

APPENDIX A
BACKGROUND ON THE BE SMART FAMILY
PLANNING WAIVER

North Carolina Family Planning Waiver Program Waiver Year Five Annual Report

Overview of the Waiver

Beginning October 1, 2005, DHHS began enrolling women and men into the “Be Smart” Family Planning Waiver. The Be Smart Family Planning Waiver operated from October 1, 2005 through September 30, 2010 under a Demonstration Waiver awarded by CMS. DHHS applied for a renewal of the waiver in March 10010 and received extensions from CMS to continue the waiver through March 10011. Instead of continuing to operate the waiver, DHHS is in the process of converting the Waiver services to Medicaid State Plan services.

The overall goal of the Waiver was to reduce unintended pregnancies and improve the health and well-being of children and families in North Carolina. The Waiver was designed to expand eligibility for family planning services and increase the number of low-income persons receiving family planning services throughout North Carolina.

The Be Smart Family Planning Waiver makes family planning services available to men ages 19 to 60 and women ages 19 to 55, who have incomes at or below 185 percent of the Federal Poverty Level (FPL).

Prior to the implementation of Be Smart, North Carolina offered family planning services through Medicaid for women at or below 45 percent of the FPL. Women who did not qualify for Medicaid could obtain family planning services through publicly-supported family planning clinics.¹

When a woman whose income is up to 185 percent of the FPL becomes pregnant, she can receive comprehensive care related to the pregnancy through the Medicaid program. After the end of the month in which the 60th postpartum day occurs, a North Carolina woman is no longer eligible for Medicaid if her income is above 45 percent of the FPL. This population of women between 45 percent and 185 percent of the FPL was of particular concern to the Division of Medical Assistance (DMA) because these women are only temporarily eligible for Medicaid due to their pregnancy status and the majority lose their eligibility after the postpartum period. The Be Smart Family Planning Waiver is intended to cover this population of women.

According to academic studies, lack of availability of family planning services for women with and without a previous pregnancy has caused an increase of inadequately spaced, unwanted and unintended pregnancies.² These types of pregnancies contribute to an increased fertility rate in a state, and also result in higher costs to Medicaid for deliveries and care for the child through the first year of life.

¹ North Carolina Family Planning Waiver Proposal, 1115(a) Demonstration Waiver Application, April 2000.

² Forrest, JD and Frost, J. “The Family Planning Attitudes and Experiences of Low-Income Women,” *Family Planning Perspectives*, 36(6):246-277, November/December 1996.

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Men ages 19 to 60 with income below 185 percent of the FPL are also included in this demonstration, since North Carolina has had limited resources in the past to provide vasectomies or other family planning services to men. By extending the Family Planning Waiver services to include men, DMA expects that an increase of vasectomies will also lead to fewer unwanted, unintended and inadequately spaced pregnancies. This in turn should lead to a lower fertility rate, and thus, fewer Medicaid dollars spent for the births and care of these children.

Waiver Objectives

The Waiver objectives developed by North Carolina DMA are as follows:

1. Increase the number of reproductive age women and men receiving either Family Planning Waiver or Title X funded family planning services by improving access to and use of Medicaid family planning services.
2. Reduce the number of inadequately spaced pregnancies by women in the target group, thus improving birth outcomes and health of these women.
3. Reduce the number of unintended and unwanted pregnancies among women eligible for Medicaid.
4. Impact positively the utilization of and “continuation rates” for contraceptive use among the target population.
5. Increase the use of more effective methods of contraception (such as Depo-Provera, Intrauterine Device (IUD) and sterilization) in the target population.
6. Decrease the number of Medicaid-paid deliveries, which will reduce annual expenditures for prenatal, delivery, newborn and infant care.
7. Estimate the overall savings in Medicaid spending attributable to providing family planning services to women and men through this demonstration project.

Covered Services Under the Waiver

To address the goals of the Waiver, the Be Smart Family Planning Program covers the following services for enrollees when provided as part of a family planning visit:

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- Annual and periodic office visits (including counseling, patient education, and treatment)
- Specific laboratory procedures (e.g., pap smears, pregnancy tests)
- Food and Drug Administration-approved and Medicaid-covered birth control methods, procedures, pharmaceutical supplies and devices
- Screening for Human Immunodeficiency Virus (HIV)
- Screening and limited treatment for specific Sexually Transmitted Infections (STIs)
- Voluntary sterilization (in accordance with Federal sterilization guidelines)

The Family Planning Waiver also provides men and women with referrals for other health concerns that are not covered under the Waiver.

Effective in Waiver Year Three, North Carolina began a second component to the Waiver, the Clinical Innovation Project, which provided enhanced family planning services to a demonstration group of Waiver participants. These enhanced family planning services included:

- Targeted messages built upon an “Explore, Share, Promote” (ESP) framework
 - Explore any discrepancies between pregnancy intention and contraceptive use
 - Share information on contraception and method use
 - Promote behaviors that reduce risk of unintended pregnancy
- Contingency planning, including a prescription for emergency contraception (EC)
- Streamlined telephone access to local health departments for women with questions or concerns about their contraceptive method
- For consenting individuals, telephone support for use of method to include at least four calls from the Telephone Support and Data Center

DHHS hypothesized that the Clinical Innovation would have a positive effect on utilization of and “continuation rates” for contraceptive use among the target population (Objective 4 of the

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Waiver) and would increase the use of more effective methods of contraception in the target population (Objective 5 of the Waiver).

Waiver Hypotheses

DMA, through its Waiver application for the Be Smart Family Planning Waiver, hypothesized that:³

- Putting in place a system by which women and men in North Carolina can more easily access family planning services will reduce the number of inadequately spaced pregnancies.
- Reducing the number of inadequately spaced pregnancies should lead to reductions in the number of adverse pregnancy outcomes and lead to a net savings in Medicaid spending.
- Reducing unintended pregnancies through increased access to and utilization of family planning services will contribute to a reduction of low birth weight as a factor contributing to infant mortality.
- Increasing family planning visits for this population (both men and women) will also improve public health, as early detection and treatment during family planning visits is predicted to result in a decrease in the rate of sexually transmitted infections.
- Supporting women in meeting their healthcare needs will put them in a better position to exercise their right to make informed choices regarding the spacing and number of their children and to increase the interval between pregnancies. Likewise, as a result of routine screening and examination, women and men will be able to maintain good health status, all of which will have tremendous value from a cost benefit standpoint as well as from the view of the individual and her/his family.

³ North Carolina Family Planning Waiver Program Proposal, 1115(a) Demonstration Waiver Program Application, April 2000.

APPENDIX B
SUMMARY OF WAIVER PROGRAM MEASURES
AND DATA SOURCES

North Carolina Family Planning Waiver Program
 Waiver Year Five Annual Report
 Appendix B: Summary of Waiver Program Measures and Data Sources

Hypothesis Number	Hypothesis	Measure	Data Source	Approach to Analysis
C.1.1	Increased proportions of eligible women and men will be enrolled in the Waiver each year.	Unduplicated count of clients enrolled divided by unduplicated count of eligible clients.	<i>Numerator:</i> MMIS Eligibility file <i>Denominator:</i> ACS population data	Calculate the ratio of unduplicated clients enrolled in the Waiver to the eligible population in North Carolina. Compare this ratio across the five years of the Waiver to determine if there are an increased proportion of eligibles enrolling in the Waiver over the life of the Waiver.
C.1.2	More low-income women who are enrolled in the Waiver will receive family planning services.	Unduplicated count of enrollees receiving services in the last 12 months (participants).	<i>Numerator:</i> MMIS paid claims <i>Denominator:</i> MMIS Eligibility file	Calculate the ratio of unduplicated female Waiver enrollees who received at least one paid family planning service in the Waiver year to the total number of female Waiver enrollees who could have received a service. Compare this ratio across the five years of the Waiver to determine if there are an increased proportion of enrollees obtaining family planning services.
C.1.3	More low-income men who are enrolled in the Waiver will receive family planning services.	Unduplicated count of enrollees, participants and vasectomies.	<i>Numerator:</i> MMIS paid claims <i>Denominator:</i> MMIS Eligibility file	Calculate the ratio of unduplicated male Waiver enrollees who received at least one paid family planning service in the Waiver year to the total number of male Waiver enrollees who could have received a service. Compare this ratio across the five years of the Waiver to determine if there are an increased proportion of male enrollees obtaining family planning services.

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 Appendix B: Summary of Waiver Program Measures and Data Sources

Hypothesis Number	Hypothesis	Measure	Data Source	Approach to Analysis
C.1.4	Participant women will be less likely to be lost to follow-up.	Participant return to clinic for annual visit and reason for visit.	<i>Numerator:</i> MMIS paid claims <i>Denominator:</i> MMIS paid claims	Calculate the ratio of female participants who received a follow-up annual exam within a 12 – 15 month time period to all females from the prior Waiver year who received a well woman exam. Beginning with Waiver Year Two, compare this ratio across the five years of the Waiver to determine if there is an increased proportion of female participants returning for services.
C.1.5	Participant women will be more likely to report continuous use of a contraceptive method.	Continuous use of contraception during the year.	<i>Numerator:</i> MMIS paid claims <i>Denominator:</i> MMIS paid claims	Calculate the ratio of unduplicated female participants with continuous use of a contraceptive method to all female participants who had a contraceptive claim in the Waiver year. Consistent claims data for a method of contraception over the course of each study year will represent consistent use of contraception over the year's time period. Less consistent claims data will signify less consistent use. Beginning with Waiver Year Two, compare this ratio across the five years of the Waiver to determine if there is an increased proportion of female participants who continuously use a contraceptive method.
C.1.6	Participant women will be more likely to report use of a highly effective method of contraception.	Types of methods used over the course of the year.	<i>Numerator:</i> MMIS paid claims <i>Denominator:</i> MMIS paid claims	Calculate the weighted average of female Waiver participants' continuous use of contraception methods indicated in claims data and the estimated percent of women <u>not</u> experiencing an unintended pregnancy within the first year of use to develop an average effectiveness score for the Waiver year. Beginning with Waiver Year Two, compare the average effectiveness score across the five years of the Waiver to determine if there is an increased proportion of female participants who use a highly effective method of contraception.

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Hypothesis Number	Hypothesis	Measure	Data Source	Approach to Analysis
C.2.1	Participant women will be less likely to have inadequately spaced pregnancies.	Percent of Waiver enrollees with inter-pregnancy interval of at least 12 months.	<ul style="list-style-type: none"> MMIS paid claims 	Calculate the ratio of female participants with inadequately spaced pregnancies to all female participants who became pregnant during the Waiver year.
C.2.2	Lower rates of unintended and unwanted pregnancy among Waiver participants.	Rate of unintended pregnancy among low-income women and among Waiver enrollees.	<i>Numerator:</i> PRAMS <i>Denominator:</i> MMIS paid claims	Use trend and other statistical analyses to track, from year to year, the number of unintended births occurring to women participating in the Waiver.
C.3.1	Fewer Medicaid paid deliveries and lower annual costs for prenatal, delivery, newborn, and infant care.	Age-adjusted births averted rate and births averted.	<i>Numerator:</i> MMIS paid claims <i>Denominator:</i> MMIS paid claims	Calculate the annual results for this measure in three steps. First, calculate the Waiver year's fertility rate by age category. Second, calculate the Waiver year's births averted rate by age category. Third, calculate the Waiver year's births averted.
C.3.2	The program achieves cost savings and is budget neutral.	Averted Medicaid Costs, Overall Medicaid Cost Savings, and Budget Neutrality.	<ul style="list-style-type: none"> MMIS paid claims CPS population data 	Calculate the averted Medicaid costs and then calculate the overall Medicaid cost savings for the Waiver year. Assess budget neutrality for the Waiver year and assess cumulative budget neutrality across Waiver years.
D.1	Increased percentages of enrollees will indicate that they heard about Waiver services from at least two sources.	Percentage of clients indicating that they heard about the Waiver from at least two sources.	Survey conducted at intake	Beginning in Waiver Year Three, report the percentage of intake survey respondents who heard about the Waiver from more than one source. Compare this percentage across the remaining years of the Waiver.

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Hypothesis Number	Hypothesis	Measure	Data Source	Approach to Analysis
D.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 primary care.	Reports of problems obtaining and following up for primary care referrals, including specific barriers encountered.	<i>Numerator:</i> Focus Group or Survey results <i>Denominator:</i> Focus Group or Survey results	Divide the number of Waiver participants indicating they were referred to a source of primary care by the total number of focus group participants. Compare this ratio across the five years of the Waiver to determine if there are increases in proportions of participants obtaining a primary care referral over the life of the Waiver.
D.3	Increase understanding about reasons for non-participation.	Reasons for non participation.	Non-participant survey	Beginning with Waiver Year Two, to assess why enrolled individuals do not participate in the Waiver program, we will annually survey, by mail, a statewide sample of non-participants. Non-participants are defined as those enrolled in the program but not receiving services within 12 months of their enrollment. The sample size for the survey will be based on the number of non-participants in any given 12 months but will not exceed 1,000 non-participants in any one survey. Our aim will be to determine the reasons non-participants choose not to participate, the circumstances surrounding their decisions and their likelihood of participating in the future.
D.4	Funds available through the Waiver will not supplement or substitute for Title X funds that could also be used for providing family planning services to low-income populations.	Number of reproductive age women and men receiving either Title X or Title XIX funded family planning services.	MMIS paid claims and HSIS reports	Count the unduplicated number of men and women who received family planning services through Title X and Title XIX.

APPENDIX C DATA SOURCES

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The following data sources were proposed in the evaluation plan as potential sources to use to develop the measures to test the Waiver hypotheses. Navigant Consulting has used these data sources, as proposed, in our analyses, as shown in Appendix B.

Medical Management Information System (MMIS) Claims and Eligibility Files

MMIS provides a database of clients served through the Family Planning Waiver, the “enrollment database” and the procedures paid for by the Waiver (including preventive services and sterilizations), the “claims database.” Navigant Consulting will use the claims database to analyze the frequency of continuity of visits for clients who received services through the Family Planning Waiver. We will use the enrollment data to count the number of enrollees in a Waiver year and to make comparisons to paid claims data to identify participants, i.e., enrollees who received at least one Family Planning Waiver service during that Waiver year.

For Waiver Year Five, Navigant Consulting reviewed paid MMIS claims data from the Family Planning Waiver with dates of service from October 1, 2009 to September 30, 2010. For certain analyses, we also included claims from Waiver Years One, Two, Three and Four in our analyses. We counted enrollees from the enrollment file as having enrollment in the Waiver at any time between October 1, 2009 and September 30, 2010. We counted participants as those Waiver Year Five enrollees with at least one Family Planning Waiver service.

Health Services Information System (HSIS) Reports

The DHHS, Division of Public Health, Office of Women's Preventive Health tracks clients using family planning services at public health clinics in North Carolina for both Title X and Medicaid (Family Planning Waiver) funding.

Vital Statistics Data (Baby Love)

North Carolina's State Center for Health Statistics (SCHS) maintains a database of Medicaid claims linked with birth certificates. This provides information about birth spacing and birth outcomes for women whose delivery was paid by Medicaid. Since the population who qualify for Medicaid when pregnant (at or below 185 percent of FPL) is the same as the eligible population for the Family Planning Waiver, this will be used to monitor birth outcomes and birth spacing for the Family Planning Waiver eligible population. This data is linked to DMA claims, which will provide the costs associated with a pregnancy, birth, and infant care through the child's first year of life. These data, known as “Baby Love,” are readily available through the North Carolina Center for Health Statistics.

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For Waiver Year Five, Navigant Consulting used calendar year 2008 Baby Love data to estimate infant care through the child's first year of life because data associated with the Waiver year were not available at the time of analysis.

Pregnancy Risk Assessment Monitoring System (PRAMS)

PRAMS is an ongoing, population-based surveillance system that was designed to identify and monitor selected self-reported maternal behaviors and experiences that occur before, during and after pregnancy among women who deliver live-born infants. To obtain adequate information about poor birth outcomes, the sample of mothers surveyed in North Carolina is weighted to contain a larger portion of low birth weight babies. Every month, a stratified systematic sample of 200 new mothers is selected from a sampling frame of eligible birth certificates.

The PRAMS measure for intendedness of pregnancy is used in evaluating the Family Planning Waiver objective of decreasing unintended pregnancies in the State. The Center for Disease Control (CDC) collects the PRAMS data by means of a random survey of women who have delivered babies. The random survey is collected up to three months after a women's delivery, and the data is released on an annual basis after the random survey is collected, analyzed, and the data set is weighted to represent all pregnancies in North Carolina. This data for the State is maintained by and is available through the North Carolina State Center for Health Statistics.

The PRAMS survey identifies a proportion of the women who were eligible for Family Planning Waiver services by their use of Medicaid during pregnancy. There is a question on the survey that allows respondents to identify Medicaid as their source of payment for delivery.

American Community Survey (ACS)

The ACS is a new survey conducted by the U.S. Census Bureau. This survey uses a series of monthly samples to produce annually updated data for the same small areas (census tracts and block groups) that the decennial census long-form sample formerly surveyed. The most recent data available is from calendar year 2009.

Navigant Consulting used the ACS data to identify population figures for North Carolina for the eligibles reported in measure C.1.1. We identified eligibles by sex for those individuals between 45 percent and 185 percent of the FPL who indicated they were U.S. citizens. This is the best estimate of the population of men and women in North Carolina who may be eligible for the Family Planning Waiver. This estimate of the eligible population includes women who are pregnant and women who cannot become pregnant, thus overstating the estimate of eligible women in North Carolina.

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A Pocket Guide to Managing Contraception¹

The Bridging the Gap Foundation publishes *A Pocket Guide to Managing Contraception*. The mission of the Bridging the Gap Foundation is to improve reproductive health and contraceptive decision-making for women and men by providing up-to-date educational resources to the physicians, nurses and public health leaders.

Navigant Consulting used *A Pocket Guide to Managing Contraception* 2010 edition as the source for contraception failure rates used for measure C.1.6.

Baseline Fertility Rate Calculations

Budget neutrality is determined by a formula that compares the reduced costs for healthcare 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 provided 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.² 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:

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

Navigant Consulting calculated the baseline fertility rate for all women below 185 percent of the FPL. Table 3 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.

¹ Ziemann M, Hatcher RA, et al. "A Pocket Guide to Managing Contraception." Tiger, Georgia: Bridging the Gap Foundation, 2010, p. 40.

² 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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Table 3: Baseline Fertility Rate

Measure	Ages	Ages	Ages	Ages	Ages	Ages
	19 – 24	25 – 29	30 – 34	35 – 39	40 – 55	19 – 55
Baseline Fertility Rate	155	158	62	31	3	78

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.

The Baseline Fertility Report is available on-line at
<http://www.ncdhhs.gov/dma/MFPW/MFPWprovider.htm>

Primary Care Surveys

For Waiver Year Five, DHHS replaced the use of focus groups with a mail survey to gather information about participants' experiences in obtaining primary care referrals from their family planning providers, their success in following up on the referrals, barriers they may have encountered and their satisfaction with the referral process.

Navigant Consulting conducted mail surveys of male and female participants in July 2010 to assess primary care referrals under Waiver Year Five (October 1, 2009 – September 30, 2010) of the Family Planning Waiver. The response rate for the female survey was 27 percent (327 female respondents) and the response rate for the male survey was 36 percent (45 male respondents).

The primary care referral report is available on-line at
<http://www.ncdhhs.gov/dma/MFPW/MFPWprovider.htm>

Non-Participant Survey

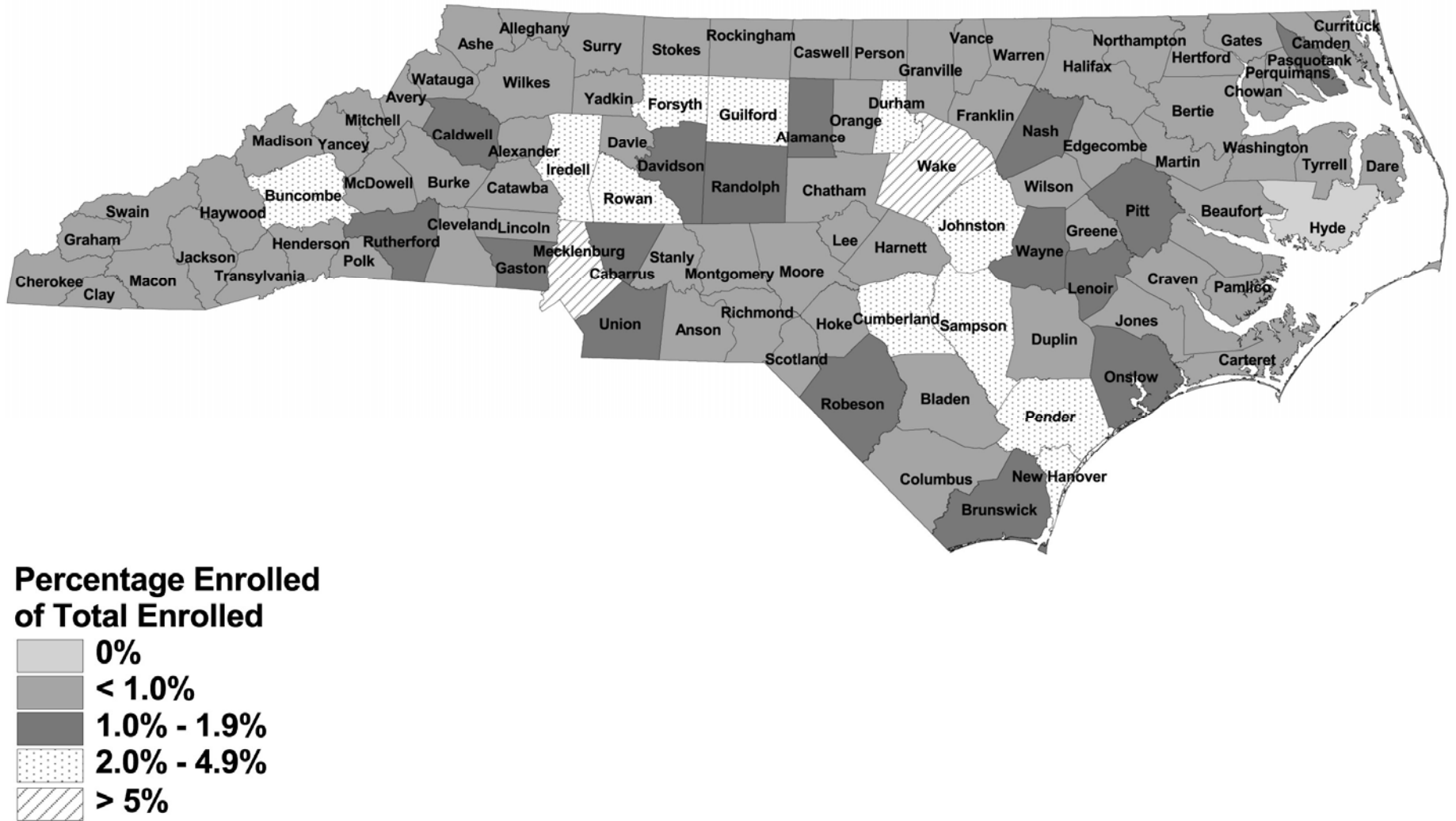
The Waiver Evaluation Plan specified a survey of non-participants to determine the reasons non-participants choose not to participate, the circumstances surrounding their decisions and their likelihood of participating in the future. Non-participants are defined as those enrolled in the program, but not receiving services within 12 months of their enrollment. The sample size for the survey for Waiver Year Five was 1,000 non-participants, with a response rate of 18 percent.

The Non-Participant Survey report is available on-line at
<http://www.ncdhhs.gov/dma/MFPW/MFPWprovider.htm>

APPENDIX D
MAPS OF ENROLLMENT AND
PARTICIPATION

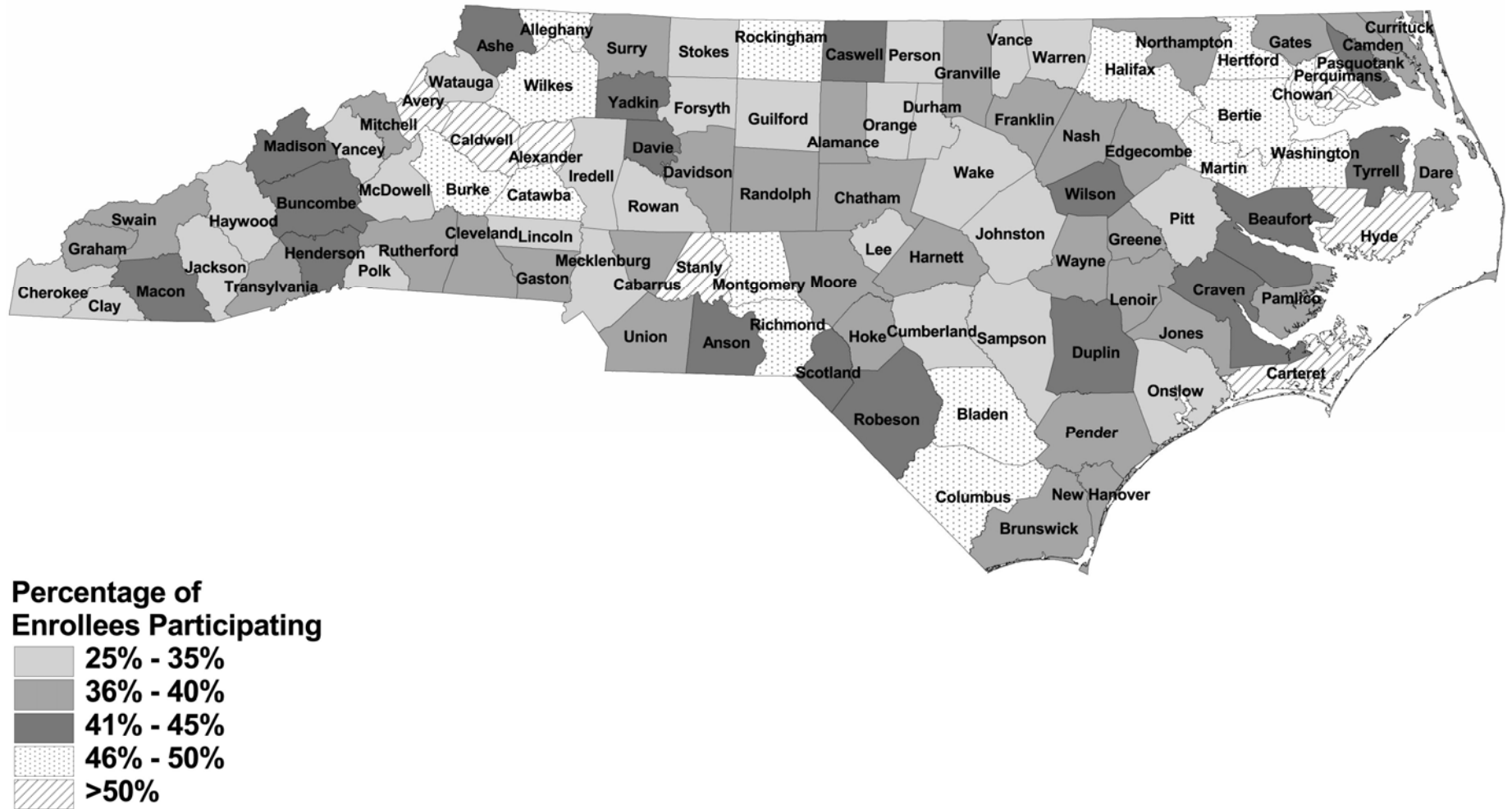
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Figure D.2: Distribution of Male Waiver Enrollees, by County



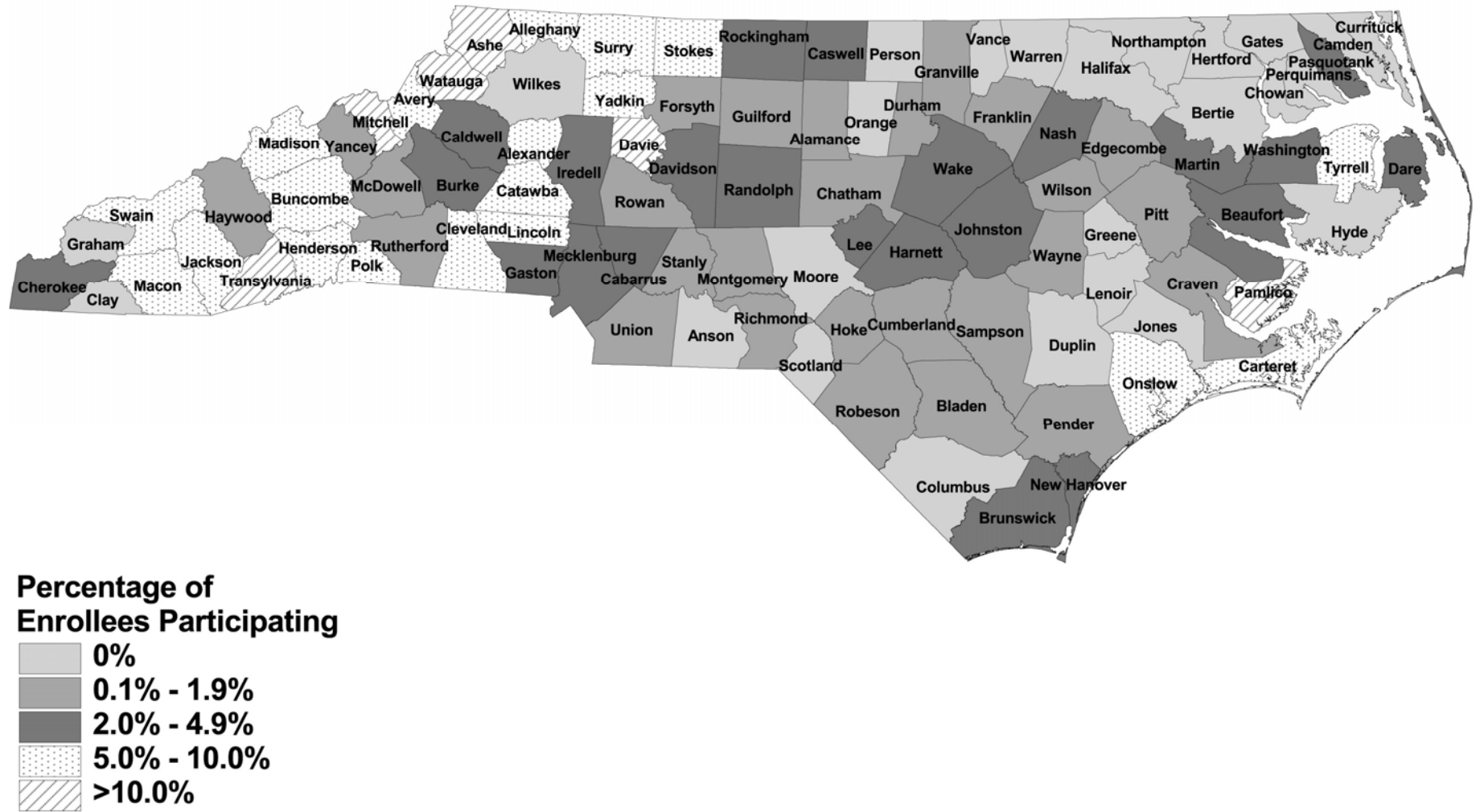
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Figure D.3: Rate of Female Waiver Participation, by County



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Figure D.4: Rate of Male Waiver Participation, by County



Appendix E.1
Count and Location of Provider Specialties
Providing Services to Waiver Year Five
Participants, by County

North Carolina Division of Medical Assistance

Family Planning Waiver

Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)
ALAMANCE		1				1	1
ALEXANDER							1
ALLEGHANY							1
ANSON							1
ASHE	1						1
AVERY	1						1
BEAUFORT		1					1
BERTIE	1						1
BLADEN	1						1
BRUNSWICK	1						1
BUNCOMBE					1	1	1
BURKE		1				1	1
CABARRUS				1		1	1
CALDWELL		1					1
CAMDEN							
CARTERET		1					1
CASWELL							
CATAWBA			1			1	1
CHATHAM							1
CHEROKEE	1						1
CHOWAN	1						1
CLAY							1
CLEVELAND			1			1	1
COLUMBUS		1				1	1
CRAVEN			1			1	1
CUMBERLAND					1	1	1
CURRITUCK							1
DARE	1						1
DAVIDSON	1					1	1
DAVIE	1						1
DUPLIN	1					1	1

North Carolina Division of Medical Assistance

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COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)
DURHAM					1		1
EDGEcombe							1
FORSYTH					1	1	1
FRANKLIN							1
GASTON					1		1
GATES							
GRAHAM							1
GRANVILLE	1					1	1
GREENE							1
GUILFORD				1		1	1
HALIFAX		1				1	1
HARNETT		1				1	1
HAYWOOD		1					1
HENDERSON		1	1			1	1
HERTFORD		1				1	1
HOKE							1
HYDE							
IREDELL		1				1	1
JACKSON	1					1	1
JOHNSTON		1					1
JONES							1
LEE		1					1
LENOIR			1			1	1
LINCOLN	1						1
MACON							1
MADISON							1
MARTIN	1					1	1
MCDOWELL	1						1
MECKLENBURG					1	1	1
MITCHELL		1					1
MONTGOMERY							1

North Carolina Division of Medical Assistance

Family Planning Waiver

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COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)
MOORE			1			1	1
NASH			1			1	1
NEW HANOVER				1			1
NORTHAMPTON							
ONSLOW		1				1	1
ORANGE					1		1
OUT-OF-STATE <= 40 MILES							1
OUT-OF-STATE > 40 MILES							
PAMLICO							1
PASQUOTANK			1				1
PENDER							1
PERQUIMANS							
PERSON							1
PITT					1	1	1
POLK							1
RANDOLPH		1				1	1
RICHMOND						1	1
ROBESON			1			1	1
ROCKINGHAM		1				2	1
ROWAN			1			1	1
RUTHERFORD		1				1	1
SAMPSON							1
SCOTLAND		1				1	1
STANLY		1				1	1
STOKES							1
SURRY	1					1	1
SWAIN		2					1
TRANSYLVANIA		1					1
TYRRELL							
UNION		1					1
VANCE		1					1

North Carolina Division of Medical Assistance

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)
WAKE					1	1	1
WARREN							1
WASHINGTON							1
WATAUGA		1					1
WAYNE				1		1	1
WILKES		1				1	1
WILSON				1			1
YADKIN							1
YANCEY							1
TOTAL	20	25	10	5	9	40	94

North Carolina Division of Medical Assistance

Family Planning Waiver

Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY
ALAMANCE		2			2	1
ALEXANDER						
ALLEGHANY					1	
ANSON					1	
ASHE					1	1
AVERY					1	1
BEAUFORT					2	
BERTIE		1				
BLADEN					2	
BRUNSWICK					2	
BUNCOMBE					1	
BURKE					1	
CABARRUS	1				1	
CALDWELL					1	
CAMDEN						
CARTERET					1	1
CASWELL		2				
CATAWBA				1	1	
CHATHAM		2			1	1
CHEROKEE						1
CHOWAN						
CLAY						
CLEVELAND						
COLUMBUS		1			2	
CRAVEN					1	
CUMBERLAND	1	1			1	
CURRITUCK					1	
DARE						
DAVIDSON					1	
DAVIE					1	
DUPLIN		1				

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY
DURHAM					1	
EDGECOMBE		2				
FORSYTH					1	1
FRANKLIN		1			2	
GASTON					2	
GATES						
GRAHAM						
GRANVILLE					1	
GREENE		1				
GUILFORD	1				2	
HALIFAX		1				
HARNETT		2			2	
HAYWOOD					1	
HENDERSON		1			1	
HERTFORD		1			1	
HOKE					2	
HYDE						
IREDELL					1	
JACKSON					1	
JOHNSTON			1		2	
JONES						
LEE					2	
LENOIR		1				
LINCOLN		1			1	
MACON						
MADISON						
MARTIN					1	
MCDOWELL					1	
MECKLENBURG	1	2			2	
MITCHELL					2	1
MONTGOMERY					1	

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY
MOORE	1				1	
NASH		1			1	
NEW HANOVER		2			2	
NORTHAMPTON		1				
ONSLOW					1	1
ORANGE		2			1	
OUT-OF-STATE <= 40 MILES			1		1	
OUT-OF-STATE > 40 MILES						
PAMLICO						
PASQUOTANK					1	
PENDER					2	
PERQUIMANS					1	
PERSON					1	
PITT		1			1	
POLK						
RANDOLPH					2	
RICHMOND					1	
ROBESON		1			2	
ROCKINGHAM					2	
ROWAN					1	
RUTHERFORD					1	
SAMPSON		1			1	
SCOTLAND					2	
STANLY					2	
STOKES					1	
SURRY						
SWAIN						
TRANSYLVANIA						
TYRRELL						
UNION					1	
VANCE					1	

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY
WAKE		1			2	
WARREN		1				
WASHINGTON						
WATAUGA					1	
WAYNE		1			2	
WILKES						
WILSON		2				
YADKIN						
YANCEY					1	
TOTAL	5	37	2	1	92	9

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA
ALAMANCE	1	1					1
ALEXANDER	1						
ALLEGHANY	1						
ANSON	1						
ASHE	1						2
AVERY	1			1			1
BEAUFORT	1			1	1		1
BERTIE	1						
BLADEN	1						1
BRUNSWICK	1			1	1		1
BUNCOMBE	1	1				1	1
BURKE	1				1		
CABARRUS	1			1	1		1
CALDWELL	1						
CAMDEN	1						
CARTERET	1		1		1		2
CASWELL	1						1
CATAWBA	1	1					
CHATHAM	1						
CHEROKEE	1						1
CHOWAN	1				1		
CLAY	1						
CLEVELAND	1				1		1
COLUMBUS	1	1		2			1
CRAVEN	1			2	1		1
CUMBERLAND	1			2	1		1
CURRITUCK							
DARE	1					1	1
DAVIDSON	1						
DAVIE	1				1		
DUPLIN	1						

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA
DURHAM	1		1	1	2		1
EDGECOMBE	1						
FORSYTH	1		1		1		1
FRANKLIN	1						
GASTON	1			1	1		1
GATES	1						
GRAHAM	1						
GRANVILLE	1				1		
GREENE	1						
GUILFORD	1	1	1	2	1		2
HALIFAX	1						
HARNETT	1			1	1		1
HAYWOOD	1				1		
HENDERSON	1			1			1
HERTFORD	1				1		1
HOKE	1				1		
HYDE	1						
IREDELL	1			1	1		2
JACKSON	1					1	1
JOHNSTON	1			1	1		
JONES	1				1		
LEE	1						
LENOIR	1			1		1	
LINCOLN	1				1		
MACON	1						
MADISON	1	1					
MARTIN	1						
MCDOWELL	1						1
MECKLENBURG	1	1	1	2	1		1
MITCHELL	1						1
MONTGOMERY	1						

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA
MOORE	1				1		1
NASH	1				1		1
NEW HANOVER	1	1		1	1		1
NORTHAMPTON	1						
ONSLOW	1			2	1		
ORANGE	1			1	1	1	
OUT-OF-STATE <= 40 MILES		1		1	1		
OUT-OF-STATE > 40 MILES		1					
PAMLICO	1						
PASQUOTANK	1				1		1
PENDER	1						
PERQUIMANS	1						
PERSON	1			1			
PITT	1		1	1	2	1	1
POLK	1						
RANDOLPH	1			1	1		1
RICHMOND	1				1		
ROBESON	1				1		2
ROCKINGHAM	1						1
ROWAN	1				1		2
RUTHERFORD	1				1		1
SAMPSON	1				1		1
SCOTLAND	1						1
STANLY	1			1		1	1
STOKES	1						
SURRY	1			1			
SWAIN	1		1	1			
TRANSYLVANIA	1						
TYRRELL	1						
UNION	1			1	1		1
VANCE	1						

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA
WAKE	1	1	1	2	1		2
WARREN	1			1			
WASHINGTON	1						
WATAUGA	1						
WAYNE	1				1		1
WILKES	1				1		
WILSON	1						1
YADKIN	1						
YANCEY	1						
TOTAL	99	11	8	36	47	4	52

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY	PEDIATRICS
ALAMANCE	2					1
ALEXANDER						
ALLEGHANY						
ANSON						
ASHE	1					
AVERY						
BEAUFORT	1					
BERTIE						
BLADEN	1					
BRUNSWICK	1					
BUNCOMBE	2				1	
BURKE	2				1	
CABARRUS	1					
CALDWELL	2				1	
CAMDEN						
CARTERET	2					
CASWELL						
CATAWBA	1				1	
CHATHAM						
CHEROKEE						
CHOWAN	1					
CLAY						
CLEVELAND	1					
COLUMBUS	1				1	
CRAVEN	1					1
CUMBERLAND	2					
CURRITUCK						
DARE	1					
DAVIDSON	1					
DAVIE						
DUPLIN	1					

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY	PEDIATRICS
DURHAM	1					1
EDGECOMBE						
FORSYTH	2				1	
FRANKLIN						
GASTON	1					
GATES						
GRAHAM						
GRANVILLE	1					
GREENE						
GUILFORD	2	1			1	
HALIFAX	1					
HARNETT	1					
HAYWOOD					1	1
HENDERSON	1					
HERTFORD	1					
HOKE	2					
HYDE						
IREDELL	2					
JACKSON	1				1	
JOHNSTON	1					
JONES						
LEE	2					
LENOIR	2					
LINCOLN	2					
MACON	1					
MADISON						
MARTIN	1					
MCDOWELL	2					
MECKLENBURG	2			1		1
MITCHELL						
MONTGOMERY						

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY	PEDIATRICS
MOORE	1					
NASH	1					
NEW HANOVER	2					
NORTHAMPTON						
ONSLOW	2					1
ORANGE	1					
OUT-OF-STATE <= 40 MILES	2		1	1	1	
OUT-OF-STATE > 40 MILES				1		
PAMLICO						1
PASQUOTANK	2					
PENDER						
PERQUIMANS						
PERSON						
PITT	2				2	1
POLK						
RANDOLPH	1					
RICHMOND	2					1
ROBESON	1				1	1
ROCKINGHAM	1					
ROWAN	1				1	1
RUTHERFORD	1					
SAMPSON						
SCOTLAND	1					1
STANLY	1				1	
STOKES						
SURRY	2					
SWAIN						
TRANSYLVANIA	1					
TYRRELL						
UNION	2					
VANCE	1					1

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY	PEDIATRICS
WAKE	2					2
WARREN						
WASHINGTON						
WATAUGA	1				1	
WAYNE	1					1
WILKES	1					1
WILSON	1					
YADKIN						
YANCEY						
TOTAL	88	1	1	3	16	17

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
ALAMANCE		1		1	1
ALEXANDER		1		1	
ALLEGHANY		1			
ANSON		1			
ASHE		1			
AVERY		1			
BEAUFORT		1			1
BERTIE		1			
BLADEN		1		1	
BRUNSWICK		1			
BUNCOMBE		1			
BURKE		1			
CABARRUS		1		1	
CALDWELL		1			1
CAMDEN					
CARTERET		1			
CASWELL		1			
CATAWBA		1			1
CHATHAM		1			
CHEROKEE		1			
CHOWAN		1			1
CLAY		1			
CLEVELAND		1			1
COLUMBUS		1		1	
CRAVEN		1		1	
CUMBERLAND		1			2
CURRITUCK		1			
DARE		1			
DAVIDSON		1			
DAVIE		1			
DUPLIN		1		1	

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
DURHAM		1			
EDGECOMBE		1			
FORSYTH		1			1
FRANKLIN		1			1
GASTON		1			1
GATES		1			
GRAHAM					
GRANVILLE				1	
GREENE		1			
GUILFORD		1			1
HALIFAX		1		1	
HARNETT		1			1
HAYWOOD		1			
HENDERSON		1			1
HERTFORD		1			
HOKE		1		1	
HYDE					
IREDELL		1			1
JACKSON		1			1
JOHNSTON		1		1	1
JONES		1			
LEE		1			
LENOIR		1			
LINCOLN		1			1
MACON		1			
MADISON		1			
MARTIN		1			
MCDOWELL		1			
MECKLENBURG		1			1
MITCHELL		1		1	1
MONTGOMERY		1		1	

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
MOORE		1			
NASH		1			1
NEW HANOVER		1			1
NORTHAMPTON		1			
ONSLOW		1			1
ORANGE		1			1
OUT-OF-STATE <= 40 MILES		1			
OUT-OF-STATE > 40 MILES					
PAMLICO		1			
PASQUOTANK		1			1
PENDER		1			
PERQUIMANS		1			
PERSON		1			
PITT		1			1
POLK		1			
RANDOLPH		1		1	
RICHMOND		1			
ROBESON		1		1	1
ROCKINGHAM		1			
ROWAN		1			1
RUTHERFORD		1			
SAMPSON		1			
SCOTLAND		1			
STANLY		1			
STOKES		1			
SURRY		1			1
SWAIN		1			
TRANSYLVANIA		1			1
TYRRELL		1			
UNION		1			
VANCE		1		1	

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Appendix E.1: Count and Location of Provider Specialties Providing Services To Waiver Year Five Participants, by County

COUNTY	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
WAKE	1	1	1		1
WARREN		1			
WASHINGTON		1			
WATAUGA		1			
WAYNE		1			1
WILKES		1			1
WILSON		1			
YADKIN		1			
YANCEY				1	
TOTAL	1	96	1	17	33

Appendix E.2
Count of Waiver Year Five Participant Visits
by Provider Specialty, by County

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)
ALAMANCE		2				2	670		124
ALEXANDER							103		
ALLEGHANY							85		
ANSON							183		
ASHE	2						96		
AVERY	4						160		
BEAUFORT		5					447		
BERTIE	1						67		4
BLADEN	3						166		
BRUNSWICK	14						1103		
BUNCOMBE					30	2	1592		
BURKE		16				2	405		
CABARRUS				102		11	1886	5	
CALDWELL		8					630		
CAMDEN									
CARTERET		12					761		
CASWELL									46
CATAWBA			3			13	947		
CHATHAM							193		97
CHEROKEE	1						57		
CHOWAN	11						138		
CLAY							29		
CLEVELAND			8			2	576		
COLUMBUS		16				7	660		7
CRAVEN			9			5	477		
CUMBERLAND					293	12	3113	7	10
CURRITUCK							78		
DARE	5						279		
DAVIDSON	3					2	985		
DAVIE	2						159		
DUPLIN	2					1	319		48
DURHAM					97		1668		
EDGECOMBE							345		15
FORSYTH					247	5	2381		
FRANKLIN							373		16

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE
ALAMANCE			9	1	432	30		
ALEXANDER					95			
ALLEGHANY			17		5			
ANSON			7		113			
ASHE			13	4	34			
AVERY			43	6	12			20
BEAUFORT			7		154			8
BERTIE					113			
BLADEN			13		123			
BRUNSWICK			30		93			5
BUNCOMBE			93		759	182		
BURKE			13		145			
CABARRUS			121		226			9
CALDWELL			3		310			
CAMDEN					29			
CARTERET			1	6	88		26	
CASWELL					117			
CATAWBA		1	17		352	5		
CHATHAM			30	1	52			
CHEROKEE				2	8			
CHOWAN					78			
CLAY					5			
CLEVELAND					293			
COLUMBUS			44		143	29		3
CRAVEN			3		255			10
CUMBERLAND			33		228			57
CURRITUCK			9					
DARE					40			
DAVIDSON			11		324			
DAVIE			21		81			
DUPLIN					53			
DURHAM			72		270		27	1
EDGECOMBE					281			
FORSYTH			94	1	212		7	
FRANKLIN			21		179			

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY
ALAMANCE			2	115				
ALEXANDER								
ALLEGHANY								
ANSON								
ASHE			4	1				
AVERY			2					
BEAUFORT	110		2	53				
BERTIE								
BLADEN			1	43				
BRUNSWICK	1		9	227				
BUNCOMBE		19	25	454				1
BURKE	2			116				82
CABARRUS	25		6	337				
CALDWELL				136				237
CAMDEN								
CARTERET	1		6	415				
CASWELL			15					
CATAWBA				74				2
CHATHAM								
CHEROKEE			1					
CHOWAN	1			91				
CLAY								
CLEVELAND	2		1	29				
COLUMBUS			5	198				2
CRAVEN	2		3	120				
CUMBERLAND	84		3	1214				
CURRITUCK								
DARE	3		3	7				
DAVIDSON				52				
DAVIE	1							
DUPLIN				80				
DURHAM	176		1	118				
EDGECOMBE								
FORSYTH	53		1	335				1
FRANKLIN								

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	PEDIATRICS	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
ALAMANCE	1		84		1	1
ALEXANDER			221		7	
ALLEGHANY			29			
ANSON			84			
ASHE			23			
AVERY			80			
BEAUFORT			209			1
BERTIE			73			
BLADEN			176		57	
BRUNSWICK			205			
BUNCOMBE			288			
BURKE			150			
CABARRUS			110		2	
CALDWELL			165			2
CAMDEN						
CARTERET			243			
CASWELL			182			
CATAWBA			188			22
CHATHAM			35			
CHEROKEE			15			
CHOWAN			58			2
CLAY			11			
CLEVELAND			51			41
COLUMBUS			437		17	
CRAVEN	5		132		19	
CUMBERLAND			231			2
CURRITUCK			94			
DARE			109			
DAVIDSON			104			
DAVIE			191			
DUPLIN			77		1	
DURHAM	10		37			
EDGECOMBE			119			
FORSYTH			153			9
FRANKLIN			40			2

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)
GASTON					32		1059		
GATES									
GRAHAM							91		
GRANVILLE	20					6	460		
GREENE							40		16
GUILFORD				48		10	3569	2	
HALIFAX		4				2	655		30
HARNETT		5				1	345		32
HAYWOOD		2					196		
HENDERSON		27	28			3	248		11
HERTFORD		2				1	346		20
HOKE							70		
HYDE									
IREDELL		19				8	1409		
JACKSON	9					2	152		
JOHNSTON		13					1688		
JONES							21		
LEE		9					448		
LENOIR			3			4	552		103
LINCOLN	8						342		1
MACON							74		
MADISON							82		
MARTIN	3					2	206		
MCDOWELL	3						433		
MECKLENBURG					533	12	5412	2	297
MITCHELL		1					150		
MONTGOMERY							278		
MOORE			6			8	313	9	
NASH			7			4	925		1
NEW HANOVER				235			2159		88
NORTHAMPTON									8
ONSLow		8				7	872		
ORANGE					14		370		40
OUT-OF-STATE <= 40 MILES							115		
OUT-OF-STATE > 40 MILES									
PAMLICO							32		

North Carolina Division of Medical Assistance

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE
GASTON			198		901			10
GATES					22			
GRAHAM					21			
GRANVILLE			12		135			
GREENE					78			
GUILFORD			17		793	902	2	11
HALIFAX					266			
HARNETT			61		112			8
HAYWOOD			7		178			
HENDERSON			27		63			1
HERTFORD			1		59			
HOKE			34		28			
HYDE					3			
IREDELL			2		264			4
JACKSON			1		51			
JOHNSTON	4		42		199			1
JONES					24			
LEE			76		44			
LENOIR					123			4
LINCOLN			33		45			
MACON					41			
MADISON					22	1		
MARTIN			3		59			
MCDOWELL			3		85			
MECKLENBURG			310		346	190	50	187
MITCHELL			10	1	29			
MONTGOMERY			3		114			
MOORE			14		175			
NASH			7		321			
NEW HANOVER			231		88	26		15
NORTHAMPTON					91			
ONSLow			13	2	133			11
ORANGE			5		50			3
OUT-OF-STATE <= 40 MILES	1		3			117		1
OUT-OF-STATE > 40 MILES						500		
PAMLICO					33			

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY
GASTON	2		17	17				
GATES								
GRAHAM								
GRANVILLE	1			199				
GREENE								
GUILFORD	29		12	423	3			180
HALIFAX				286				
HARNETT	1		1	98				
HAYWOOD	20							1
HENDERSON			5	22				
HERTFORD	1		1	32				
HOKE	4			17				
HYDE								
IREDELL	42		10	148				
JACKSON	7		2	107				2
JOHNSTON	22			307				
JONES	5							
LEE				112				
LENOIR	3			46				
LINCOLN	12			115				
MACON				1				
MADISON								
MARTIN				206				
MCDOWELL			1	85				
MECKLENBURG	119		1	879			5	
MITCHELL			1					
MONTGOMERY								
MOORE	176		5	169				
NASH	45		2	157				
NEW HANOVER	14		15	335				
NORTHAMPTON								
ONslow	7			314				
ORANGE	73	8		126				
OUT-OF-STATE <= 40 MILES	1			42		14	95	6
OUT-OF-STATE > 40 MILES							1	
PAMLICO								

North Carolina Division of Medical Assistance

Family Planning Waiver

Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	PEDIATRICS	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
GASTON			214			1
GATES			71			
GRAHAM						
GRANVILLE					7	
GREENE			38			
GUILFORD			97			11
HALIFAX			549		1	
HARNETT			283			2
HAYWOOD	1		88			
HENDERSON			23			10
HERTFORD			267			
HOKE			163		3	
HYDE						
IREDELL			166			8
JACKSON			107			1
JOHNSTON			112		22	2
JONES			2			
LEE			206			
LENOIR			191			
LINCOLN			143			1
MACON			36			
MADISON			67			
MARTIN			105			
MCDOWELL			106			
MECKLENBURG	4		199			2
MITCHELL			27		1	1
MONTGOMERY			189		6	
MOORE			221			
NASH			111			9
NEW HANOVER			54			12
NORTHAMPTON			72			
ONslow	2		246			20
ORANGE			8			4
OUT-OF-STATE <= 40 MILES			17			
OUT-OF-STATE > 40 MILES						
PAMLICO	4		28			

North Carolina Division of Medical Assistance

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	1-100 BEDS NC HOSPITAL	101-200 BEDS NC HOSPITAL	201-300 BEDS NC HOSPITAL	301-474 BEDS NC HOSPITAL	475 UP BEDS NC HOSPITAL	ANESTHESIOLOGY	CHAIN PHARMACY (TCC)	CLINIC - AMBULATORY SURGERY OR BIRTHING CENTER	FEDERALLY QUALIFIED HEALTH CLINIC (FQHC)
PASQUOTANK			7				459		
PENDER							259		
PERQUIMANS									
PERSON							137		
PITT					5	4	1254		6
POLK							74		
RANDOLPH		4				4	645		
RICHMOND						3	474		
ROBESON			62			9	1901		235
ROCKINGHAM		5				5	587		
ROWAN			1			1	972		
RUTHERFORD		5				2	347		
SAMPSON							376		15
SCOTLAND		6				4	513		
STANLY		6				5	762		
STOKES							161		
SURRY	7					3	376		
SWAIN	10						20		
TRANSYLVANIA	6						45		
TYRRELL									
UNION		6					1152		
VANCE		2					587		
WAKE					34	2	5505		216
WARREN							120		1
WASHINGTON							188		
WATAUGA		1					112		
WAYNE				4		4	917		5
WILKES		9				4	232		
WILSON				5			582		48
YADKIN							142		
YANCEY							189		
TOTAL	114	193	134	394	1285	184	63331	25	1540

North Carolina Division of Medical Assistance

Family Planning Waiver

Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	FULL-TIME EMERGENCY ROOM PHYSICIAN	GASTROENTEROLOGY	GENERAL FAMILY PRACTICE	GENERAL THORACIC SURGERY, PROCTOLOGY	HEALTH DEPARTMENT	INDEPENDENT LABORATORY	INSTITUTION PHARMACY (TCC)	INTERNAL MEDICINE
PASQUOTANK			10		330			
PENDER			10		154			
PERQUIMANS			2		63			
PERSON			2		95			5
PITT			96		57		5	9
POLK					6			
RANDOLPH			34		107			3
RICHMOND			5		173			
ROBESON			28		167			
ROCKINGHAM			15		136			
ROWAN			50		269			
RUTHERFORD			2		289			
SAMPSON			1		295			
SCOTLAND			5		141			
STANLY			8		144			10
STOKES			10		16			
SURRY					124			2
SWAIN					3		25	3
TRANSYLVANIA					22			
TYRRELL					29			
UNION			127		186			5
VANCE			48		61			
WAKE			80		1264	8	21	39
WARREN					35			2
WASHINGTON					134			
WATAUGA			2		16			
WAYNE			26		555			
WILKES					25			
WILSON					188			
YADKIN					22			
YANCEY			10		55			
TOTAL	5	1	2409	24	15859	1990	163	447

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	MULTI-SPECIALTY	NURSE MIDWIFE	NURSE PRACTITIONER OR CRNA	OBSTETRICS GYNECOLOGY	OPHTHALMOLOGY	OUT-OF-STATE HOSPITAL	OUT-OF-STATE PHARMACY (TCC)	PATHOLOGY
PASQUOTANK	9		18	199				
PENDER								
PERQUIMANS								
PERSON								
PITT	109	20	8	7				263
POLK								
RANDOLPH	1		4	94				
RICHMOND	75			132				
ROBESON	6		5	244				435
ROCKINGHAM			4	307				
ROWAN	3		17	16				1
RUTHERFORD	24		2	48				
SAMPSON	2		1					
SCOTLAND			3	148				
STANLY		50	3	540				1
STOKES								
SURRY				92				
SWAIN								
TRANSYLVANIA				4				
TYRRELL								
UNION	1		1	85				
VANCE				25				
WAKE	33		5	550				
WARREN								
WASHINGTON								
WATAUGA				33				53
WAYNE	4		4	17				
WILKES	20			53				
WILSON			4	306				
YADKIN								
YANCEY								
TOTAL	1332	97	242	11358	3	14	101	1267

North Carolina Division of Medical Assistance

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Appendix E.2: Count of Waiver Year Five Participant Visits by Provider Specialty, by County

COUNTY	PEDIATRICS	PHYSICAL MEDICINE AND REHABILITATION	PRIVATELY OWNED PHARMACY	RADIOLOGY NUCLEAR MEDICINE	RURAL HEALTH CLINIC (RHC)	UROLOGY
PASQUOTANK			253			1
PENDER			86			
PERQUIMANS			86			
PERSON			14			
PITT	25		100			3
POLK			10			
RANDOLPH			264		1	
RICHMOND	2		276			
ROBESON	6		705		47	1
ROCKINGHAM			346			
ROWAN	4		67			17
RUTHERFORD			150			
SAMPSON			345			
SCOTLAND	4		189			
STANLY			381			
STOKES			53			
SURRY			61			4
SWAIN			88			
TRANSYLVANIA			24			3
TYRRELL			39			
UNION			47			
VANCE	1		184		137	
WAKE	101	1	344	1		4
WARREN			3			
WASHINGTON			50			
WATAUGA			45			
WAYNE	13		215			2
WILKES	2		59			3
WILSON			37			
YADKIN			24			
YANCEY					4	
TOTAL	185	1	13155	1	333	204

APPENDIX F

NEW ENROLLEE SURVEY

North Carolina
Be Smart.
Family Planning

We would like to know how you learned about the “Be Smart” Family Planning Program. Please take a moment to complete the question below and place the questionnaire in the postage-paid envelope so that the return address (see reverse side) shows through the window of the envelope. Then, mail the envelope to the Division of Medical Assistance. Thank you for your cooperation.

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.

- Health Care Provider
 - Health Department Staff
 - Family or friends
 - Case manager
 - Brochure or poster
 - New Enrollee Letter
 - Don't remember
 - Other _____
-

Quisiéramos saber cómo se enteró del programa “Póngase Listo” de Planificación Familiar. Por favor, tome un momento para contestar la pregunta de abajo, y ponga el cuestionario en el sobre con costo de envío pagado asegurándose que la dirección (vea la parte de atrás) se vea en al ventana del sobre. Envíelo por correo a la División de Asistencia Médica. Gracias por su cooperación.

¿Cómo se enteró del programa “Póngase Listo” de Planificación Familiar? Si escuchó hablar del programa de más de una fuente, por favor marque todas las apliquen.

- Proveedor de cuidado médico / doctor
- Departamento de Salud - personal
- Familia o amigos
- Trabajador del caso
- Folleto o póster
- Carta para el nuevo beneficiario
- No me acuerdo
- Otro _____