envelope by pressing it closed.
- Return the sealed envelope by placing it in the mail.
- We may want to call you to clarify your responses. Please answer Question 50 to tell us your willingness to talk with us. If you do not want to be contacted, you will still receive the \$25 gift card for completing this survey and returning it to us by July 31, 2009.

**This survey will take you about 10 – 15 minutes to complete.**

**THANK YOU FOR FILLING OUT THE SURVEY.**



# Medicaid "Be Smart" Family Planning Program Survey

1. Gender

100% Female  
0% Male → **STOP. This survey is not for you. Return the survey in the self-addressed stamped envelope**

The "Be Smart" Family Planning Program is a Medicaid program with goals to: increase the number of persons receiving family planning services, decrease the number of unplanned pregnancies and improve the health and well-being of children and families in North Carolina.

2. Did you know that the services listed below are paid for by the Medicaid Be Smart Family Planning program?

- ✓ Annual and periodic family planning exams
- ✓ Most types of birth control
- ✓ Testing for sexually transmitted infections
- ✓ HIV testing
- ✓ Voluntary sterilization (including vasectomies)
- ✓ Pregnancy tests

53% Yes, I knew some of these services were paid for  
42% Yes, I knew all of these services were paid for  
4% No, I did not know any of these services were paid for  
1% No Answer

3. Did you use Medicaid Be Smart Family Planning Program services between October 1, 2008 and March 30, 2009?

96% Yes  
0% No → **STOP. This survey is not for you. Return the survey in the self-addressed stamped envelope**  
4% Unsure  
<1% No Answer

4. Think about the first month that you started using the Be Smart Family Planning Program services. How many months has it been since that first month?

100% 6 months or more  
0% Less than 6 months → **STOP. This survey is not for you. Return the survey in the self-addressed stamped envelope**  
0% No Answer

5. Where did you go to get Be Smart family planning services? (Check all that apply)

31% Health Care Provider's Office (including Doctor's Office)  
43% County Health Department  
4% Community Health Clinic  
10% Family Planning Agency  
3% Hospital  
2% Unsure  
18% Other: \_\_\_\_\_  
1% No Answer

6. How did you find out about the Be Smart Family Planning Program? If you heard about the program from more than one source, please check all that apply.

10% New enrollee letter  
11% Health Care Provider  
32% County Health Department Staff  
16% Family or friends  
42% Case manager  
3% Brochure or poster  
5% Don't remember  
8% Other \_\_\_\_\_  
53% No Answer

7. Did the information you heard or read about the Be Smart Family Planning Program encourage you to get family planning services?

86% Yes → **Go to Question 9**  
12% No  
2% No Answer

8. If you answered "No" to Question 7, please tell us who or what encouraged you to get family planning services.

\_\_\_\_\_

9. How would you describe the enrollment process for the Be Smart Family Planning Program?

38% Very Easy  
43% Easy  
15% Neither Easy nor Difficult  
2% Difficult  
1% Very Difficult  
1% No Answer

10. If you felt the enrollment process was difficult, please tell us what was difficult.

\_\_\_\_\_

11. Did you have an initial (yearly) physical examination from a health care provider when you first enrolled in the Be Smart Family Planning Program?

80% Yes  
19% No  
1% No Answer

12. After having an initial (yearly) exam, have you returned to get additional services provided under the Be Smart Family Planning Program?

31% Yes, for a yearly check-up  
14% Yes, for a periodic visit  
35% Yes, for both a yearly check-up and periodic visits  
19% No → **Go to Question 14**  
1% No Answer



# Medicaid “Be Smart” Family Planning Program Survey

13. If you have visited your family planning provider for periodic visits, how many visits do you make per year?

- 27% 1
- 48% 2 – 3
- 20% 4 or more
- 5% No Answer

14. Do you have a health care provider who you visit when you need other medical care, such as when you are sick or need a check-up (this might be the same provider as your family planning provider)?

- 51% Yes
- 47% No → **Go to Question 17**
- 2% No Answer

15. Does this health care provider offer medical care that is either free or low cost?

- 13% Yes
- 18% No → **Go to Question 17**
- 66% No Answer

16. If you have a health care provider who offers free or low cost medical care, where do you go to get the medical care?

- 27% Health Care Provider’s Office (including Doctor’s Office)
- 12% County Health Department
- 7% Community Health Clinic
- 0% Family Planning Agency
- 1% Hospital
- 1% Unsure
- 1% Other: \_\_\_\_\_
- 51% No Answer

17. Within the past 12 months, did you have a health problem that required you to see a health care provider *other than* your family planning provider?

- 51% Yes
- 48% No → **Go to Question 20**
- 1% No Answer

18. What type of health care provider did you see for that health problem?

- 33% My family physician
- 9% A physician recommended to me by someone else
- 41% Hospital Emergency Room physician
- 13% Other: \_\_\_\_\_
- 4% No Answer

19. Who paid for that visit to your health care provider?

- 52% I paid
- 8% The Medicaid “Be Smart” Family Planning Program paid
- 9% My insurance paid
- 3% There was no charge
- 24% Other: \_\_\_\_\_
- 4% No Answer

In the next set of questions, we would like to learn more about the health care services you received to treat a medical condition or issue that was discovered by your family planning provider.

20. At your last family planning visit, did the doctor or nurse tell you that you had any other medical condition or issue that should be taken care of that would not be paid by the Medicaid Be Smart Family Planning Program?

- 27% Yes
- 69% No → **Go to Question 35**
- 3% Unsure
- 1% No Answer

21. Did the doctor or nurse suggest a health care provider where you could go to get care for your other medical condition or issue? **This suggestion is sometimes known as a “referral.”**

- 48% Yes
- 43% No → **Go to Question 34**
- 6% Unsure
- 3% No Answer

22. If you received a referral from your family planning provider, what was the reason that you needed to see a different health care provider?

- 57% Because my family planning provider could not treat my condition.
- 29% Because my family planning provider could not provide free or low cost care.
- 14% Other \_\_\_\_\_
- 0% No Answer

23. If you received a referral from your family planning provider, did you ask for the referral?

- 27% Yes, I asked for the name of a health care provider.
- 67% No, the referral was offered to me.
- 6% Unsure

24. Did the family planning provider give you a list of health care providers for you to choose from?

- 33% Yes
- 63% No → **Go to Question 27**
- 4% Unsure
- 0% No Answer

25. Did the list include names and phone numbers to call?

- 94% Yes
- 6% No
- 0% Unsure
- 0% No Answer

26. Did you know if the health care providers on the list offered free or low cost services?

- 47% Yes
- 41% No
- 12% Unsure
- 0% No Answer



# Medicaid “Be Smart” Family Planning Program Survey

27. After receiving a health care provider referral from your family planning provider, did you make an appointment to see a health care provider?

- 49% Yes → **Go to Question 29**
- 49% No
- 2% No Answer

28. Why did you not make an appointment to see a referral health care provider? (Check all that apply)

- 0% I did not think I needed the services.
- 0% I needed care sooner than I could get an appointment.
- 0% I did not want the services.
- 0% I did not know where I could get services.
- 8% I did not have the time to get services.
- 92% I could not pay for the cost of services.
- 4% I did not have transportation to get to the health care provider.
- 8% I could not find child care so that I could go to see the health care provider.
- 0% I could not find a health care provider I was comfortable using.
- 0% Unsure
- 8% Other: \_\_\_\_\_
- 0% No Answer

**GO TO QUESTION 31**

29. If you made an appointment to see a health care provider, did you go to the appointment?

- 92% Yes → **Go to Question 31**
- 8% No
- 0% No Answer

30. If you did not go to the appointment, why not? (Check all that apply)

- 0% I did not think I needed the services after all.
- 0% I needed care sooner than the appointment, i.e., the amount of time I had to wait for the appointment was too long.
- 0% I decided I did not want to see this health care provider.
- 0% I did not have the time to go to the appointment.
- 50% I could not pay the cost for services.
- 0% I did not have transportation to get to the appointment.
- 0% I could not find child care so that I could go to the appointment.
- 0% Unsure
- 50% Other: \_\_\_\_\_
- 0% No Answer

31. Were you satisfied with your experience in obtaining a health care provider referral?

- 67% Yes → **Go to Question 35**
- 27% No
- 6% Unsure
- 0% No Answer

32. If you were not satisfied, why not?

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33. What would you change to make getting a health care provider referral a better experience?

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**GO TO QUESTION 35**

34. Why do you think you did not receive a referral?

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In the next set of questions, we would like to learn more about the choices that you have made for birth control use. If you have children, we also would like information about your experiences as a mother. We appreciate your answering these questions to the best of your ability. You may skip any questions that you do not want to answer.

35. Do you use a method of birth control to prevent pregnancy, for example: condoms, birth control pills, patch, tubes tied?

- 91% Yes
- 8% No → **Go to Question 43**
- 1% No Answer

36. Did you use a method of birth control before joining the Medicaid Be Smart Family Planning Program?

- 68% Yes
- 29% No
- 3% No Answer

37. Did you change the method of birth control that you use when you joined the Medicaid Be Smart Family Planning Program?

- 43% Yes
- 53% No
- 4% No Answer

**→ Go to Next Page**



# Medicaid "Be Smart" Family Planning Program Survey

38. What method of birth control do you use now? (Check all that apply)
- 30% Condom
  - 48% Birth control pills or oral contraceptive
  - 22% Depo-provera or other injectables
  - 9% IUD
  - 0% Diaphragm
  - 4% Patch
  - 6% Nuva-ring
  - 6% Withdrawal
  - 0% Fertility awareness, rhythm method, or natural family planning (Safe period by temperature, or cervical mucus test, or LAM)
  - 0% Sponge
  - 1% Spermicidal foam/cream/film/suppository
  - 1% Female condom
  - <1% Emergency contraception (or morning after pill)
  - 2% Periodic abstinence (Rhythm/Calendar)
  - 1% Chance
  - 3% Sterilization
  - <1% My partner had a vasectomy
  - 1% None
  - 1% Other \_\_\_\_\_
  - 2% No Answer

39. Did you use the same method of birth control prior to enrolling in the Family Planning Program?

53% Yes  
 44% No  
 3% No Answer

40. How did you decide on the method of birth control that you use now?

49% Advice from health care provider  
 3% Price  
 22% Convenience  
 10% Discussed with partner/spouse  
 12% Performance/effectiveness of method  
 15% Ease of use  
 6% Other \_\_\_\_\_  
 4% No Answer

41. Were you given a choice by your health care provider of the method of birth control that you use now?

91% Yes  
 6% No  
 4% No Answer

42. If you answered "No" to Question 41, please explain.

\_\_\_\_\_

## Go to Question 44

43. If you do not use birth control, why not?

3% Too expensive  
 10% Don't know which type to use  
 10% My partner is sterile/I am sterile  
 67% Other \_\_\_\_\_  
 10% No Answer

44. Have you had more than one pregnancy in your lifetime?

52% Yes  
 47% No → **Go to Question 48**  
 1% No Answer

45. Do you have more than one child?

37% Yes  
 20% No → **Go to Question 48**  
 42% No Answer

46. What is the age difference between your first born child and your second born child?

26% Less than 2 years  
 30% Between 2 to 3 years  
 42% Greater than 3 years  
 2% Other \_\_\_\_\_  
 0% No Answer

47. If you have more than two children, what is the age difference between your second born child and your third born child?

14% Less than 2 years  
 10% Between 2 to 3 years  
 16% Greater than 3 years  
 4% Other \_\_\_\_\_  
 56% No Answer

48. Were any of your pregnancies unplanned, that is, were you surprised to find out that you were pregnant?

65% Yes  
 30% No → **Go to Question 51**  
 4% No Answer

49. How many unplanned pregnancies have you had in your lifetime?

48% 1  
 30% 2  
 17% 3 or more  
 5% No Answer

50. Have you had fewer pregnancies/children since enrolling in the Family Planning Program?

48% Yes  
 16% No  
 36% No Answer

51. Have you had any unplanned pregnancies since enrolling in the Medicaid Be Smart Family Planning Program?

6% Yes  
 91% No → **Go to Question 53**  
 3% No Answer

52. How many unplanned pregnancies have you had since enrolling in the Medicaid Be Smart Family Planning Program?

77% 1  
 8% 2  
 4% 3 or more  
 11% No Answer



# Medicaid "Be Smart" Family Planning Program Survey

53. How did you receive this survey?

- 100% It was mailed to me
- 0% I completed it for my friend/relative based on their experiences
- 0% My friend/relative did not want to complete it so I completed it based on my experiences
- 0% Other \_\_\_\_\_
- <1% No Answer

54. If we have additional questions, may we contact you about your responses?

- 79% Yes (please provide your phone number)  
phone #: \_\_\_\_\_

What is the best time of day to reach you?

- |  | Morning<br>(9AM – Noon) | Afternoon<br>(Noon – 4PM) | Evening<br>(4PM – 7PM) |
|--|-------------------------|---------------------------|------------------------|
|--|-------------------------|---------------------------|------------------------|

21% No

Ethnicity: Spanish/Hispanic/Latino

- 3% Yes
- 89% No
- 7% No Answer

Race (optional, check one)

- 41% African American
- 48% White/Caucasian
- 1% Asian
- 2% American Indian or Alaskan Native
- 0% Pacific Islander or Hawaiian Native
- 2% Other \_\_\_\_\_
- 6% No Answer

Age

- 0% 18 or younger
- 37% 19-24
- 28% 25-29
- 18% 30-34
- 10% 35-39
- 6% 40-55
- 0% 56 or older
- 1% No Answer

**FINISHED**

**THANK YOU FOR PARTICIPATING**



**APPENDIX B**  
**Male Participant Survey**

# Medicaid “Be Smart” Family Planning Program Survey

## Would you like to receive a \$25 Wal-Mart Gift Card?

Complete this survey and return it by July 22, 2009 using the enclosed self-addressed, stamped envelope. We will mail you a \$25 Wal-Mart Gift Card within 2 weeks of receiving your completed survey.

The North Carolina Division of Medical Assistance (Medicaid) records show that you used family planning services through the Medicaid “Be Smart” Family Planning Program some time from **October 1, 2008 to March 30, 2009**. By answering the questions in this survey, we hope to learn about your experiences using the Medicaid Be Smart Family Planning Program for your family planning needs. Please be assured that we will keep your individual responses confidential.

- Please do your best to answer all of the questions by checking the box to the left of your answer, like this:

Yes

or

Yes

No

No

- You are sometimes asked to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

Yes    →    **Go to Question 3**

No

In this example, if you answered “yes” to this question, you would skip the next question and go to question 3. If you answered “no” to this question, you would answer the next question on the survey. You do not need to answer the questions if you are told to skip them.

- When you finish answering all of the questions in the survey, put the survey in the enclosed self-addressed stamped envelope.
- Seal the envelope by pressing it closed.
- Return the sealed envelope by placing it in the mail.
- We may want to call you to clarify your responses. Please answer Question 39 to tell us your willingness to talk with us. If you do not want to be contacted, you will still receive the \$25 gift card for completing this survey and returning it to us by July 22, 2009.

**This survey will take you about 10 – 15 minutes to complete.**

**THANK YOU FOR FILLING OUT THE SURVEY.**



# Medicaid "Be Smart" Family Planning Program Survey

1. Gender

100% Male  
 0% Female → **STOP. This survey is not for you. Return the survey in the self-addressed stamped envelope**

The "Be Smart" Family Planning Program is a Medicaid program with goals to: increase the number of persons receiving family planning services, decrease the number of unplanned pregnancies and improve the health and well-being of children and families in North Carolina.

2. Did you know that the services listed below are paid for by the Medicaid Be Smart Family Planning program?

- ✓ Annual and periodic family planning exams
- ✓ Most types of birth control
- ✓ Testing for sexually transmitted infections
- ✓ HIV testing
- ✓ Voluntary sterilization (including vasectomies)
- ✓ Pregnancy tests

59% Yes, I knew some of these services were paid for  
 41% Yes, I knew all of these services were paid for  
 0% No, I did not know any of these services were paid for

3. Did you use Medicaid Be Smart Family Planning Program services between October 1, 2008 and March 30, 2009?

94% Yes  
 0% No → **STOP. This survey is not for you. Return the survey in the self-addressed stamped envelope**  
 6% Unsure

4. Think about the first month that you started using the Be Smart Family Planning Program services. How many months has it been since that first month?

100% 6 months or more  
 0% Less than 6 months → **STOP. This survey is not for you. Return the survey in the self-addressed stamped envelope**

5. Where did you go to get Be Smart family planning services? (Check all that apply)

65% Health Care Provider's Office (including Doctor's Office)  
 24% County Health Department  
 0% Community Health Clinic  
 0% Family Planning Agency  
 0% Hospital  
 0% Unsure  
 11% Other: \_\_\_\_\_

6. How did you find out about the Be Smart Family Planning Program? If you heard about the program from more than one source, please check all that apply.

6% New enrollee letter  
 0% Health Care Provider  
 47% County Health Department Staff  
 35% Family or friends  
 35% Case manager  
 6% Brochure or poster  
 0% Don't remember  
 12% Other \_\_\_\_\_  
 6% No Answer

7. Did the information you heard or read about the Be Smart Family Planning Program encourage you to get family planning services?

94% Yes → **Go to Question 9**  
 6% No

8. If you answered "No" to Question 7, please tell us who or what encouraged you to get family planning services.

\_\_\_\_\_  
 \_\_\_\_\_

9. How would you describe the enrollment process for the Be Smart Family Planning Program?

41% Very Easy  
 30% Easy  
 29% Neither Easy nor Difficult  
 0% Difficult  
 0% Very Difficult

10. If you felt the enrollment process was difficult, please tell us what was difficult.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

11. Did you have an initial (yearly) physical examination from a health care provider when you first enrolled in the Be Smart Family Planning Program?

41% Yes  
 59% No

12. After having an initial (yearly) exam, have you returned to get additional services provided under the Be Smart Family Planning Program?

0% Yes, for a yearly check-up  
 43% Yes, for a periodic visit  
 4% Yes, for both a yearly check-up and periodic visits  
 43% No → **Go to Question 14**  
 0% No Answer



# Medicaid “Be Smart” Family Planning Program Survey

13. If you have visited your family planning provider for periodic visits, how many visits do you make per year?

- 40% 1
- 60% 2 – 3
- 0% 4 or more
- 0% No Answer

14. Do you have a health care provider who you visit when you need other medical care, such as when you are sick or need a check-up (this might be the same provider as your family planning provider)?

- 59% Yes
- 41% No → **Go to Question 17**

15. Does this health care provider offer medical care that is either free or low cost?

- 30% Yes
- 60% No → **Go to Question 17**
- 10% No Answer

16. If you have a health care provider who offers free or low cost medical care, where do you go to get the medical care?

- 20% Health Care Provider’s Office (including Doctor’s Office)
- 0% County Health Department
- 10% Community Health Clinic
- 0% Family Planning Agency
- 10% Hospital
- 0% Unsure
- 10% Other: \_\_\_\_\_
- 50% No Answer

17. Within the past 12 months, did you have a health problem that required you to see a health care provider *other than* your family planning provider?

- 35% Yes
- 65% No → **Go to Question 20**

18. What type of health care provider did you see for that health problem?

- 67% My family physician
- 0% A physician recommended to me by someone else
- 17% Hospital Emergency Room physician
- 16% Other: \_\_\_\_\_
- 0% No Answer

19. Who paid for that visit to your health care provider?

- 67% I paid
- 0% The Medicaid “Be Smart” Family Planning Program paid
- 0% My insurance paid
- 17% There was no charge
- 16% Other: \_\_\_\_\_
- 0% No Answer

In the next set of questions, we would like to learn more about the health care services you received to treat a medical condition or issue that was discovered by your family planning provider.

20. At your last family planning visit, did the doctor or nurse tell you that you had any other medical condition or issue that should be taken care of that would not be paid by the Medicaid Be Smart Family Planning Program?

- 6% Yes
- 88% No → **Go to Question 35**
- 0% Unsure
- 6% No Answer

21. Did the doctor or nurse suggest a health care provider where you could go to get care for your other medical condition or issue? **This suggestion is sometimes known as a “referral.”**

- 100% Yes
- 0% No → **Go to Question 34**
- 0% Unsure
- 0% No Answer

22. If you received a referral from your family planning provider, what was the reason that you needed to see a different health care provider?

- 0% Because my family planning provider could not treat my condition.
- 0% Because my family planning provider could not provide free or low cost care.
- 100% Other \_\_\_\_\_
- 0% No Answer

23. If you received a referral from your family planning provider, did you ask for the referral?

- 0% Yes, I asked for the name of a health care provider.
- 6% No, the referral was offered to me.
- 0% Unsure
- 94% No Answer

24. Did the family planning provider give you a list of health care providers for you to choose from?

- 0% Yes
- 100% No → **Go to Question 27**
- 0% Unsure
- 0% No Answer

25. Did the list include names and phone numbers to call?

- 0% Yes
- 0% No
- 0% Unsure
- 0% No Answer

26. Did you know if the health care providers on the list offered free or low cost services?

- 0% Yes
- 0% No
- 0% Unsure
- 0% No Answer



# Medicaid "Be Smart" Family Planning Program Survey

27. After receiving a health care provider referral from your family planning provider, did you make an appointment to see a health care provider?

100% Yes → **Go to Question 29**  
0% No

28. Why did you not make an appointment to see a referral health care provider? (Check all that apply)

- 0% I did not think I needed the services.
- 0% I needed care sooner than I could get an appointment.
- 0% I did not want the services.
- 0% I did not know where I could get services.
- 0% I did not have the time to get services.
- 0% I could not pay for the cost of services.
- 0% I did not have transportation to get to the health care provider.
- 0% I could not find child care so that I could go to see the health care provider.
- 0% I could not find a health care provider I was comfortable using.
- 0% Unsure
- 0% Other: \_\_\_\_\_
- 0% No Answer

**GO TO QUESTION 31**

29. If you made an appointment to see a referral health care provider, did you go to the appointment?

100% Yes → **Go to Question 31**  
0% No

30. If you did not go to the appointment, why not? (Check all that apply)

- 0% I did not think I needed the services after all.
- 0% I needed care sooner than the appointment, i.e., the amount of time I had to wait for the appointment was too long.
- 0% I decided I did not want to see this health care provider.
- 0% I did not have the time to go to the appointment.
- 0% I could not pay the cost for services.
- 0% I did not have transportation to get to the appointment.
- 0% I could not find child care so that I could go to the appointment.
- 0% Unsure
- 0% Other: \_\_\_\_\_
- 0% No Answer

31. Were you satisfied with your experience in obtaining a health care provider referral?

100% Yes → **Go to Question 35**  
0% No  
0% Unsure  
0% No Answer

32. If you were not satisfied, why not?

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33. What would you change to make getting a health care provider referral a better experience?

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**GO TO QUESTION 35**

34. Why do you think you did not receive a referral?

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In the next set of questions, we would like to learn more about the choices that you have made for birth control use. If you have children, we also would like information about your experiences as a father. We appreciate your answering these questions to the best of your ability. You may skip any questions that you do not want to answer.

35. Do you use a method of birth control to prevent pregnancy, for example, condoms, spermicidal foam, vasectomy?

82% Yes  
18% No → **Go to Question 43**

36. Did you use birth control before joining the Medicaid Be Smart Family Planning Program?

86% Yes  
14% No  
0% No Answer

37. Did you change the method of birth control that you use when you joined the Medicaid Be Smart Family Planning Program?

79% Yes  
21% No  
0% No Answer

38. What method of birth control do you use now? (Check all that apply)

- 21% Condom
- 79% Vasectomy/Sterilization
- 0% Periodic abstinence
- 0% Spermicidal foam/cream/film/suppository
- 21% Withdrawal
- 0% Fertility awareness, rhythm method, or natural family planning
- 0% Chance
- 14% My partner takes care of birth control
- 0% None
- 0% Other: \_\_\_\_\_
- 0% No Answer



# Medicaid "Be Smart" Family Planning Program Survey

39. Did you use the same method of birth control prior to enrolling in the Family Planning Program?

29% Yes  
71% No  
0% No Answer

40. How did you decide on the method of birth control to use?

7% Advice from health care provider  
7% Price  
21% Convenience  
50% Discussed with partner/spouse  
7% Performance/effectiveness of method  
7% Ease of use  
0% Other \_\_\_\_\_  
0% No Answer

41. Were you given a choice by your health care provider of the method of birth control to use?

64% Yes  
36% No  
0% No Answer

42. If you answered "No" to Question 41, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

➔ **Go to Question 44**

43. If you do not use birth control, why not?

0% Too expensive  
0% Don't know which type to use  
33% I had a vasectomy/My partner is sterilized  
33% Other \_\_\_\_\_  
33% No Answer

44. Have you ever been responsible for an unplanned pregnancy, that is, you were surprised to find out that there was a pregnancy?

65% Yes  
35% No ➔ **Go to Question 48**

45. How many unplanned pregnancies have you been responsible for in your lifetime?

18% 1  
64% 2  
18% 3 or more  
0% No Answer

46. Have you been responsible for any unplanned pregnancy(ies) since enrolling in the Medicaid Be Smart Family Planning Program?

0% Yes  
100% No ➔ **Go to Question 48**  
0% No Answer

47. How many unplanned pregnancies have you been responsible for since enrolling in the Medicaid Be Smart Family Planning Program?

0% 1  
0% 2  
0% 3 or more  
0% No Answer

48. How did you receive this survey?

100% It was mailed to me  
0% I completed it for my friend/relative based on their experiences  
0% My friend/relative did not want to complete it so I completed it based on my experiences  
0% Other \_\_\_\_\_

49. If we have additional questions, may we contact you about your responses?

53% Yes (please provide your phone number)  
phone #: \_\_\_\_\_

What is the best time of day to reach you?

Morning (9AM – Noon)	Afternoon (Noon – 4PM)	Evening (4PM – 7PM)
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47% No

Ethnicity: Spanish/Hispanic/Latino

0% Yes  
94% No  
6% No Answer

Race (optional, check one)

18% African American  
76% White/Caucasian  
0% Asian  
6% American Indian or Alaskan Native  
0% Pacific Islander or Hawaiian Native  
0% Other \_\_\_\_\_

Age

0% 18 or younger  
12% 19-24  
24% 25-29  
29% 30-34  
12% 35-39  
23% 40-55  
0% 56 or older

**FINISHED**

**THANK YOU FOR PARTICIPATING**

