

November 2008
Revised December 2009

Family Planning Annual Report

X

2007 NATIONAL SUMMARY

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Errata Sheet

Family Planning Annual Report 2007 National Summary

As of December 3, 2009, the errors listed below were found in the print version of the *Family Planning Annual Report: 2007 National Summary* (November 2008). These errors have been corrected in the PDF and HTML versions of the report, which are found on the Office of Population Affairs Web site at <http://www.hhs.gov/opa/familyplanning/toolsdocs/index.html>.

Page 49, Revenue:

The following sentence was replaced: “The major sources of program revenue—Medicaid (\$349.7 million) and Title X (\$255.3 million)—accounted for 31% and 22%, respectively, of total national revenue.”

Page 49, Medicaid:

The following sentences were replaced: “While Medicaid revenue (federal and state shares) accounted for 31% of total national revenue, it accounted for 2% (VIII) to 60% (IX) of total regional revenue. The percentages of total revenue from Medicaid were highest in Regions IX (60%) and X (49%), both of which include states (i.e., California, Oregon, and Washington) with established Medicaid family planning waiver programs.”

Page 49, Title X:

The following sentences were replaced: “Revenue from Title X accounted for 22% of total national revenue and between 12% (X) and 33% (VI) of total regional revenue. In all but three regions (II, IX, and X), the percentage of total revenue from Title X exceeded the national average of 22%.”

Page 50, Trends:

The following sentences were replaced: “However, when adjusted for inflation (constant 1999 dollars), total revenue increased only 10% during this period. Additionally, unadjusted Title X revenue increased 39% (\$183.2 million in 1999 versus \$255.3 million in 2007), but less than 1% when adjusted for inflation (*Exhibits A-10a, A-10b, and A-10c*).”

Page 53, Exhibit 31:

Under “Revenue Source, Federal Grants, Title X,” the value for “Dollar Amount” was changed to \$255,337,864. The value for “Distribution” was changed to 22%.

Under “Revenue Source, Subtotal Federal Grants,” the value for “Dollar Amount” was changed to \$262,598,783.

Under “Revenue Source, Total Revenue, Unadjusted,” the value for “Dollar Amount” was changed to \$1,140,511,162.

Under “Revenue Source, Total Revenue, Adjusted (1999\$),” the value for “Dollar Amount” was changed to \$814,154,225.

Page 54, Exhibit 32:

Under “Revenue Source, Federal Grants, Title X,” the value for “All Regions” was changed to \$255,337,864. The value for “Region IX” was changed to \$34,695,434.

Under “Revenue Source, Subtotal Federal Grants,” the value for “All Regions” was changed to \$262,598,783. The value for “Region IX” was changed to \$37,329,156.

Under “Revenue Source, Total Revenue, Unadjusted,” the value for “All Regions” was changed to \$1,140,511,162. The value for “Region IX” was changed to \$227,564,399.

Under “Revenue Source, Total Revenue, Adjusted (1999\$),” the value for “All Regions” was changed to \$814,154,225. The value for “Region IX” was changed to \$162,446,912.

Under “Revenue Source, Total Revenue per User, Unadjusted,” the value for “Region IX” was changed to \$206.

Page 55, Exhibit 33:

Under “Revenue Source, Federal Grants, Title X,” the value for “All Regions” was changed to 22%. The value for Region IX was changed to 15%.

Under “Revenue Source, Subtotal Federal Grants,” the value for “Region IX” was changed to 16%.

Under “Revenue Source, Payment for Services, Medicaid (Title XIX),” the value for “Region IX” was changed to 60%.

Under “Revenue Source, Payment for Services, Subtotal Payment for Services,” the value for “Region IX” was changed to 66%.

Page A–18, Exhibit A–9b:

In the title of this exhibit, the word “distribution” was corrected to “percentage,” so that the new title reads, “Number and percentage of female users younger than 25 years tested for chlamydia: 2005–2007.”

Page A–19, Exhibit A–10a:

Under “Revenue, Total Revenue, Unadjusted (actual),” the value for “2007” was changed to \$1,140,511,162.

Under “Revenue, Total Revenue, Adjusted, 1999\$,” the value for “2007” was changed to \$814,154,225. The value for “1999-2007 Change” was changed to 10%.

Under “Revenue, Total Revenue, Adjusted, 1981\$,” the value for “2007” was changed to \$269,327,156.” The value for “1999-2007 Change” was changed to 10%.

Under “Revenue, Title X Revenue, Unadjusted (actual),” the value for “2007” was changed to \$255,337,864. The value for “1999-2007 Change” was changed to 39%.

Under “Revenue, Title X Revenue, Adjusted, 1999\$,” the value for “2007” was changed to \$182,273,008. The value for “1999-2007 Change” was changed to less than 1% (0%).

Under “Revenue, Title X Revenue, Adjusted, 1981\$,” the value for “2007” was changed to \$60,297,017. The value for “1997-2007 Change” was changed to less than 1% (0%).

Page A–20, Exhibit A–10b:

The values for “Total Revenue in \$000s” were changed as follows: The value for “2007, Unadjusted (actual)” was changed to \$1,140,511. The value for “2007, Adjusted, 1999\$” was changed to \$814,154. The value for “2007, Adjusted, 1981\$” was changed to \$269,327.

Page A–21, Exhibit A–10c:

The values for “Title X Revenue in \$000s” were changed as follows: The value for “2007, Unadjusted (actual)” was changed to \$255,338. The value for “2007, Adjusted, 1999\$” was changed to \$182,273. The value for “2007, Adjusted, 1981\$” was changed to \$60,297.

Page A–22, Exhibit A–11a:

Under “Revenue Sources, Federal Grants, Title X,” the value for “2007” was changed to \$255,337,864.

Under “Revenue Sources, Federal Grants, Subtotal Federal Grants,” the value for “2007” was changed to \$262,598,783.

Under “Revenue Sources, Unadjusted Total Revenue,” the value for “2007” was changed to \$1,140,511,162.

Under “Revenue Sources, Adjusted Total Revenue (1999\$)” the value for “2007” was changed to \$814,154,225.

Under “Revenue Sources, Adjusted Total Revenue (1981\$)” the value for “2007” was changed to \$269,327,156.

Page A–23, Exhibit A–11b:

Under “Revenue Sources, Federal Grants, Title X,” the value for “2007” was changed to 22%.

Page A–24, Exhibit A–11c:

The value for 2007 total revenue was changed to \$1,140,511,162.

The value for 2007 Title X revenue was changed to 22%.

The value for 2005 total revenue was changed to \$1,004,633,020.

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Revised December 2009

Family Planning Annual Report: 2007 National Summary

Prepared for

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ADDITIONAL COPIES

This report can be viewed, downloaded, or printed from the Office of Population Affairs/ Office of Family Planning Web site at <http://www.hhs.gov/opa/familyplanning/toolsdocs/index.html>.

ACKNOWLEDGMENTS

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CONTENTS

1	Introduction	1
	Title X National Family Planning Program	1
	Family Planning Annual Report (FPAR)	1
	Report Structure	3
2	FPAR Methodology	5
	Data Collection	5
	Data Reporting	5
	Data Validation	5
3	Findings	7
	Grantee Profile (Exhibit 2).....	7
	Family Planning User Demographic Profile	8
	Total Users (Exhibit 3).....	8
	Users by Gender (Exhibits 4 and 5)	9
	Users by Age (Exhibits 4 and 5)	9
	Users by Race (Exhibits 6 to 14).....	9
	Users by Ethnicity (Exhibits 6 to 14).....	12
	Family Planning User Social and Economic Profile	21
	Users by Income Level (Exhibit 15)	21
	Users by Insurance Coverage Status (Exhibit 16).....	21
	Limited English Proficient (LEP) Users (Exhibit 17)	24
	Family Planning Method Use.....	27
	Female Users by Primary Contraceptive Method (Exhibits 18 to 21)	27
	Male Users by Primary Contraceptive Method (Exhibits 22 to 25).....	29
	Cervical and Breast Cancer Screening Activities.....	39
	Cervical Cancer Screening Activities (Exhibit 26)	39
	Breast Cancer Screening Activities (Exhibit 26)	39
	Sexually Transmitted Disease (STD) Screening	41
	Chlamydia Testing (Exhibits 27 and 28).....	41
	Gonorrhea Testing (Exhibit 29)	41
	Syphilis Testing (Exhibit 29)	45
	HIV Testing (Exhibit 29)	45
	Staffing and Family Planning Encounters	47
	Staffing (Exhibit 30)	47

Family Planning Encounters (Exhibit 30).....	47
Revenue (Exhibits 31 to 33).....	49
Medicaid.....	49
Title X.....	49
State and Local Government.....	49
Client Collections/Payment for Services.....	49
Private Third-Party Payers.....	50
Block Grants and Temporary Assistance for Needy Families (TANF).....	50
Other Revenue.....	50
Trends.....	50
4 References.....	57
5 Appendixes	
A. Trend Tables.....	A-1
B. State Tables.....	B-1
C. Methodological Notes.....	C-1

EXHIBITS

1. U.S. Department of Health and Human Services (HHS) regions.....	2
2. Number of and percentage change in grantees, delegates, and service sites, by region: 2006–2007 (Source: FPAR Grantee Profile Cover Sheet).....	7
3. Number, distribution, and percentage change in number of family planning users, by region: 2006–2007 (Source: FPAR Table 1).....	8
4. Number of family planning users, by gender, age, and region: 2007 (Source: FPAR Table 1).....	10
5. Distribution of family planning users, by gender, age, and region: 2007 (Source: FPAR Table 1).....	11
6. Number and distribution of all family planning users, by race and ethnicity: 2007 (Source: FPAR Tables 2 and 3).....	13
7. Number and distribution of female family planning users, by race and ethnicity: 2007 (Source: FPAR Table 2).....	13
8. Number and distribution of male family planning users, by race and ethnicity: 2007 (Source: FPAR Table 3).....	13
9. Number of all family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Tables 2 and 3).....	14
10. Distribution of all family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Tables 2 and 3).....	15
11. Number of female family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 2).....	16
12. Distribution of female family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 2).....	17

13.	Number of male family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 3).....	18
14.	Distribution of male family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 3).....	19
15.	Number and distribution of all family planning users, by income level and region: 2007 (Source: FPAR Table 4).....	22
16.	Number and distribution of all family planning users, by principal health insurance coverage status and region: 2007 (Source: FPAR Table 5)	23
17.	Number and percentage of family planning users who are limited English proficient (LEP), by region: 2007 (Source: FPAR Table 6)	25
18.	Number of female family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 7)	30
19.	Distribution of female family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 7)	31
20.	Number of female family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 7).....	32
21.	Distribution of female family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 7).....	33
22.	Number of male family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 8).....	34
23.	Distribution of male family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 8)	35
24.	Number of male family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 8).....	36
25.	Distribution of male family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 8).....	37
26.	Cervical and breast cancer screening activities, by screening test/exam and region: 2007 (Source: FPAR Tables 9 and 10).....	40
27.	Number of family planning users tested for chlamydia, by gender, age, and region: 2007 (Source: FPAR Table 11).....	42
28.	Percentage of family planning users in each age group tested for chlamydia, by gender, age, and region: 2007 (Source: FPAR Table 11).....	43
29.	Number of gonorrhea, syphilis, and HIV tests performed, by test type and region: 2007 (Source: FPAR Table 12).....	44
30.	Composition of clinical services provider (CSP) staff and number and distribution of family planning (FP) encounters, by type and region: 2007 (Source: FPAR Table 13)	48
31.	Amount and distribution of Title X project revenues, by revenue source: 2007 (Source: FPAR Table 14).....	53
32.	Amount of Title X project revenues, by revenue source and region: 2007 (Source: FPAR Table 14)	54
33.	Distribution of Title X project revenues, by revenue source and region: 2007 (Source: FPAR Table 14).....	55
A-1a.	Number and distribution of all family planning users, by region: 1999-2007.....	A-2
A-1b.	Distribution of all family planning users, by region: 1999-2007	A-3

A-2a.	Number and distribution of all family planning users, by age: 1999–2007	A-4
A-2b.	Distribution of all family planning users, by age: 1999–2007	A-5
A-3a.	Number and distribution of all family planning users, by race: 1999–2007	A-6
A-3b.	Distribution of all family planning users, by race: 1999–2007	A-7
A-4a.	Number and distribution of all family planning users, by Hispanic or Latino ethnicity: 1999–2007	A-8
A-4b.	Distribution of all family planning users, by Hispanic or Latino ethnicity: 1999–2007	A-9
A-5a.	Number and distribution of all family planning users, by race and Hispanic or Latino ethnicity: 1999–2007	A-10
A-5b.	Distribution of all family planning users, by race and Hispanic or Latino ethnicity: 1999–2007	A-11
A-6a.	Number and distribution of all family planning users, by income level: 1999–2007	A-12
A-6b.	Distribution of all family planning users, by income level: 1999–2007	A-13
A-7a.	Number of female family planning users, by primary contraceptive method: 1999–2007	A-14
A-7b.	Distribution of female family planning users who reported use of a method, by primary contraceptive method: 1999–2007	A-15
A-7c.	Distribution of female family planning users who reported use of a method, by primary contraceptive method: 1999–2007	A-16
A-8a.	Number and percentage of female users who received a Pap test (2005–2007), number of Pap tests performed (1999–2007), and percentage of Pap tests performed with an atypical squamous cells (ASC) or higher result.....	A-17
A-8b.	Number and percentage of female users who received a Pap test: 2005–2007	A-17
A-9a.	Number and percentage of female users younger than 25 years tested for chlamydia: 2005–2007	A-18
A-9b.	Number and percentage of female users younger than 25 years tested for chlamydia: 2005–2007	A-18
A-10a.	Actual (unadjusted) and adjusted (constant 1999\$ and 1981\$) total and Title X revenue: 1999–2007	A-19
A-10b.	Actual (unadjusted) and adjusted (constant 1999\$ and 1981\$) total revenue: 1999–2007	A-20
A-10c.	Actual (unadjusted) and adjusted (constant 1999\$ and 1981\$) Title X revenue: 1999–2007	A-21
A-11a.	Amount of Title X project revenue, by revenue source: 1999–2007	A-22
A-11b.	Distribution of Title X project revenue, by revenue source: 1999–2007	A-23
A-11c.	Distribution of Title X project revenue, by revenue source: 1999–2007	A-24
B-1.	Number and distribution of all family planning users, by state and gender: 2007 (Source: FPAR Table 1).....	B-2
B-2.	Number and distribution of all family planning users, by state and income level: 2007 (Source: FPAR Table 4).....	B-4

1 Introduction

TITLE X NATIONAL FAMILY PLANNING PROGRAM

The National Family Planning Program, created in 1970 and authorized under Title X of the Public Health Service Act,¹ is administered within the Office of Population Affairs (OPA) by the Office of Family Planning (OFP). The Title X program is the only federal program dedicated solely to the provision of family planning and related preventive health care. The program is designed to provide contraceptive supplies and information to all who want and need them, with priority given to low-income persons. Title X-funded agencies offer a broad range of effective and acceptable contraceptive methods on a voluntary and confidential basis. Title X funds also support the delivery of related preventive health services, including patient education and counseling; cervical and breast cancer screening; sexually transmitted disease (STD) and HIV prevention education, testing, and referral; and pregnancy diagnosis and counseling. By law, Title X funds may not be used in programs where abortion is a method of family planning.² For many clients, Title X clinics provide the only continuing source of health care and health education. In fiscal year 2007, the program received approximately \$283 million in funding.³

OPA allocates Title X service funds to U.S. Department of Health and Human Services (HHS) offices in 10 regions, shown in *Exhibit 1*. Each regional office manages the competitive review of Title X grant applications, makes grant awards, and monitors program performance for its respective region.

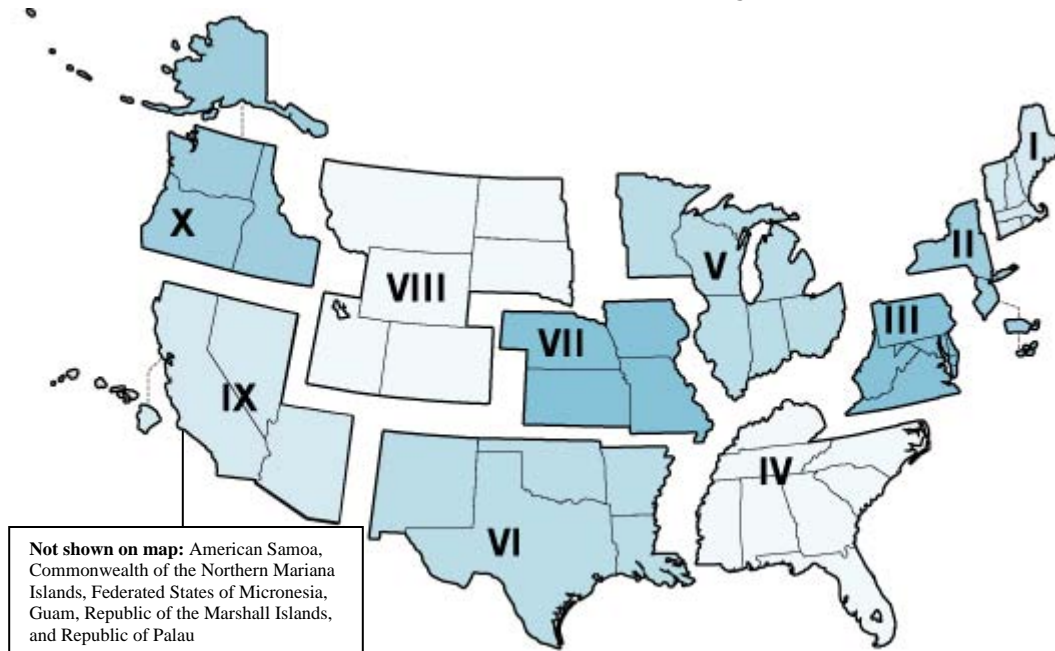
FAMILY PLANNING ANNUAL REPORT (FPAR)

The Family Planning Annual Report (FPAR) is the only source of annual, uniform reporting by all Title X service grantees. The FPAR provides consistent, national-level data on program users; service providers; utilization of family planning and related preventive health services; and sources of Title X and other program revenue. Annual submission of the FPAR is required of all Title X service grantees for purposes of monitoring program performance and reporting.^{4,5} The FPAR data are reported and presented in summary form to protect the confidentiality of the persons that receive Title X-funded services.⁶

Title X administrators and grantees use FPAR data to

- monitor program performance and compliance with statutory requirements;
- comply with accountability and federal performance requirements for Title X family planning funds, as required by the 1993 Government Performance and Results Act and the Office of Management and Budget's (OMB's) Program Assessment Rating Tool;
- guide strategic and financial planning and respond to inquiries from policy makers and Congress about the program; and
- estimate the impact of Title X-funded activities on key reproductive health outcomes, including prevention of unintended pregnancy, infertility, and invasive cervical cancer.

Exhibit 1. U.S. Department of Health and Human Services (HHS) regions



The 10 HHS regions (and regional office locations) are as follows:

- Region I (Boston, MA)—Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont
- Region II (New York, NY)—New Jersey, New York, Puerto Rico, and the U.S. Virgin Islands
- Region III (Philadelphia, PA)—Delaware, Washington, D.C., Maryland, Pennsylvania, Virginia, and West Virginia
- Region IV (Atlanta, GA)—Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee
- Region V (Chicago, IL)—Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin
- Region VI (Dallas, TX)—Arkansas, Louisiana, New Mexico, Oklahoma, and Texas
- Region VII (Kansas City, MO)—Iowa, Kansas, Missouri, and Nebraska
- Region VIII (Denver, CO)—Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming
- Region IX (San Francisco, CA)—Arizona, California, Hawaii, Nevada, American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Republic of the Marshall Islands, and Republic of Palau
- Region X (Seattle, WA)—Alaska, Idaho, Oregon, and Washington

REPORT STRUCTURE

The *Family Planning Annual Report: 2007 National Summary* presents data for the 89 Title X service grantees that submitted reports for the 2007 reporting period. It has five sections:

Section 1—Introduction—describes the Title X National Family Planning Program and the role of FPAR data in Title X program management and performance reporting.

Section 2—FPAR Methodology—describes the procedures for collecting, reporting, and validating FPAR data, and presents the definitions for key FPAR terms.

Section 3—Findings—presents the results for each FPAR table, and includes a discussion of national and regional patterns and trends (1999 to 2007) for selected indicators. Section 3 also presents definitions for table-specific FPAR terms and reporting instructions.

Section 4—References—is a list of key FPAR and report references.

Section 5—Appendixes—consists of three appendixes. *Appendix A* presents trend data for 1999 to 2007 or 2005 to 2007 for selected indicators. *Appendix B* presents information on the number and distribution of users served in 2007 by gender and income level for each state, the District of Columbia, and the eight U.S. territories and jurisdictions (American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Puerto Rico, Republic of the Marshall Islands, Republic of Palau, and U.S. Virgin Islands). *Appendix C* presents general and table-specific notes about the data presented in this report.

Key Terms and Definitions for FPAR Reporting

Family Planning User—A family planning user is an individual who has at least one family planning encounter at a Title X service site during the reporting period. The same individual may be counted as a family planning user only once during a reporting period.

Family Planning Encounter—A family planning encounter is a documented, face-to-face contact between an individual and a family planning provider that takes place in a Title X service site. The purpose of a family planning encounter—whether clinical or nonclinical—is to provide family planning and related preventive health services to female and male clients who want to avoid unintended pregnancies or achieve intended pregnancies. To be counted for purposes of the FPAR, a written record of the service(s) provided during the family planning encounter must be documented in the client record.

There are two types of family planning encounters at Title X service sites: (1) family planning encounters with a clinical services provider and (2) family planning encounters with a nonclinical services provider. The type of family planning provider who renders the care, regardless of the services rendered, determines the type of family planning encounter.

Laboratory tests and related counseling and education, in and of themselves, do not constitute a family planning encounter unless there is face-to-face contact between the client and provider, the provider documents the encounter in the client's record, and the test(s) is/are accompanied by family planning counseling or education.

Family Planning Provider—A family planning provider is the individual who assumes primary responsibility for assessing a client and documenting services in the client record. Providers include those agency staff that exercise independent judgment as to the services rendered to the client during an encounter. Two general types of providers deliver Title X family planning services: clinical services providers and nonclinical services providers.

Family Planning Service Site—A family planning service site refers to an established unit where grantee or delegate agency staff provides Title X services (clinical, counseling, educational, and/or referral) that comply with the *Title X Program Guidelines*⁷ and where at least some of the encounters between the family planning provider(s) and the individual(s) served meet the requirements of a family planning encounter. Established units include clinics, hospital outpatient departments, homeless shelters, detention and correctional facilities, and other locations where Title X agency staff provides these family planning services. Service sites may also include equipped mobile vans or schools.

Client Record—Title X projects must establish a medical record for every client who obtains clinical services or other screening or laboratory services (e.g., blood pressure check, urine-based pregnancy, or STD test). The medical record contains personal data; a medical history; physical exam data; laboratory test orders, results, and followup; treatment and special instructions; scheduled revisits; informed consent forms; documentation of refusal of services; and information on allergies and untoward reactions to identified drug(s). The medical record also contains clinical findings; diagnostic and therapeutic orders; and documentation of continuing care, referral, and followup. The medical record allows for entries by counseling and social service staff. The medical record is a confidential record, accessible only to authorized staff and secured by lock when not in use. The client medical record must contain sufficient information to identify the client, indicate where and how the client can be contacted, justify the clinical impression or diagnosis, and warrant the treatment and end results.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 5-7.

2 FPAR Methodology

DATA COLLECTION

The *Title X Family Planning Annual Report: Forms and Instructions*⁸ consists of a Grantee Profile Cover Sheet and 14 reporting tables. OPA instructs grantees to report on the scope of services or activities that are proposed in their approved grant applications and supported with Title X grant and related sources of funding. OPA provides definitions for key FPAR terms to ensure uniform reporting among Title X grantees. The key terms describe the persons receiving family planning and related preventive health services at Title X-funded service sites; the range and scope of the services provided; and the family planning providers that render care. In this report, we reproduce table-specific FPAR guidance alongside the table-specific findings.

DATA REPORTING

Title X service grantees are required to submit an FPAR by February 15 for the completed reporting period (January 1–December 31). In February 2008, 89 Title X service grantees submitted FPARs for 2007. Eighty-seven reports (98%) were submitted by the February 15 due date, and 82 reports (92%) were submitted using OPA's Web-based electronic grants management system (*GrantSolutions*). Regional Program Consultants (RPCs) entered into *GrantSolutions* the data for seven hardcopy reports, thereby consolidating all reports into a single electronic file. HHS regional staff and the FPAR Data Coordinator reviewed and approved all FPAR data prior to their tabulation.

DATA VALIDATION

FPAR data undergo both electronic and manual validations. *GrantSolutions* performs a set of automated validation procedures that ensure consistency within and across tables. The automated validation procedures include calculation of row and column totals and cross-table comparisons of selected cell values, including but not limited to the FPAR checkpoints (AA = unduplicated number of female family planning users, BB = unduplicated number of male family planning users, and CC = unduplicated number of all family planning users). Each validation procedure is based on a validation rule that defines which table cells to compare and what condition or validation test (e.g., =, <, >, ≤, ≥) to apply.

RTI performs further validations to identify potential reporting errors and problems (e.g., ≥ 10% unknown/not reported) and to identify extreme or unexpected values for selected data items (e.g., STD test-to-user ratios). RTI also performs a manual review of each hardcopy FPAR. The results of the RTI validations are presented in a grantee-specific report that is sent to the FPAR Data Coordinator for followup and resolution. Once OPA staff addresses all outstanding validation issues and updates the electronic reports in *GrantSolutions*, OPA sends RTI a second data file for tabulation and analysis.

Appendix C, Methodological Notes summarizes general and table-specific notes about limitations and other issues related to the data presented in this report.

FPAR Guidance for Reporting User Demographic Profile Data in Tables 1 to 3

In FPAR **Tables 1, 2, and 3**, grantees report information on the demographic profile of family planning users, including gender and age (**Table 1**) and race and ethnicity (**Tables 2 and 3**).

In FPAR **Table 1**, grantees report the unduplicated number of family planning users by age group and gender, categorizing the users based on their age as of June 30th of the reporting period.

In FPAR **Tables 2 and 3**, grantees report both the race and ethnicity of female (**Table 2**) and male (**Table 3**) family planning users, using categories that comply with the *1997 Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity* from the Office of Management and Budget (OMB).

The two minimum OMB categories for reporting ethnicity are

Hispanic or Latino (All Races)—A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Not Hispanic or Latino (All Races)—A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

The five minimum OMB categories for reporting race are

American Indian or Alaska Native—A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian—A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American—A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander—A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White—A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

If an agency wants to collect data for ethnic or race subcategories, the agency must be able to aggregate the data reported into the OMB minimum standard set of ethnicity and race categories.

OMB encourages self-identification of race. When respondents are allowed to self-identify or self-report their race, agencies should adopt a method that allows respondents to mark or select more than one of the five minimum race categories. FPAR **Tables 2 and 3** allow grantees to report the number of users who self-identify with two or more of the five minimum race categories.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 13–17, A1–A2.

3 Findings

GRANTEE PROFILE (EXHIBIT 2)

In 2007, OPA regional offices awarded Title X service grants to 89 public and private grantees, including state and local health departments (55%) and nonprofit family planning agencies, independent clinics, and community health agencies (45%). In turn, grantees distributed these funds to 1,176 subcontractors (“delegates”) and their own clinics, ultimately supporting a family planning service network of 4,542 service sites in the 50 United States, the District of Columbia, and the eight U.S. territories and jurisdictions (*Exhibit 2*).

Between 2006 and 2007, there was a net increase of one grantee—two grantees joined Region VI and one grantee withdrew from Region V. Additionally, the total number of delegates decreased 2% (19 delegates), while the total number of service sites increased 1% (62 sites). Regions I and X reported the largest percentage increases in number of sites—7% (16 sites) and 24% (54 sites), respectively—and four regions (II, IV, V, and VI) reported declines ranging from 1% (V) to 3% (II) (*Exhibit 2*).

Exhibit 2. Number of and percentage change in grantees, delegates, and service sites, by region: 2006-2007 (Source: FPAR Grantee Profile Cover Sheet)

Region	Number						% Change 2006-2007		
	Grantees		Delegates		Service Sites		Grantees	Delegates	Service Sites
	2006	2007	2006	2007	2006	2007			
I	10	10	68	70	224	240	0%	3%	7%
II	7	7	98	91	302	293	0%	-7%	-3%
III	9	9	228	226	638	662	0%	-1%	4%
IV	10	10	185	187	1,145	1,117	0%	1%	-2%
V	12	11	165	158	432	428	-8%	-4%	-1%
VI	6	8	92	93	587	573	33%	1%	-2%
VII	5	5	107	107	279	286	0%	0%	3%
VIII	6	6	74	73	184	187	0%	-1%	2%
IX	15	15	114	107	466	479	0%	-6%	3%
X	8	8	64	64	223	277	0%	0%	24%
Total	88	89	1,195	1,176	4,480	4,542	1%	-2%	1%

† Percentage is less than 0.5%.

FAMILY PLANNING USER DEMOGRAPHIC PROFILE

Total Users (Exhibit 3)

In 2007, Title X service grantees served 4,987,238 family planning users. Regions IV and IX accounted for 20% and 22%, respectively, of the total users served in 2007. Regions II, III, V, and VI each served between 9% and 12% of total users, and Regions I, VII, VIII, and X each served between 3% and 5% (*Exhibit 3*).

Between 2006 and 2007, there was a 0.14% decrease (7,040 users) in the total number of users served in Title X-funded service sites. The number of family planning users decreased between 2% and 9% in seven regions (I, III, IV, V, VII, VIII, and X) and increased between 1% and 13% in three regions (II, VI, and IX) (*Exhibit 3*). The average number of users per clinic decreased from almost 1,115 in 2006 to 1,098 in 2007, or the equivalent of almost 17 users per service site (not shown).

Since 1999 the regional distribution of total family planning users has remained relatively stable, except in Regions IV and IX. Region IV accounted for 23% of total users in 1999 compared to 20% in 2007. In contrast, Region IX accounted for 16% of total users in 1999 compared to 22% in 2007. During this period, four regions (IV, V, VI, and VII) experienced a decline (0.1% to 5%) in the number of users served (*Exhibits A-1a and A-1b in Appendix A*).

Exhibit 3. Number, distribution, and percentage change in number of family planning users, by region: 2006–2007 (Source: FPAR Table 1)

Region	Number		Distribution		% Change 2006–2007
	2006	2007	2006	2007	
I	212,169	199,010	4%	4%	–6%
II	470,148	479,572	9%	10%	2%
III	567,583	557,031	11%	11%	–2%
IV	1,051,330	1,018,656	21%	20%	–3%
V	582,313	531,679	12%	11%	–9%
VI	483,632	486,378	10%	10%	1%
VII	245,133	234,592	5%	5%	–4%
VIII	156,482	149,395	3%	3%	–5%
IX	973,524	1,102,718	19%	22%	13%
X	251,964	228,207	5%	5%	–9%
Total All Users	4,994,278	4,987,238	100%	100%	0%†

† Percentage is less than 0.5%.

Users by Gender (Exhibits 4 and 5)

Of the total number of users in 2007, 94% (4,691,857) were female and 6% (295,381) were male. The distribution of users by gender ranged from 89% female (Region IX) to 98% female in (IV) (*Exhibits 4 and 5*). *Exhibit B-1 (Appendix B)* presents the number and distribution of family planning users for 2007 by gender and state, including the eight U.S. territories and jurisdictions.

Between 1999 and 2007, the percentage of users that was female decreased from 97% of total users in 1999 to 94% in 2007. Numerically, however, the number of female users increased 9%, from 4,315,040 in 1999 to 4,691,857 in 2007. During this same time, the number of male users more than doubled (132%), increasing from 127,098 in 1999 to 295,381 in 2007 (*Exhibit A-1a*).

Users by Age (Exhibits 4 and 5)

In 2007, 51% (2,524,079) of family planning users were in their 20s, and about one of every four were either 19 years and younger (25%) or 30 years and older (24%). The highest percentage of users was aged 20 to 24 (31%), followed by those 15 to 19 (24%) and 25 to 29 (19%). By region, the percentage of users in their early 20s ranged from 29% (Region I) to 35% (V), while the percentage age 15 to 19 ranged from 22% (IX) to 28% (III). Teens younger than 15 years accounted for only 1% (68,918) of total users nationally, and between 1% and 2% of total users across the regions (*Exhibits 4 and 5*).

Nationally, about the same percentages of male (27%) and female (25%) users were in their teens, and a slightly higher percentage of female (31%) than male (29%) users were in their early 20s. Compared to female users, there was more variation across regions in the age distribution of male users. For example, the percentage of male users who were teens ranged from 17% (Region X) to 51% (IV), compared with a range of 23% (II and IX) to 29% (III and VIII) for female users (*Exhibits 4 and 5*).

Between 1999 and 2007, there were small shifts in the percentage distribution of family planning users by age group. All age groups experienced an increase in the number of users with the exception of the group 17 years and younger, which decreased 4% (24,524 users) during this period (*Exhibits A-2a and A-2b*).

Users by Race (Exhibits 6 to 14)

In 2007, 63% (3,125,435) of family planning users identified themselves as white, 19% (958,241) as black, 3% (131,735) as Asian, 1% (43,360) as Native Hawaiian or other Pacific Islander, and 1% (38,080) as American Indian or Alaska Native. Three percent (132,911) of all users self-identified with two or more of the five minimum race categories, specified in the Office of Management and Budget's *Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity*,⁹ and race was either unknown or not reported for 11% (557,476) (*Exhibits 6, 9, and 10*).

Exhibit 4. Number of family planning users, by gender, age, and region: 2007 (Source: FPAR Table 1)

Age Group (Years)	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Female Users											
< 15	55,913	1,431	4,363	9,778	15,082	5,321	6,214	1,984	1,642	7,707	2,391
15-17	501,023	20,522	45,793	70,993	102,175	60,072	47,573	21,896	16,774	91,052	24,173
18-19	617,303	24,237	55,863	70,140	129,141	76,706	57,248	28,974	20,934	125,962	28,098
20-24	1,471,512	51,965	140,284	158,516	314,479	178,158	138,341	73,643	47,161	300,747	68,218
25-29	915,040	33,027	91,812	93,642	201,570	94,771	95,423	42,154	24,894	194,572	43,175
30-34	495,933	17,482	50,288	48,624	109,158	45,282	57,835	21,488	12,014	111,321	22,441
35-39	306,108	12,212	31,192	31,311	63,740	26,798	35,066	13,359	6,914	72,355	13,161
40-44	179,021	8,822	17,862	19,683	35,588	14,660	18,391	8,801	4,141	44,291	6,782
> 44	150,004	11,886	14,812	19,121	24,622	10,481	12,395	9,288	3,419	38,544	5,436
Total Female Users	4,691,857	181,584	452,269	521,808	995,555	512,249	468,486	221,587	137,893	986,551	213,875
Male Users											
< 15	13,005	399	815	1,231	7,030	226	491	194	517	2,016	86
15-17	33,031	2,122	3,328	7,660	2,749	2,135	2,247	775	1,477	9,541	997
18-19	34,481	1,934	3,720	4,664	2,014	2,549	2,439	1,368	1,438	13,005	1,350
20-24	85,158	5,161	9,359	8,475	3,512	7,172	5,307	4,445	3,448	33,956	4,323
25-29	52,369	3,264	4,805	4,667	2,554	3,764	3,018	2,611	2,247	22,331	3,108
30-34	26,740	1,433	2,215	2,440	1,668	1,489	1,712	1,233	984	11,926	1,640
35-39	17,777	961	1,215	1,879	1,229	848	995	763	570	8,273	1,044
40-44	12,482	742	728	1,471	862	490	682	566	307	5,924	710
> 44	20,338	1,410	1,118	2,736	1,483	757	1,001	1,050	514	9,195	1,074
Total Male Users	295,381	17,426	27,303	35,223	23,101	19,430	17,892	13,005	11,502	116,167	14,332
All Users											
< 15	68,918	1,830	5,178	11,009	22,112	5,547	6,705	2,178	2,159	9,723	2,477
15-17	534,054	22,644	49,121	78,653	104,924	62,207	49,820	22,671	18,251	100,593	25,170
18-19	651,784	26,171	59,583	74,804	131,155	79,255	59,687	30,342	22,372	138,967	29,448
20-24	1,556,670	57,126	149,643	166,991	317,991	185,330	143,648	78,088	50,609	334,703	72,541
25-29	967,409	36,291	96,617	98,309	204,124	98,535	98,441	44,765	27,141	216,903	46,283
30-34	522,673	18,915	52,503	51,064	110,826	46,771	59,547	22,721	12,998	123,247	24,081
35-39	323,885	13,173	32,407	33,190	64,969	27,646	36,061	14,122	7,484	80,628	14,205
40-44	191,503	9,564	18,590	21,154	36,450	15,150	19,073	9,367	4,448	50,215	7,492
> 44	170,342	13,296	15,930	21,857	26,105	11,238	13,396	10,338	3,933	47,739	6,510
Total All Users	4,987,238	199,010	479,572	557,031	1,018,656	531,679	486,378	234,592	149,395	1,102,718	228,207

Exhibit 5. Distribution of family planning users, by gender, age, and region: 2007 (Source: FPAR Table 1)

Age Group (Years)	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Female Users											
< 15	1%	1%	1%	2%	2%	1%	1%	1%	1%	1%	1%
15-17	11%	11%	10%	14%	10%	12%	10%	10%	12%	9%	11%
18-19	13%	13%	12%	13%	13%	15%	12%	13%	15%	13%	13%
20-24	31%	29%	31%	30%	32%	35%	30%	33%	34%	30%	32%
25-29	20%	18%	20%	18%	20%	19%	20%	19%	18%	20%	20%
30-34	11%	10%	11%	9%	11%	9%	12%	10%	9%	11%	10%
35-39	7%	7%	7%	6%	6%	5%	7%	6%	5%	7%	6%
40-44	4%	5%	4%	4%	4%	3%	4%	4%	3%	4%	3%
> 44	3%	7%	3%	4%	2%	2%	3%	4%	2%	4%	3%
Total Female Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Male Users											
< 15	4%	2%	3%	3%	30%	1%	3%	1%	4%	2%	1%
15-17	11%	12%	12%	22%	12%	11%	13%	6%	13%	8%	7%
18-19	12%	11%	14%	13%	9%	13%	14%	11%	13%	11%	9%
20-24	29%	30%	34%	24%	15%	37%	30%	34%	30%	29%	30%
25-29	18%	19%	18%	13%	11%	19%	17%	20%	20%	19%	22%
30-34	9%	8%	8%	7%	7%	8%	10%	9%	9%	10%	11%
35-39	6%	6%	4%	5%	5%	4%	6%	6%	5%	7%	7%
40-44	4%	4%	3%	4%	4%	3%	4%	4%	3%	5%	5%
> 44	7%	8%	4%	8%	6%	4%	6%	8%	4%	8%	7%
Total Male Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
All Users											
< 15	1%	1%	1%	2%	2%	1%	1%	1%	1%	1%	1%
15-17	11%	11%	10%	14%	10%	12%	10%	10%	12%	9%	11%
18-19	13%	13%	12%	13%	13%	15%	12%	13%	15%	13%	13%
20-24	31%	29%	31%	30%	31%	35%	30%	33%	34%	30%	32%
25-29	19%	18%	20%	18%	20%	19%	20%	19%	18%	20%	20%
30-34	10%	10%	11%	9%	11%	9%	12%	10%	9%	11%	11%
35-39	6%	7%	7%	6%	6%	5%	7%	6%	5%	7%	6%
40-44	4%	5%	4%	4%	4%	3%	4%	4%	3%	5%	3%
> 44	3%	7%	3%	4%	3%	2%	3%	4%	3%	4%	3%
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Female Users	94%	91%	94%	94%	98%	96%	96%	94%	92%	89%	94%
Male Users	6%	9%	6%	6%	2%	4%	4%	6%	8%	11%	6%

The racial composition of female (*Exhibits 7, 11, and 12*), and male users (*Exhibits 8, 13, and 14*) differed in terms of the percentages in each group that self-identified as white and black. Among female users, 63% self-identified as white and 19% as black; among male users, 55% self-identified as white and 23% as black. Additionally, race was unknown or not reported for a slightly higher percentage of male (14%) than female (11%) users.

Across regions, the distribution of family planning users by race reflected geographic differences in the distribution of racial groups. More than seven of every ten users in six regions (I, V, VI, VII, VIII, and X) self-identified as white, and between 15% and 34% in six regions (II, III, IV, V, VI, and VII) self-identified as black. Region IX, which includes the Pacific territories, had the highest percentages of users identifying themselves as either Asian (6%) or Native Hawaiian or other Pacific Islander (3%). The percentage of users for whom race was unknown or not reported exceeded the national average of 11% in three regions (II, IX, and X) (*Exhibits 9 and 10*).

Between 1999 and 2007, there were small shifts in the percentage distribution of family planning users by race, with the largest changes (2 to 3 points) during this period reported for users who self-identified as white, black, and unknown or not reported race. The percentage of total users that self-identified as white decreased from 65% in 1999 to 63% in 2007, while the percentage that self-identified as black decreased from 22% to 19%. Numerically, of these two groups blacks were the only group to experience a decrease (3%) in the number of users (28,207). The percentage of users for whom race was unknown or not reported increased from 9% in 1999 to 11% in 2007 (*Exhibits A-3a and A-3b*).

Users by Ethnicity (Exhibits 6 to 14)

In 2007, 26% (1,303,402) of users identified themselves as Hispanic or Latino, including 26% (1,223,022) of female users and 27% (80,380) of male users. Ethnicity was unknown or not reported for 1% of total and female users and 2% of male users (*Exhibits 6, 7, and 8*). For female and male users, the highest percentages of Hispanic or Latino users were in Regions IX (46% of females and 42% of males), VI (41% of females and 47% of males), and II (31% of females and 26% of males) (*Exhibits 11, 12, 13, and 14*).

Between 1999 and 2007, the percentage of family planning users reporting Hispanic or Latino ethnicity increased from 17% of total users in 1999 to 26% in 2007, while the percentage of users with unknown Hispanic or Latino ethnicity decreased from 4% to 1%. Numerically, the number of Hispanic or Latino users increased 69% from 772,129 in 1999 to 1,303,402 in 2007 (*Exhibits A-4a and A-4b*).

Since 2005, grantees have reported race and ethnicity data in a single, cross-tabulated table for female (FPAR Table 2) and male (FPAR Table 3) users. The revised format provides new information on the ethnic composition of users reported in each race category, including those for whom race is unknown or not reported. Among the 11% (516,991) of female users for whom race was unknown or not reported in 2007, 74% (380,822) were Hispanic or Latino (*Exhibit 7*). Similarly, among the 14% (40,485) of male users for whom race was unknown or not reported, 72% (29,349) were Hispanic or Latino (*Exhibit 8*). One percent of female and male users did not self-identify with either a race or ethnic group category. *Exhibits A-5a and A-5b* present trends in the distribution of users by ethnicity and race for 2005 to 2007.

Exhibit 6. Number and distribution of all family planning users, by race and ethnicity: 2007
(Source: FPAR Tables 2 and 3)

Race	Number				Distribution			
	Hispanic or Latino	Not Hispanic or Latino	Ethnicity UK/NR	Total	Hispanic or Latino	Not Hispanic or Latino	Ethnicity UK/NR	Total
American Indian/ Alaska Native	5,770	31,931	379	38,080	0%†	1%	0%†	1%
Asian	4,001	126,320	1,414	131,735	0%†	3%	0%†	3%
Black/African American	23,235	926,564	8,442	958,241	0%†	19%	0%†	19%
Native Hawaiian/ Pacific Islander	4,808	38,191	361	43,360	0%†	1%	0%†	1%
White	772,254	2,324,430	28,751	3,125,435	15%	47%	1%	63%
More than one race	83,163	47,946	1,802	132,911	2%	1%	0%†	3%
Unknown/ not reported	410,171	116,115	31,190	557,476	8%	2%	1%	11%
Total All Users	1,303,402	3,611,497	72,339	4,987,238	26%	72%	1%	100%

UK/NR=unknown or not reported. † Percentage is less than 0.5%.

Exhibit 7. Number and distribution of female family planning users, by race and ethnicity: 2007
(Source: FPAR Table 2)

Race	Number				Distribution			
	Hispanic or Latino	Not Hispanic or Latino	Ethnicity UK/NR	Total	Hispanic or Latino	Not Hispanic or Latino	Ethnicity UK/NR	Total
American Indian/ Alaska Native	5,265	29,936	337	35,538	0%†	1%	0%†	1%
Asian	3,731	120,561	1,324	125,616	0%†	3%	0%†	3%
Black/African American	21,514	860,283	7,508	889,305	0%†	18%	0%†	19%
Native Hawaiian/ Pacific Islander	4,471	30,895	344	35,710	0%†	1%	0%†	1%
White	727,192	2,207,669	27,080	2,961,941	15%	47%	1%	63%
More than one race	80,027	45,059	1,670	126,756	2%	1%	0%†	3%
Unknown/ not reported	380,822	106,975	29,194	516,991	8%	2%	1%	11%
Total All Users	1,223,022	3,401,378	67,457	4,691,857	26%	72%	1%	100%

UK/NR=unknown or not reported. † Percentage is less than 0.5%.

Exhibit 8. Number and distribution of male family planning users, by race and ethnicity: 2007
(Source: FPAR Table 3)

Race	Number				Distribution			
	Hispanic or Latino	Not Hispanic or Latino	Ethnicity UK/NR	Total	Hispanic or Latino	Not Hispanic or Latino	Ethnicity UK/NR	Total
American Indian/ Alaska Native	505	1,995	42	2,542	0%†	1%	0%†	1%
Asian	270	5,759	90	6,119	0%†	2%	0%†	2%
Black/African American	1,721	66,281	934	68,936	1%	22%	0%†	23%
Native Hawaiian/ Pacific Islander	337	7,296	17	7,650	0%†	2%	0%†	3%
White	45,062	116,761	1,671	163,494	15%	40%	1%	55%
More than one race	3,136	2,887	132	6,155	1%	1%	0%†	2%
Unknown/ not reported	29,349	9,140	1,996	40,485	10%	3%	1%	14%
Total All Users	80,380	210,119	4,882	295,381	27%	71%	2%	100%

UK/NR=unknown or not reported. † Percentage is less than 0.5%.

Exhibit 9. Number of all family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Tables 2 and 3)

Race and Ethnicity	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
American Indian or Alaska Native												
Hispanic or Latino	5,770	40	779	313	841	270	760	114	305	1,866	482	
Not Hispanic or Latino	31,931	428	1,313	683	2,076	1,718	6,854	1,247	1,971	12,647	2,994	
Unknown/not reported	379	17	63	26	3	46	38	28	42	112	4	
Total	38,080	485	2,155	1,022	2,920	2,034	7,652	1,389	2,318	14,625	3,480	
Asian												
Hispanic or Latino	4,001	63	298	1,356	270	106	176	66	25	1,534	107	
Not Hispanic or Latino	126,320	6,549	11,200	8,193	18,552	4,603	2,685	2,594	1,270	63,661	7,013	
Unknown/not reported	1,414	64	72	173	50	180	99	68	37	670	1	
Total	131,735	6,676	11,570	9,722	18,872	4,889	2,960	2,728	1,332	65,865	7,121	
Black or African American												
Hispanic or Latino	23,235	1,906	5,744	2,487	8,278	913	923	155	108	2,357	364	
Not Hispanic or Latino	926,564	20,760	103,844	161,071	333,884	94,323	87,619	34,115	3,207	79,815	7,926	
Unknown/not reported	8,442	137	1,970	1,990	350	1,405	967	309	235	1,079	0	
Total	958,241	22,803	111,558	165,548	342,512	96,641	89,509	34,579	3,550	83,251	8,290	
Native Hawaiian/Pacific Islander												
Hispanic or Latino	4,808	99	265	193	1,136	98	208	89	39	2,057	624	
Not Hispanic or Latino	38,191	432	641	480	818	513	668	391	293	32,262	1,693	
Unknown/not reported	361	1	77	11	3	16	6	20	11	215	1	
Total	43,360	532	983	684	1,957	627	882	500	343	34,534	2,318	
White												
Hispanic or Latino	772,254	21,259	50,692	23,733	107,444	49,329	180,199	22,284	14,366	280,993	21,955	
Not Hispanic or Latino	2,324,430	125,192	182,949	288,745	475,844	332,288	175,957	161,647	106,826	324,188	150,794	
Unknown/not reported	28,751	1,187	1,694	13,569	309	3,269	821	1,462	3,066	3,340	34	
Total	3,125,435	147,638	235,335	326,047	583,597	384,886	356,977	185,393	124,258	608,521	172,783	
More Than One Race												
Hispanic or Latino	83,163	3,739	12,471	4,175	32,734	6,263	803	167	701	21,478	632	
Not Hispanic or Latino	47,946	3,012	2,011	2,709	2,031	14,748	1,912	888	1,028	17,702	1,905	
Unknown/not reported	1,802	48	168	120	36	822	113	32	45	414	4	
Total	132,911	6,799	14,650	7,004	34,801	21,833	2,828	1,087	1,774	39,594	2,541	
Race Unknown or Not Reported												
Hispanic or Latino	410,171	11,887	78,704	27,488	21,222	15,341	17,713	5,196	13,478	194,386	24,756	
Not Hispanic or Latino	116,115	1,456	22,629	11,196	11,885	3,737	2,710	1,300	1,646	52,954	6,602	
Unknown/not reported	31,190	734	1,988	8,320	890	1,691	5,147	2,420	696	8,988	316	
Total	557,476	14,077	103,321	47,004	33,997	20,769	25,570	8,916	15,820	256,328	31,674	
All Races												
Hispanic or Latino	1,303,402	38,993	148,953	59,745	171,925	72,320	200,782	28,071	29,022	504,671	48,920	
Not Hispanic or Latino	3,611,497	157,829	324,587	473,077	845,090	451,930	278,405	202,182	116,241	583,229	178,927	
Unknown/not reported	72,339	2,188	6,032	24,209	1,641	7,429	7,191	4,339	4,132	14,818	360	
Total All Users	4,987,238	199,010	479,572	557,031	1,018,656	531,679	486,378	234,592	149,395	1,102,718	228,207	

Exhibit 10. Distribution of all family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Tables 2 and 3)

Race and Ethnicity	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
American Indian or Alaska Native												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	1%	0%†	0%†	0%†	0%†	0%†	1%	0%†	1%	1%	1%	1%
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	1%	0%†	0%†	0%†	0%†	0%†	2%	1%	2%	1%	2%	2%
Asian												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	3%	3%	2%	1%	2%	1%	1%	1%	1%	6%	3%	3%
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	3%	3%	2%	2%	2%	1%	1%	1%	1%	6%	3%	3%
Black or African American												
Hispanic or Latino	0%†	1%	1%	0%†	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	19%	10%	22%	29%	33%	18%	18%	15%	2%	7%	3%	3%
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%
Total	19%	11%	23%	30%	34%	18%	18%	15%	2%	8%	4%	4%
Native Hawaiian/Pacific Islander												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	3%	1%	1%
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	3%	1%	1%
White												
Hispanic or Latino	15%	11%	11%	4%	11%	9%	37%	9%	10%	25%	10%	10%
Not Hispanic or Latino	47%	63%	38%	52%	47%	62%	36%	69%	72%	29%	66%	66%
Unknown/not reported	1%	1%	0%†	2%	0%†	1%	0%†	1%	2%	0%†	0%†	0%†
Total	63%	74%	49%	59%	57%	72%	73%	79%	83%	55%	76%	76%
More Than One Race												
Hispanic or Latino	2%	2%	3%	1%	3%	1%	0%†	0%†	0%†	2%	0%†	0%†
Not Hispanic or Latino	1%	2%	0%†	0%†	0%†	3%	0%†	0%†	1%	2%	1%	1%
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	3%	3%	3%	1%	3%	4%	1%	0%†	1%	4%	1%	1%
Race Unknown or Not Reported												
Hispanic or Latino	8%	6%	16%	5%	2%	3%	4%	2%	9%	18%	11%	11%
Not Hispanic or Latino	2%	1%	5%	2%	1%	1%	1%	1%	1%	5%	3%	3%
Unknown/not reported	1%	0%†	0%†	1%	0%†	0%†	1%	1%	0%†	1%	0%†	0%†
Total	11%	7%	22%	8%	3%	4%	5%	4%	11%	23%	14%	14%
All Races												
Hispanic or Latino	26%	20%	31%	11%	17%	14%	41%	12%	19%	46%	21%	21%
Not Hispanic or Latino	72%	79%	68%	85%	83%	85%	57%	86%	78%	53%	78%	78%
Unknown/not reported	1%	1%	1%	4%	0%†	1%	1%	2%	3%	1%	0%†	0%†
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

† Percentage is less than 0.5%.

Exhibit 11. Number of female family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 2)

Race and Ethnicity	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
American Indian or Alaska Native												
Hispanic or Latino	5,265	36	673	311	839	263	742	104	204	1,631	462	
Not Hispanic or Latino	29,936	367	1,243	652	2,056	1,656	6,472	1,191	1,759	11,847	2,693	
Unknown/not reported	337	16	52	24	3	40	32	28	40	98	4	
Total	35,538	419	1,968	987	2,898	1,959	7,246	1,323	2,003	13,576	3,159	
Asian												
Hispanic or Latino	3,731	58	291	1,217	269	105	167	65	24	1,431	104	
Not Hispanic or Latino	120,561	6,288	10,779	7,863	18,459	4,468	2,617	2,464	1,189	59,729	6,705	
Unknown/not reported	1,324	58	69	166	50	176	85	63	35	621	1	
Total	125,616	6,404	11,139	9,246	18,778	4,749	2,869	2,592	1,248	61,781	6,810	
Black or African American												
Hispanic or Latino	21,514	1,638	5,437	2,069	8,090	859	862	138	88	2,000	333	
Not Hispanic or Latino	860,283	18,074	95,979	143,495	325,078	88,578	83,488	30,324	2,275	66,243	6,749	
Unknown/not reported	7,508	126	1,870	1,745	350	1,277	722	286	196	936	0	
Total	889,305	19,838	103,286	147,309	333,518	90,714	85,072	30,748	2,559	69,179	7,082	
Native Hawaiian/Pacific Islander												
Hispanic or Latino	4,471	94	236	186	1,122	90	197	83	33	1,819	611	
Not Hispanic or Latino	30,895	414	559	449	801	498	659	381	269	25,293	1,572	
Unknown/not reported	344	1	74	11	3	15	5	17	10	207	1	
Total	35,710	509	869	646	1,926	603	861	481	312	27,319	2,184	
White												
Hispanic or Latino	727,192	19,376	48,980	23,158	105,694	48,396	172,693	21,397	13,347	252,959	21,192	
Not Hispanic or Latino	2,207,669	114,847	172,851	277,110	464,937	321,327	171,887	154,300	99,366	289,982	141,062	
Unknown/not reported	27,080	1,001	1,576	13,014	301	3,034	765	1,399	2,951	3,008	31	
Total	2,961,941	135,224	223,407	313,282	570,932	372,757	345,345	177,096	115,664	545,949	162,285	
More Than One Race												
Hispanic or Latino	80,027	3,393	11,899	4,002	32,332	6,152	749	163	637	20,168	532	
Not Hispanic or Latino	45,059	2,742	1,874	2,478	1,992	14,442	1,835	846	947	16,100	1,803	
Unknown/not reported	1,670	48	147	118	31	775	99	29	41	378	4	
Total	126,756	6,183	13,920	6,598	34,355	21,369	2,683	1,038	1,625	36,646	2,339	
Race Unknown or Not Reported												
Hispanic or Latino	380,822	11,036	74,396	25,539	20,761	14,890	16,888	4,889	12,418	176,328	23,677	
Not Hispanic or Latino	106,975	1,302	21,347	10,123	11,607	3,659	2,512	1,207	1,513	47,680	6,025	
Unknown/not reported	29,194	669	1,937	8,078	780	1,549	5,010	2,213	551	8,093	314	
Total	516,991	13,007	97,680	43,740	33,148	20,098	24,410	8,309	14,482	232,101	30,016	
All Races												
Hispanic or Latino	1,223,022	35,631	141,912	56,482	169,107	70,755	192,298	26,839	26,751	456,336	46,911	
Not Hispanic or Latino	3,401,378	144,034	304,632	442,170	824,930	434,628	269,470	190,713	107,318	516,874	166,609	
Unknown/not reported	67,457	1,919	5,725	23,156	1,518	6,866	6,718	4,035	3,824	13,341	355	
Total Female Users	4,691,857	181,584	452,269	521,808	995,555	512,249	468,486	221,587	137,893	986,551	213,875	

Exhibit 12. Distribution of female family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 2)

Race and Ethnicity	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
American Indian or Alaska Native												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	1%	0%†	0%†	0%†	0%†	0%†	1%	0%†	1%	1%	1%	1%
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	1%	0%†	0%†	0%†	0%†	0%†	2%	1%	1%	1%	1%	1%
Asian												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	3%	3%	2%	2%	2%	1%	1%	1%	1%	6%	3%	
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	3%	4%	2%	2%	2%	1%	1%	1%	1%	6%	3%	
Black or African American												
Hispanic or Latino	0%†	1%	1%	0%†	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	18%	10%	21%	27%	33%	17%	18%	14%	2%	7%	3%	
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%
Total	19%	11%	23%	28%	34%	18%	18%	14%	2%	7%	3%	
Native Hawaiian/Pacific Islander												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	3%	1%	
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Total	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	3%	1%	
White												
Hispanic or Latino	15%	11%	11%	4%	11%	9%	37%	10%	10%	26%	10%	
Not Hispanic or Latino	47%	63%	38%	53%	47%	63%	37%	70%	72%	29%	66%	
Unknown/not reported	1%	1%	0%†	2%	0%†	1%	0%†	1%	2%	0%†	0%†	
Total	63%	74%	49%	60%	57%	73%	74%	80%	84%	55%	76%	
More Than One Race												
Hispanic or Latino	2%	2%	3%	1%	3%	1%	0%†	0%†	0%†	2%	0%†	
Not Hispanic or Latino	1%	2%	0%†	0%†	0%†	3%	0%†	0%†	1%	2%	1%	
Unknown/not reported	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	
Total	3%	3%	3%	1%	3%	4%	1%	0%†	1%	4%	1%	
Race Unknown or Not Reported												
Hispanic or Latino	8%	6%	16%	5%	2%	3%	4%	2%	9%	18%	11%	
Not Hispanic or Latino	2%	1%	5%	2%	1%	1%	1%	1%	1%	5%	3%	
Unknown/not reported	1%	0%†	0%†	2%	0%†	0%†	1%	1%	0%†	1%	0%†	
Total	11%	7%	22%	8%	3%	4%	5%	4%	11%	24%	14%	
All Races												
Hispanic or Latino	26%	20%	31%	11%	17%	14%	41%	12%	19%	46%	22%	
Not Hispanic or Latino	72%	79%	67%	85%	83%	85%	58%	86%	78%	52%	78%	
Unknown/not reported	1%	1%	1%	4%	0%†	1%	1%	2%	3%	1%	0%†	
Total Female Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

† Percentage is less than 0.5%.

Exhibit 13. Number of male family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 3)

Race and Ethnicity	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
American Indian or Alaska Native												
Hispanic or Latino	505	4	106	2	2	7	18	10	101	235	20	
Not Hispanic or Latino	1,995	61	70	31	20	62	382	56	212	800	301	
Unknown/not reported	42	1	11	2	0	6	6	0	2	14	0	
Total	2,542	66	187	35	22	75	406	66	315	1,049	321	
Asian												
Hispanic or Latino	270	5	7	139	1	1	9	1	1	103	3	
Not Hispanic or Latino	5,759	261	421	330	93	135	68	130	81	3,932	308	
Unknown/not reported	90	6	3	7	0	4	14	5	2	49	0	
Total	6,119	272	431	476	94	140	91	136	84	4,084	311	
Black or African American												
Hispanic or Latino	1,721	268	307	418	188	54	61	17	20	357	31	
Not Hispanic or Latino	66,281	2,686	7,865	17,576	8,806	5,745	4,131	3,791	932	13,572	1,177	
Unknown/not reported	934	11	100	245	0	128	245	23	39	143	0	
Total	68,936	2,965	8,272	18,239	8,994	5,927	4,437	3,831	991	14,072	1,208	
Native Hawaiian/Pacific Islander												
Hispanic or Latino	337	5	29	7	14	8	11	6	6	238	13	
Not Hispanic or Latino	7,296	18	82	31	17	15	9	10	24	6,969	121	
Unknown/not reported	17	0	3	0	0	1	1	3	1	8	0	
Total	7,650	23	114	38	31	24	21	19	31	7,215	134	
White												
Hispanic or Latino	45,062	1,883	1,712	575	1,750	933	7,506	887	1,019	28,034	763	
Not Hispanic or Latino	116,761	10,345	10,098	11,635	10,907	10,961	4,070	7,347	7,460	34,206	9,732	
Unknown/not reported	1,671	186	118	555	8	235	56	63	115	332	3	
Total	163,494	12,414	11,928	12,765	12,665	12,129	11,632	8,297	8,594	62,572	10,498	
More Than One Race												
Hispanic or Latino	3,136	346	572	173	402	111	54	4	64	1,310	100	
Not Hispanic or Latino	2,887	270	137	231	39	306	77	42	81	1,602	102	
Unknown/not reported	132	0	21	2	5	47	14	3	4	36	0	
Total	6,155	616	730	406	446	464	145	49	149	2,948	202	
Race Unknown or Not Reported												
Hispanic or Latino	29,349	851	4,308	1,949	461	451	825	307	1,060	18,058	1,079	
Not Hispanic or Latino	9,140	154	1,282	1,073	278	78	198	93	133	5,274	577	
Unknown/not reported	1,996	65	51	242	110	142	137	207	145	895	2	
Total	40,485	1,070	5,641	3,264	849	671	1,160	607	1,338	24,227	1,658	
All Races												
Hispanic or Latino	80,380	3,362	7,041	3,263	2,818	1,565	8,484	1,232	2,271	48,335	2,009	
Not Hispanic or Latino	210,119	13,795	19,955	30,907	20,160	17,302	8,935	11,469	8,923	66,355	12,318	
Unknown/not reported	4,882	269	307	1,053	123	563	473	304	308	1,477	5	
Total Male Users	295,381	17,426	27,303	35,223	23,101	19,430	17,892	13,005	11,502	116,167	14,332	

Exhibit 14. Distribution of male family planning users, by race, ethnicity, and region: 2007 (Source: FPAR Table 3)

Race and Ethnicity	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
American Indian or Alaska Native												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	1%	0%†	0%†	
Not Hispanic or Latino	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	2%	1%	2%	
Unknown/not reported	0%†	0%†	0%†	0%†	0%	0%†	0%†	0%	0%†	0%†	0%	
Total	1%	0%†	1%	0%†	0%†	0%†	2%	1%	3%	1%	2%	
Asian												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	2%	1%	2%	1%	0%†	1%	0%†	1%	1%	3%	2%	
Unknown/not reported	0%†	0%†	0%†	0%†	0%	0%†	0%†	0%†	0%†	0%†	0%	
Total	2%	2%	2%	1%	0%†	1%	1%	1%	1%	4%	2%	
Black or African American												
Hispanic or Latino	1%	2%	1%	1%	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	22%	15%	29%	50%	38%	30%	23%	29%	8%	12%	8%	
Unknown/not reported	0%†	0%†	0%†	1%	0%	1%	1%	0%†	0%†	0%†	0%	
Total	23%	17%	30%	52%	39%	31%	25%	29%	9%	12%	8%	
Native Hawaiian/Pacific Islander												
Hispanic or Latino	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Not Hispanic or Latino	2%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	6%	1%	
Unknown/not reported	0%†	0%	0%†	0%	0%	0%†	0%†	0%†	0%†	0%†	0%	
Total	3%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	6%	1%	
White												
Hispanic or Latino	15%	11%	6%	2%	8%	5%	42%	7%	9%	24%	5%	
Not Hispanic or Latino	40%	59%	37%	33%	47%	56%	23%	56%	65%	29%	68%	
Unknown/not reported	1%	1%	0%†	2%	0%†	1%	0%†	0%†	1%	0%†	0%†	
Total	55%	71%	44%	36%	55%	62%	65%	64%	75%	54%	73%	
More Than One Race												
Hispanic or Latino	1%	2%	2%	0%†	2%	1%	0%†	0%†	1%	1%	1%	
Not Hispanic or Latino	1%	2%	1%	1%	0%†	2%	0%†	0%†	1%	1%	1%	
Unknown/not reported	0%†	0%	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%	
Total	2%	4%	3%	1%	2%	2%	1%	0%†	1%	3%	1%	
Race Unknown or Not Reported												
Hispanic or Latino	10%	5%	16%	6%	2%	2%	5%	2%	9%	16%	8%	
Not Hispanic or Latino	3%	1%	5%	3%	1%	0%†	1%	1%	1%	5%	4%	
Unknown/not reported	1%	0%†	0%†	1%	0%†	1%	1%	2%	1%	1%	0%†	
Total	14%	6%	21%	9%	4%	3%	6%	5%	12%	21%	12%	
All Races												
Hispanic or Latino	27%	19%	26%	9%	12%	8%	47%	9%	20%	42%	14%	
Not Hispanic or Latino	71%	79%	73%	88%	87%	89%	50%	88%	78%	57%	86%	
Unknown/not reported	2%	2%	1%	3%	1%	3%	3%	2%	3%	1%	0%†	
Total Male Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

† Percentage is less than 0.5%.

FPAR Guidance for Reporting User Social and Economic Profile Data in Tables 4 to 6

In FPAR Tables 4, 5, and 6, grantees report information on the social and economic profile of family planning users, including income level (Table 4), health insurance coverage (Table 5), and English proficiency (Table 6).

In FPAR Table 4, grantees report the unduplicated number of family planning users by income level, using the following instructions:

Income Level as a Percentage of the HHS Poverty Guidelines—Grantees are required to collect income data on all users at least annually. In determining user income, agencies should use the poverty guidelines updated periodically in the *Federal Register* by HHS under the authority of 42 USC 9902(2). Report the unduplicated number of users by income level, using the most current income information available.

In FPAR Table 5, grantees report the unduplicated number of users by their principal insurance coverage status, using the following instructions:

Principal Health Insurance Covering Primary Medical Care—Refers to public and private health insurance plans that provide a broad set of primary medical care benefits to enrolled individuals. Report the most current health insurance coverage information available for the client even though he or she may not have used this health insurance to pay for family planning services received during his or her last encounter. For individuals who have coverage under more than one health plan, principal insurance is defined as the insurance plan that the agency would bill first (i.e., primary) if a claim were to be filed. Categories of health insurance covering primary medical care include public and private sources of coverage.

Public Health Insurance Covering Primary Medical Care—Refers to federal, state, or local government health insurance programs that provide a broad set of primary medical care benefits for eligible individuals. Examples of such programs include Medicaid (both regular and managed care), Medicare, state Children’s Health Insurance Programs (CHIPs), and health plans for military personnel and their dependents (e.g., TRICARE or CHAMPVA).

Private Health Insurance Covering Primary Medical Care—Refers to health insurance coverage through an employer, union, or direct purchase that provides a broad set of primary medical care benefits for the enrolled individual (beneficiary or dependent).

(Optional) Private Health Insurance Coverage for Family Planning Services—Title X grantees have the option of reporting additional information on the level of private health insurance coverage for family planning services. Family planning services are defined broadly as any services—physical exam, lab tests, counseling and education, contraceptive supplies, and/or prescription medication—that a client receives during a family planning encounter with a clinical or nonclinical services provider. Levels of family planning coverage are defined as follows:

Private Insurance/All or Some Family Planning Services Coverage—The user reports that his or her private health insurance plan *covers all or some family planning services*.

Private Insurance/No Family Planning Services Coverage—The user reports that his or her private health insurance plan *covers no family planning services*.

Private Insurance/Unknown Family Planning Services Coverage—The user reports that he or she *does not know about family planning service coverage* under his or her private health insurance plan.

Uninsured—Refers to clients who *do not have a public or private health insurance plan that covers broad, primary medical care benefits*. Clients whose services are subsidized through state or local indigent care programs, or clients insured through the Indian Health Service who obtain care in a nonparticipating facility, are considered uninsured.

In FPAR Table 6, grantees report the unduplicated number of limited English proficient (LEP) users, using the following instructions:

Limited English Proficiency (LEP)—Refers to clients whose native or dominant language is not English and whose skills in listening to, speaking, reading, or writing English are such that they derive little benefit from family planning and related preventive health services provided in English. In Table 6, report the unduplicated number of family planning users who required oral language assistance services to optimize their use of Title X services. Include those users who received family planning and related preventive health services from bilingual staff or who were assisted by a competent agency or contracted interpreter. Also include users who opted to use a family member or friend as interpreter after refusing an agency’s offer to provide a qualified interpreter at no cost to the user. Additional LEP-related definitions provided on the FPAR (pages 20–21) include English proficiency, native language, dominant language, and interpreter competence.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 19–26.

FAMILY PLANNING USER SOCIAL AND ECONOMIC PROFILE

Users by Income Level (Exhibit 15)

Federal regulations specify that priority in the provision of Title X-funded services be given to persons from low-income families, and that individuals with family incomes at or below the poverty level receive services at no charge, unless a third party (government or private) is authorized or obligated to pay for these services. For individuals with incomes between 101% and 250% of the poverty level, Title X-funded agencies are required to charge for services using a sliding scale based on family size and family income.¹⁰ For unemancipated minors seeking confidential services, the assessment of income level is based on their own rather than their family's income.¹¹

Nationally, 69% (3,455,335) of users had family incomes at or below the poverty level, based on U.S. Department of Health and Human Services (HHS) poverty guidelines for the calendar year (\$17,170 for a family of three).¹² Additionally, 25% (1,246,335) of users had incomes between 101% and 250% of poverty, and 4% (212,849) had incomes exceeding 250% of the poverty level. The income status for 1% (72,719) of users was unknown or not reported (*Exhibit 15*).

Across regions, between 47% (I) and 75% (IV and VI) of users had family incomes at or below 100% of the poverty level, and in four regions (III, IV, VI, and IX) this percentage was equal to or exceeded the national average of 69%. Furthermore, between 87% (I) and 96% (VI, IX, and X) of users had incomes below the income level that would qualify them for free or subsidized services (\leq 250% of the poverty level). In all but three regions (I, VI, and IX), the percentage of users for whom income was not reported was at or below the national average of 1% (*Exhibit 15*). *Exhibit B-2* presents the distribution of family planning users for 2007 by income level for each state, including the eight U.S. territories and jurisdictions.

Between 1999 and 2007, the percentage of total users with family incomes at or below 100% of the poverty level increased from 65% to 69%. This 4-point increase represented a 20% (568,651) increase in the number of users eligible for free care in 2007. Between 2005 and 2007, the period during which data are available on the number of users with incomes at or below 250% of poverty, the percentage of users who qualified for free or subsidized services increased from 93% of total users in 2005 to 94% in 2007 (*Exhibits A-6a* and *A-6b*).

Users by Insurance Coverage Status (Exhibit 16)

Since the 2005 reporting period, grantees have been required to report the number of users by type of principal health insurance coverage, including those insured by a public or private plan covering broad primary medical care benefits, those who were uninsured, or those for whom insurance status was unknown or not reported. Users whose family planning care is covered by a Medicaid family planning waiver, but who have no private or public health insurance plan that covers a broad set of primary medical care services, are considered uninsured, as are users who have a plan that covers only a single health service. In 2007, 64% (3,202,642) of family planning users were uninsured, 21% (1,036,976) had Medicaid or other public health insurance, 9% (433,058) had private insurance, and insurance coverage was unknown or not reported for 6% (314,562) (*Exhibit 16*).

Exhibit 15. Number and distribution of all family planning users, by income level and region: 2007 (Source: FPAR Table 4)

Income Level ^a	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
≤ 100%	3,455,335	94,031	293,556	386,999	760,597	364,043	363,552	135,886	99,044	811,420	146,207
101%-150%	820,870	48,992	126,317	76,933	132,587	86,033	66,319	44,520	20,582	170,735	47,852
151%-200%	303,992	21,852	26,013	34,958	56,617	37,119	25,363	17,523	10,464	57,036	17,047
201%-250%	121,473	9,147	10,065	16,777	21,666	16,135	9,458	7,898	5,907	16,876	7,544
> 250%	212,849	14,009	20,613	37,432	40,201	24,862	7,021	25,667	11,850	21,695	9,499
Unknown/not reported	72,719	10,979	3,008	3,932	6,988	3,487	14,665	3,098	1,548	24,956	58
Total All Users	4,987,238	199,010	479,572	557,031	1,018,656	531,679	486,378	234,592	149,395	1,102,718	228,207
≤ 100%	69%	47%	61%	69%	75%	68%	75%	58%	66%	74%	64%
101%-150%	16%	25%	26%	14%	13%	16%	14%	19%	14%	15%	21%
151%-200%	6%	11%	5%	6%	6%	7%	5%	7%	7%	5%	7%
201%-250%	2%	5%	2%	3%	2%	3%	2%	3%	4%	2%	3%
> 250%	4%	7%	4%	7%	4%	5%	1%	11%	8%	2%	4%
Unknown/not reported	1%	6%	1%	1%	1%	1%	3%	1%	1%	2%	0%†
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

^a Title X-funded agencies calculate and report user income as a percentage of the poverty guidelines issued by the U.S. Department of Health and Human Services (HHS). Each year, HHS announces updates to its poverty guidelines in the *Federal Register* and on the HHS Web site <http://aspe.hhs.gov/poverty/>.

† Percentage is less than 0.5%.

Exhibit 16. Number and distribution of all family planning users, by principal health insurance coverage status and region: 2007 (Source: FPAR Table 5)

Insurance Status	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Public health insurance	1,036,976	53,517	127,191	126,424	302,496	133,659	81,680	38,469	7,397	124,932	41,211
Private Health Insurance	433,058	49,585	52,671	54,157	77,225	52,749	23,543	42,072	22,643	32,768	25,645
All/some FP coverage	74,692	21,085	6,769	18,738	13,704	3,208	936	2,406	6,546	1,137	163
No FP coverage	22,881	0	221	29	15,995	1,401	54	2,288	740	2,153	0
Unknown FP coverage	335,485	28,500	45,681	35,390	47,526	48,140	22,553	37,378	15,357	29,478	25,482
Uninsured	3,202,642	88,390	286,979	362,517	508,602	308,512	342,001	148,054	104,430	901,447	151,710
Unknown/not reported	314,562	7,518	12,731	13,933	130,333	36,759	39,154	5,997	14,925	43,571	9,641
Total All Users	4,987,238	199,010	479,572	557,031	1,018,656	531,679	486,378	234,592	149,395	1,102,718	228,207
Public health insurance	21%	27%	27%	23%	30%	25%	17%	16%	5%	11%	18%
Private Health Insurance	9%	25%	11%	10%	8%	10%	5%	18%	15%	3%	11%
All/some FP coverage	1%	11%	1%	3%	1%	1%	0%†	1%	4%	0%†	0%†
No FP coverage	0%†	0%	0%†	0%†	2%	0%†	0%†	1%	0%†	0%†	0%
Unknown FP coverage	7%	14%	10%	6%	5%	9%	5%	16%	10%	3%	11%
Uninsured	64%	44%	60%	65%	50%	58%	70%	63%	70%	82%	66%
Unknown/not reported	6%	4%	3%	3%	13%	7%	8%	3%	10%	4%	4%
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

FP=family planning.

† Percentage is less than 0.5%.

Across regions, there were large variations in the distribution of users by insurance coverage status. The percentage of total users that was uninsured ranged from 44% (Region I) to 82% (IX), with half of all regions (III, VI, VIII, IX, and X) reporting levels of uninsured users exceeding the national average of 64%. The percentage of users with any health insurance coverage (Medicaid/other public or private insurance) ranged from 14% (IX) to 52% (I), with four regions (VI, VIII, IX, and X) reporting levels of any health insurance coverage at or below the national average of 29%. Among the insured, Medicaid or other public insurance was the predominant type of coverage in all but two regions (VII and VIII). The percentage of users covered by Medicaid or other public insurance ranged from 5% (VIII) to 30% (IV), and the percentage of users that was privately insured ranged from 3% (IX) to 25% (I). The percentage of users for whom insurance coverage was not reported ranged from 3% (II, III, and VII) to 13% (IV) (*Exhibit 16*). Since 2005, the number of uninsured users receiving care from Title X-funded sites has increased 7% (204,134), from 2,998,508 in 2005 to 3,202,642 in 2007 (not shown).

Limited English Proficient (LEP) Users (Exhibit 17)

In compliance with the *HHS Guidance Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*,¹³ any agency that receives federal financial assistance from HHS must take steps to ensure that limited English proficient (LEP) persons have meaningful access to the health and social services that the agency provides. As recipients of HHS assistance, Title X grantees and delegates, including those operating in U.S. territories and jurisdictions where English is an official language, are required to provide language assistance services to LEP persons to ensure their meaningful access to Title X-funded services. In 2005, grantees began reporting the number of LEP users receiving Title X-funded services.

In 2007, 13% (662,714) of total family planning users were LEP. Across regions, the percentage of total users that were LEP ranged from 6% (Region III) to 23% (IX). When users in the eight U.S. territories and jurisdictions in Regions II and IX are excluded, the total percentage of total users that were LEP remained the same (13%), while the percentage of users that were LEP in Regions II and IX decreased to 11% and 22% of total users, respectively (*Exhibit 17*). Since 2005, the number of LEP users in the 50 states and District of Columbia increased 13% (72,833), from 557,034 in 2005 to 629,867 in 2007 (not shown).

Exhibit 17. Number and percentage of family planning users who are limited English proficient (LEP), by region: 2007 (Source: FPAR Table 6)

Region	Number		Percentage	
	LEP (All grantees)	LEP (Excluding territories)	LEP (All grantees)	LEP (Excluding territories)
I	23,056	23,056	12%	12%
II	67,066	48,327 ^a	14%	11% ^a
III	33,695	33,695	6%	6%
IV	100,840	100,840	10%	10%
V	35,011	35,011	7%	7%
VI	89,202	89,202	18%	18%
VII	18,105	18,105	8%	8%
VIII	14,566	14,566	10%	10%
IX	254,181	240,073 ^b	23%	22% ^b
X	26,992	26,992	12%	12%
Total	662,714	629,867	13%	13%

LEP=limited English proficiency.

^a Excludes LEP users in Puerto Rico and the U.S. Virgin Islands.

^b Excludes LEP users in American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Republic of the Marshall Islands, and Republic of Palau.

FPAR Guidance for Reporting Primary Contraceptive Use in Tables 7 and 8

In FPAR **Table 7**, grantees report the unduplicated number of female family planning users by primary method and age, and in FPAR **Table 8**, grantees report the unduplicated number of male users by primary method and age. The FPAR instructions provide the following guidance for reporting this information:

Age—Use the client’s age as of June 30th of the reporting period.

Primary Method of Family Planning—The primary method of family planning is the user’s method—adopted or continued—at the time of exit from his or her last encounter in the reporting period. If the user reports that he or she is using more than one family planning method, report the most effective one as the primary method. Family planning methods include:

Female Sterilization—Refers to surgical (tubal ligation) or non-surgical (Essure™ implants) sterilization procedures performed on a female user in the current or any previous reporting period. In **Table 7**, report the number of female users who rely on female sterilization as their primary family planning method.

Intrauterine Device (IUD)—In **Table 7**, report the number of female users who use a long-term hormonal or other type of intrauterine device (IUD) or system as their primary family planning method.

Hormonal Implant—In **Table 7**, report the number of female users who use a long-term, subdermal hormonal implant as their primary family planning method.

1-Month Hormonal Injection—In **Table 7**, report the number of female users who use 1-month injectable hormonal contraception as their primary family planning method.

3-Month Hormonal Injection—In **Table 7**, report the number of female users who use 3-month injectable hormonal contraception as their primary family planning method.

Oral Contraceptive—In **Table 7**, report the number of female users who use any oral contraceptive, including combination and progestin-only (“mini-pills”) formulations, as their primary family planning method.

Hormonal/Contraceptive Patch—In **Table 7**, report the number of female users who use a transdermal hormonal contraceptive patch as their primary family planning method.

Vaginal Ring—In **Table 7**, report the number of female users who use a hormonal vaginal ring as their primary family planning method.

Cervical Cap/Diaphragm—In **Table 7**, report the number of female users who use a cervical cap or diaphragm (with or without spermicidal jelly or cream) as their primary family planning method.

Contraceptive Sponge—In **Table 7**, report the number of female users who use a contraceptive sponge as their primary family planning method.

Female Condom—In **Table 7**, report the number of female users who use female condoms (with or without spermicidal foam or film) as their primary family planning method.

Spermicide (used alone)—In **Table 7**, report the number of female users who use only spermicidal jelly, cream, foam, or film (i.e., not in conjunction with another method of contraception) as their primary family planning method.

Fertility Awareness Method (FAM)—Refers to family planning methods that rely on identifying potentially fertile days in each menstrual cycle when intercourse is most likely to result in a pregnancy. Fertility awareness methods include rhythm/calendar, Standard Days™, Basal Body Temperature, Cervical Mucus, and Sympto-Thermal methods. In **Tables 7 and 8**, report the number of users who use one or a combination of the FAMs listed above as their primary family planning method. Post-partum women who are practicing the lactational amenorrhea method (LAM) should also be reported with users of fertility awareness methods in **Tables 7 and 8**.

Abstinence—For purposes of FPAR reporting, abstinence is defined as refraining from oral, vaginal, and anal intercourse. In **Table 7**, report the number of female users who rely on abstinence as their primary family planning method or who are not currently sexually active and therefore not using contraception. In **Table 8**, report the number of male users who rely on abstinence as their primary family planning method or who are not currently sexually active.

(continued)

FAMILY PLANNING METHOD USE

Female Users by Primary Contraceptive Method (Exhibits 18 to 21)

In 2007, grantees reported that 85% (4,000,493) of all female users were using a contraceptive method at their last encounter in the reporting period, while 15% (691,364) were not, either because they were pregnant or seeking pregnancy (8%) or for other reasons (7%). The leading primary contraceptive method, used by almost four of every ten female users, was the pill (39%), followed by male condoms (15%), injectable contraceptives (13%), contraceptive patch (3%), vaginal ring (3%), intrauterine device (IUD) (3%), female sterilization (2%), and abstinence (1%). Fewer than 1% of female users relied on any of the following methods: hormonal implants, vasectomy, cervical caps or diaphragms, the contraceptive sponge, female condoms, spermicides, or a fertility awareness method. Three percent of female users relied on “other” methods not listed in the FPAR reporting table (e.g., withdrawal or emergency contraception), and the type of method used was unknown or not reported for another 3% (*Exhibits 18 and 19*).

By age group, the percentage of female users who used any contraceptive method ranged from 84% (25 to 29 years, and older than 44 years) to 89% (younger than 15 years). Among users aged 15 to 44, the leading method was the pill, used by 28% to 44% of users in these age groups, followed by male condoms (14% to 19%) or injectable contraceptives (12% to 14%). Among users in the youngest age group (younger than 15), 70% relied on one of three methods—the pill (38%), injectable contraceptives (18%), or male condoms (14%)—while women in the oldest age group (older than 44) used male condoms (20%), the pill (18%), or female sterilization (13%). Across all age groups, use of newer methods like the contraceptive patch and vaginal ring ranged from 1% (users older than 44 years) to 7% (users 20 to 24 years). The percentage of users for whom the type of method used was unknown was highest (8%) in the oldest age group (older than 44). Finally, nonuse of a contraceptive method due to pregnancy or the desire for pregnancy was highest (9%) among users in age groups ranging from 18 to 34 years, followed by 7% of users 35 to 39 years, 6% of users 15 to 17 years, 4% of users 40 to 44 years, and 4% of users 14 years and younger (*Exhibits 18 and 19*).

By region, use of any contraceptive method ranged from 81% (Region II) to 89% (VIII and IX). In five regions (V, VII, VIII, IX, and X), the percentage using any method was at or above the national average of 85%. The pill was the leading method in all regions, where use ranged from 33% (I and II) to 54% (VIII) of all female users. In five regions (I, II, III, V, and IX), the male condom was the second most common method among female users, while in the other five regions (IV, VI, VII, VIII, and X), injectable contraceptives were the second most common method. The percentage of female users for whom the type of method used was unknown exceeded the national average of 3% in two regions (IV and IX) (*Exhibits 20 and 21*).

As shown in *Exhibit A-7a*, among the 85% (4,000,493) of female users for whom use of any contraceptive method was reported in 2007, 46% relied on oral contraceptives as their primary method, followed by male condoms (18%) and injectable contraceptives (15%). The hormonal patch, vaginal ring, and IUD accounted for 3% of female method users each, while just over 2% of female users relied on female sterilization. One percent or fewer of female

method users relied on abstinence, female barrier methods (e.g., cervical cap or diaphragm, sponge, or female condom), hormonal implants, fertility awareness methods, or vasectomy. For the remaining 7% of female contraceptive users, 3% used an “other” method (e.g., withdrawal or emergency contraception), and type of method was unknown or not reported for 4%.

Since 1999, the contraceptive pill has been the leading method among female contraceptive users, followed by other short-term hormonal methods (e.g., injectables) and male condoms. The percentage of female contraceptive users relying on the pill declined from 53% in 1999 to 46% in 2007. From 1999 to 2002 the decrease in pill use was offset by an increased use of injectable contraceptives, but after 2002 the percentage using injectable contraceptives declined as well, and the combined percentage of female users relying on oral or injectable contraceptives decreased from about 72% between 1999 and 2002 to about 60% between 2005 and 2007. In 2005, with the expansion of primary method reporting categories on the FPAR form, grantees reported an additional 9% of female contraceptive users relying on newer, short-term hormonal methods (contraceptive patch [7%] and vaginal ring [2%]), which were approved by the U.S. Food and Drug Administration (FDA) in late 2001. Prior to FPAR revisions in 2005, grantees reported users of these two new methods as “other” method users. By 2007, the percentage using the vaginal ring had increased to 3% of female method users, while the percentage using the contraceptive patch decreased to 3%. Overall, 67% of female contraceptive users in 2007 relied on short-term hormonal methods (i.e., pills, injectables, patch, or vaginal ring), compared to 72% in 1999 (*Exhibits A-7a* and *A-7b*).

FPAR Guidance for Reporting Primary Contraceptive Use in Tables 7 and 8 (continued)

Other Method—In **Tables 7** and **8**, report the number of female and male users, respectively, who use withdrawal or other methods not listed in the tables as their primary family planning method.

Method Unknown—In **Tables 7** and **8**, report the number of users for whom documentation exists that the users adopted or continued use of a family planning method, but information about the specific method(s) used is unavailable.

No Method—[Partner] Pregnant or Seeking Pregnancy—In **Tables 7** and **8**, report the number of users who are not using any family planning method because they (**Table 7**) or their partners (**Table 8**) are pregnant or seeking pregnancy.

No Method—Other Reason—In **Tables 7** and **8**, report the number of users who are not using any family planning method to avoid pregnancy due to reasons other than pregnancy or seeking pregnancy, including if either partner is sterile without having been sterilized surgically.

Vasectomy—Refers to conventional incisional or no-scalpel vasectomy performed on a male user, or the male partner of a female user, in the current or any previous reporting period. In **Table 7**, report the number of female users who rely on vasectomy as their (partner’s) primary family planning method. In **Table 8**, report the number of male users on whom a vasectomy was performed in the current or any previous reporting period.

Male Condom—In **Table 7**, report the number of female users who rely on their sexual partner to use male condoms (with or without spermicidal foam or film) as their primary family planning method. In **Table 8**, report the number of male users who use male condoms (with or without spermicidal foam or film) as their primary family planning method.

Rely on Female Method(s)—In **Table 8**, report the number of male family planning users who rely on their female partner’s family planning method(s) as their primary method. “Female” contraceptive methods include female sterilization, IUDs, hormonal implants, 1- and 3-month hormonal injections, oral contraceptives, hormonal/contraceptive patches, vaginal rings, cervical caps/diaphragms, contraceptive sponges, female condoms, and spermicides.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 27–31.

Regarding use of other methods, between 1999 and 2007 the percentage of female contraceptive users relying on male condoms increased from 14% to 18%, IUD use increased from 1% to 3%, sterilization use decreased from 3% to 2%, and implant use decreased from 1% to less than 1%. After a steady decline in implant use between 1999 and 2006, in 2007 the number using implants rose to 7,300, more than doubling the number of users from the previous year (2,506). This rise in implant use reflects the increased availability in Title X-funded service sites of the Implanon™ contraceptive implant, which was approved by the FDA in mid-2006 (*Exhibits A-7a* and *A-7b*).

Finally, between 1999 and 2007 there were larger shifts in the percentage of users who relied on other methods. These large shifts reflect, in part, the limitations of the FPAR reporting form to capture newly available methods prior to 2005. The 2005 revision in the contraceptive use reporting table resulted in separate rows for reporting newly available methods (e.g., 1-month injectable, contraceptive patch, and contraceptive ring), as well as several methods previously included in the “other” method category (e.g., sponge and abstinence). Grantees continue to report emergency contraceptive pills and withdrawal using the “other” method category (*Exhibits A-7a* and *A-7b*).

Male Users by Primary Contraceptive Method (Exhibits 22 to 25)

In 2007, grantees reported that 91% (269,695) of all male users were using a contraceptive method at their last family planning encounter during the reporting period. The remaining 9% (25,686) were not using a contraceptive because their partner was pregnant or seeking pregnancy (1%) or for other reasons (8%). The leading contraceptive method, used by seven of every ten male users, was male condoms (70%), followed by reliance on a female method (6%), abstinence (3%), vasectomy (1%), or fertility awareness methods (< 1%). Three percent of male users relied on “other” methods not listed in the FPAR reporting table (e.g., withdrawal), while the type of method used was either unknown or not reported for 7% (*Exhibits 22* and *23*).

By age group, the percentage of male users who used any contraceptive method ranged from 86% (older than 44 years) to 94% (younger than 15 years). Among male users 18 years and older, the leading method was male condoms, used by 58% to 78% of male users in these age groups, followed by reliance on a female partner’s contraceptive method (6% to 8%). Among male users 15 to 17 years, the leading method was male condoms, used by 72%, while abstinence and reliance on a female partner’s method were used by 7% and 4%, respectively. Among males in the youngest age group (younger than 15 years), 23% used male condoms, 25% relied on abstinence, 28% used “other” methods (e.g., withdrawal), and type of method used was unknown or not reported for 15% (*Exhibits 22* and *23*).

By region, the percentage of males who used any method ranged from 76% (Region VII) to 96% (IV), and male method use met or exceeded the national level of 91% in six regions (I, III, IV, VI, VIII, and IX). Use of male condoms, the leading method for male users in all regions, ranged from 44% (IV) to 81% (II), and in six regions (II, V, VI, VII, VIII, and X), reliance on a female method was the second most prevalent type of contraception. In three regions (IV, VIII, and IX), the percentage of male users for whom the type of method used was unknown or not reported exceeded the national average of 7% (*Exhibits 24* and *25*).

Exhibit 18. Number of female family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 7)

Primary Method	All Female Users	Age								
		<15	15-17	18-19	20-24	25-29	30-34	35-39	40-44	>44
Female sterilization	89,447	0	1	3	3,344	12,803	17,970	19,397	16,239	19,690
Intrauterine device (IUD)	138,714	74	2,112	6,499	35,567	39,428	27,308	16,012	8,164	3,550
Hormonal implant	7,300	83	579	843	2,307	1,491	945	650	280	122
Hormonal injection ^a	591,861	10,216	71,263	73,225	178,085	120,023	63,964	39,578	23,271	12,236
Oral contraceptive	1,826,518	21,126	218,128	270,855	627,859	346,816	169,018	95,410	50,216	27,090
Contraceptive patch	128,324	1,957	14,700	18,041	44,671	27,104	13,406	5,733	2,052	660
Vaginal ring	139,656	501	11,354	19,638	59,513	30,439	11,218	4,440	1,755	798
Cervical cap/diaphragm	4,087	10	183	222	844	834	609	465	354	566
Contraceptive sponge	1,827	12	114	160	452	354	276	202	134	123
Female condom	3,925	46	400	456	1,002	729	493	359	244	196
Spermicide (used alone)	16,882	228	1,225	1,411	4,237	3,484	2,511	1,773	1,148	865
Fertility awareness method ^b	8,784	31	305	568	2,021	1,900	1,420	1,104	735	700
Abstinence ^c	53,987	4,038	7,607	5,152	10,898	7,594	4,894	4,153	3,584	6,067
Other method ^d	123,844	840	10,017	14,599	37,745	24,128	13,576	8,877	5,680	8,382
Method unknown ^e	142,145	2,921	14,518	15,377	35,629	24,673	15,832	11,616	8,870	12,709
Rely on Male Method										
Vasectomy	6,546	0	0	30	407	971	1,189	1,421	1,244	1,284
Male condom	716,646	7,695	86,372	95,710	203,663	130,031	76,025	52,533	34,338	30,279
No Method										
Pregnant/seeking pregnancy	383,303	2,006	31,132	54,945	134,994	85,305	44,265	21,925	6,942	1,789
Other reason	308,061	4,129	31,013	39,569	88,274	56,933	31,014	20,460	13,771	22,898
Total Female Users	4,691,857	55,913	501,023	617,303	1,471,512	915,040	495,933	306,108	179,021	150,004
Using a Method	4,000,493	49,778	438,878	522,789	1,248,244	772,802	420,654	263,723	158,308	125,317
Not Using a Method	691,364	6,135	62,145	94,514	223,268	142,238	75,279	42,385	20,713	24,687

^a See Table 7 comments in the *Methodological Notes (Appendix C)*.

^b Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^c User refrained from oral, vaginal, and anal intercourse.

^d Includes withdrawal and any other method not listed in FPAR Table 7.

^e User adopted or continued use of an unspecified family planning method.

Exhibit 19. Distribution of female family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 7)

Primary Method	All Female Users	Age								
		<15	15-17	18-19	20-24	25-29	30-34	35-39	40-44	>44
Female sterilization	2%	0%	0%†	0%†	0%†	1%	4%	6%	9%	13%
Intrauterine device (IUD)	3%	0%†	0%†	1%	2%	4%	6%	5%	5%	2%
Hormonal implant	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Hormonal injection ^a	13%	18%	14%	12%	12%	13%	13%	13%	13%	8%
Oral contraceptive	39%	38%	44%	44%	43%	38%	34%	31%	28%	18%
Contraceptive patch	3%	4%	3%	3%	3%	3%	3%	2%	1%	0%†
Vaginal ring	3%	1%	2%	3%	4%	3%	2%	1%	1%	1%
Cervical cap/diaphragm	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Contraceptive sponge	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Female condom	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Spermicide (used alone)	0%†	0%†	0%†	0%†	0%†	0%†	1%	1%	1%	1%
Fertility awareness method ^b	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Abstinence ^c	1%	7%	2%	1%	1%	1%	1%	1%	2%	4%
Other method ^d	3%	2%	2%	2%	3%	3%	3%	3%	3%	6%
Method unknown ^e	3%	5%	3%	2%	2%	3%	3%	4%	5%	8%
Rely on Male Method										
Vasectomy	0%†	0%	0%	0%†	0%†	0%†	0%†	0%†	1%	1%
Male condom	15%	14%	17%	16%	14%	14%	15%	17%	19%	20%
No Method										
Pregnant/seeking pregnancy	8%	4%	6%	9%	9%	9%	9%	7%	4%	1%
Other reason	7%	7%	6%	6%	6%	6%	6%	7%	8%	15%
Total Female Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Using a Method	85%	89%	88%	85%	85%	84%	85%	86%	88%	84%
Not Using a Method	15%	11%	12%	15%	15%	16%	15%	14%	12%	16%

^a See Table 7 comments in the *Methodological Notes (Appendix C)*.

^b Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^c User refrained from oral, vaginal, and anal intercourse.

^d Includes withdrawal and any other method not listed in FPAR Table 7.

^e User adopted or continued use of an unspecified family planning method.

† Percentage is less than 0.5%.

Exhibit 20. Number of female family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 7)

Primary Method	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Female sterilization	89,447	7,867	9,508	10,939	14,654	9,848	12,288	7,709	999	10,522	5,113
Intrauterine device (IUD)	138,714	5,491	14,736	9,917	22,385	12,677	15,349	4,299	3,904	37,873	12,083
Hormonal implant	7,300	90	135	1,840	1,096	349	278	522	46	2,610	334
Hormonal injection ^a	591,861	12,940	38,330	67,587	170,679	69,853	77,307	31,097	16,104	82,817	25,147
Oral contraceptive	1,826,518	59,283	150,191	200,880	401,490	222,129	190,047	98,985	74,939	346,682	81,892
Contraceptive patch	128,324	3,985	12,257	13,736	18,128	15,180	10,740	4,166	4,210	35,971	9,951
Vaginal ring	139,656	4,283	14,738	14,454	12,285	21,367	7,781	6,668	5,350	36,252	16,478
Cervical cap/diaphragm	4,087	364	624	500	420	448	201	209	161	812	348
Contraceptive sponge	1,827	64	101	89	774	84	117	23	23	521	31
Female condom	3,925	233	462	618	248	667	273	109	27	1,220	68
Spermicide (used alone)	16,882	146	824	908	6,228	780	3,469	158	95	3,951	323
Fertility awareness method ^b	8,784	458	465	1,286	1,408	335	1,332	317	182	2,553	448
Abstinence ^c	53,987	5,061	4,055	7,310	9,426	4,664	5,819	3,529	1,469	8,774	3,880
Other method ^d	123,844	8,318	11,695	7,223	55,210	5,656	8,337	5,836	1,064	16,445	4,060
Method unknown ^e	142,145	4,959	7,314	8,204	37,046	3,108	6,672	2,392	4,237	68,165	48
Rely on Male Method											
Vasectomy	6,546	643	610	530	451	643	595	642	459	1,116	857
Male condom	716,646	36,873	102,427	93,386	85,235	75,583	50,518	21,911	9,469	220,078	21,166
No Method											
Pregnant/seeking pregnancy	383,303	13,462	53,058	39,382	59,701	39,836	50,588	15,835	9,787	75,168	26,486
Other reason	308,061	17,064	30,739	43,019	98,691	29,042	26,775	17,180	5,368	35,021	5,162
Total Female Users	4,691,857	181,584	452,269	521,808	995,555	512,249	468,486	221,587	137,893	986,551	213,875
Using a Method	4,000,493	151,058	368,472	439,407	837,163	443,371	391,123	188,572	122,738	876,362	182,227
Not Using a Method	691,364	30,526	83,797	82,401	158,392	68,878	77,363	33,015	15,155	110,189	31,648

^a See Table 7 comments in the *Methodological Notes (Appendix C)*.

^b Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^c User refrained from oral, vaginal, and anal intercourse.

^d Includes withdrawal and any other method not listed in FPAR Table 7.

^e User adopted or continued use of an unspecified family planning method.

Exhibit 21. Distribution of female family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 7)

Primary Method	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Female sterilization	2%	4%	2%	2%	1%	2%	3%	3%	1%	1%	2%
Intrauterine device (IUD)	3%	3%	3%	2%	2%	2%	3%	2%	3%	4%	6%
Hormonal implant	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Hormonal injection ^a	13%	7%	8%	13%	17%	14%	17%	14%	12%	8%	12%
Oral contraceptive	39%	33%	33%	38%	40%	43%	41%	45%	54%	35%	38%
Contraceptive patch	3%	2%	3%	3%	2%	3%	2%	2%	3%	4%	5%
Vaginal ring	3%	2%	3%	3%	1%	4%	2%	3%	4%	4%	8%
Cervical cap/diaphragm	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Contraceptive sponge	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Female condom	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Spermicide (used alone)	0%†	0%†	0%†	0%†	1%	0%†	1%	0%†	0%†	0%†	0%†
Fertility awareness method ^b	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Abstinence ^c	1%	3%	1%	1%	1%	1%	1%	2%	1%	1%	2%
Other method ^d	3%	5%	3%	1%	6%	1%	2%	3%	1%	2%	2%
Method unknown ^e	3%	3%	2%	2%	4%	1%	1%	1%	3%	7%	0%†
Rely on Male Method											
Vasectomy	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Male condom	15%	20%	23%	18%	9%	15%	11%	10%	7%	22%	10%
No Method											
Pregnant/seeking pregnancy	8%	7%	12%	8%	6%	8%	11%	7%	7%	8%	12%
Other reason	7%	9%	7%	8%	10%	6%	6%	8%	4%	4%	2%
Total Female Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Using a Method	85%	83%	81%	84%	84%	87%	83%	85%	89%	89%	85%
Not Using a Method	15%	17%	19%	16%	16%	13%	17%	15%	11%	11%	15%

^a See Table 7 comments in the *Methodological Notes (Appendix C)*.

^b Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^c User refrained from oral, vaginal, and anal intercourse.

^d Includes withdrawal and any other method not listed in FPAR Table 7.

^e User adopted or continued use of an unspecified family planning method.

† Percentage is less than 0.5%.

Exhibit 22. Number of male family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 8)

Primary Method	All Male Users	Age								
		<15	15-17	18-19	20-24	25-29	30-34	35-39	40-44	>44
Vasectomy	2,922	0	0	0	205	495	704	634	427	457
Male condom	207,502	3,042	23,813	26,953	65,714	38,108	18,401	11,796	7,921	11,754
Fertility awareness method ^a	826	1	13	39	193	178	135	96	76	95
Abstinence ^b	10,060	3,259	2,476	851	1,045	614	327	286	280	922
Other method ^c	10,154	3,701	424	726	1,977	1,357	658	442	328	541
Method unknown ^d	20,253	2,008	2,819	1,508	3,873	3,344	1,997	1,471	1,138	2,095
Rely on Female Method^e	17,978	196	1,216	1,970	5,186	3,593	1,905	1,281	983	1,648
No Method										
Partner pregnant/seeking pregnancy	3,090	32	160	283	931	696	438	249	134	167
Other reason	22,596	766	2,110	2,151	6,034	3,984	2,175	1,522	1,195	2,659
Total Male Users	295,381	13,005	33,031	34,481	85,158	52,369	26,740	17,777	12,482	20,338
Using a Method	269,695	12,207	30,761	32,047	78,193	47,689	24,127	16,006	11,153	17,512
Not Using a Method	25,686	798	2,270	2,434	6,965	4,680	2,613	1,771	1,329	2,826

^a Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^b User refrained from oral, vaginal, and anal intercourse.

^c Includes withdrawal and any other method not listed in FPAR Table 8.

^d User adopted or continued use of an unspecified family planning method.

^e Primary method of user's sexual partner was female sterilization, intrauterine device, hormonal implant, hormonal injection, oral contraceptive, hormonal/contraceptive patch, vaginal ring, female barrier method (cervical cap, diaphragm, sponge, female condom), or spermicide.

Exhibit 23. Distribution of male family planning users, by primary contraceptive method and age: 2007 (Source: FPAR Table 8)

Primary Method	All Male Users	Age								
		<15	15-17	18-19	20-24	25-29	30-34	35-39	40-44	>44
Vasectomy	1%	0%	0%	0%	0%†	1%	3%	4%	3%	2%
Male condom	70%	23%	72%	78%	77%	73%	69%	66%	63%	58%
Fertility awareness method ^a	0%†	0%†	0%†	0%†	0%†	0%†	1%	1%	1%	0%†
Abstinence ^b	3%	25%	7%	2%	1%	1%	1%	2%	2%	5%
Other method ^c	3%	28%	1%	2%	2%	3%	2%	2%	3%	3%
Method unknown ^d	7%	15%	9%	4%	5%	6%	7%	8%	9%	10%
Rely on Female Method^e	6%	2%	4%	6%	6%	7%	7%	7%	8%	8%
No Method										
Partner pregnant/seeking pregnancy	1%	0%†	0%†	1%	1%	1%	2%	1%	1%	1%
Other reason	8%	6%	6%	6%	7%	8%	8%	9%	10%	13%
Total Male Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Using a Method	91%	94%	93%	93%	92%	91%	90%	90%	89%	86%
Not Using a Method	9%	6%	7%	7%	8%	9%	10%	10%	11%	14%

^a Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^b User refrained from oral, vaginal, and anal intercourse.

^c Includes withdrawal and any other method not listed in FPAR Table 8.

^d User adopted or continued use of an unspecified family planning method.

^e Primary method of user's sexual partner was female sterilization, intrauterine device, hormonal implant, hormonal injection, oral contraceptive, hormonal/contraceptive patch, vaginal ring, female barrier method (cervical cap, diaphragm, sponge, female condom), or spermicide.

† Percentage is less than 0.5%.

Exhibit 24. Number of male family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 8)

Primary Method	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Vasectomy	2,922	45	273	121	829	108	285	63	67	728	403
Male condom	207,502	12,736	22,184	26,967	10,167	14,476	11,997	7,333	7,197	85,747	8,698
Fertility awareness method ^a	826	53	43	31	4	8	276	7	9	385	10
Abstinence ^b	10,060	786	272	1,260	2,850	336	968	690	200	1,826	872
Other method ^c	10,154	711	349	796	4,201	296	458	411	133	2,113	686
Method unknown ^d	20,253	571	276	1,711	3,626	502	1,085	537	1,606	10,292	47
Rely on Female Method^e	17,978	932	903	1,051	416	1,331	1,343	797	1,628	8,534	1,043
No Method											
Partner pregnant/seeking pregnancy	3,090	36	22	681	51	87	140	124	247	1,473	229
Other reason	22,596	1,556	2,981	2,605	957	2,286	1,340	3,043	415	5,069	2,344
Total Male Users	295,381	17,426	27,303	35,223	23,101	19,430	17,892	13,005	11,502	116,167	14,332
Using a Method	269,695	15,834	24,300	31,937	22,093	17,057	16,412	9,838	10,840	109,625	11,759
Not Using a Method	25,686	1,592	3,003	3,286	1,008	2,373	1,480	3,167	662	6,542	2,573

^a Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^b User refrained from oral, vaginal, and anal intercourse.

^c Includes withdrawal and any other method not listed in FPAR Table 8.

^d User adopted or continued use of an unspecified family planning method.

^e Primary method of user's sexual partner was female sterilization, intrauterine device, hormonal implant, hormonal injection, oral contraceptive, hormonal/contraceptive patch, vaginal ring, female barrier method (cervical cap, diaphragm, sponge, female condom), or spermicide.

Exhibit 25. Distribution of male family planning users, by primary contraceptive method and region: 2007 (Source: FPAR Table 8)

Primary Method	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Vasectomy	1%	0%†	1%	0%†	4%	1%	2%	0%†	1%	1%	3%
Male condom	70%	73%	81%	77%	44%	75%	67%	56%	63%	74%	61%
Fertility awareness method ^a	0%†	0%†	0%†	0%†	0%†	0%†	2%	0%†	0%†	0%†	0%†
Abstinence ^b	3%	5%	1%	4%	12%	2%	5%	5%	2%	2%	6%
Other method ^c	3%	4%	1%	2%	18%	2%	3%	3%	1%	2%	5%
Method unknown ^d	7%	3%	1%	5%	16%	3%	6%	4%	14%	9%	0%†
Rely on Female Method^e	6%	5%	3%	3%	2%	7%	8%	6%	14%	7%	7%
No Method											
Partner pregnant/seeking pregnancy	1%	0%†	0%†	2%	0%†	0%†	1%	1%	2%	1%	2%
Other reason	8%	9%	11%	7%	4%	12%	7%	23%	4%	4%	16%
Total Male Users	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Using a Method	91%	91%	89%	91%	96%	88%	92%	76%	94%	94%	82%
Not Using a Method	9%	9%	11%	9%	4%	12%	8%	24%	6%	6%	18%

^a Includes rhythm/calendar, Standard Days™, basal body temperature, cervical mucus, sympto-thermal, and lactational amenorrhea methods.

^b User refrained from oral, vaginal, and anal intercourse.

^c Includes withdrawal and any other method not listed in FPAR Table 8.

^d User adopted or continued use of an unspecified family planning method.

^e Primary method of user's sexual partner was female sterilization, intrauterine device, hormonal implant, hormonal injection, oral contraceptive, hormonal/contraceptive patch, vaginal ring, female barrier method (cervical cap, diaphragm, sponge, female condom), or spermicide.

† Percentage is less than 0.5%.

FPAR Guidance for Reporting Cervical and Breast Cancer Screening Activities in Tables 9 and 10

In FPAR **Tables 9** and **10**, grantees report information on cervical (**Table 9**) and breast cancer (**Table 10**) screening activities during the reporting period.

In FPAR **Table 9**, grantees report the following information on cervical cancer screening activities:

- Unduplicated number of users who obtained a Pap test;
- Number of Pap tests performed;
- Number of Pap tests with an ASC or higher result, including ASC-US, ASC-H, LSIL, HSIL, AGC, adenocarcinoma, and presence of endometrial cells in a woman ≥ 40 years of age; and
- Number of Pap tests with an HSIL or higher result (i.e., HSIL, AGC, adenocarcinoma, and presence of endometrial cells in a woman ≥ 40 years of age).

The FPAR instructions provide the following guidance for reporting this information:

Tests—Report Pap tests that are documented in the client medical record and provided within the scope of the agency’s Title X project during the reporting period.

Atypical Squamous Cells (ASC)—ASC refers to cytological changes that are suggestive of a squamous intraepithelial lesion. The 2001 Bethesda System subdivides atypical squamous cells into two categories:^{14, 15}

Atypical squamous cells of undetermined significance (ASC-US)—Cytological changes that are suggestive of a squamous intraepithelial lesion, but lack criteria for a definitive interpretation.

Atypical squamous cells, cannot exclude HSIL (ASC-H)—Cytological changes that are suggestive of a high-grade squamous intraepithelial lesion, but lack criteria for a definitive interpretation.

Low-Grade Squamous Intraepithelial Lesions (LSIL)—LSIL refers to low-grade squamous intraepithelial lesions encompassing human papillomavirus, mild dysplasia, and cervical intraepithelial neoplasia (CIN) 1.

High-Grade Squamous Intraepithelial Lesions (HSIL)—HSIL refers to high-grade squamous intraepithelial lesions encompassing moderate and severe dysplasia, carcinoma in situ, CIN 2, and CIN 3.

Atypical Glandular Cells (AGC)—AGC refers to glandular cell abnormalities, including adenocarcinoma. The 2001 Bethesda System¹⁴ classifies AGC less severe than adenocarcinoma into three categories: atypical glandular cells, either endocervical, endometrial, or “glandular cells” not otherwise specified (AGC NOS); atypical glandular cells, either endocervical or “glandular cells” favor neoplasia (AGC “favor neoplasia”); and endocervical adenocarcinoma in situ (AIS).

In FPAR **Table 10**, grantees report the following information on breast cancer screening activities:

- Unduplicated number of users receiving a clinical breast exam (CBE) and
- Unduplicated number of users referred for further evaluation based on CBE results.

The FPAR instructions provide the following guidance for reporting this information:

Tests—Report CBEs that are documented in the client medical record and provided within the scope of the agency’s Title X project during the reporting period.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 33–38.

CERVICAL AND BREAST CANCER SCREENING ACTIVITIES

OPA requires Title X-funded service providers to adhere to cancer screening recommendations established by professional organizations that set national standards of care (e.g., American College of Obstetricians and Gynecologists, American Cancer Society, or U.S. Preventive Services Task Force [USPSTF]).¹⁶

Cervical Cancer Screening Activities (Exhibit 26)

In 2007, Title X service sites provided Papanicolaou (Pap) testing to 2,272,571 (48%) female family planning users, and performed 2,470,674 tests or approximately 0.53 Pap tests per female user. Of the almost 2.5 million Pap tests performed, 10% (254,712) had a result indicating a precancerous or cancerous condition (i.e., atypical squamous cell [ASC] or higher result), which required further evaluation and possible treatment. Additionally, of the total Pap tests performed, 1% (20,890) had a result of high-grade squamous intraepithelial lesion (HSIL) or higher, indicating the presence of a more severe condition. By region, the percentage of total female users who received a Pap test ranged from 38% (IX) to 60% (VI), and the percentage tested was at or above the national average of 48% in five regions (II, IV, V, VI, and VII) (*Exhibit 26*).

In addition to the number of Pap tests performed, since 2005 grantees have also reported the unduplicated number of users who received a Pap test, the number of tests with an ASC or higher result, and the number of tests with an HSIL or higher result. Between 2005 and 2007, the number of female users tested decreased by 174,927 users (7%) and the percentage who received a Pap test decreased from 52% of all female users in 2005 to 48% in 2007. Additionally, the percentage of tests with an ASC or higher result increased from 9% in 2005 to 10% in 2007 (*Exhibits A-8a* and *A-8b*).

The downward trend in Pap testing is attributed to several factors, including provider adoption of updated national standards for cervical cancer screening¹⁷ and use of newer Pap testing technologies (e.g., brush, liquid-based cytologic methods). The updated screening guidelines have increased both the age at which Pap testing should begin and the testing interval for women with a normal result, while newer testing technology has reduced the number of repeat tests due to unsatisfactory specimens.

Breast Cancer Screening Activities (Exhibit 26)

In 2007, Title X service sites provided clinical breast exams (CBEs) to 2,399,221 (48%) family planning users. Two percent (59,959) of those who received a CBE were referred for further evaluation based on the results of the exam. By region, between 35% (IX) and 61% (VI) of total users received a CBE, and the percentage examined was above the national average of 48% in all but three regions (I, IX, and X). Additionally, referrals based on the CBE ranged from 1% (V, VIII, and X) to 4% (IX), with three regions (II, IV, and IX) exceeding the national average of 2% for CBE-related referrals (*Exhibit 26*).

Exhibit 26. Cervical and breast cancer screening activities, by screening test/exam and region: 2007 (Source: FPAR Tables 9 and 10)

Tests/Exams	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Pap Tests											
Female users tested ^a	2,272,571	77,001	219,102	244,938	559,755	244,817	281,364	120,116	62,640	375,598	87,240
Percentage tested ^b	48%	42%	48%	47%	56%	48%	60%	54%	45%	38%	41%
Number of tests	2,470,674	80,839	233,217	263,649	606,546	255,620	295,342	127,216	71,234	446,961	90,050
Require follow-up ≥ ASC result											
Number	254,712	10,507	25,465	34,051	53,379	27,738	26,061	13,230	7,987	41,935	14,359
Percentage ^c	10%	13%	11%	13%	9%	11%	9%	10%	11%	9%	16%
≥ HSIL result											
Number	20,890	918	1,522	2,072	7,470	2,186	1,828	689	374	3,182	649
Percentage ^c	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%
Clinical Breast Exams											
Users examined ^d	2,399,221	87,634	238,795	276,237	545,611	277,458	296,764	124,096	74,880	382,410	95,336
Percentage examined ^e	48%	44%	50%	50%	54%	52%	61%	53%	50%	35%	42%
Users referred based on exam	59,959	1,805	6,238	4,357	18,748	2,737	5,055	2,679	864	16,371	1,105
Percentage referred based on exam ^f	2%	2%	3%	2%	3%	1%	2%	2%	1%	4%	1%

ASC=atypical squamous cells. HSIL=high-grade squamous intraepithelial lesion.

^a Unduplicated number of female users.

^b Denominator is the total unduplicated number of female users.

^c Denominator is the total number of Pap tests performed.

^d Unduplicated number of female and male users.

^e Denominator is the total unduplicated number of users (female and male).

^f Denominator is the total unduplicated number of users examined.

SEXUALLY TRANSMITTED DISEASE (STD) SCREENING

Sexually transmitted diseases (STDs) are a concern for clients served in Title X service projects, particularly young, sexually active women (15 to 24 years) who have the highest rates of chlamydia and gonorrhea.^{16, 18} Title X *Program Guidelines*⁷ require Title X-funded sites to provide family planning users with a thorough history and physical assessment that includes screening for risk of STDs, both symptomatic and asymptomatic, in accordance with the current U.S. Centers for Disease Control and Prevention (CDC) *STD Treatment Guidelines*.¹⁹ As part of a comprehensive family planning visit, Title X providers offer, onsite or by referral, STD testing, treatment, and management.

Chlamydia Testing (Exhibits 27 and 28)

CDC recommends routine chlamydia screening, at least annually, for all sexually active, nonpregnant women 25 years and younger, and for older, nonpregnant women at increased risk (e.g., with a new or multiple sex partners).^{19, 20} Though the evidence is insufficient for CDC to recommend routine chlamydia screening for sexually active young men, the guidelines suggest screening in high-prevalence settings (e.g., adolescent clinics and STD clinics).¹⁹ Through an interagency agreement between CDC and OPA, about one-half of all Title X-funded clinics participate in chlamydia prevention efforts through the national Infertility Prevention Project (IPP). Since 2005, grantees have been required to report the unduplicated number of users, by age and gender, that were tested for chlamydia.

In 2007, Title X-funded service sites tested 47% (2,220,512) of all female users for chlamydia and 52% (1,385,623) of female users 24 and younger. Chlamydia testing rates among female users 24 and younger were at or above the national rate in four regions (II, VI, VII, and IX). By age group, rates of chlamydia testing were highest among female users 20 to 24 years (54%) and lowest among females 25 years and older (41%) (*Exhibits 27 and 28*). Between 2005 and 2007, the percentage of female users 24 and younger who were tested for chlamydia increased from 50% to 52% (*Exhibits A-9a and A-9b*).

Additionally, Title X-funded service sites tested 52% (153,105) of all male users for chlamydia. Compared to female users, there was substantially more variation by region and age in rates of male chlamydia testing. By region, between 14% (IV) and 71% (VIII) of all male users received a chlamydia test, and testing rates were at or above the national average of 52% in five regions (II, V, VIII, IX, and X). By age group, rates of chlamydia testing were highest among male users 20 to 24 years (64%) and lowest (10%) among those 14 years and younger (*Exhibits 27 and 28*).

Gonorrhea Testing (Exhibit 29)

In 2007, Title X service sites performed 2,316,324 gonorrhea tests (2,156,501 female tests and 159,823 male tests), or 4.6 tests for every 10 family planning users. By region, the rate of gonorrhea testing ranged from 2.8 (X) to 5.4 (IX) tests for every 10 users, with rates at or above the national average in five regions (II, IV, VI, VII, and IX) (*Exhibit 29*).

Exhibit 27. Number of family planning users tested for chlamydia, by gender, age, and region: 2007 (Source: FPAR Table 11)

Age Group (Years)	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Female Users											
< 15	23,722	822	1,666	4,398	5,598	2,466	3,074	828	664	3,564	642
15-17	246,576	10,981	21,817	34,428	41,325	28,355	27,705	11,988	6,842	54,365	8,770
18-19	324,617	11,331	28,867	36,837	64,123	34,831	33,252	15,928	8,379	79,774	11,295
20-24	790,708	25,161	75,143	78,852	168,383	78,798	79,510	41,615	18,274	194,262	30,710
25 and older	834,889	32,023	89,451	74,276	204,560	63,925	86,577	29,542	11,826	218,775	23,934
Total Female Users	2,220,512	80,318	216,944	228,791	483,989	208,375	230,118	99,901	45,985	550,740	75,351
Female Users <25^a	1,385,623	48,295	127,493	154,515	279,429	144,450	143,541	70,359	34,159	331,965	51,417
Male Users											
< 15	1,241	44	68	473	50	61	55	41	107	319	23
15-17	13,831	758	1,081	2,885	441	935	856	421	931	4,791	732
18-19	20,032	1,143	1,976	2,290	551	1,648	1,081	682	960	8,728	973
20-24	54,621	3,207	5,694	4,348	868	4,722	2,427	2,363	2,547	25,472	2,973
25 and older	63,380	3,254	5,260	5,026	1,369	4,118	2,633	2,274	3,647	31,588	4,211
Total Male Users	153,105	8,406	14,079	15,022	3,279	11,484	7,052	5,781	8,192	70,898	8,912
All Users											
< 15	24,963	866	1,734	4,871	5,648	2,527	3,129	869	771	3,883	665
15-17	260,407	11,739	22,898	37,313	41,766	29,290	28,561	12,409	7,773	59,156	9,502
18-19	344,649	12,474	30,843	39,127	64,674	36,479	34,333	16,610	9,339	88,502	12,268
20-24	845,329	28,368	80,837	83,200	169,251	83,520	81,937	43,978	20,821	219,734	33,683
25 and older	898,269	35,277	94,711	79,302	205,929	68,043	89,210	31,816	15,473	250,363	28,145
Total All Users	2,373,617	88,724	231,023	243,813	487,268	219,859	237,170	105,682	54,177	621,638	84,263

^a The U.S. Centers for Disease Control and Prevention (CDC) recommends annual screening for chlamydial infection for all sexually active nonpregnant women age 25 years and younger, and for older nonpregnant women at increased risk (e.g., new sexual partner, multiple sexual partners). Similarly, the U.S. Preventive Services Task Force (USPSTF) recommends screening for chlamydial infection for all sexually active nonpregnant young women age 24 years or younger and older nonpregnant women who are at increased risk. (Sources: CDC. Sexually Transmitted Diseases Treatment Guidelines, 2006. *MMWR* 2006; 55 (No. RR-11):1-94 and Screening for Chlamydial Infection: U.S. Preventive Services Task Force Recommendation Statement. *Annals of Internal Medicine* 2007; 147(2):128-134.)

Exhibit 28. Percentage of family planning users in each age group tested for chlamydia, by gender, age, and region: 2007 (Source: FPAR Table 11)

Age Group (Years)	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Female Users											
< 15	42%	57%	38%	45%	37%	46%	49%	42%	40%	46%	27%
15-17	49%	54%	48%	48%	40%	47%	58%	55%	41%	60%	36%
18-19	53%	47%	52%	53%	50%	45%	58%	55%	40%	63%	40%
20-24	54%	48%	54%	50%	54%	44%	57%	57%	39%	65%	45%
25 and older	41%	38%	43%	35%	47%	33%	40%	31%	23%	47%	26%
Total Female Users	47%	44%	48%	44%	49%	41%	49%	45%	33%	56%	35%
Female Users <25^a	52%	49%	52%	50%	50%	45%	58%	56%	39%	63%	42%
Male Users											
< 15	10%	11%	8%	38%	1%	27%	11%	21%	21%	16%	27%
15-17	42%	36%	32%	38%	16%	44%	38%	54%	63%	50%	73%
18-19	58%	59%	53%	49%	27%	65%	44%	50%	67%	67%	72%
20-24	64%	62%	61%	51%	25%	66%	46%	53%	74%	75%	69%
25 and older	49%	42%	52%	38%	18%	56%	36%	37%	79%	55%	56%
Total Male Users	52%	48%	52%	43%	14%	59%	39%	44%	71%	61%	62%
All Users											
< 15	36%	47%	33%	44%	26%	46%	47%	40%	36%	40%	27%
15-17	49%	52%	47%	47%	40%	47%	57%	55%	43%	59%	38%
18-19	53%	48%	52%	52%	49%	46%	58%	55%	42%	64%	42%
20-24	54%	50%	54%	50%	53%	45%	57%	56%	41%	66%	46%
25 and older	41%	39%	44%	35%	47%	34%	39%	31%	28%	48%	29%
Total All Users	48%	45%	48%	44%	48%	41%	49%	45%	36%	56%	37%

^a The U.S. Centers for Disease Control and Prevention (CDC) recommends annual screening for chlamydial infection for all sexually active nonpregnant women age 25 years and younger, and for older nonpregnant women at increased risk (e.g., new sexual partner, multiple sexual partners). Similarly, the U.S. Preventive Services Task Force (USPSTF) recommends screening for chlamydial infection for all sexually active nonpregnant young women age 24 years or younger and older nonpregnant women who are at increased risk. (Sources: CDC. Sexually Transmitted Diseases Treatment Guidelines, 2006. *MMWR* 2006; 55 (No. RR-11):1-94 and Screening for Chlamydial Infection: U.S. Preventive Services Task Force Recommendation Statement. *Annals of Internal Medicine* 2007; 147(2):128-134.)

Exhibit 29. Number of gonorrhea, syphilis, and HIV tests performed, by test type and region: 2007 (Source: FPAR Table 12)

STD Test	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Gonorrhea											
Female	2,156,501	73,389	207,444	236,116	496,869	184,089	238,567	105,951	38,718	519,420	55,938
Male	159,823	8,422	13,850	16,121	5,653	9,576	8,153	6,531	7,858	75,620	8,039
Total	2,316,324	81,811	221,294	252,237	502,522	193,665	246,720	112,482	46,576	595,040	63,977
Test-to-user ratio	0.46	0.41	0.46	0.45	0.49	0.36	0.51	0.48	0.31	0.54	0.28
Syphilis											
Female	625,179	8,709	51,634	61,210	264,540	23,050	94,990	18,452	1,516	96,693	4,385
Male	84,355	3,221	6,761	8,732	4,485	2,704	4,649	2,594	2,667	44,935	3,607
Total	709,534	11,930	58,395	69,942	269,025	25,754	99,639	21,046	4,183	141,628	7,992
Test-to-user ratio	0.14	0.06	0.12	0.13	0.26	0.05	0.20	0.09	0.03	0.13	0.04
HIV (Confidential)											
Female	644,065	19,062	98,657	54,110	184,748	27,166	74,388	17,684	7,401	152,481	8,368
Male	120,061	7,427	13,763	10,973	4,381	5,844	5,286	3,317	5,665	57,573	5,832
Total	764,126	26,489	112,420	65,083	189,129	33,010	79,674	21,001	13,066	210,054	14,200
Test-to-user ratio	0.15	0.13	0.23	0.12	0.19	0.06	0.16	0.09	0.09	0.19	0.06
Positive Test Results	1,744	58	325	191	376	34	51	36	5	649	19
HIV (Anonymous)	10,781	1,550	0	2,388	136	411	517	313	0	4,231	1,235

Syphilis Testing (Exhibit 29)

In 2007, Title X service sites performed 709,534 syphilis tests (625,179 female tests and 84,355 male tests), or 1.4 tests for every 10 family planning users. By region, the rates of syphilis testing ranged from 0.3 (VIII) to 2.6 (IV) tests per 10 users, with rates at or above the national average in two regions (IV and VI) (*Exhibit 29*).

HIV Testing (Exhibit 29)

In 2007, Title X service sites performed 764,126 confidential HIV tests (644,065 female tests and 120,061 male tests) or 1.5 tests for every 10 family planning users. Across regions, the rate of confidential HIV testing ranged from 0.6 (V and X) to 2.3 (II) tests per 10 users, with rates at or above the national average in four regions (II, IV, VI, and IX). Of the total number of confidential HIV tests performed, 1,744 had a positive result. In addition, Title X service sites in all but two regions (II and VIII) performed 10,781 anonymous HIV tests (*Exhibit 29*).

FPAR Guidance for Reporting STD Testing Activities in Tables 11 and 12

In FPAR **Tables 11** and **12**, grantees report testing information for chlamydia (**Table 11**), gonorrhea (**Table 12**), syphilis (**Table 12**), and HIV (**Table 12**).

In FPAR **Table 11**, grantees report the unduplicated number of family planning users tested for chlamydia by age group (< 15, 15–17, 18–19, 20–24, and 25 and over) and gender.

In FPAR **Table 12**, grantees report the following information on gonorrhea, syphilis, and HIV testing:

- Number of gonorrhea, syphilis, and confidential HIV tests performed, by gender;
- Number of positive, confidential HIV tests performed; and
- Number of anonymous HIV tests performed.
- The FPAR instructions provide the following guidance for reporting this information:

Age—Use the client’s age as of June 30th of the reporting period.

Tests—Report STD (chlamydia, gonorrhea, and syphilis) and HIV (confidential and anonymous) tests that an agency performs within the scope of its Title X project. Do not report tests performed in an STD clinic operated by the Title X-funded agency, unless the activities of the STD clinic are within the defined scope of the agency’s Title X project.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 39–42.

FPAR Guidance for Reporting Encounter and Staffing Data in Table 13

In FPAR **Table 13**, grantees report information on the number of family planning encounters and composition of clinical services provider staff, including:

- Number of full-time equivalent (FTE) family planning clinical services providers by type of provider;
- Number of family planning encounters with clinical services providers; and
- Number of family planning encounters with nonclinical services providers.

The FPAR instructions provide the following guidance for reporting this information:

Family Planning Provider—A family planning provider is the individual who assumes primary responsibility for assessing a client and documenting services in the client record. Providers include those agency staff that exercise independent judgment as to the services rendered to the client during an encounter. Two general types of providers deliver Title X family planning services: clinical services providers and nonclinical services providers.

Clinical Services Provider—Includes physicians (family and general practitioners, specialists), physician assistants, nurse practitioners, certified nurse midwives, and other licensed health providers (e.g., registered nurses) who are trained and permitted by state-specific regulations to perform *all aspects* of the user (male and female) physical assessment, as described in Section 8.3 of the *Program Guidelines*. Clinical services providers are able to offer client education, counseling, referral, follow-up, and/or clinical services (physical assessment, treatment, and management) relating to a client's proposed or adopted method of contraception, general reproductive health, or infertility treatment.

Nonclinical Services Provider—Includes other agency staff (e.g., nurses, health educators, social workers, or clinic aides) that are able to offer client education, counseling, referral, and/or follow-up services relating to the client's proposed or adopted method of contraception, general reproductive health, or infertility treatment. Nonclinical services providers may also perform or obtain samples for routine laboratory tests (e.g., urine, pregnancy, STD, and cholesterol and lipid analysis), give contraceptive injections (e.g., Depo Provera), and perform routine clinical procedures that may include *some aspects* of the user physical assessment (e.g., blood pressure evaluation), as described in Section 8.3 of the *Program Guidelines*.

Full-Time Equivalent (FTE)—For each type of clinical services provider, report the time in FTEs that these providers are involved in the direct provision of Title X services (i.e., engaged in a family planning encounter).

Family Planning Encounter—A family planning encounter is a documented, face-to-face contact between an individual and a family planning provider that takes place in a Title X service site. The purpose of a family planning encounter—whether clinical or nonclinical—is to provide family planning and related preventive health services to female and male clients who want to avoid unintended pregnancies or achieve intended pregnancies. To be counted for purposes of the FPAR, a written record of the service(s) provided during the family planning encounter must be documented in the client record.

There are two types of family planning encounters at Title X service sites: (1) family planning encounters with a clinical services provider and (2) family planning encounters with a nonclinical services provider. The type of family planning provider who renders the care, regardless of the services rendered, determines the type of family planning encounter.

Family Planning Encounter with a Clinical Services Provider—A face-to-face, documented encounter between a family planning client and a clinical services provider that takes place in a Title X service site.

Family Planning Encounter with a Nonclinical Services Provider—A face-to-face, documented encounter between a family planning client and a nonclinical services provider that takes place in a Title X service site.

Laboratory tests and related counseling and education, in and of themselves, do not constitute a family planning encounter unless there is face-to-face contact between the client and provider, the provider documents the encounter in the client's record, and the test(s) is/are accompanied by family planning counseling or education.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 43–46.

STAFFING AND FAMILY PLANNING ENCOUNTERS

Staffing (Exhibit 30)

In 2007, 3,830 full-time equivalent (FTE) physicians, midlevel clinicians (physician assistants, nurse practitioners, and certified nurse midwives), and “other” clinical services providers delivered clinical family planning and related preventive health services in Title X-funded services sites. “Other” clinical services providers are licensed health providers, such as registered nurses, who are trained and permitted by state-specific regulations to perform all aspects of the male and female user physical assessment, as described in the Title X *Program Guidelines*.⁷ Midlevel clinicians comprised 54% (2,065 FTEs) of the full-time medical staff, followed by “other” clinical services providers (34% or 1,319 FTEs), and physicians (12% or 446 FTEs). Nationally, grantees reported an average of 4.6 midlevel provider FTEs per physician FTE (*Exhibit 30*).

The staffing composition varied across regions, with Title X-funded agencies in some regions relying more heavily on midlevel family planning providers and “other” clinical services providers than in other regions. For example, the number of midlevel clinician FTEs per physician FTE ranged from 2.5 (III) to 15.9 (VIII), and six regions (IV, V, VI, VIII, IX, and X) exceeded the national ratio of 4.6 midlevel FTEs per physician FTE (*Exhibit 30*).

Family Planning Encounters (Exhibit 30)

In 2007, Title X-funded agencies reported over 9.5 million family planning encounters, or almost two (1.9) encounters per family planning user. Encounters with a clinical services provider accounted for over seven of every ten (72%) family planning encounters. Across regions, the total number of encounters per user ranged from 1.6 (X) to 2.2 (VII), and in five regions (II, III, V, VI, and VII) the number of encounters per user was at or above the national average (*Exhibit 30*).

Exhibit 30. Composition of clinical services provider (CSP) staff and number and distribution of family planning (FP) encounters, by type and region: 2007 (Source: FPAR Table 13)

FTEs and FP Encounters	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
CSP FTEs												
Number of FTEs												
Physician	446.33	26.20	54.28	92.86	52.27	43.30	52.01	24.71	4.69	82.67	13.34	
PA/NP/CNM	2,064.93	101.31	229.83	235.62	339.11	209.93	264.41	100.15	74.53	388.53	121.51	
Other CSP	1,319.06	30.66	8.80	120.28	468.29	0.00	332.48	135.11	54.17	82.42	86.85	
Total	3,830.32	158.17	292.91	448.76	859.67	253.23	648.90	259.97	133.39	553.62	221.70	
Distribution of FTEs												
Physician	12%	17%	19%	21%	6%	17%	8%	10%	4%	15%	6%	
PA/NP/CNM	54%	64%	78%	53%	39%	83%	41%	39%	56%	70%	55%	
Other CSP	34%	19%	3%	27%	54%	0%	51%	52%	41%	15%	39%	
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Ratio of midlevel ^a to physician FTE	4.63	3.87	4.23	2.54	6.49	4.85	5.08	4.05	15.89	4.70	9.11	
FP Encounters												
Number of Encounters												
With a CSP	6,909,359	291,482	697,491	821,941	1,224,371	708,739	737,085	333,941	208,832	1,558,503	326,974	
With a non-CSP	2,652,914	48,662	222,744	280,743	675,872	377,674	302,378	180,957	68,320	452,478	43,086	
Total	9,562,273	340,144	920,235	1,102,684	1,900,243	1,086,413	1,039,463	514,898	277,152	2,010,981	370,060	
Distribution of Encounters												
With a CSP	72%	86%	76%	75%	64%	65%	71%	65%	75%	77%	88%	
With a non-CSP	28%	14%	24%	25%	36%	35%	29%	35%	25%	23%	12%	
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
FP Encounters per User	1.92	1.71	1.92	1.98	1.87	2.04	2.14	2.19	1.86	1.82	1.62	

CNM=Certified Nurse Midwife. CSP=clinical services provider. FP=family planning. FTE=full-time equivalent. NP=Nurse Practitioner. PA=Physician Assistant.

^a Midlevel providers includes Physician Assistants, Nurse Practitioners, and Certified Nurse Midwives.

REVENUE (EXHIBITS 31 TO 33)

In 2007, Title X grantees reported total revenue of over \$1.14 billion, or \$229 per user, to support the provision of family planning and related preventive health services. The major sources of program revenue—Medicaid (\$349.7 million) and Title X (\$255.3 million)—accounted for 31% and 22%, respectively, of total national revenue. Other key sources of revenue, including state governments (\$138.8 million), local governments (\$99.5 million), and client payment for services (\$94.3 million), each accounted for 8% to 12% of total national revenue, while all other sources accounted for 4% or less of total national revenue (*Exhibit 31*).

Medicaid

Across regions there was wide variation in Medicaid's contribution to total revenue. While Medicaid revenue (federal and state shares) accounted for 31% of total national revenue, it accounted for 2% (VIII) to 60% (IX) of total regional revenue. The percentages of total revenue from Medicaid were highest in Regions IX (60%) and X (49%), both of which include states (i.e., California, Oregon, and Washington) with established Medicaid family planning waiver programs. In seven other regions (I, II, III, IV, V, VI, and VII), Medicaid accounted for 16% to 25% of total revenue (*Exhibits 32 and 33*). The Table 14 comments in the *Methodological Notes (Appendix C)* list the 24 states that reported Medicaid family planning waiver revenue in 2007.

Title X

Revenue from Title X accounted for 22% of total national revenue and between 12% (X) and 33% (VI) of total regional revenue. In all but three regions (II, IX, and X), the percentage of total revenue from Title X exceeded the national average of 22%. Additionally, Title X was the largest source of revenue in five regions (I, III, V, VI, and VIII) and in two regions Title X tied with either Medicaid (IV) or client payment for services (VII) as the largest sources of revenue (*Exhibits 32 and 33*).

State and Local Government

State and local government revenue accounted for 12% and 9%, respectively, of total national revenue. Across regions, revenue from state governments ranged from 1% (VII and IX) to 22% (IV) of total regional revenue, while local government revenue accounted for 1% (I and IX) to 20% (VIII) of total regional revenue. In four regions (I, II, III, and IV), the percentage of total regional revenue from state governments exceeded the national average of 12%, while the share of total regional revenue from local governments met or exceeded the national average of 9% in all but four regions (I, III, VII, and IX). In Regions II and III, state governments were the second largest source of revenue, while local government revenue was the second largest source of revenue in Region X (*Exhibits 32 and 33*).

Client Collections/Payment for Services

Nationally, revenue from client payment for services accounted for 8% of total revenue and between 4% (VI) and 25% (VII) of total regional revenue. In five regions (I, III, V, VII, and VIII), the percentage of total regional revenue from client payments exceeded the national average. In Region VII, client payment for services tied with Title X as the largest source of total revenue (25%), and in Regions I (19%) and VIII (21%), revenue from client payment for

services was the second most important source of program revenue after Title X (*Exhibits 32 and 33*).

Private Third-Party Payers

Title X *Program Guidelines*⁷ require Title X-funded agencies to “bill all third parties authorized or legally obligated to pay for services” and to “make reasonable efforts to collect charges without jeopardizing client confidentiality.” Revenue from private payers (\$46.4 million) accounted for 4% of total national revenue and between less than 1% (Region VI) to 15% (I) of total regional revenue. Revenue from private third-party payers exceeded the national average of 4% in all but three regions (IV, VI, and IX) (*Exhibits 32 and 33*).

Block Grants and Temporary Assistance for Needy Families (TANF)

Revenue from the Title XX Social Services Block Grant (\$28.6 million) accounted for 3% of total national revenue, while the Title V Maternal and Child Health Block Grant (\$23.5 million) and Temporary Assistance for Needy Families (TANF) (\$23.5 million) each accounted for 2%. Across regions there was little variation in the share of total revenue accounted for by Title V or Title XX revenue, except in Region VI, where Title XX Social Services Block Grants accounted for 17% of total regional revenue. Similarly, revenue from TANF ranged between 0% (VI and X) and 4% (IV), except in Region II where it accounted for 7% of total regional revenue (*Exhibits 32 and 33*).

Other Revenue

Finally, 6% (\$69.9 million) of total revenue in 2007 came from numerous other sources reported as “other” revenue (*Exhibits 31, 32, and 33*). The Table 14 comments in the *Methodological Notes (Appendix C)* list “other” revenue sources.

Trends

Between 1999 and 2007, unadjusted (actual) total revenue grew 55%, from almost \$738 million in 1999 to \$1.14 billion in 2007. However, when adjusted for inflation (constant 1999 dollars),²¹ total revenue increased only 10% during this period. Additionally, unadjusted Title X revenue increased 39% (\$183.2 million in 1999 versus \$255.3 million in 2007), but less than 1% when adjusted for inflation (*Exhibits A-10a, A-10b, and A-10c*).

During this same period, there were also notable shifts in the composition of total project revenue across major funding sources, including a decrease in the share from Title X, state governments, client payment for services, and block grants and an increase in the share from Medicaid, local governments, and private third-party payers (*Exhibits A-11a, A-11b, and A-11c*). Furthermore, between 2003 and 2004 there were large percentage-point changes in the share of total revenue from Medicaid and state governments as a result of reclassifying revenue from California’s Medicaid family planning waiver as Medicaid rather than state government revenue in 2004. This reclassification increased the Medicaid share of total revenue from 17% in 2003 to 28% in 2004, and decreased the state government share from 23% in 2003 to 13% in 2004 (*Exhibits A-11a, A-11b, and A-11c*). The practice of reporting state-sourced Medicaid revenue with other Medicaid revenue has continued since 2004 (see Table 14 comments in *Appendix C, Methodological Notes*).

FPAR Guidance for Reporting Project Revenue in Table 14

In FPAR **Table 14**, grantees report the revenue (i.e., actual *cash* receipts) they received during the reporting period, even if they did not expend the funds during the reporting period. The FPAR instructions provide the following guidance for reporting this information:

Federal Grants (Rows 1–5)—Refers to funds the grantee received **directly** from the federal government. Do **not** include federal funds that were first received by a state government, local government, or other agency and then passed on to the grantee.

Title X Grant (Row 1)—Enter the amount received during the reporting period from the Title X grant. Do not enter the amount of grant funds awarded unless this figure is the same as the actual *cash* receipts or *drawdown* amounts.

Bureau of Primary Health Care (BPHC) (Row 2)—Specify the amount of revenue received from BPHC grants (e.g., Section 330) during the reporting period that supported services within the scope of the grantee’s Title X project.

Other Federal Grant (Rows 3–4)—Specify the amount and source of any other federal grant revenue received during the reporting period that supported services within the scope of the grantee’s Title X project.

Payment for Services (Rows 6–9)—Refers to revenues from public and private third parties (capitated or fee-for-service) and funds collected directly from clients.

Total Client Collections/Self-Pay (Row 6)—Report the amount collected directly from clients during the reporting period for services rendered within the scope of the grantee’s Title X project.

Third-Party Payers (Rows 7a–7e)—For each third-party source listed, enter the amount of funds received during the reporting period for services rendered within the scope of the grantee’s Title X project. Only revenue from pre-paid (capitated) managed care arrangements (e.g., capitated Medicare, Medicaid, and private managed care contracts) should be reported as “pre-paid.” Revenue received after the service was rendered, even under managed care arrangements, should be reported as “not pre-paid.”

Medicaid (Row 7a)—Grantees should report as “Medicaid” all services paid for by Medicaid (Title XIX) regardless of whether they were paid directly by Medicaid or through a fiscal intermediary or a health maintenance organization (HMO). For example, in states with a capitated Medicaid program (i.e., the grantee has a contract with a private plan like Blue Cross), the payer is Medicaid, even though the actual payment may come from Blue Cross. Report revenue from state-only Medicaid programs in accordance with the services covered by the state plan. Report revenue (Federal and State shares) from family planning waivers with other Medicaid revenue on row 7a, column B. If the amount reported on row 7a, column B includes family planning waiver revenue, indicate this in the table-specific comment field.

Medicare (Row 7b)—Grantees should report as “Medicare” all services paid for by Medicare (Title XVIII) regardless of whether they were paid directly by Medicare or through a fiscal intermediary or an HMO. For clients enrolled in a capitated Medicare program (i.e., where the grantee has a contract with a private plan like Blue Cross), the payer is Medicare, even though the actual payment may come from Blue Cross.

State Children’s Health Insurance Program (CHIP) (Row 7c)—Enter the amount of funds received in the reporting period from the non-Medicaid, state CHIPs for services rendered within the scope of the grantee’s Title X project.

Other Public Health Insurance (Row 7d)—Enter the amount of funds received in the reporting period from other federal, state, and/or local government health insurance programs for services rendered within the scope of the grantee’s Title X project. Examples of other public third-party insurance programs include health insurance plans for military personnel and their dependents (e.g., TRICARE, CHAMPVA).

Private Health Insurance (Row 7e)—Refers to health insurance provided by commercial and non-profit companies. Individuals may obtain health insurance through employers, unions, or on their own.

(continued)

FPAR Guidance for Reporting Project Revenue in Table 14 (continued)

Other Revenue (Rows 10–18)—Enter the amount of funds from contracts, state and local indigent care programs, and other public or private revenues that were received during the reporting period and that supported services within the scope of the grantee’s Title X project.

Title V (Maternal and Child Health [MCH] Block Grant) (Row 10)—Enter the amount of Title V funds received during the reporting period that supported services within the scope of the grantee’s Title X project.

Title XX (Social Services Block Grant) (Row 11)—Enter the amount of Title XX funds received during the reporting period that supported services within the scope of the grantee’s Title X project.

Temporary Assistance for Needy Families (TANF) (Row 12)—Enter the amount of TANF funds received during the reporting period that supported services within the scope of the grantee’s Title X project.

Local Government Revenue (Row 13)—Enter the amount of funds from local government sources, including county and city grants or contracts that were received during the reporting period and that supported services within the scope of the grantee’s Title X project.

State Government Revenue (Row 14)—Enter the amount of funds from state government sources, including grants or contracts that were received during the reporting period and that supported services within the scope of the grantee’s Title X project. CDC (e.g., IPP funds) and block grant funds awarded to and distributed by the state are not considered “state revenues.” Report these revenues as “Other” and indicate the specific program source.

Other Revenue (Rows 15–17)—Enter the amount and specify the source of funds received during the reporting period from other sources that supported services within the scope of the grantee’s Title X project. This may include revenue from private grants and donations, fundraising, interest income, or other sources.

Source: *Title X Family Planning Annual Report: Forms and Instructions* (October 2007), pp. 47–50.

Exhibit 31. Amount and distribution of Title X project revenues, by revenue source: 2007
(Source: FPAR Table 14)

Revenue Source	Dollar Amount	Distribution
Federal Grants		
Title X	\$255,337,864	22%
Bureau of Primary Health Care	\$7,177,359	1%
Other ^a	\$83,560	0%†
Subtotal Federal Grants	\$262,598,783	23%
Payment for Services		
Client collections	\$94,273,992	8%
Third-party payers ^b		
Medicaid (Title XIX) ^c	\$349,672,196	31%
Medicare (Title XVIII)	\$523,170	0%†
State Child Health Insurance Program	\$247,539	0%†
Other public	\$3,042,991	0%†
Private	\$46,403,049	4%
Subtotal Payment for Services	\$494,162,937	43%
Other Revenue		
Maternal and Child Health Block Grant (Title V)	\$23,484,206	2%
Social Services Block Grant (Title XX)	\$28,593,275	3%
Temporary Assistance for Needy Families	\$23,460,554	2%
State government	\$138,760,608	12%
Local government	\$99,510,026	9%
Other ^a	\$69,940,773	6%
Subtotal Other Revenue	\$383,749,442	34%
Total Revenue		
Unadjusted ^d	\$1,140,511,162	100%
Adjusted (1999\$) ^e	\$814,154,225	—
Total Revenue per User		
Unadjusted ^d	\$229	—

^a See Table 14 comments in the *Methodological Notes (Appendix C)* for the types of revenue reported as “other” within each revenue category.

^b Prepaid and not prepaid.

^c Includes revenue from Medicaid family planning waivers.

^d Unadjusted total revenue is in actual dollar values.

^e Adjusted total revenue is in constant 1999 dollars (1999\$), based on the consumer price index for medical care, which includes medical care commodities and medical care services (Source: U.S. Department of Labor Bureau of Labor Statistics, <http://www.bls.gov/cpi>).

† Percentage is less than 0.5%.

Exhibit 32. Amount of Title X project revenues, by revenue source and region: 2007 (Source: FPAR Table 14)

Revenue Source	All Regions	Region										
		I	II	III	IV	V	VI	VII	VIII	IX	X	
Federal Grants												
Title X	\$255,337,864	\$12,701,215	\$26,372,237	\$28,780,922	\$54,149,345	\$33,156,226	\$33,317,533	\$12,044,264	\$10,137,421	\$34,695,434	\$9,983,267	
BPHC	\$7,177,359	\$181,901	\$1,286,596	\$72,293	\$794,907	\$51,949	\$0	\$2,155,991	\$0	\$2,633,722	\$0	
Other ^a	\$83,560	\$30,000	\$0	\$40,022	\$10,818	\$220	\$0	\$0	\$2,500	\$0	\$0	
Subtotal Federal Grants	\$262,598,783	\$12,913,116	\$27,658,833	\$28,893,237	\$54,955,070	\$33,208,395	\$33,317,533	\$14,200,255	\$10,139,921	\$37,329,156	\$9,983,267	
Payment for Services												
Client collections	\$94,273,992	\$9,267,943	\$8,600,020	\$13,095,798	\$11,815,965	\$14,027,205	\$3,881,330	\$11,954,695	\$7,137,508	\$10,388,794	\$4,104,734	
Third-party payers ^b												
Medicaid (Title XIX) ^c	\$349,672,196	\$7,455,716	\$36,657,561	\$16,111,218	\$54,933,958	\$26,399,819	\$20,033,507	\$10,745,920	\$681,232	\$136,461,219	\$40,192,046	
Medicare (Title XVIII)	\$523,170	\$25,399	\$119,486	\$68,455	\$58,156	\$40,223	\$852	\$73,396	\$3,109	\$133,289	\$805	
State CHIP	\$247,539	\$10,598	\$2,894	\$0	\$28,800	\$87,944	\$0	\$110,045	\$7,258	\$0	\$0	
Other public	\$3,042,991	\$213,597	\$383,648	\$550,733	\$66,242	\$181,436	\$67,051	\$326,422	\$37,775	\$405,764	\$810,323	
Private	\$46,403,049	\$7,295,829	\$8,450,155	\$6,141,184	\$2,438,429	\$10,621,743	\$377,213	\$3,663,520	\$1,772,194	\$1,889,982	\$3,752,800	
Subtotal Payment for Services	\$494,162,937	\$24,269,082	\$54,213,764	\$35,967,388	\$69,341,550	\$51,358,370	\$24,359,953	\$26,873,998	\$9,639,076	\$149,279,048	\$48,860,708	
Other Revenue												
MCH Block Grant (Title V)	\$23,484,206	\$141,999	\$2,859,485	\$3,285,869	\$7,023,551	\$2,971,566	\$2,498,800	\$268,249	\$617,435	\$1,636,655	\$2,180,597	
SS Block Grant (Title XX)	\$28,593,275	\$1,598,171	\$1,787,122	\$4,125,028	\$0	\$3,850,142	\$17,002,023	\$0	\$30,789	\$200,000	\$0	
TANF	\$23,460,554	\$966,806	\$11,284,086	\$500,000	\$9,784,223	\$141,141	\$0	\$31,500	\$173,352	\$579,446	\$0	
State government	\$138,760,608	\$6,310,723	\$32,270,289	\$21,192,572	\$48,975,618	\$6,697,213	\$10,387,976	\$660,298	\$2,094,638	\$3,168,060	\$7,003,221	
Local government	\$99,510,026	\$252,767	\$14,525,347	\$7,240,294	\$27,559,760	\$11,260,474	\$13,493,093	\$2,362,963	\$6,843,394	\$3,214,841	\$12,757,093	
Other ^a	\$69,940,773	\$1,299,212	\$9,877,336	\$2,502,317	\$2,822,077	\$11,524,091	\$707,144	\$3,005,966	\$4,265,649	\$32,157,193	\$1,779,788	
Subtotal Other Revenue	\$383,749,442	\$10,569,678	\$72,603,665	\$38,846,080	\$96,165,229	\$36,444,627	\$44,089,036	\$6,328,976	\$14,025,257	\$40,956,195	\$23,720,699	
Total Revenue												
Unadjusted ^d	\$1,140,511,162	\$47,751,876	\$154,476,262	\$103,706,705	\$220,461,849	\$121,011,392	\$101,766,522	\$47,403,229	\$33,804,254	\$227,564,399	\$82,564,674	
Adjusted (1999\$) ^e	\$814,154,225	\$34,087,691	\$110,272,925	\$74,031,062	\$157,376,755	\$86,384,017	\$72,646,061	\$33,838,809	\$24,131,177	\$162,446,912	\$58,938,817	
Total Revenue per User												
Unadjusted ^d	\$229	\$240	\$322	\$186	\$216	\$228	\$209	\$202	\$226	\$206	\$362	

BPHC=Bureau of Primary Health Care. CHIP=Child Health Insurance Program. MCH=Maternal and Child Health. SS=Social Service. TANF=Temporary Assistance for Needy Families.

^a See Table 14 comments in the *Methodological Notes (Appendix C)* for the types of revenue reported as "other" within each revenue category.

^b Prepaid and not prepaid.

^c Includes revenue from Medicaid family planning waivers.

^d Unadjusted total revenue is in actual dollar values.

^e Adjusted total revenue is in constant 1999 dollars (1999\$), based on the consumer price index for medical care, which includes medical care commodities and medical care services (Source: U.S. Department of Labor Bureau of Labor Statistics, <http://www.bls.gov/cpi>).

Exhibit 33. Distribution of Title X project revenues, by revenue source and region: 2007 (Source: FPAR Table 14)

Revenue Source	All Regions	Region									
		I	II	III	IV	V	VI	VII	VIII	IX	X
Federal Grants											
Title X	22%	27%	17%	28%	25%	27%	33%	25%	30%	15%	12%
BPHC	1%	0%†	1%	0%†	0%†	0%†	0%	5%	0%	1%	0%
Other ^a	0%†	0%†	0%	0%†	0%†	0%†	0%	0%	0%†	0%	0%
Subtotal Federal Grants	23%	27%	18%	28%	25%	27%	33%	30%	30%	16%	12%
Payment for Services											
Client collections	8%	19%	6%	13%	5%	12%	4%	25%	21%	5%	5%
Third-party payers ^b											
Medicaid (Title XIX) ^c	31%	16%	24%	16%	25%	22%	20%	23%	2%	60%	49%
Medicare (Title XVIII)	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
State CHIP	0%†	0%†	0%†	0%	0%†	0%†	0%	0%†	0%†	0%	0%
Other public	0%†	0%†	0%†	1%	0%†	0%†	0%†	1%	0%†	0%†	1%
Private	4%	15%	5%	6%	1%	9%	0%†	8%	5%	1%	5%
Subtotal Payment for Services	43%	51%	35%	35%	31%	42%	24%	57%	29%	66%	59%
Other Revenue											
MCH Block Grant (Title V)	2%	0%†	2%	3%	3%	2%	2%	1%	2%	1%	3%
SS Block Grant (Title XX)	3%	3%	1%	4%	0%	3%	17%	0%	0%†	0%†	0%
TANF	2%	2%	7%	0%†	4%	0%†	0%	0%†	1%	0%†	0%
State government	12%	13%	21%	20%	22%	6%	10%	1%	6%	1%	8%
Local government	9%	1%	9%	7%	13%	9%	13%	5%	20%	1%	15%
Other ^a	6%	3%	6%	2%	1%	10%	1%	6%	13%	14%	2%
Subtotal Other Revenue	34%	22%	47%	37%	44%	30%	43%	13%	41%	18%	29%
Total Revenue	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

BPHC=Bureau of Primary Health Care. CHIP=Child Health Insurance Program. MCH=Maternal and Child Health. SS=Social Service. TANF=Temporary Assistance for Needy Families.

^a See Table 14 comments in the *Methodological Notes (Appendix C)* for the types of revenue reported as “other” within each revenue category.

^b Prepaid and not prepaid.

^c Includes revenue from Medicaid family planning waivers.

† Percentage is less than 0.5%.

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Appendix A

Trend Tables

Exhibit A-1a. Number and distribution of all family planning users, by region: 1999–2007

Region	1999	2001	2002	2003	2004	2005	2006	2007
I	187,589	216,098	220,094	212,422	207,450	211,693	212,169	199,010
II	415,848	428,169	449,854	460,798	468,635	468,237	470,148	479,572
III	499,163	533,956	551,759	562,182	571,883	562,173	567,583	557,031
IV	1,025,865	1,043,788	1,077,707	1,065,310	1,052,584	1,051,887	1,051,330	1,018,656
V	532,036	595,982	617,372	607,756	610,058	600,145	582,313	531,679
VI	488,372	529,997	532,268	539,704	547,802	513,130	483,632	486,378
VII	247,863	254,278	260,651	260,034	257,833	243,299	245,133	234,592
VIII	138,469	148,353	143,595	147,730	154,924	157,150	156,482	149,395
IX	709,360	844,781	870,070	878,088	920,543	931,827	973,524	1,102,718
X	197,573	262,315	251,504	278,024	276,073	263,420	251,964	228,207
Total All Users	4,442,138	4,857,717	4,974,874	5,012,048	5,067,785	5,002,961	4,994,278	4,987,238
Female Users	4,315,040	4,658,472	4,772,254	4,784,889	4,823,404	4,740,168	4,721,869	4,691,857
Male Users	127,098	199,245	202,620	227,159	244,381	262,793	272,409	295,381
I	4%	4%	4%	4%	4%	4%	4%	4%
II	9%	9%	9%	9%	9%	9%	9%	10%
III	11%	11%	11%	11%	11%	11%	11%	11%
IV	23%	21%	22%	21%	21%	21%	21%	20%
V	12%	12%	12%	12%	12%	12%	12%	11%
VI	11%	11%	11%	11%	11%	10%	10%	10%
VII	6%	5%	5%	5%	5%	5%	5%	5%
VIII	3%	3%	3%	3%	3%	3%	3%	3%
IX	16%	17%	17%	18%	18%	19%	19%	22%
X	4%	5%	5%	6%	5%	5%	5%	5%
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%
Female Users	97%	96%	96%	95%	95%	95%	95%	94%
Male Users	3%	4%	4%	5%	5%	5%	5%	6%

Exhibit A-1b. Distribution of all family planning users, by region: 1999-2007

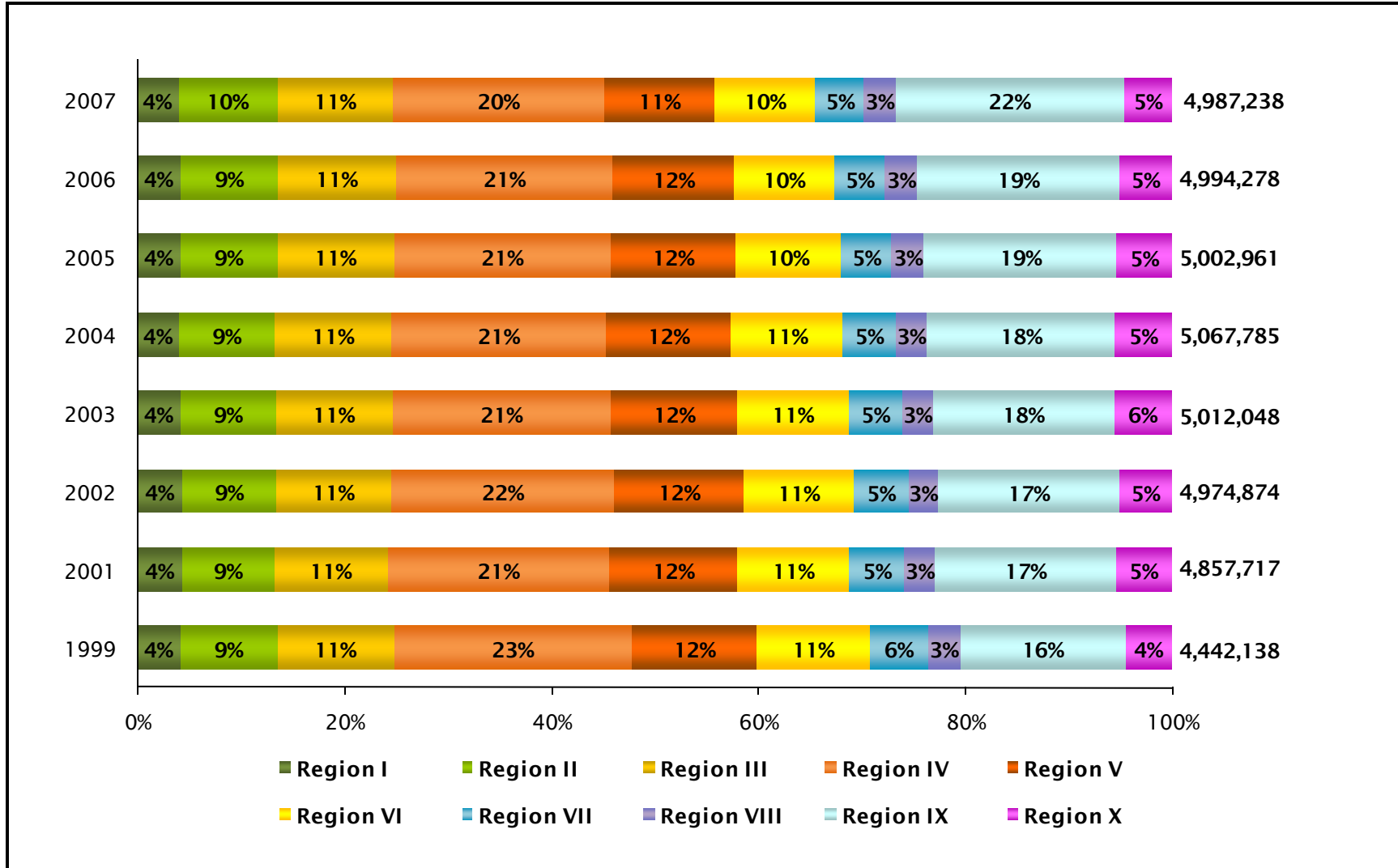


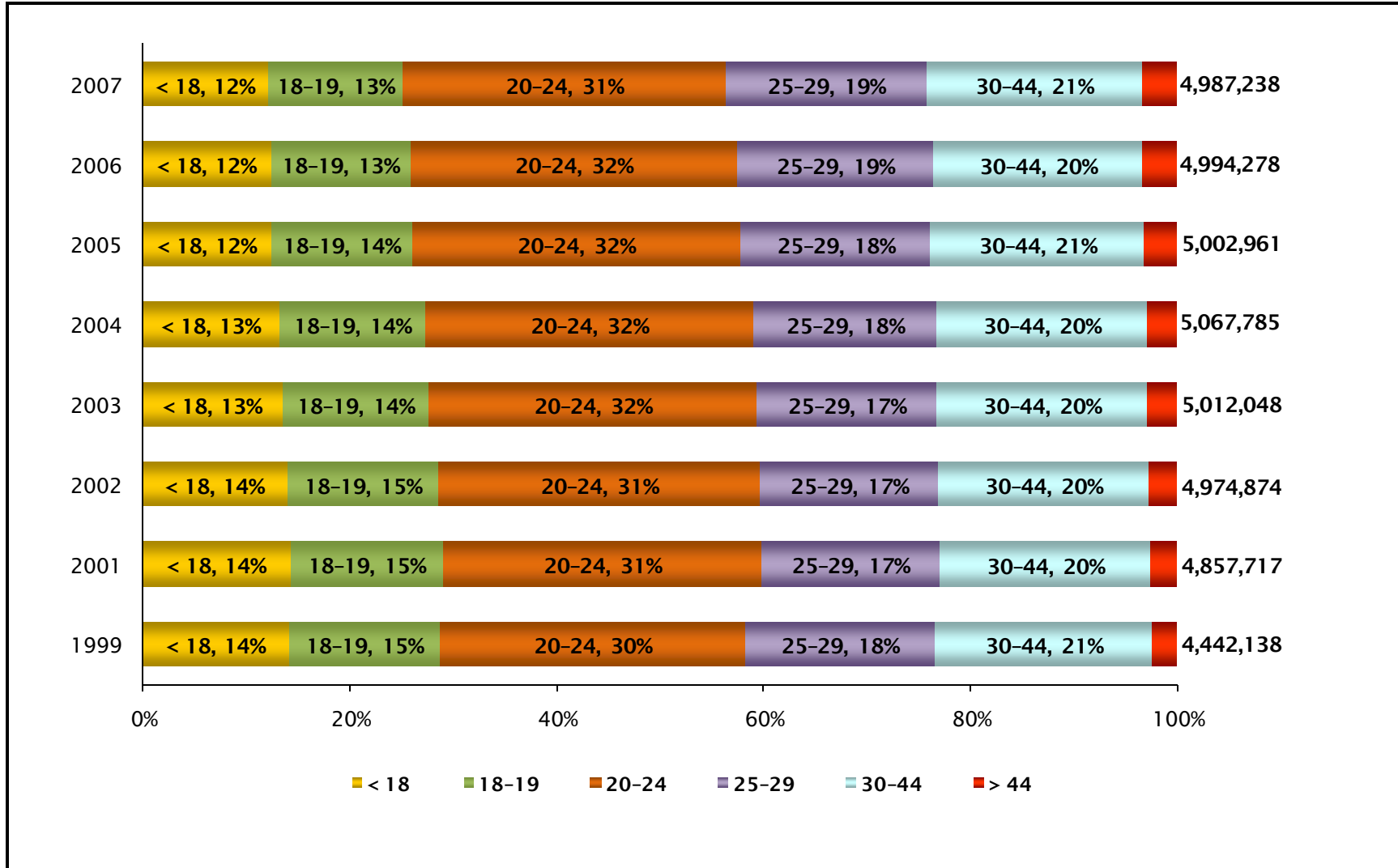
Exhibit A-2a. Number and distribution of all family planning users, by age: 1999–2007

Age Group (Years)	1999	2001	2002	2003	2004	2005	2006	2007
< 15	—	—	—	—	—	70,840	67,627	68,918
< 18	627,496	690,718	693,416	674,639	667,734	--	--	--
15-17	—	—	—	—	—	549,079	549,844	534,054
18-19	648,224	720,939	728,049	711,364	716,399	681,690	672,027	651,784
20-24	1,312,102	1,493,687	1,550,715	1,590,344	1,608,278	1,589,794	1,582,688	1,556,670
25-29	812,323	835,897	851,926	870,394	898,231	921,425	943,009	967,409
30-44	937,691	995,231	1,016,055	1,021,266	1,028,661	--	--	--
30-34	—	—	—	—	—	519,448	512,173	522,673
35-39	—	—	—	—	—	317,900	314,488	323,885
40-44	—	—	—	—	—	193,490	188,507	191,503
> 44	104,302	121,245	134,713	144,041	148,482	159,295	163,915	170,342
Total All Users	4,442,138	4,857,717	4,974,874	5,012,048	5,067,785	5,002,961	4,994,278	4,987,238
< 15	—	—	—	—	—	1%	1%	1%
< 18	14%	14%	14%	13%	13%	--	--	--
15-17	—	—	—	—	—	11%	11%	11%
18-19	15%	15%	15%	14%	14%	14%	13%	13%
20-24	30%	31%	31%	32%	32%	32%	32%	31%
25-29	18%	17%	17%	17%	18%	18%	19%	19%
30-44	21%	20%	20%	20%	20%	--	--	--
30-34	—	—	—	—	—	10%	10%	10%
35-39	—	—	—	—	—	6%	6%	6%
40-44	—	—	—	—	—	4%	4%	4%
> 44	2%	2%	3%	3%	3%	3%	3%	3%
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%

— Data are not available.

-- Disaggregated data are presented in the table.

Exhibit A-2b. Distribution of all family planning users, by age: 1999-2007



Note: Due to rounding, percentages in each year may not sum to 100% and percentages in combined or aggregated categories may not match the sum of the individual percentages that are included in the aggregated categories.

Exhibit A-3a. Number and distribution of all family planning users, by race: 1999-2007

Race	1999	2001	2002	2003	2004	2005	2006	2007
American Indian or Alaska Native	31,372	34,241	34,811	35,320	36,050	35,665	38,098	38,080
Asian	115,564	109,007	137,064	117,122	136,813	124,946	129,155	131,735
Black or African American	986,448	1,049,740	1,041,329	1,028,446	1,027,880	969,301	953,580	958,241
Native Hawaiian or other Pacific Islander ^a	—	46,330	51,672	124,055	58,881	58,946	44,708	43,360
White	2,896,882	3,079,264	3,137,887	3,100,808	3,225,150	3,183,116	3,239,675	3,125,435
More than one race	—	—	—	—	—	127,543	122,583	132,911
Unknown/not reported	411,872	539,135	572,111	606,297	583,011	503,444	466,479	557,476
Total All Users	4,442,138	4,857,717	4,974,874	5,012,048	5,067,785	5,002,961	4,994,278	4,987,238
American Indian or Alaska Native	1%	1%	1%	1%	1%	1%	1%	1%
Asian	3%	2%	3%	2%	3%	2%	3%	3%
Black or African American	22%		21%	21%	20%	19%	19%	19%
Native Hawaiian or other Pacific Islander ^a	—	1%	1%	2%	1%	1%	1%	1%
White	65%	63%	63%	62%	64%	64%	65%	63%
More than one race	— 22%	—	—	—	—	3%	2%	3%
Unknown/not reported	9%	11%		12%	12%	10%	9%	11%
Total All Users	100%	100%	100%					

^a In 1999, data for Pacific Islanders were combined with data for the Asian race category.

— Data are not available.

12%

100%

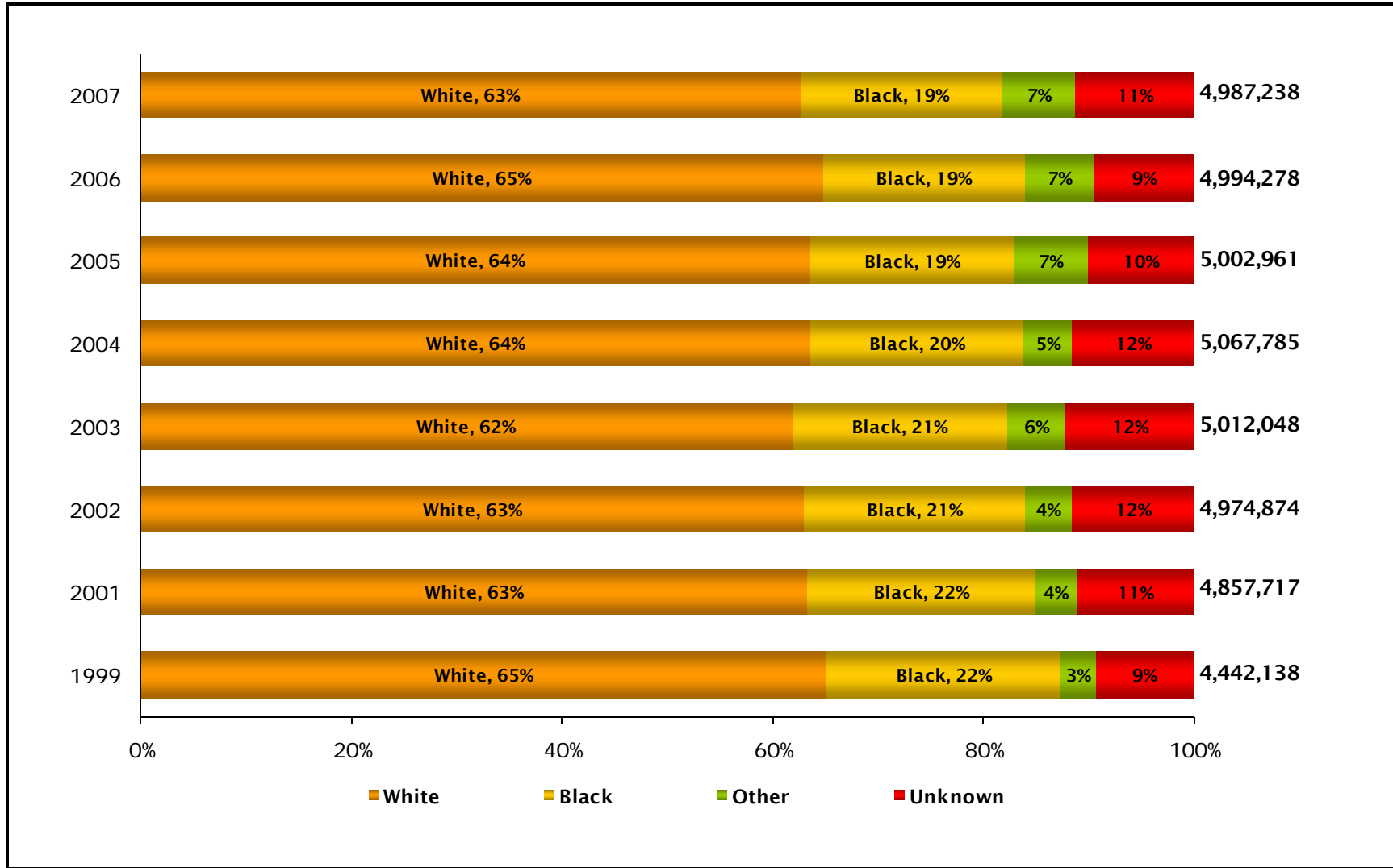
100%

100%

100%

100%

Exhibit A-3b. Distribution of all family planning users, by race: 1999–2007



Note: In 1999, data for Pacific Islanders were combined with data for the Asian race category. Due to rounding, percentages in each year may not sum to 100% and percentages in combined or aggregated categories may not match the sum of the individual percentages that are included in the aggregated categories.

Exhibit A-4a. Number and distribution of all family planning users, by Hispanic or Latino ethnicity: 1999-2007

Ethnicity	1999	2001	2002	2003	2004	2005	2006	2007
Hispanic or Latino (all races)	772,129	982,314	1,044,045	1,081,207	1,159,637	1,181,093	1,223,732	1,303,402
Not Hispanic or Latino (all races)	3,472,143	3,735,945	3,825,440	3,806,566	3,780,396	3,628,142	3,670,894	3,611,497
Unknown/not reported	197,866	139,458	105,389	124,275	127,752	193,726	99,652	72,339
Total All Users	4,442,138	4,857,717	4,974,874	5,012,048	5,067,785	5,002,961	4,994,278	4,987,238
Hispanic or Latino (all races)	17%	20%	21%	22%	23%	24%	25%	26%
Not Hispanic or Latino (all races)	78%	77%	77%	76%	75%	73%	74%	72%
Unknown/not reported	4%	3%	2%	2%	3%	4%	2%	1%
Total All Users	100%	100%	100%	100%	100%	100%	100%	100%

Exhibit A-4b. Distribution of all family planning users, by Hispanic or Latino ethnicity: 1999-2007

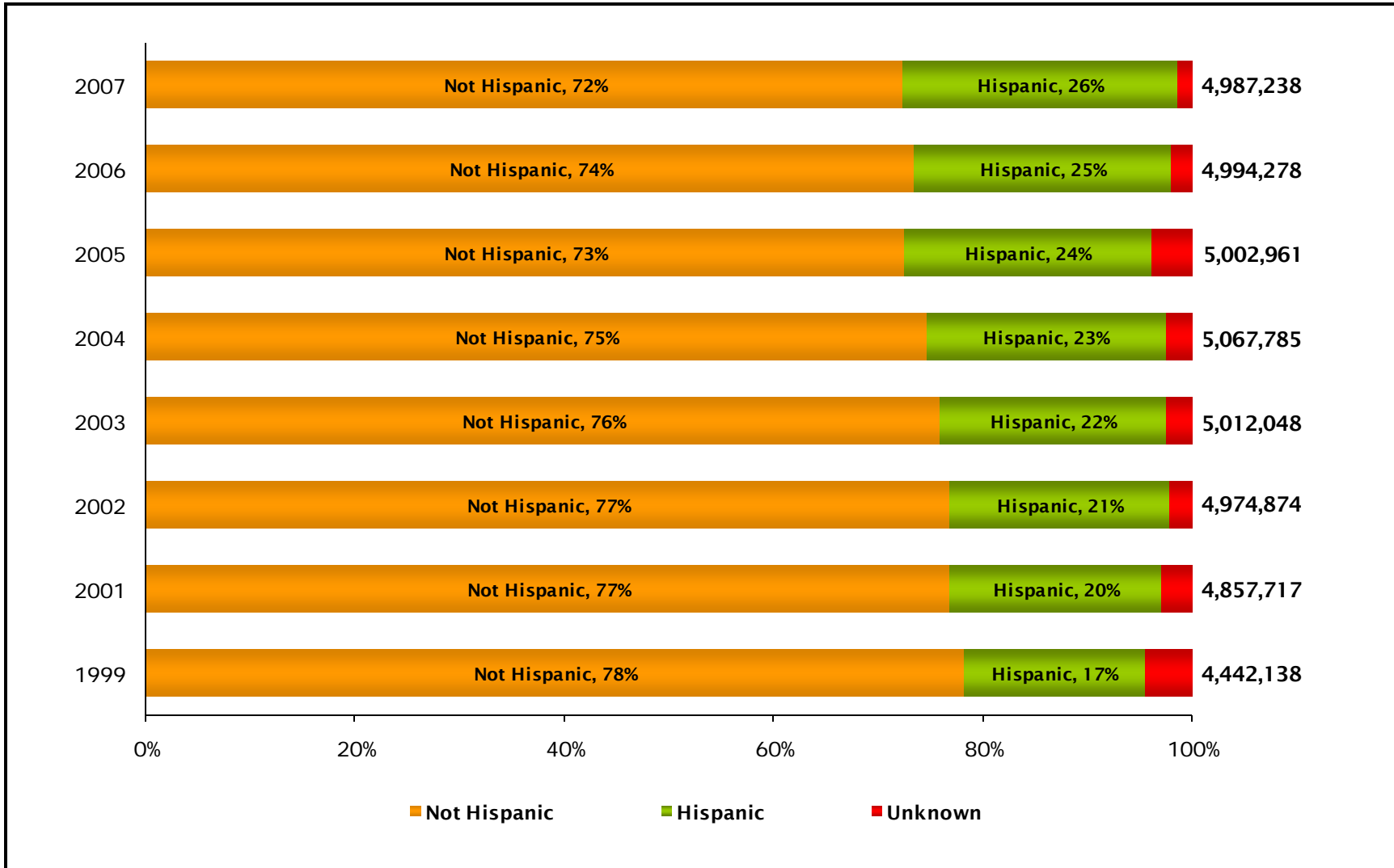


Exhibit A-5a. Number and distribution of all family planning users, by race and Hispanic or Latino ethnicity: 1999-2007

Race/Ethnicity Trend	1999	2001	2002	2003	2004	2005	2006	2007
Not Hispanic (NH), all races	3,472,143	3,735,945	3,825,440	3,806,566	3,780,396	--	--	--
NH Asian	—	—	—	—	—	118,499	123,192	126,320
NH Black/African American	—	—	—	—	—	929,066	918,983	926,564
NH White	—	—	—	—	—	2,366,762	2,400,897	2,324,430
NH other and unknown race	—	—	—	—	—	213,815	227,822	234,183
Hispanic or Latino, all races	772,129	982,314	1,044,045	1,081,207	1,159,637	1,181,093	1,223,732	1,303,402
Ethnicity unknown	197,866	139,458	105,389	124,275	127,752	193,726	99,652	72,339
Total All Users	4,442,138	4,857,717	4,974,874	5,012,048	5,067,785	5,002,961	4,994,278	4,987,238
Not Hispanic (NH), all races	78%	77%	77%	76%	75%	--	--	--
NH Asian	—	—	—	—	—	2%	2%	3%
NH Black/African American	—	—	—	—	—	19%	18%	19%
NH White	—	—	—	—	—	47%	48%	47%
NH other and unknown race	—	—	—	—	—	4%	5%	5%
Hispanic or Latino, all races	17%	20%	21%	22%	23%	24%	25%	26%
Ethnicity unknown	4%	3%	2%	2%	3%	4%	2%	1%
Total All Users	100%	100%	100%		100%		100%	

NH=Not Hispanic or Latino.

— Data are not available.

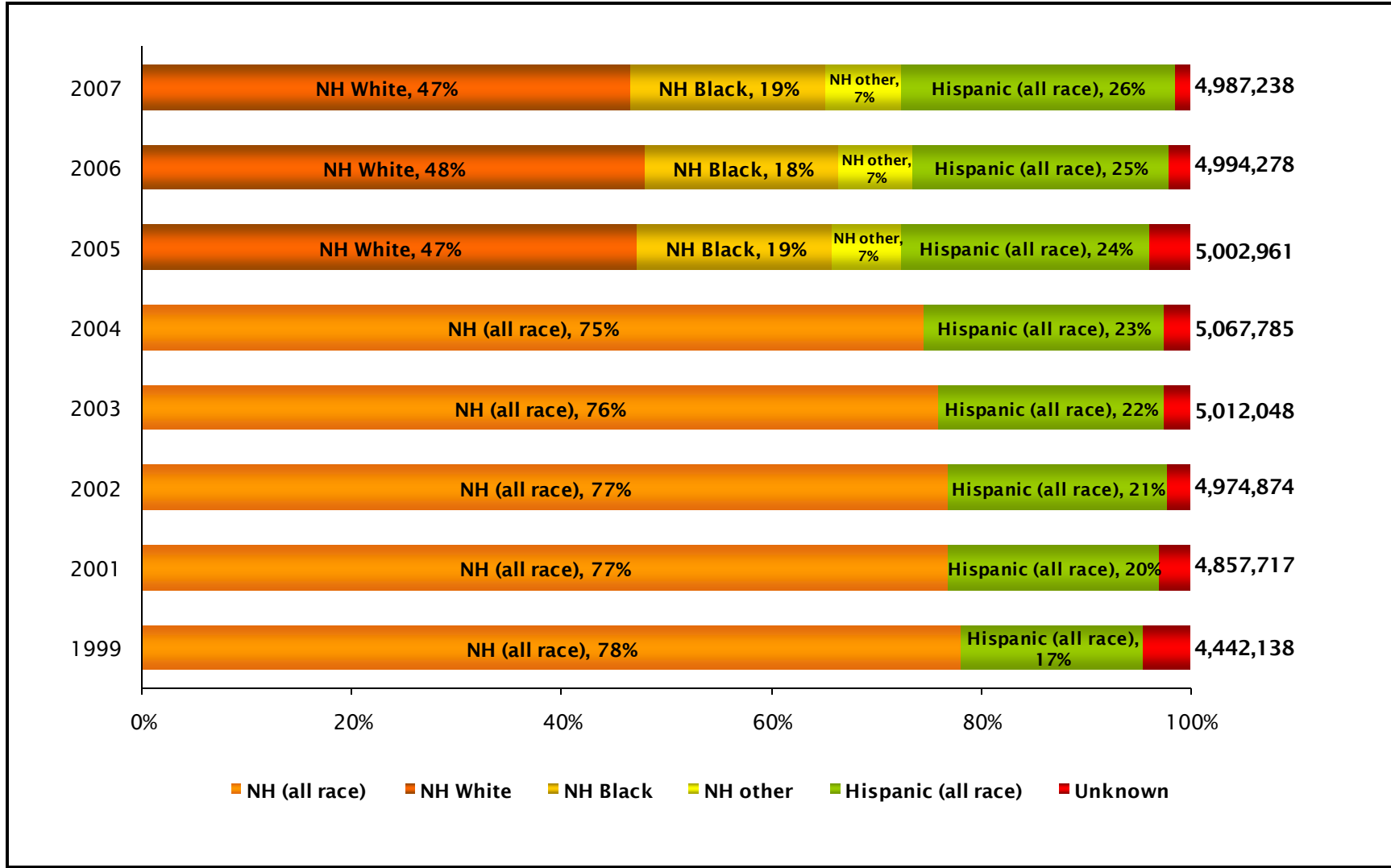
-- Disaggregated data by race are presented in the table.

100%

100%

100%

Exhibit A-5b. Distribution of all family planning users, by race and Hispanic or Latino ethnicity: 1999–2007



NH=Not Hispanic or Latino.

Note: Due to rounding, percentages in each year may not sum to 100% and percentages in combined or aggregated categories may not match the sum of the individual percentages that are included in the aggregated categories.

Exhibit A-6a. Number and distribution of all family planning users, by income level: 1999-2007

Income Level ^a	1999	2001	2002	2003	2004	2005	2006	2007
≤100%	2,886,684	3,177,934	3,256,554	3,374,895	3,461,649	3,316,699	3,353,129	3,455,335
101%-150%	803,360	832,137	872,911	854,878	838,704	879,666	846,873	820,870
151%-200%	328,084	328,019	335,792	318,001	312,393	324,358	311,958	303,992
>200%	346,735	422,460	408,346	370,790	355,025	--	--	--
201%-250%	—	—	—	—	—	129,097	127,902	121,473
>250%	—	—	—	—	—	242,241	262,501	212,849
Unknown/not reported	77,275	97,167	101,271	93,484	100,014	110,900	91,915	72,719
Total All Users	4,442,138	4,857,717	4,974,874	5,012,048	5,067,785	5,002,961	4,994,278	4,987,238
≤100%	65%	65%	65%	67%	68%	66%	67%	69%
101%-150%	18%	17%	18%	17%	17%	18%	17%	16%
151%-200%	7%	7%	7%	6%	6%	6%	6%	6%
>200%	8%	9%	8%	7%	7%	--	--	--
201%-250%	—	—	—	—	—	3%	3%	2%
>250%	—	—	—	—	—	5%	5%	4%
Unknown/not reported	2%	2%	2%	2%	2%	2%	2%	1%
Total All Users	100%	100%	100%		100%		100%	

^a Title X-funded agencies calculate and report user income as a percentage of the poverty guidelines issued by the U.S. Department of Health and Human Services (HHS). Each year, HHS announces updates to its poverty guidelines in the *Federal Register* and on the HHS Web site <http://aspe.hhs.gov/poverty/>.

— Data are not available.

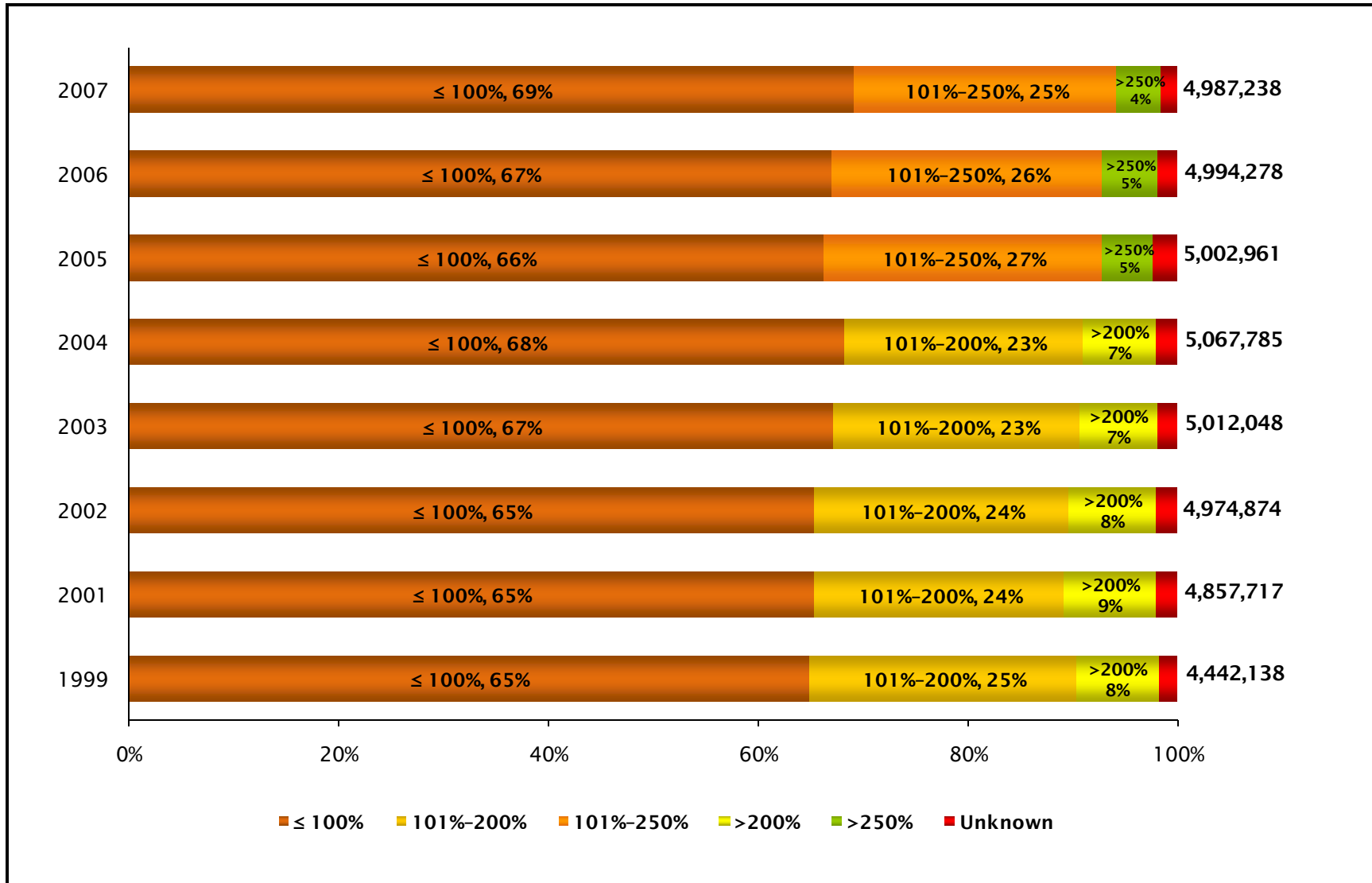
-- Disaggregated data are presented in the table.

100%

100%

100%

Exhibit A-6b. Distribution of all family planning users, by income level: 1999-2007



Note: Due to rounding, percentages in each year may not sum to 100% and percentages in combined or aggregated categories may not match the sum of the individual percentages that are included in the aggregated categories.

Exhibit A-7a. Number of female family planning users, by primary contraceptive method: 1999-2007

Primary Method	1999	2001	2002	2003	2004	2005	2006	2007
Sterilization ^a	111,609	117,787	115,742	110,513	105,103	95,264	89,428	89,447
Intrauterine device	48,015	63,045	68,802	72,378	77,773	88,342	110,338	138,714
Hormonal implant	22,881	12,390	12,791	13,180	5,602	3,395	2,506	7,300
Hormonal injection ^b		799,521	809,170	765,266	740,028	602,721	571,588	591,861
Oral contraceptive	1,981,664	2,111,124	2,111,088	1,994,310	1,974,050	1,852,654	1,859,542	1,826,518
Hormonal patch ^c		—	—	—	—	286,214	170,815	128,324
Vaginal ring ^c		—	—	—	—	65,320	98,689	139,656
Cervical cap or diaphragm	--	--	--	--	--	5,477	4,753	4,087
Cervical cap	581	753	732	623	2,034	—	—	—
Diaphragm	14,235	9,689	8,289	7,240	9,683	—	—	—
Contraceptive sponge ^c		—	—	—	—	2,826	1,076	1,827
Female condom ^c		—	—	—	—	8,862	6,031	3,925
Spermicide	78,762	65,309	45,977	33,483	19,861	23,226	22,075	16,882
Natural method ^d		17,573	18,265	22,972	25,906	—	—	—
Fertility awareness method ^d		—	—	—	—	9,702	9,446	8,784
Abstinence ^c		—	—	—	—	44,939	49,022	53,987
Other method ^e		88,579	133,529	293,383	313,688	104,779	133,099	123,844
Method unknown	162,056	175,780	106,785	128,432	146,417	195,245	139,537	142,145
Rely on Male Method								
Vasectomy ^a		—	—	—	—	7,060	6,605	6,546
Male condom	527,248	616,696	679,656	698,248	737,169	686,992	747,323	716,646
Total Reporting Primary Method	3,746,113	4,078,246	4,110,826	4,140,028	4,157,314	4,083,018	4,021,873	4,000,493
No Method								
Pregnant/seeking pregnancy	261,399	244,706	273,051	265,190	287,485	358,492	373,111	383,303
Other reason —	307,528	335,520	388,377	379,671	378,605	298,658	326,885	308,061
Total Reporting No Primary Method	568,927	580,226	661,428	644,861	666,090	657,150	699,996	691,364
Total Female Users	4,315,040	4,658,472	4,772,254	4,784,889	4,823,404	4,740,168	4,721,869	4,691,857
Percentage Using a Method	87%	88%	86%	87%	86%	86%	85%	85%
Percentage Not Using a Method	13%	12%	14%	13%	14%	14%	15%	15%

^a Sterilization figures for 1999-2004 include both male and female sterilization. Beginning in 2005, data for female and male (vasectomy) sterilization were reported separately.

^b For 2005-2007, includes both 1- and 3-month hormonal injections.

^c Prior to 2005, grantees reported these methods under the other method category.

^d For 1999-2004, the natural method category included only safe period by temperature or cervical mucus test. In 2005, the natural method category was renamed fertility awareness method (FAM), which includes rhythm/calendar, Standard Days™, Basal Body Temperature, Cervical Mucus, and Sympto-Thermal methods. Postpartum women who rely on the lactational amenorrhea method (LAM) are also included in the FAM category of primary methods.

^e For 1999-2004, "other" methods included withdrawal, rhythm/calendar, sponge, vaginal suppositories, douching, abstinence, and other methods not included in FPAR Table 3 of the 2001 version. Beginning in 2005, "other" methods included withdrawal and other methods not listed in FPAR Table 7 of the 2005 FPAR form.

— Data are not available. -- Disaggregated data are presented in the table. † Percentage is less than 0.5%.

Exhibit A-7b. Distribution of female family planning users who reported use of a method, by primary contraceptive method: 1999-2007

Primary Method	1999	2001	2002	2003	2004	2005	2006	2007
Sterilization ^a	3%	3%	3%	3%	3%	2%	2%	2%
Intrauterine device	1%	2%	2%	2%	2%	2%	3%	3%
Hormonal implant	1%	0%†	0%†	0%†	0%†	0%†	0%†	0%†
Hormonal injection ^b	19%	20%	20%	18%	18%	15%	14%	15%
Oral contraceptive	53%	52%		48%	47%	45%	46%	46%
Hormonal patch ^c	0%	0%	0%	0%	0%	7%	4%	3%
Vaginal ring ^c	0%	0%	0%	0%	0%	2%	2%	3%
Cervical cap or diaphragm	0%	0%	0%	0%	0%	0%†	0%†	0%†
Cervical cap	0%†	0%† ^{51%}	0%†	0%†	0%†	—	—	—
Diaphragm	0%†	0%†	0%†	0%†	0%†	—	—	—
Contraceptive sponge ^c	—	—	—	—	—	0%†	0%†	0%†
Female condom ^c	—	—	—	—	—	0%†	0%†	0%†
Spermicide	2%	2%	1%		0%†	1%	1%	0%†
Natural method ^d	0%†	0%†	0%†	1%	1%	—	—	—
Fertility awareness method ^d	—	—	—	—	—	0%†	0%†	0%†
Abstinence ^c	—	—	—	—	—	1%	1%	1%
Other method ^e	2%	2%	3% ^{1%}	7%	8%	3%	3%	3%
Method unknown	4%	4%	3%	3%	4%	5%	3%	4%
Rely on Male Method								
Vasectomy ^a	—	—	—	—	—	0%†	0%†	0%†
Male condom	14%	15%	17%		18%	17%	19%	18%
Total Female Users Reporting Primary Method	100%	100%	100%	100%	100%	100%	100%	100%

^a Sterilization figures for 1999-2004 include both male and female sterilization. Beginning in 2005, data for female and male (vasectomy) sterilization were reported separately.

17%

^b For 2005-2007, includes both 1- and 3-month hormonal injections.

^c Prior to 2005, grantees reported these methods under the other method category.

^d For 1999-2004, the natural method category included only safe period by temperature or cervical mucus test. In 2005, the natural method category was renamed fertility awareness method (FAM), which includes rhythm/calendar, Standard Days™, Basal Body Temperature, Cervical Mucus, and Sympto-Thermal methods. Postpartum women who rely on the lactational amenorrhea method (LAM) are also included in the FAM category of primary methods.

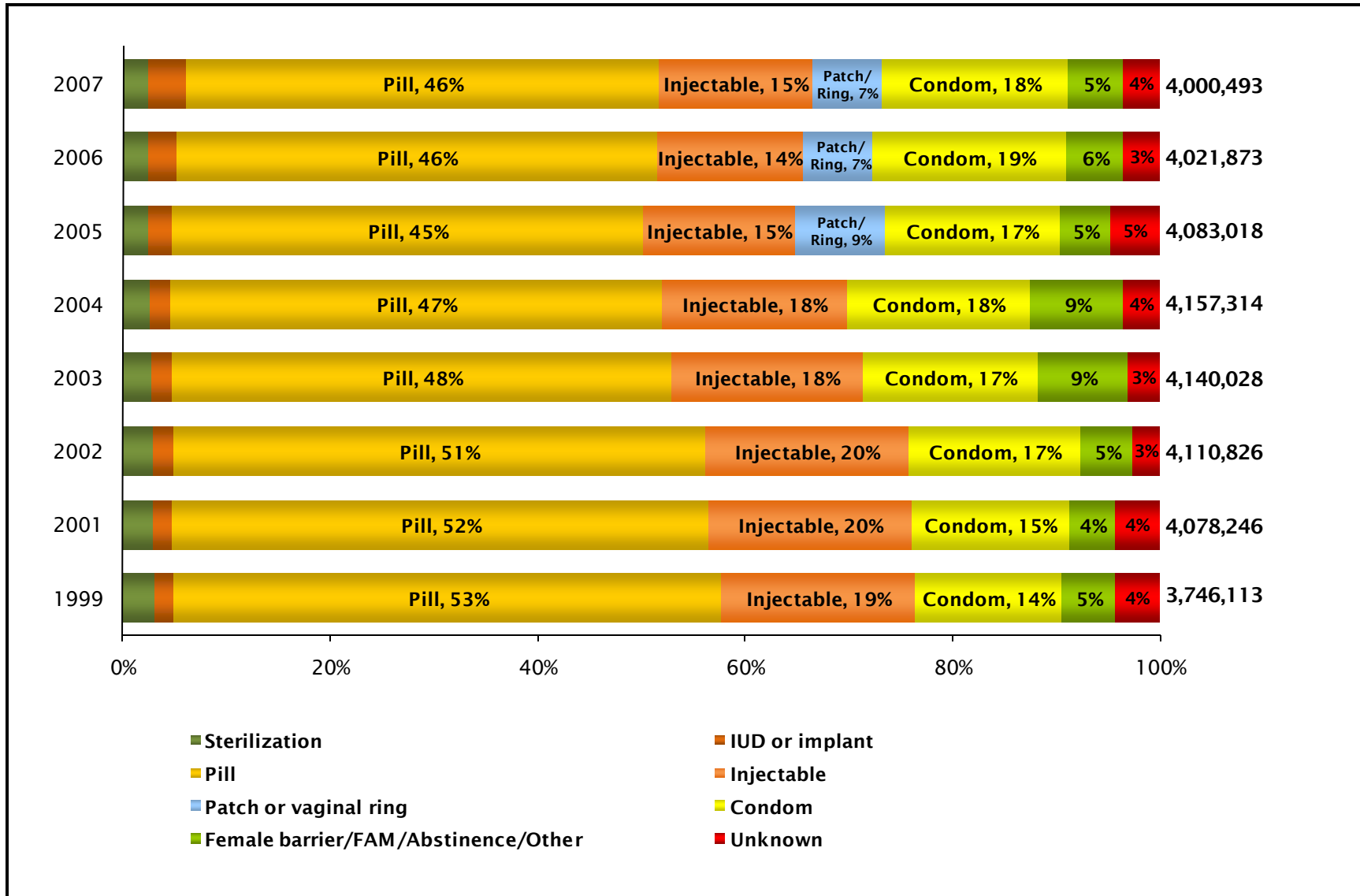
^e For 1999-2004, "other" methods included withdrawal, rhythm/calendar, sponge, vaginal suppositories, douching, abstinence, and other methods not included in FPAR Table 3 of the 2001 version. Beginning in 2005, "other" methods included withdrawal and other methods not listed in FPAR Table 7 of the 2005 FPAR form.

— Data are not available.

-- Disaggregated data are presented in the table.

† Percentage is less than 0.5%.

Exhibit A-7c. Distribution of female family planning users who reported use of a method, by primary contraceptive method: 1999-2007



Note: Due to rounding, percentages in each year may not sum to 100% and percentages in combined or aggregated categories may not match the sum of the individual percentages that are included in the aggregated categories.

Exhibit A-8a. Number and percentage of female users who received a Pap test (2005-2007), number of Pap tests performed (1999-2007), and percentage of Pap tests performed with an atypical squamous cells (ASC) or higher result

	1999	2001	2002	2003	2004	2005	2006	2007
Number of female users who received a Pap test	—	—	—	—	—	2,447,498	2,326,153	2,272,571
Percentage of female users who received a Pap test	—	—	—	—	—	52%	49%	48%
Number of Pap tests performed	2,970,924	3,047,310	2,955,034	2,852,438	2,782,641	2,644,413	2,477,209	2,470,674
Percentage of tests with ≥ ASC result	—	—	—	—	—	9%	10%	10%

ASC=atypical squamous cells.

— Data are not available.

Exhibit A-8b. Number and percentage of female users who received a Pap test: 2005-2007

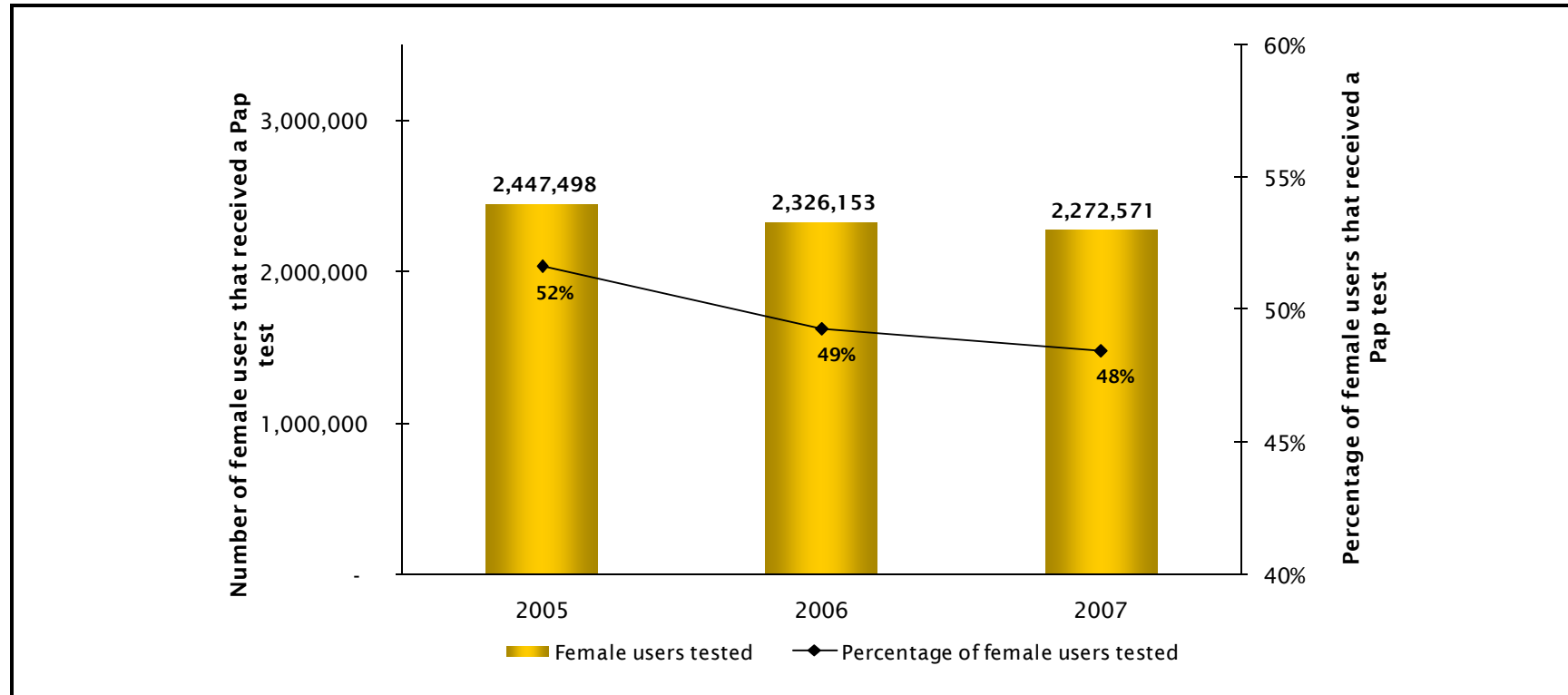


Exhibit A-9a. Number and percentage of female users younger than 25 years tested for chlamydia: 2005-2007

	2005	2006	2007
Number of female users <25 years tested for chlamydia	1,375,787	1,387,222	1,385,623
Percentage of female users <25 years tested for chlamydia	50%	51%	52%

Exhibit A-9b. Number and percentage of female users younger than 25 years tested for chlamydia: 2005-2007

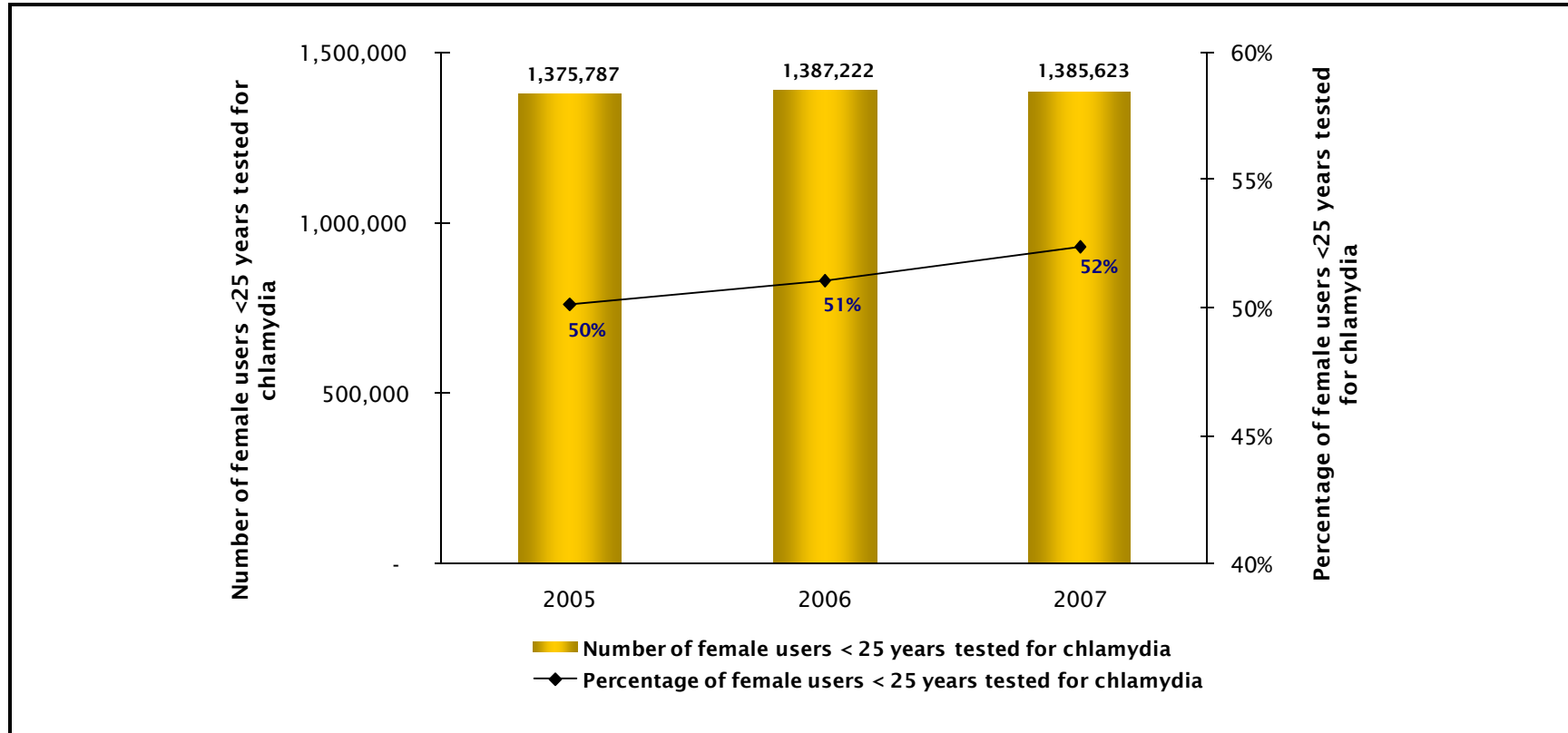


Exhibit A-10a. Actual (unadjusted) and adjusted (constant 1999\$ and 1981\$) total and Title X revenue: 1999-2007

Revenue	1999	2001	2002	2003	2004	2005	2006	2007	1999-2007 Change
Total Revenue									
Unadjusted (actual)	\$737,980,611	\$830,967,862	\$899,339,792	\$927,081,651	\$982,537,801	\$1,004,633,020	\$1,081,431,527	\$1,140,511,162	55%
Adjusted, 1999\$	\$737,980,611	\$763,345,111	\$789,126,582	\$781,981,359	\$794,014,747	\$778,963,598	\$806,087,866	\$814,154,225	10%
Adjusted, 1981\$	\$244,128,462	\$252,519,193	\$261,047,860	\$258,684,177	\$262,664,894	\$257,685,883	\$266,658,755	\$269,327,156	10%
Title X Revenue									
Unadjusted (actual)	\$183,163,632	\$226,582,287	\$231,549,999	\$245,714,562	\$252,141,527	\$249,562,677	\$262,983,478	\$255,337,864	39%
Adjusted, 1999\$	\$183,163,632	\$208,143,406	\$203,173,774	\$207,257,049	\$203,762,227	\$193,503,734	\$196,025,162	\$182,273,008	0%†
Adjusted, 1981\$	\$60,591,640	\$68,855,101	\$67,211,117	\$68,561,889	\$67,405,781	\$64,012,209	\$64,846,313	\$60,297,017	0%†

Note: Unadjusted revenue is in actual dollar values. Adjusted revenue is in constant 1999 dollars (1999\$) or 1981 dollars (1981\$), based on the consumer price index for medical care, which includes medical care commodities and medical care services (Source: U.S. Department of Labor Bureau of Labor Statistics, <http://www.bls.gov/cpi>).

† Percentage is less than 0.5%.

Exhibit A-10b. Actual (unadjusted) and adjusted (constant 1999\$ and 1981\$) total revenue: 1999-2007

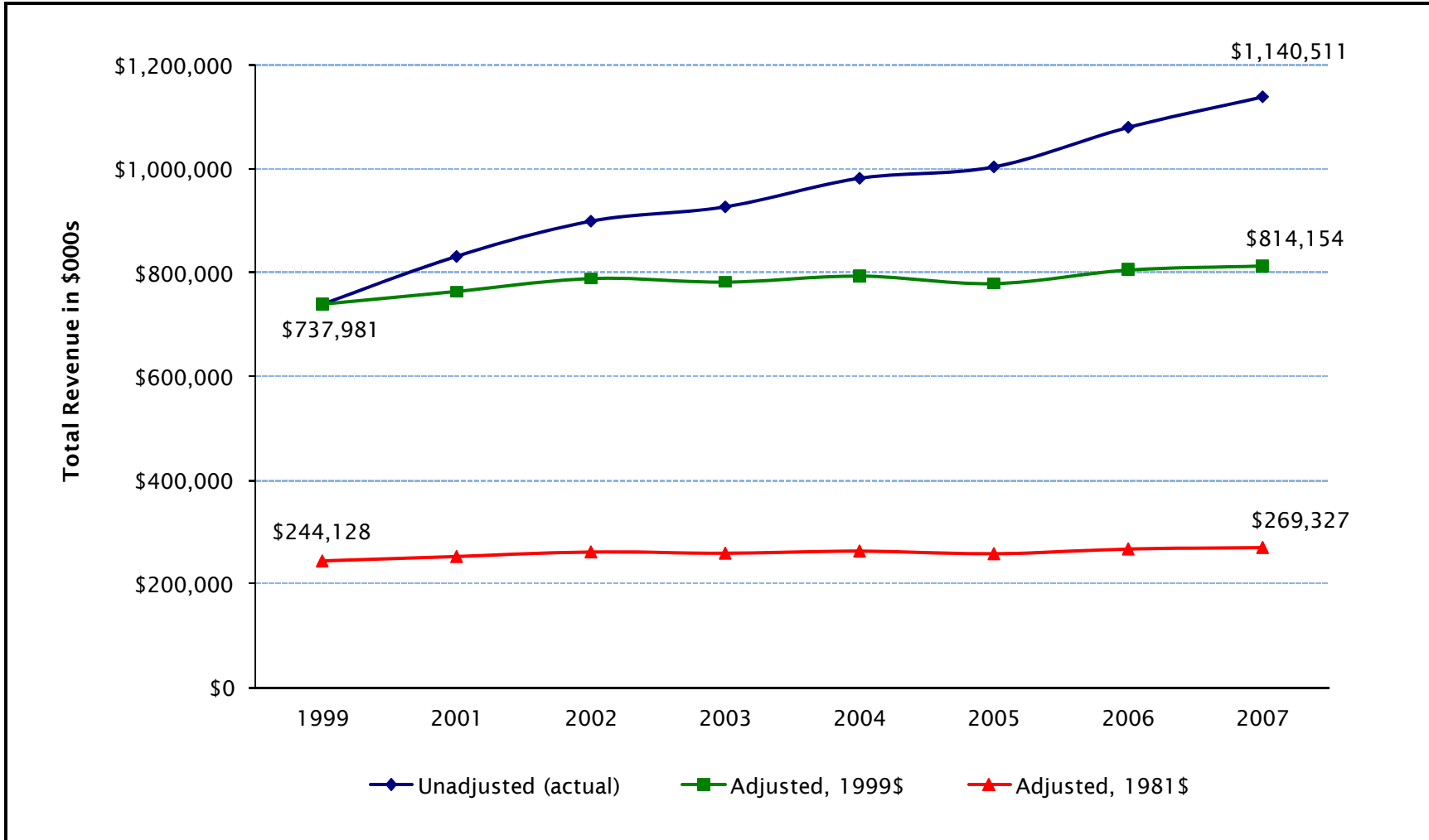


Exhibit A-10c. Actual (unadjusted) and adjusted (constant 1999\$ and 1981\$) Title X revenue: 1999-2007

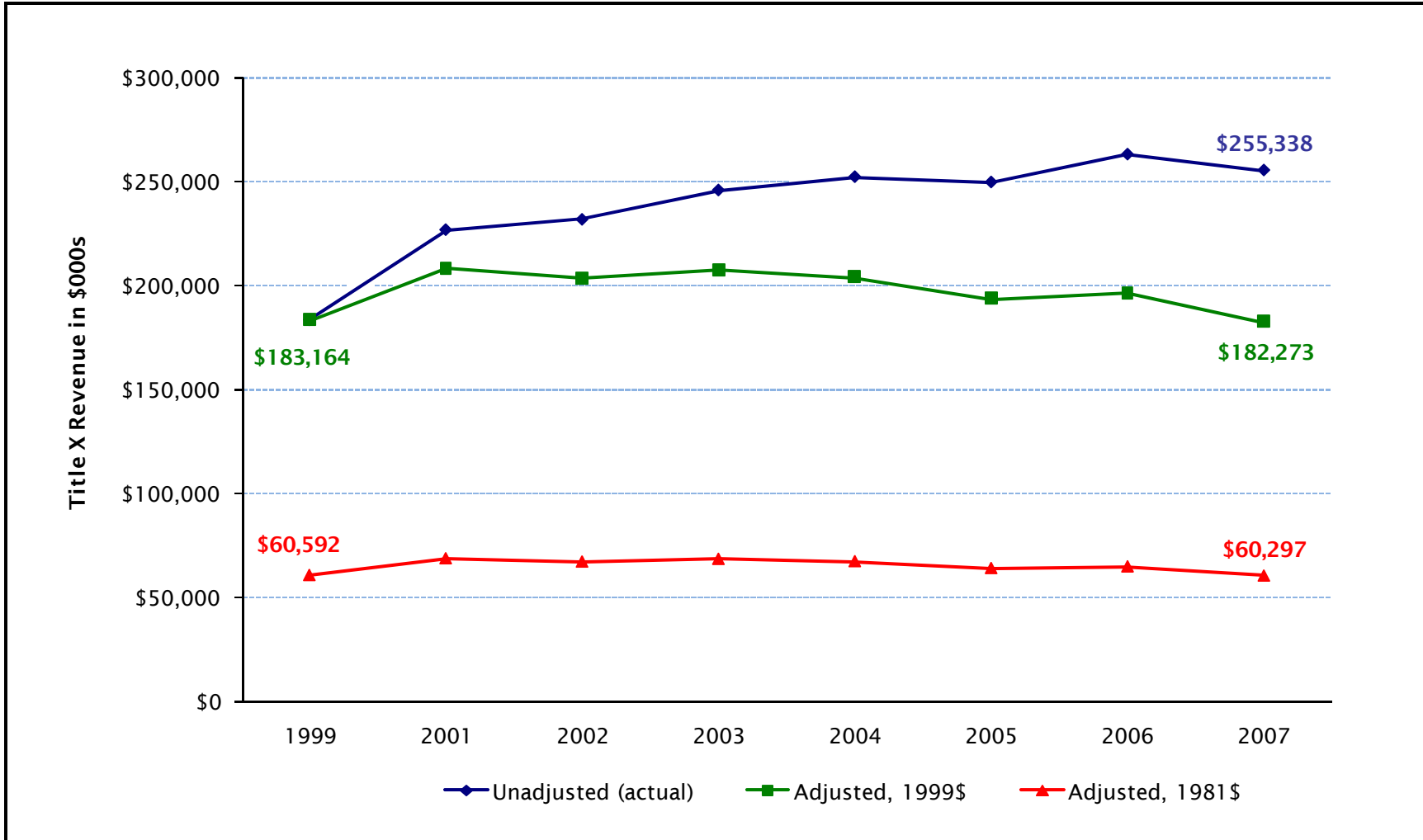


Exhibit A-11a. Amount of Title X project revenue, by revenue source: 1999-2007

Revenue Sources	1999	2001	2002	2003	2004	2005	2006	2007
Federal Grants								
Title X	\$183,163,632	\$226,582,287	\$231,549,999	\$245,714,562	\$252,141,527	\$249,562,677	\$262,983,478	\$255,337,864
BPHC	2,960,179	1,208,964	2,257,586	843,273	3,959,649	6,172,992	5,847,921	7,177,359
WIC	5,109,103	4,189,226	3,638,969	2,486,260	3,344,085	—	—	—
Other ^a	16,592,272	22,883,785	21,371,845	18,107,490	18,408,627	1,531,956	92,411	83,560
Subtotal Federal Grants	\$207,825,186	\$254,864,262	\$258,818,399	\$267,151,585	\$277,853,888	\$257,267,625	\$268,923,810	\$262,598,783
Payment for Services								
Client collections	97,376,797	95,257,186	96,842,560	97,561,767	99,774,741	101,353,959	102,527,805	94,273,992
Third-party payers ^b								
Medicaid (Title XIX) ^c	100,361,553	133,121,016	148,746,779	156,182,638	277,174,817	311,066,271	320,154,915	349,672,196
Medicare (Title XVIII)	468,189	127,709	329,980	585,762	755,938	850,289	695,725	523,170
State CHIP	—	—	—	—	—	159,966	302,282	247,539
Other public	—	—	—	—	—	2,137,736	3,173,806	3,042,991
Other third-party	10,345,386	17,893,603	20,413,354	12,035,788	15,231,967	--	--	--
Private	11,721,540	15,828,979	21,129,413	22,717,290	23,923,861	31,794,914	37,263,692	46,403,049
Subtotal Payment for Services	\$220,273,465	\$262,228,493	\$287,462,086	\$289,083,245	\$416,861,324	\$447,363,135	\$464,118,225	\$494,162,937
Other Revenue								
MCH Block Grant (Title V)	32,055,309	23,931,198	28,604,028	30,827,138	32,992,292	24,384,126	22,806,213	23,484,206
SS Block Grant (Title XX)	34,049,367	31,284,545	27,626,015	32,913,637	30,835,001	27,232,575	28,443,123	28,593,275
TANF	—	—	—	—	—	16,986,542	10,521,097	23,460,554
State government	169,673,542	171,766,076	193,508,723	211,814,774	125,848,881	115,558,888	133,618,734	138,760,608
Local government	44,383,037	52,744,977	61,587,837	57,939,837	50,028,918	56,251,710	93,388,186	99,510,026
Other ^a	29,720,705	34,148,311	41,732,704	37,351,435	48,117,497	59,588,419	59,612,139	69,940,773
Subtotal Other Revenue	\$309,881,960	\$313,875,107	\$353,059,307	\$370,846,821	\$287,822,589	\$300,002,260	\$348,389,492	\$383,749,442
Unadjusted^d Total Revenue	\$737,980,611	\$830,967,862	\$899,339,792	\$927,081,651	\$982,537,801	\$1,004,633,020	\$1,081,431,527	\$1,140,511,162
Adjusted^e Total Revenue (1999\$)	\$737,980,611	\$763,345,111	\$789,126,582	\$781,981,359	\$794,014,747	\$778,963,598	\$806,087,866	\$814,154,225
Adjusted^e Total Revenue (1981\$)	\$244,128,462	\$252,519,193	\$261,047,860	\$258,684,177	\$262,664,894	\$257,685,883	\$266,658,755	\$269,327,156

BPHC=Bureau of Primary Health Care. CHIP=Child Health Insurance Program. MCH=Maternal and Child Health. SS=Social Service. TANF=Temporary Assistance for Needy Families. WIC=Special Supplemental Nutrition Program for Women, Infants, and Children.

^a See Table 14 comments in the *Methodological Notes (Appendix C)* for the types of revenue reported as "other" within each revenue category.

^b Prepaid and not prepaid.

^c Includes revenue from Medicaid family planning waivers.

^d Unadjusted total revenue is in actual dollar values.

^e Adjusted total revenue is in constant 1999 dollars (1999\$) or 1981 dollars (1981\$), based on the consumer price index for medical care, which includes medical care commodities and medical care services (Source: U.S. Department of Labor Bureau of Labor Statistics, <http://www.bls.gov/cpi>).

— Data are not available. -- Disaggregated data are presented in the table. † Percentage is less than 0.5%.

Exhibit A-11b. Distribution of Title X project revenue, by revenue source: 1999-2007

Revenue Sources	1999	2001	2002	2003	2004	2005	2006	2007
Federal Grants								
Title X	25%	27%	26%	27%	26%	25%	24%	22%
BPHC	0%†	0%†	0%†	0%†	0%†	1%	1%	1%
WIC	1%	1%	0%†	0%†	0%†	0%	0%	0%
Other ^a	2%	3%	2%	2%	2%	0%†	0%†	0%†
Subtotal Federal Grants	28%	31%	29%	29%	28%	26%	25%	23%
Payment for Services								
Client collections	13%	11%	11%	11%	10%	10%	9%	8%
Third-party payers ^b								
Medicaid (Title XIX) ^c	14%	16%	17%	17%	28%	31%	30%	31%
Medicare (Title XVIII)	0%†	0%†	0%†	0%†	0%†	0%†	0%†	0%†
State CHIP	—	—	—	—	—	0%†	0%†	0%†
Other public	—	—	—	—	—	0%†	0%†	0%†
Other third-party	1%	2%	2%	1%	—	--	--	--
Private	2%	2%	2%	2%	—	—	3%	—
Subtotal Payment for Services	30%	32%	32%	31%	42%		43%	
Other Revenue								
MCH Block Grant (Title V)	4%	3%	3%	3% ^{2%}	3%	2%	2%	2%
SS Block Grant (Title XX)	5%	4%	3%	4% ^{2%}	3% ^{3%}	—	3% ^{4%}	4% ^{3%}
TANF	—	—	—	—	—	2%	1%	2%
State government	23%	21%	22%	23%	13%	12%	12%	12%
Local government	6%	—	—	—	—	—	9%	—
Other ^a	4%	4%	5%	4%	5% ^{3%}	—	6% ^{3%}	—
Subtotal Other Revenue	42%	38%	39%	40%	29%		32%	
Unadjusted^d Total Revenue	100%	100%	100%	100%	100%	100%	100%	100%

BPHC=Bureau of Primary Health Care. **CHIP**=Child Health Insurance Program. **MCH**=Maternal and Child Health. **SS**=Social Service. **TANF**=Temporary Assistance for Needy Families. **WIC**=Special Supplemental Nutrition Program for Women, Infants, and Children.

^a See Table 14 comments in the *Methodological Notes (Appendix C)* for the types of revenue reported as "other" within each revenue category.

^b Prepaid and not prepaid.

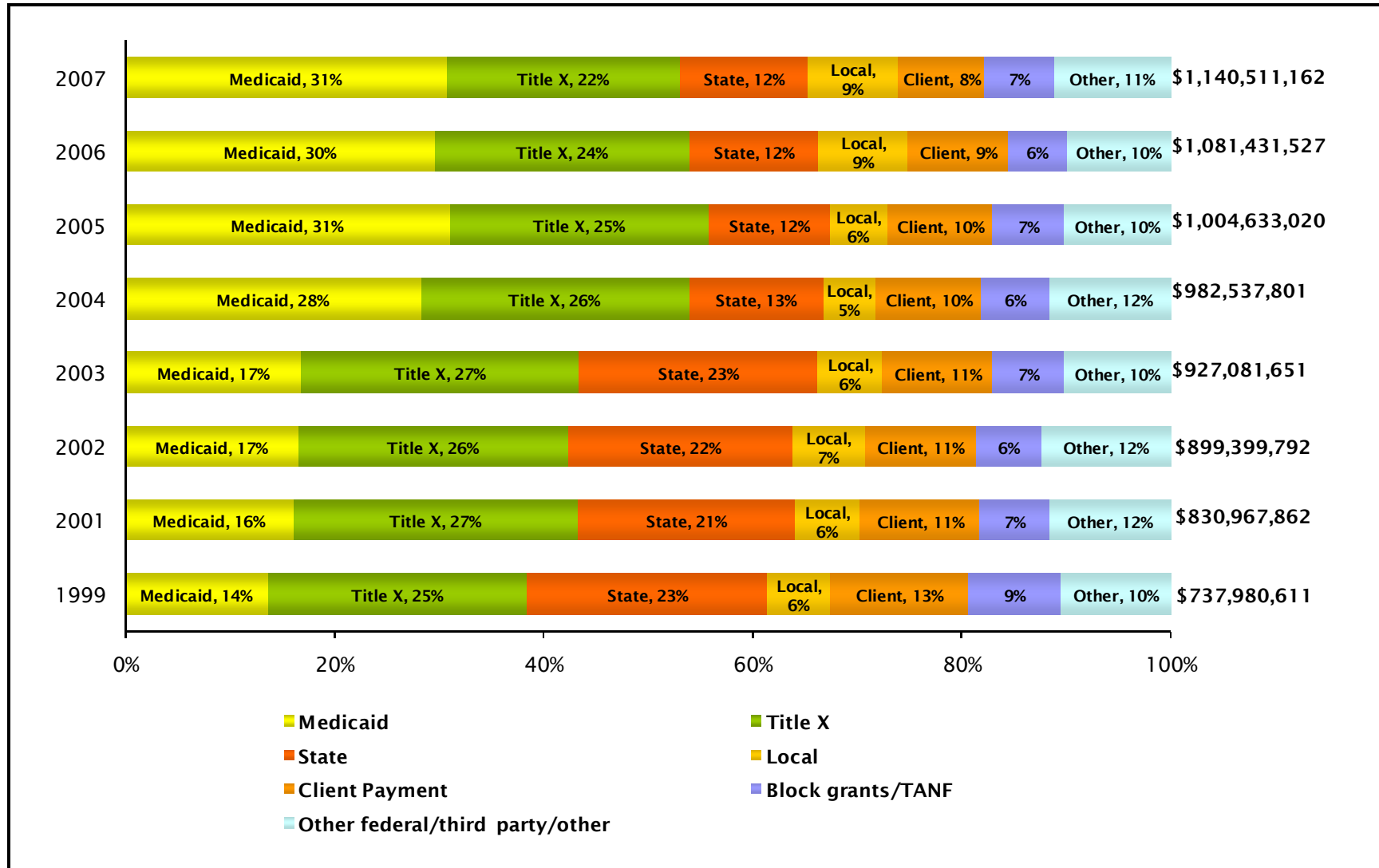
^c Includes revenue from Medicaid family planning waivers.

^d Unadjusted total revenue is in actual dollar values.

^e Adjusted total revenue is in constant 1999 dollars (1999\$) or 1981 dollars (1981\$), based on the consumer price index for medical care, which includes medical care commodities and medical care services (Source: U.S. Department of Labor Bureau of Labor Statistics, <http://www.bls.gov/cpi>).

— Data are not available. -- Disaggregated data are presented in the table. † Percentage is less than 0.5%.

Exhibit A-11c. Distribution of Title X project revenue, by revenue source: 1999-2007



Note: Due to rounding, percentages in each year may not sum to 100% and percentages in combined or aggregated categories may not match the sum of the individual percentages that are included in the aggregated categories.

Appendix B

State Tables

Exhibit B-1. Number and distribution of all family planning users, by state and gender: 2007 (Source: FPAR Table 1)

State	Family Planning Users			% of State Users		% of Total Users
	Female	Male	Total	Female	Male	
Alabama	102,147	545	102,692	99%	1%	2%
Alaska	7,075	2,225	9,300	76%	24%	0%†
Arizona	43,223	2,581	45,804	94%	6%	1%
Arkansas	74,518	338	74,856	100%	0%†	2%
California	888,083	106,004	994,087	89%	11%	20%
Colorado	46,013	5,153	51,166	90%	10%	1%
Connecticut	40,101	3,673	43,774	92%	8%	1%
Delaware	22,618	4,287	26,905	84%	16%	1%
District of Columbia	13,495	2,630	16,125	84%	16%	0%†
Florida	222,427	7,466	229,893	97%	3%	5%
Georgia	154,781	4,827	159,608	97%	3%	3%
Hawaii	15,629	347	15,976	98%	2%	0%†
Idaho	27,773	2,603	30,376	91%	9%	1%
Illinois	133,026	432	133,458	100%	0%†	3%
Indiana	42,455	2,949	45,404	94%	6%	1%
Iowa	65,684	2,524	68,208	96%	4%	1%
Kansas	37,987	2,719	40,706	93%	7%	1%
Kentucky	106,527	4,935	111,462	96%	4%	2%
Louisiana	57,124	1,833	58,957	97%	3%	1%
Maine	27,863	2,091	29,954	93%	7%	1%
Maryland	72,832	3,713	76,545	95%	5%	2%
Massachusetts	61,044	7,768	68,812	89%	11%	1%
Michigan	142,431	4,697	147,128	97%	3%	3%
Minnesota	36,670	2,517	39,187	94%	6%	1%
Mississippi	60,362	431	60,793	99%	1%	1%
Missouri	81,756	4,922	86,678	94%	6%	2%
Montana	25,538	1,315	26,853	95%	5%	1%
Nebraska	36,160	2,840	39,000	93%	7%	1%
Nevada	22,964	653	23,617	97%	3%	0%†
New Hampshire	27,104	1,397	28,501	95%	5%	1%
New Jersey	123,068	7,579	130,647	94%	6%	3%
New Mexico	35,741	5,326	41,067	87%	13%	1%
New York	308,535	18,776	327,311	94%	6%	7%
North Carolina	133,769	4,307	138,076	97%	3%	3%
North Dakota	14,385	983	15,368	94%	6%	0%†

† Percentage is less than 0.5%.

(continued)

Exhibit B-1. Number and distribution of all family planning users, by state and gender: 2007 (Source: FPAR Table 1) (continued)

State	Family Planning Users			% of State Users		% of Total Users
	Female	Male	Total	Female	Male	
Ohio	105,659	5,026	110,685	95%	5%	2%
Oklahoma	84,276	1,067	85,343	99%	1%	2%
Oregon	78,782	3,892	82,674	95%	5%	2%
Pennsylvania	291,285	20,613	311,898	93%	7%	6%
Rhode Island	16,701	1,955	18,656	90%	10%	0%†
South Carolina	92,940	439	93,379	100%	0%†	2%
South Dakota	12,328	507	12,835	96%	4%	0%†
Tennessee	122,602	151	122,753	100%	0%†	2%
Texas	216,827	9,328	226,155	96%	4%	5%
Utah	26,396	3,127	29,523	89%	11%	1%
Vermont	8,771	542	9,313	94%	6%	0%†
Virginia	66,990	1,768	68,758	97%	3%	1%
Washington	100,245	5,612	105,857	95%	5%	2%
West Virginia	54,588	2,212	56,800	96%	4%	1%
Wisconsin	52,008	3,809	55,817	93%	7%	1%
Wyoming	13,233	417	13,650	97%	3%	0%†
Jurisdictions/ Territories						
Puerto Rico	17,621	938	18,559	95%	5%	0%†
U.S. Virgin Islands	3,045	10	3,055	100%	0%†	0%†
Pacific region ^a	16,652	6,582	23,234	72%	28%	0%†
Total All Users	4,691,857	295,381	4,987,238	94%	6%	100%

^a The U.S. jurisdictions in the Pacific region include American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Republic of the Marshall Islands, and Republic of Palau.

† Percentage is less than 0.5%.

Exhibit B-2. Number and distribution of all family planning users, by state and income level: 2007
(Source: FPAR Table 4)

State	Number of Users by Income Level ^a					Distribution of Users by Income Level ^a			
	≤100%	101%–250%	>250%	Unknown	Total Users	≤100%	101%–250%	>250%	Unknown
Alabama	77,434	23,032	2,075	151	102,692	75%	22%	2%	0%†
Alaska	7,026	1,904	370	0	9,300	76%	20%	4%	0%
Arizona	36,300	6,777	411	2,316	45,804	79%	15%	1%	5%
Arkansas	45,708	21,187	2,402	5,559	74,856	61%	28%	3%	7%
California	732,283	225,969	19,364	16,471	994,087	74%	23%	2%	2%
Colorado	39,346	10,132	1,450	238	51,166	77%	20%	3%	0%†
Connecticut	11,151	25,531	2,689	4,403	43,774	25%	58%	6%	10%
Delaware	17,163	7,253	2,104	385	26,905	64%	27%	8%	1%
District of Columbia	9,543	2,292	3,477	813	16,125	59%	14%	22%	5%
Florida	174,289	48,634	6,506	464	229,893	76%	21%	3%	0%†
Georgia	110,182	44,458	4,968	0	159,608	69%	28%	3%	0%
Hawaii	12,635	1,906	673	762	15,976	79%	12%	4%	5%
Idaho	18,389	10,419	1,568	0	30,376	61%	34%	5%	0%
Illinois	100,381	29,023	3,598	456	133,458	75%	22%	3%	0%†
Indiana	33,302	10,915	1,187	0	45,404	73%	24%	3%	0%
Iowa	47,977	15,578	4,621	32	68,208	70%	23%	7%	0%†
Kansas	20,142	14,961	2,912	2,691	40,706	49%	37%	7%	7%
Kentucky	77,905	23,901	4,053	5,603	111,462	70%	21%	4%	5%
Louisiana	53,157	4,831	257	712	58,957	90%	8%	0%†	1%
Maine	14,482	11,040	2,975	1,457	29,954	48%	37%	10%	5%
Maryland	61,839	12,217	2,079	410	76,545	81%	16%	3%	1%
Massachusetts	39,799	25,021	2,946	1,046	68,812	58%	36%	4%	2%
Michigan	97,084	41,550	8,089	405	147,128	66%	28%	5%	0%†
Minnesota	25,247	11,317	2,623	0	39,187	64%	29%	7%	0%
Mississippi	51,661	8,682	438	12	60,793	85%	14%	1%	0%†
Missouri	50,794	27,541	8,343	0	86,678	59%	32%	10%	0%
Montana	14,480	8,075	4,298	0	26,853	54%	30%	16%	0%
Nebraska	16,973	11,861	9,791	375	39,000	44%	30%	25%	1%
Nevada	14,828	6,800	1,238	751	23,617	63%	29%	5%	3%
New Hampshire	12,977	10,112	3,670	1,742	28,501	46%	35%	13%	6%
New Jersey	58,649	68,762	3,236	0	130,647	45%	53%	2%	0%

† Percentage is less than 0.5%.

(continued)

Exhibit B-2. Number and distribution of all family planning users, by state and income level: 2007
(Source: FPAR Table 4) (continued)

State	Number of Users by Income Level ^a					Distribution of Users by Income Level ^a			
	≤100%	101%–250%	>250%	Unknown	Total Users	≤100%	101%–250%	>250%	Unknown
New Mexico	31,953	4,710	481	3,923	41,067	78%	11%	1%	10%
New York	215,240	92,270	16,870	2,931	327,311	66%	28%	5%	1%
North Carolina	96,854	27,654	13,568	0	138,076	70%	20%	10%	0%
North Dakota	7,577	5,339	2,416	36	15,368	49%	35%	16%	0%†
Ohio	70,003	32,073	6,719	1,890	110,685	63%	29%	6%	2%
Oklahoma	61,982	22,031	1,330	0	85,343	73%	26%	2%	0%
Oregon	56,748	23,577	2,323	26	82,674	69%	29%	3%	0%†
Pennsylvania	206,714	75,360	27,601	2,223	311,898	66%	24%	9%	1%
Rhode Island	12,430	4,454	456	1,316	18,656	67%	24%	2%	7%
South Carolina	84,396	7,134	1,091	758	93,379	90%	8%	1%	1%
South Dakota	7,705	3,286	1,670	174	12,835	60%	26%	13%	1%
Tennessee	87,876	27,375	7,502	0	122,753	72%	22%	6%	0%
Texas	170,752	48,381	2,551	4,471	226,155	76%	21%	1%	2%
Utah	21,652	6,120	651	1,100	29,523	73%	21%	2%	4%
Vermont	3,192	3,833	1,273	1,015	9,313	34%	41%	14%	11%
Virginia	46,912	19,595	2,150	101	68,758	68%	28%	3%	0%†
Washington	64,044	36,543	5,238	32	105,857	61%	35%	5%	0%†
West Virginia	44,828	11,951	21	0	56,800	79%	21%	0%†	0%
Wisconsin	38,026	14,409	2,646	736	55,817	68%	26%	5%	1%
Wyoming	8,284	4,001	1,365	0	13,650	61%	29%	10%	0%
Jurisdictions/ Territories									
Puerto Rico	17,225	842	415	77	18,559	93%	5%	2%	0%†
U.S. Virgin Islands	2,442	521	92	0	3,055	80%	17%	3%	0%
Pacific region ^b	15,374	3,195	9	4,656	23,234	66%	14%	0%†	20%
Total All Users	3,455,335	1,246,335	212,849	72,719	4,987,238	69%	25%	4%	1%

^a Title X-funded agencies calculate and report user income as a percentage of the poverty guidelines issued by the U.S. Department of Health and Human Services (HHS). Each year, HHS announces updates to its poverty guidelines in the *Federal Register* and on the HHS Web site <http://aspe.hhs.gov/poverty>.

^b The U.S. jurisdictions in the Pacific region include American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Republic of the Marshall Islands, and Republic of Palau.

† Percentage is less than 0.5%.

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Appendix C

Methodological Notes

Methodological Notes

INTRODUCTION

In February 2008, 89 Title X service grantees submitted Family Planning Annual Reports (FPARs) for the 2007 reporting period (January 1 through December 31, 2007). Eighty-seven reports (98%) were submitted by the February 15 due date, and 82 reports (92%) were submitted using the Office of Population Affairs (OPA) Web-based electronic grants management system (*GrantSolutions*). Regional Program Consultants (RPCs) entered into *GrantSolutions* the data for seven hardcopy reports, thereby consolidating all reports into a single electronic file. OPA regional staff and the FPAR Data Coordinator reviewed and approved all FPARs prior to sending RTI the first electronic data file on April 7, 2008.

After receiving the initial data file, RTI performed further validations to identify potential reporting errors (e.g., extreme or unexpected values for selected data items) and problems (e.g., 10% or more unknown or not reported). RTI also performed a manual review of each hardcopy report. Once these validations were complete, RTI submitted (May 13, 2008) to OPA a grantee-specific report listing validation issues that required follow-up with the grantee. OPA sent RTI a second electronic data file on June 17, 2008, and a third and final electronic data file on August 6, 2008. Final corrections were completed September 9, 2008, including OPA-approved changes made by RTI in the final RTI analysis file.

This appendix summarizes table-specific notes from grantees and OPA staff (RPCs, other regional staff, and the FPAR Data Coordinator) about the 2007 FPAR data, as well as issues identified by RTI during validation. The comments are organized according to the FPAR reporting table to which they apply, and not the exhibits in the main body of the *FPAR 2007 National Summary*.

FPAR COVER SHEET: GRANTEE PROFILE

Three grantees reported data for a different 12-month period (December 1, 2006 to November 30, 2007), and one grantee reported data for a 6-month period (January 1 to June 30, 2007), which ended with their Title X service grant.

FPAR TABLE 1: USERS BY AGE AND GENDER

Nineteen grantees reported that the decrease in number of users compared to 2006 was due to one or more factors, including staffing issues (e.g., problems recruiting and retaining nurse practitioners and other midlevel providers, shortage of public health nurses); clinic closures/consolidations or reduced operating hours; inadequate capacity to meet the demand for services; inefficient clinic operations; problems with phone and appointment systems; disruption in operations during implementation of electronic medical record and patient billing systems; inadequate funding; delegate financial problems; increased Medicaid participation by and competition from private providers in states with and without Medicaid family planning waivers; increased demand on clinic staff time from more diverse client population (e.g., Hispanic/Latino); restrictions on the types of staff that can dispense

prescription contraception; contraceptive supply shortages; natural and other disasters that hampered clinic operations and client access; barriers to Medicaid enrollment/re-enrollment posed by the documentation requirements of the 2005 Deficit Reduction Act; and availability of over-the-counter emergency contraception, which drew potential clients away from clinics.

FPAR TABLE 2: FEMALE USERS BY ETHNICITY AND RACE

Four grantees commented on female users who self-identify as Hispanic or Latino, but who do not self-identify with one or more of the five minimum Office of Management and Budget (OMB) race options in FPAR Table 2. The failure of some Hispanic female users to self-identify with at least one of the five minimum race categories results in a higher percentage of female users reported as “unknown or not reported” race. However, the structure of FPAR Table 2 allows grantees and OPA to determine the ethnic composition for a majority of female users who do not report a race. Of the 11% of total female users for whom race was unknown or not reported in 2007, 74% were Hispanic or Latino. Both race and ethnicity were unknown or not reported for less than 1% of total female users in 2006 and 2007 (0.6% in both years). Several grantees noted ongoing efforts to improve the collection and reporting of ethnicity and race data.

FPAR TABLE 3: MALE USERS BY ETHNICITY AND RACE

Six grantees commented on male users who self-identify as Hispanic or Latino, but who do not self-identify with one or more of the five minimum OMB race options in FPAR Table 3. The failure of some Hispanic male users to self-identify with at least one of the five minimum race categories results in a higher percentage of male users reported as “unknown or not reported” race. However, the structure of FPAR Table 3 allows grantees and OPA to determine the ethnic composition for a majority of male users who do not report a race. Of the 14% of total male users for whom race was unknown or not reported in 2007, 72% were Hispanic or Latino. In 2006 and 2007, there were only small percentages of total male users—1% in 2006 and 0.7% in 2007—for whom both race and ethnicity were unknown or not reported. Several grantees noted ongoing efforts to improve the collection and reporting of ethnicity and race data.

FPAR TABLE 4: USERS BY INCOME LEVEL

One grantee reported that data on user income were not always collected for users with public assistance, the insured, adolescents, and walk-in or first-time emergency clients, resulting in higher proportions of users reported as “unknown or not reported” income. Two grantees reported that the distributions of users by income level were estimates.

FPAR TABLE 5: USERS BY PRINCIPAL HEALTH INSURANCE COVERAGE STATUS

One grantee reported that data on user insurance coverage status were not always collected for users who received non-clinical education/information services and that they estimated health insurance coverage for minors seeking confidential services. Another grantee reported that health insurance data were not always collected for postpartum clients, and three grantees reported that the distribution of users by insurance status were estimated for all or a portion of total users reported.

FPAR TABLE 6: USERS WITH LIMITED ENGLISH PROFICIENCY (LEP)

Two grantees reported estimates of the number of LEP users.

FPAR TABLE 7: FEMALE USERS BY PRIMARY CONTRACEPTIVE METHOD

Hormonal injection users—Eighteen grantees in all but two regions (V and X) reported a total of 421 1-month hormonal injection users, which accounted for 0.1% of all 591,861 hormonal injection users reported in 2007. In general, users who report reliance on 1-month injectables obtain the method in countries where it is produced (e.g., Mexico) or locally through non-Title X sources. Since 2006, grantees have improved the quality of reporting hormonal injection use (1- and 3-month), leading to a 77% decrease in the number of 1-month injectable users reported between 2006 (2,095) and 2007 (421).

Sterilization users < 20 years—Four grantees reported four female users 18–19 years of age who relied on female sterilization as their primary contraceptive method. In each case, the grantee confirmed that the teen had been sterilized prior to seeking services at the Title X-funded site.

Unknown methods—Three grantees reported that primary contraceptive use data were incomplete for some female users, including those who received counseling in nonclinic settings or during postpartum visits.

Additionally, two grantees reported that the number of female users by primary method were estimates, and two grantees reported problems with the systems for collecting and reporting female contraceptive use data.

FPAR TABLE 8: MALE USERS BY PRIMARY CONTRACEPTIVE METHOD

Unknown methods—Four grantees noted that primary contraceptive use data were incomplete for some male users, including those who received counseling in nonclinic settings or during outreach activities.

Additionally, one grantee reported that the distribution of male users by primary method was an estimate, and three grantees reported problems with systems for collecting and reporting male contraceptive use data.

FPAR TABLE 9: CERVICAL CANCER SCREENING ACTIVITIES

Six grantees attributed decreases in numbers of Pap tests performed and users tested to the adoption of updated cervical cancer screening guidelines, while two others attributed the decrease in number of tests to use of improved Pap testing technology (e.g., brush and liquid-based cytologic methods). One grantee noted that Pap result data for one of their delegates were unavailable because of limitations of the delegate's data system.

FPAR TABLE 10: BREAST CANCER SCREENING ACTIVITIES

Two grantees noted that the numbers of reported clinical breast exams (CBEs) were estimates based on comprehensive/global billing code data. Additionally, five grantees noted that their own data system or that of one or more delegates were not able to track CBE-related referrals,

while another mentioned that the CBE data (users examined and referrals) were incomplete because these data were not available for Medicaid-covered women who had received services through their state's family planning program.

FPAR TABLE 11: USERS TESTED FOR CHLAMYDIA BY AGE AND GENDER

One grantee was unable to report the number of users tested for chlamydia due to problems with their data collection and reporting system.

FPAR TABLE 12: STD TESTING BY GENDER

Three grantees noted that anonymous HIV testing was not available in their states (NH, NC, and TN), two others reported that Title X-funded sites did not offer anonymous HIV testing, and two grantees reported problems collecting and reporting data on HIV testing activity (confidential and anonymous).

FPAR TABLE 13: ENCOUNTERS AND CLINICAL PROVIDER UTILIZATION

In 2005, a new category of clinical services provider (CSP) was introduced in the FPAR in an effort to collect information on the role of nonphysician/nonmidlevel providers in delivering clinical family planning services traditionally restricted to physician and midlevel providers. The FPAR defines other CSPs as “other licensed health providers (e.g., registered nurses) who are trained and permitted by state-specific regulations to perform *all aspects* of the user (male and female) physical assessment, as described in Section 8.3 of the *Program Guidelines*.”

The *FPAR 2005 National Summary* excluded full-time equivalent (FTE) data for other CSPs because grantee reports overstated their role in providing clinical family planning services. To improve the quality of these data, OPA provided technical guidance to grantees on reporting other CSP FTEs and encounters in advance of the 2006 FPAR submission. Between 2005 and 2006, the number of other CSP FTEs decreased 46%, from 2,641 in 2005 to 1,429 in 2006. Between 2006 and 2007, the number of other CSP FTEs reported decreased 8% to 1,319 other CSP FTEs. While the quality of these data appears to have improved, there is evidence that some grantees may still be overstating the role of the other CSP in delivering Title X-funded clinical services. OPA will continue monitoring the quality of these data.

Six grantees noted reasons for the decrease in CSP FTEs, including difficulty recruiting and retaining clinical and support staff, inability to offer competitive salaries and incentives, retirement of family planning workforce, decreased operating hours, and clinic closings. Additionally, two grantees noted that the reported FTE data were either incomplete or estimated.

FPAR TABLE 14: REVENUE REPORT

Title X revenue (row 1)—Title X revenue includes 2007 cash receipts or drawdown amounts from all family planning service grants, including supplemental awards (e.g., HIV and male involvement). As an estimate of Title X revenue, two Region IX grantees reported the award amount of their Title X service grant instead of 2007 cash receipts or drawdown amounts.

Other federal grant revenue (rows 3 and 4)—Grantees specified the following types of other federal grant revenue on rows 3 and 4: U.S. Department of Health and Human Services (HHS) Health Resources Services Administration (HRSA); Ryan White Care Act (prevention services); and Office of Women’s Health/HIV.

Client payment for services revenue (row 6)—Two grantees mentioned that they were unable to capture revenue from client payment for services, and one of the two noted that the reported client payment figure was an estimate.

Medicaid waiver revenue (row 7a)—In 2007, Medicaid revenue reported on row 7a included revenue from Medicaid family planning waivers in 24 states, including Alabama, Arizona, Arkansas, California, Delaware, Florida, Illinois, Iowa, Louisiana, Maryland, Michigan, Minnesota, Mississippi, Missouri, New Mexico, New York, North Carolina, Oklahoma, Oregon, Rhode Island, South Carolina, Texas, Virginia, and Washington. The grantee in Wisconsin did not confirm whether row 7a included revenue from the state’s family planning waiver program.

Other revenue (rows 15 to 17)—Grantees specified the following types of other revenue:

Abortion Alternative	CDC/IPP Michigan Department of Community Health
Adult and Family Services agency contribution	CDC/IPP Minnesota Department of Health
AIDS Prevention and Risk Reduction	CDC/IPP Montana Department of Public Health and Human Services
Amherst High School applicant	CDC/IPP North Dakota State Department of Health
Avon Foundation	CDC/IPP Ohio Department of Health
Blue Cross Outreach	CDC/IPP Oregon Department of Human Services
Blue Cross Pathways	CDC/IPP Pennsylvania Department of Health
Blue Ribbon grant	CDC/IPP South Dakota Department of Health
Bureau of Primary Health Care/FQHCs	CDC/IPP Vermont Department of Health
business and community contributions	CFC
carryover	Chicopee Academy
CDC	Community Services Block Grant
CDC Breast and Cervical Cancer Early Detection Program	consultation (fees)
CDC HIV contract	contracts
CDC/IPP	contributions
CDC/IPP California-DHS	data processing
CDC/IPP County of Los Angeles-DHS	delegate reimbursement
CDC/IPP Idaho Department of Health and Welfare	delegate reimbursement for contraceptives
CDC/IPP Illinois Department of Human Services	donations
CDC/IPP Indiana State Department of Health	education income/revenue
CDC/IPP Massachusetts Department of Health	fiscal administrative services
	foundation grant(s)

Franklin/Grand Isle Tobacco Prevention Coalition	private general fund
fundraising	private grants and donations
general operating funds	property insurance proceeds
Genetics	refunds
Golf Tournament	Region III IPP
grants from other agencies	reimbursement from other programs
Harris Methodist Grant Family Planning	rental income
Health Foundation of Central MA	restricted contributions and gifts
HIV	Richland County Fetal Infant Mortality Review
HIV and STD from Vermont Department of Health	Rural Health Service
in-kind (lab provider services)	Settlement money
interest income	Smith Vocational School
intra-agency transfers	SOA grants
Komen Foundation	special/earned funds
KS Statewide Farmworker Health Program	STD
local	student health fees
local agency	subcontracts
local grants	Teen Pregnancy Prevention
Maine Women's Fund	Tobacco Settlement
Medicaid administrative funds	training revenue
medical supply revenue	Tuberculosis Control
mileage	Uncompensated Care
miscellaneous donations and revenue	UNFPA
nongovernmental grants	United MidCoast Charities
North Adams Wise Guys	United Way
other	United Way (Berkshire)
other fees	United Way (Indiana)
other private grants	United Way (Maine)
patient contributions	United Way (Ohio)
patient donations	VNA contracts
Preventive Health and Health Services Block Grant	Wahconah High School
private	World Health Organization/United Nations Population Fund (WHO/UNFPA)
private contributions and donations	Women's Health Connection
private foundations	Workers' Compensation Fund

TREND EXHIBITS

Exhibits A-7a, A-7b, and A-7c—In the *FPAR National Summaries* for 1999–2004 (*Table A-6*) and 2005 (*Exhibit A-6a*), the primary contraceptive use trend data for 1999 excluded 8,271 female users from the total number because the grantee did not report a method of contraception for them. The correct total number of female users in 1999 was 4,315,040 and not 4,306,769, as shown in these tables. In the *FPAR 2007 National Summary*, these 8,271 users are included in the unknown method cell of the 1999 primary contraceptive use column,

bringing the total number of female users with an unknown method in 1999 to 162,056 (instead of 153,785), and the total number of female primary method users to 3,746,113 (instead of 3,737,842).

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O P A X D H
D H H S



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