

NORTH DAKOTA FAMILY PLANNING  
DATA SYSTEM MANUAL

**November 2012**

# NORTH DAKOTA FAMILY PLANNING DATA SYSTEM MANUAL

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# NORTH DAKOTA FAMILY PLANNING DATA SYSTEM MANUAL

## INTRODUCTION

As the Data System contractor Ahlers' responsibilities include:

1. Receipt and uploading of your CVR data.
2. Production and printing of your monthly processing reports.
3. Production and printing of your quarterly and annual management reports (including FPAR - Family Planning Annual Report).
4. Posting your data to our web site for ad hoc reporting needs.
5. Answering your questions about the data system and resolving any functions which are not clear to you. Our toll-free number is 800-888-1836. Policy questions may be referred to your state office.
6. Producing special reports when you have a data need. These are often done at no cost to you.
7. Creating a quarterly IPP data file for NDDoH staff.

The purpose of the Data System is to provide needed demographic and visit information about all family planning clients. The various reports produced by Ahlers provide local management and the state with information to monitor clinic activity and service to target populations. The goal of the Data System is to capture all demographic and visit data once and have all subsequent requests for information automatically available.

The functions of the Family Planning Data System include the following:

1. Collect demographic data on each patient.
2. Collect services provided data on each visit.
3. Check the data for accuracy.
4. Maintain a database of all accepted data.
5. Produce reports for agencies that can be used to see that all data is being processed.
6. Produce standard management reports on a quarterly and annual basis.
7. Provide ad hoc reporting on the Internet.
8. Produce special reports as needed by the agency to respond to inquiries by funding or other sources.

## **HELP**

Questions and/or problems should first be taken up with the NDDoH. They will determine if the issue is policy, procedural, training or technical. Any issues related to the software performance are always welcome at Ahlers. The software manual is available online at [www.ahlerssoftware.com](http://www.ahlerssoftware.com) and a hard copy was also mailed to your agency when the software was originally installed. You may also contact us by phone, fax or email.

Phone	800-888-1836
Fax	254-755-0267
Email	<a href="mailto:customerservice@ahlerssoftware.com">customerservice@ahlerssoftware.com</a>

## **VISITS THAT QUALIFY**

The CVR should be completed only for family planning clients making a family planning visit.

**FAMILY PLANNING CLIENT** - A family planning client is an individual of reproductive age who receives medical and/or counseling related to contraception, sterilization, infertility treatment, or related care, and for whom a medical record is established. Also include clients who receive supply only and/or deferred exams.

**FAMILY PLANNING VISIT** - A family planning visit is a visit where medical and/or counseling services are provided in conjunction with contraception, sterilization, infertility treatment, or related care and the services are recorded in the medical record. Also include supply only and/or deferred exam visits.

In multi-service agencies it is especially important to remember:

1. A family planning client can make a non-family planning visit, e.g., for prenatal or WIC services.
2. A non-family planning client could receive a family planning service but not in conjunction with contraceptives, sterilization, infertility treatment, and related services. Examples of this would be a cervical cancer screening client receiving a Pap smear or a prenatal client receiving a hematocrit. (This does not preclude these individuals from becoming family planning clients.)

Visits that can also be reported include:

1. Previously sterilized clients who receive a complete physical exam.
2. Male clients who receive medical and/or counseling services
3. Visits that occur off-site but meet all the other criteria for a family planning visit.

**NOTE:** When in doubt, record the visit.

## **HOW TO RECORD THE VISIT**

Client demographics and visit specifics are recorded in the Ahlers WINCVR PC software system, or in an existing inhouse system which has been programmed to record and transmit the required data. Demographics should be reviewed at each visit and changes recorded.

Ahlers (upon request) will provide a CVR master from which copies can be made. The master is arranged in the same sequence as the WINCVR screens. You may use these to record your answers or simply key from your chart or internal encounter form. The specific fields which are transmitted to Ahlers include the following:

**CLINIC NUMBER** - This number is assigned by Ahlers and is automatically transmitted by WINCVR.

**CLIENT NUMBER** - This number may be up to nine digits. Because this number is used to unduplicate clients, exercise care in not assigning two numbers to one client. WINCVR has an option to allow you to automatically assign numbers to new clients.

**DATE of BIRTH** - The client's birth date. Clients under age 10 will not be accepted by the system.

**GENDER** - Self explanatory.

**CONTACT STATUS** - This field is not transmitted. It allows you to perform client follow-up (due for exams, etc.) with assurance that you will not breach client confidentiality.

**Name and Address fields are not transmitted to Ahlers. The exception is that Zip Code is transmitted.**

**NAME** - (Last, First, MI) - Last and first name is required in WINCVR because it is the primary search path for locating the client's record.

**PHONE** - Not required but helpful when producing client follow-up reports.

**ADDRESS** - Not required but helpful in client follow-up including mailing labels.

**CITY, STATE** - See the explanation at Zip Code for a shortcut to record City and State.

**OTHER LAST NAMES USED** - Not required but most often used for Maiden Name which is another search path available in WINCVR.

**ZIP CODE** - Record the five digit zip code in which the client resides. WINCVR allows you to set up City, County and Zip Code so that one keystroke will record all three of these fields.

**ANNUAL INCOME** - This, along with Household Size, is used to calculate the patient's poverty level. Because Title X regulations prohibit charging fees to patients at or below 100% of the current federal poverty level, the responses need to be very accurate.

The first big question to consider is "whose income"? For adults and teens whose parents know they are receiving services, the answer is the patient's income plus all others included in HOUSEHOLD SIZE. That would include spouse/significant other or parent. For teens requesting confidentiality, concerns outweigh the need to know the parents' income and statements of parents' income often represent a guess anyway. If the patient's income varies during the year, try to get a weekly or monthly figure and convert it to an annual figure. If the income is unknown, put 99999 in the income field.

*Please refer to NDFPP policy FA-8 for the definition of "What is income?"*

**HOUSEHOLD SIZE** - Include all persons whose income was included in the previous question. The working definition of a family is: A social unit composed of one or more persons living together in a household.

**MEDICAID NUMBER** - This field is not transmitted to Ahlers. While the field is optional it is one of the five search criteria in the system.

**LIMITED ENGLISH PROFICIENCY** - If your clinic provides an interpreter or the client brings her own interpreter, mark this question "Yes". This is an FPAR required field.

**RACE** - Select from the choices displayed by WINCVR. For example, two races will be chosen for a biracial client.

**HISPANIC ORIGIN** - Choose either Yes or No based on the client's declaration.

**Those are the demographic fields to be recorded for all family planning clients. Now take a look at the Visit Specific data elements.**

**VISIT DATE** - WINCVR automatically puts in today's date. You should confirm that the date shown is the date service was provided.

**PRIMARY SOURCE OF PAYMENT** - Select one code which represents the way you expect to be paid for the visit. Do not consider whether payment is actually received.

Code No Fee for those clients receiving a 100% discount. Code either Partial Fee or Full Fee for those clients who pay a partial or full fee. Code Title XIX for Medicaid-eligible clients or Private Insurance for those clients whose services are covered by Private Insurance.

**CLIENT INSURANCE STATUS** - Record one of these six choices for the client.

**Public Health Insurance** - If the client receives a broad set of primary medical benefits from Medicaid, Medicare, Champus, etc. select this one.

**Private Health Insurance Covering All or Some Family Planning** - Select this one if the client has private insurance and it covers some or all services you provide.

**Private Health Insurance Covering No Family Planning** - Select this one if the client has private insurance but it covers none of the services you provide.

**Private Health Insurance Unknown for Family Planning** - Select this one if you do not know if the client's insurance covers the services you provide.

**Uninsured** - Select this one if the client has no Public or Private coverage.

**Unknown** - Select this one if the client does not know about their coverage.

**PURPOSE OF VISIT** - There are nine choices for the Purpose of Visit. Record the one that most closely fits the reason for the patient's visit. The choices are as follows:

**Initial Comprehensive** - First comprehensive examination in which medical services (see Item 11 – Medical Services Provided) and appropriate lab services are provided (see Item 12 – Lab Services Provided) and contraceptive counseling and education are given as required by the Program Guidelines for Project Grants for Family Planning Services under Section 1001, Public Health Service Act, aka Title X Guidelines. Other medical or counseling services may also be provided. This examination does not necessarily occur during the client's first visit to the agency. Therefore, the Initial Comprehensive visit is not necessarily the same as first visit to service site.

**Annual Comprehensive** - Subsequent visit (usually provided annually) at which time the client receives a comprehensive medical examination, as required by the Program Guidelines, and further counseling or education as indicated. Medical services and appropriate lab services should be provided during this visit. Other services may also be provided.

**Medical Visit** - A clinic visit which can be initiated by the client or clinical staff in which Medical Services are provided, but are not applicable to other visit types (i.e. EC, Implant insert or removal, IUD insert or removal, and HPV vaccination).

**STD/Infection Check** - A clinic visit for a sexually transmitted disease screening and/or treatment. This may be the first visit to clinic or a return visit.

**Problem Re-Visit** - This visit is generally initiated by the client and is related to gynecological issues/problems including problems with the current contraceptive method.

**Method Check/Depo** - This visit is typically coded when the visit is initiated by clinic staff for follow-up with the client. It may include method changes as well as Depo injection.

**Education/Counseling Only** - The client receives specific family planning related consultation, but no medical services are provided. See ND FPP policy MSA 15 and MSA 20 for definitions of counseling.

**Pregnancy Test** - This visit is typically requested by the client for the purpose of determining her pregnancy status. Other services may be provided during this visit.

**Supply Visit** - The patient's primary purpose for the visit was to pick up contraceptive supplies. No medical services were provided. These visits are **NOT** FPAR-reportable.

**CONTRACEPTIVE METHOD** - Code the primary contraceptive method the patient will use following this date's visit. Code Orals if oral contraceptives have been prescribed or dispensed, even when other non-prescription methods have been given as an interim method.

This item is not asking what supplies were dispensed. You may dispense condoms for disease prevention, but if the patient is using Orals from another visit or another source, her method is Orals.

If the client is relying on his/her partner's method record the partner's method. For example, if a male relies on his partner's Orals, mark Orals for the male client.

Record the Initial Visit method for the client only for that client's first-ever visit to your clinic. This information is used to prepare the Births Averted Report which is described in the Reports section.

If the patient is not using a contraceptive method, Code 19 - NONE and answer the Reason for No Method question.

**REASON FOR NO METHOD** - Choose the reason which best describes why the client is not using a contraceptive method.

**PROVIDER OF MEDICAL/COUNSELING SERVICES** - FPAR allows for one provider per encounter and the rule states that the one with the most medical training will be counted. You may select multiple providers during the data-entry process, but only the one with the most medical training will be reported. Clinician codes are required for Physician and Mid-Level providers. Specific coding ranges have been established for each agency. Call Ahlers Customer Support if you do not know the ranges assigned to your agency.

**VISIT CODES** - This field is for your internal use and is not transmitted to Ahlers. Use A - Z or 1 - 9. You may record Abnormal Paps, positive STDs, student status, etc. by assigning a letter or number to each. Then you can produce a Visit Codes Report for any time period you choose. That report gives you a client list and a total count.

**NEXT EXAM DATE** - WINCVR automatically keeps up with when Annual Exams are due. So any clients seen for an annual in September of last year will appear on the Clients Due for Exam report for September of this year. You may also record a Recall Date for a repeat Pap, Depo, etc. and the Clients Due for Exam report will list them and print mailing labels.

**MEDICAL SERVICES PROVIDED** - For a medical visit (Purpose of Visit = Initial Comprehensive, Annual Comprehensive, Medical Visit, Problem Re-visit, STD/Infection Check, Method Check/Depo, Pregnancy Test Only, Supply Visit) at least one medical service must be coded. See CVR Medical Services Provided section for a list of medical services.

**Definitions:**

BV TX	Bacterial Vaginosis Treatment
CBE	Clinical Breast Exam
EC	Emergency Contraception
HPV TX	Human Papilloma Virus Treatment
Rx Change	Prescription Change

**LAB SERVICES**

Select all labs provided.

**CHLAMYDIA**

This section is to collect data for the Regional Infertility Prevention Project (IPP). This is a CDC project and provides funding for testing and treatment of Chlamydia. Complete all sections for all clients under 25 who received a Chlamydia test, male and female.

**COUNSELING SERVICES PROVIDED** - At least one counseling service must be coded for an Education/Counseling "Purpose of Visit". May select multiple.

**Definitions:**

- ABC                      A = extramarital abstinence  
                              B = be faithful in marriage or committed relationship  
                              C = correct and consistent condom usage
- FAM                      Fertility Awareness Method
- Req Adol Counsel      Required Adolescent Counseling covers addressing family involvement, sexual coercion and risk behavior assessment
- Tobacco Cessation      AAR (Ask, Advise and Refer) completed
- TSE                      Testicular Self Exam

Female exam includes: ABC, contraception, domestic violence, exercise, HIV, STD's, immunizations, nutrition, sexual coercion, SBE, Pap follow up, tobacco.

Male exam includes: ABC, contraception, domestic violence, exercise, HIV, STD's, immunizations, nutrition, sexual coercion, TSE, tobacco.

Preconception includes: ABC, contraception, domestic violence, exercise, HIV, STD's, immunizations, nutrition, obesity, substance abuse, tobacco.

Required adolescent counseling includes: family involvement, sexual coercion, risk behaviors, contraception, including abstinence, tobacco.

**SUICIDE PREVENTION COUNSELING SERVICES PROVIDED** – Agencies participating in the Suicide Prevention Pilot project must administer, at minimum, the PHQ-2 screening tool for every client (other than supply visit) and if needed the PHQ-9 screening tool, frequency identified on screening tool.

**Definitions:**

PHQ-2 – This Patient Health Questionnaire is used as the initial screening tool for major depressive episode. The PHQ-2 should be administered to every client, not including supply visit, frequency identified on the PHQ-2 form. When the PHQ-2 is administered check box 88 on CVR. Referral is required in accordance to agency suicide prevention policy. If referral is not necessary identify #24. None Warranted or #25 Client Declined.

PHQ-9 – This Patient Health Questionnaire is used as a follow-up screening tool after completion of the PHQ2 for major depressive episode. The PHQ-9 should be administered to clients scoring three or higher on the PHQ-2. If the PHQ-9 is administered check box

89 on CVR. (when checking box #89; it is presumed PHQ-2 has also been administered). Referral is required in accordance to agency suicide prevention policy.

Note: Non-participating agencies in the Suicide Prevention Project will not check PHQ-2

**REFERRED ELSEWHERE** - Code any referrals for which a definite arrangement has been made for the client to attend another agency or clinic. Note that Code 05 - Abnormal Breast FU should be coded for clients with a Suspect Clinical Breast Exam. This is an FPAR data element.

**Definitions:**

FAM	Fertility Awareness Method
OPOP	Optimum Pregnancy Outcome Program
WIC	Special supplemental nutrition program for Women, Infants and Children

**SUICIDE PREVENTION REFERRED ELSEWHERE** – In accordance to agency suicide prevention policy code any referrals for which a definite arrangement has been made for the client to be referred to another agency or clinic. Multiple referrals may be checked under 07. Mental Health including National lifeline, Private Counselor, Human Service Center, Taken to Hospital, Physician Counseled, None Warranted and or Client Declined.

## **CORRECTING ERRORS**

The WINCVR System will warn you of missing or invalid answers. Records which contain "reject errors" will not be transmitted to Ahlers.

You are encouraged to run the Incomplete Visit Report before running your transmission to confirm that all visits have been completed and transmitted.

It is possible that a visit was transmitted without all applicable services being coded or demographics not being updated either from the Ahlers system or another system. You can send a correction in the Ahlers WINCVR system by locating the visit, keying the correct data and clicking OK to accept the visit. It will be included on your next transmission.

Regardless of whether you are running the Ahlers WINCVR system or a non-Ahlers system, you will receive a list of CVRs with errors (see exhibit 3 for an example of this report) each month after monthly processing has occurred. The correction procedure for non-Ahlers system users is the same as for those running the WINCVR system. Correct the entries in error and resubmit the visit with your next transmission.

## **TRANSMITTING VISITS**

Each month you will need to create a CVR transmission file and upload it to Ahlers via their web site. The transmission file creation process for the WINCVR system is described in the WINCVR manual. Regardless of whether you use the WINCVR or another system, you will receive an email confirmation from Ahlers within 24 hours. The confirmation will show the range of visit dates received along with a record count for each clinic transmitted.

**The cut-off date is the 15<sup>th</sup> of the month. Transmissions after that date (or mail received after that date) will be included in the following month's activity.**

## **PAP RESULTS REPORTING TO STATE OFFICE**

FPAR Table 9 requires abnormal Pap result reporting on an annual basis. As the Title X grantee for North Dakota, the FP coordinator is responsible for gathering and reporting this information to the RPC of the region. Because this information is not captured through the data system, it needs to be captured in some other way. The Ahlers Lab Results Reporting module contains many reports which assist in proper lab results management and follow up, and is well-suited for the Pap reporting required in the FPAR if it has been set up properly.

Following is an illustration of how to generate the necessary report from the Ahlers Lab Results Reporting module.

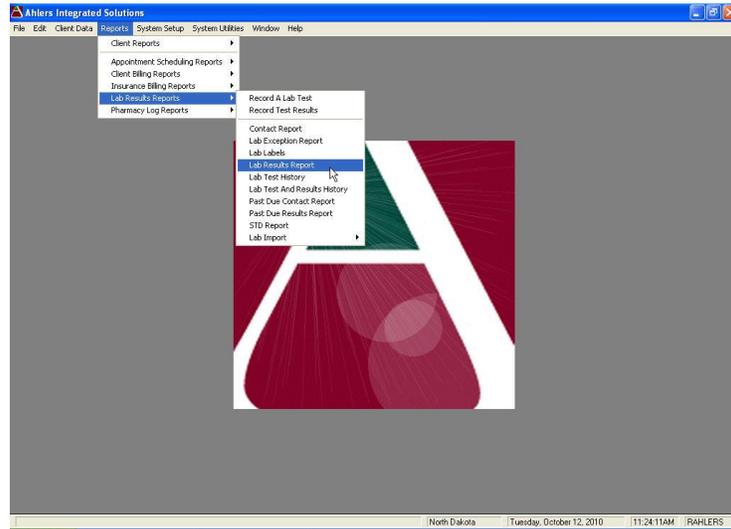


Figure 1

From the main screen, access the Lab Results Report option shown in Figure 1 from the Reports menu.

Next, pick the clinic site as shown in Figure 2. If you have more than 1 clinic site to be reported, repeat the steps in this section of the manual until all clinics have been reported to the state office.

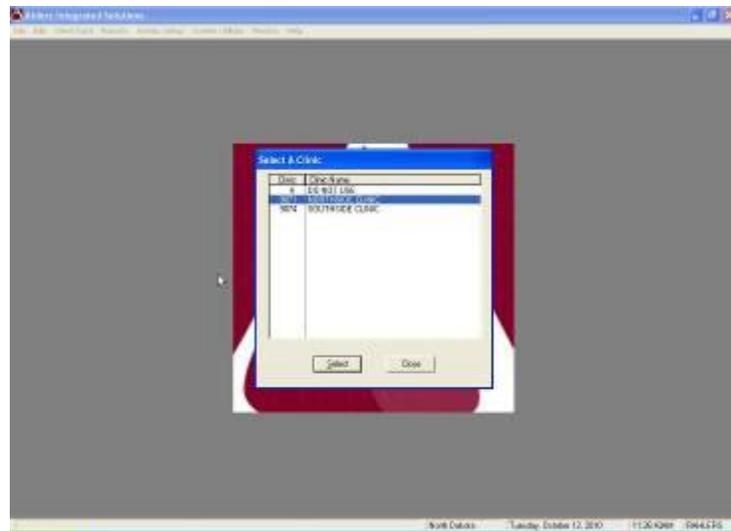


Figure 2

Next, pick the appropriate date range. Because the state FP coordinator wishes for a monthly report, a monthly date range should be entered as shown below in Figure 3.

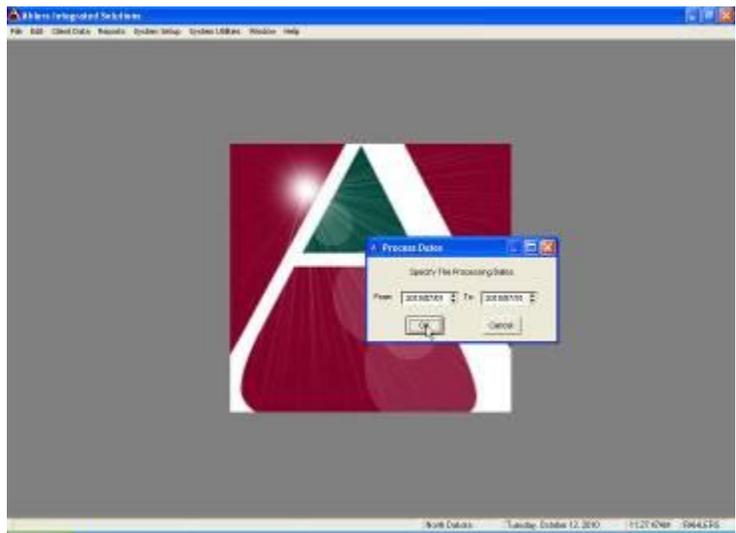


Figure 3

The next screen asks for the gender of the clients to be reported. Our choice of Both in Figure 4 assumes there were no Paps done for men in your agency.

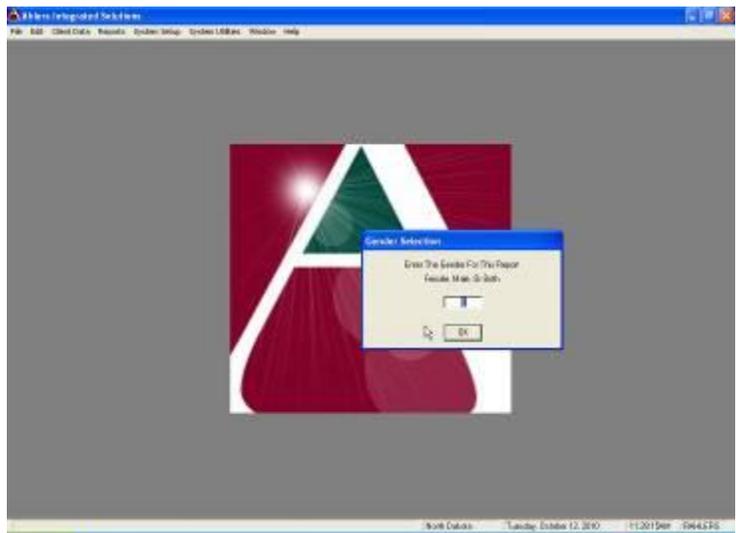


Figure 4





After clicking on the “T”, a file dialogue window appears so you may name the file and place the file where you want it. If you have more than 1 file to send you will want to name each file differently if you intend to put all of them in the same location as Windows doesn’t allow identical filenames and if it encounters them then previous files will be overwritten with subsequent files. The illustration in Figure 9 demonstrates the file is to be placed on the Desktop of the PC on which it was generated, and indicates the month of July as the month for which it was generated.

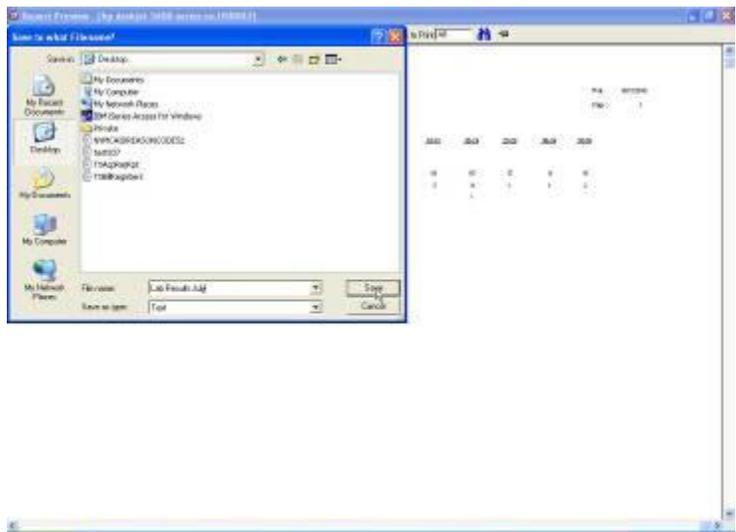


Figure 9

Clicking on the Save button will place the text file named Lab Results July on the Desktop. At this point the report will still be displayed and you may click the red “X” at the top of the report preview screen to exit.

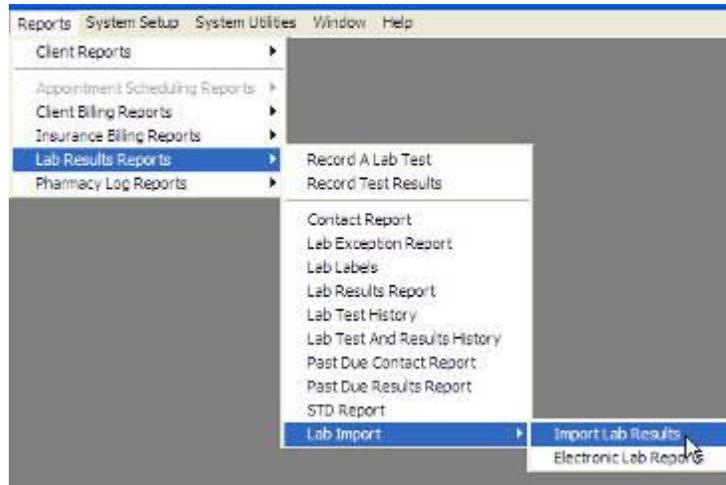
The final step is to open your email program and send an email with the lab report attached to Dubi Schwanz at dschwanz@nd.gov. In the example above, the file named Lab Results July.txt on the Desktop would be the file to attach to the email.

## **ELECTRONIC LAB RESULT POSTING FUNCTION**

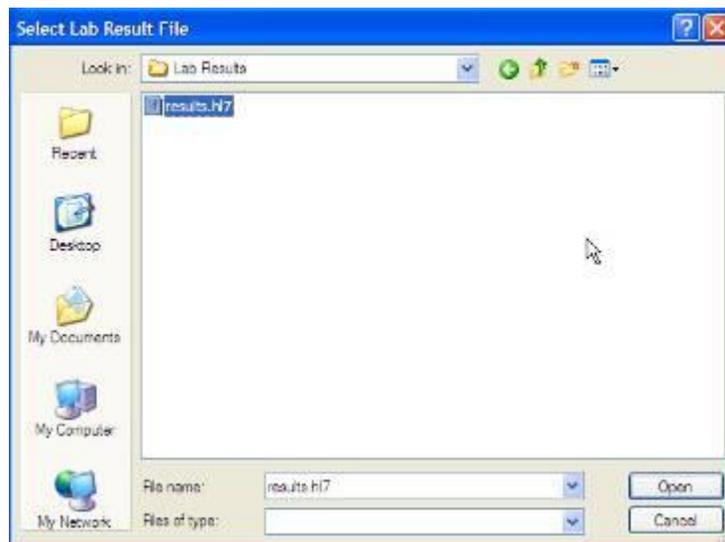
The Ahlers Lab Results Reporting module allows for importation and posting of electronic lab results from any lab which supports the HL7 message file format for lab result data. Electronic posting of lab result data has proven to be a huge timesaver for those agencies who utilize it, and facilitates more accurate posting of results as well. Here’s how it works:

## IMPORT LAB RESULTS:

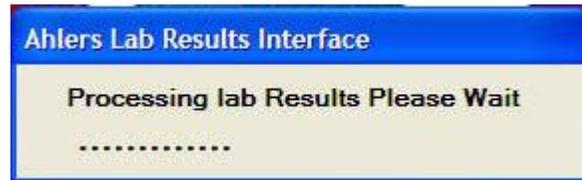
Once you have logged into the system select **REPORTS, LAB RESULTS REPORTS, LAB IMPORT**, and click **IMPORT LAB RESULTS**.



This will open a new window. Browse to find your lab results file that you received from your lab processing vendor (NDDoH, Cytocheck, etc.). Highlight the file and click **OPEN**.

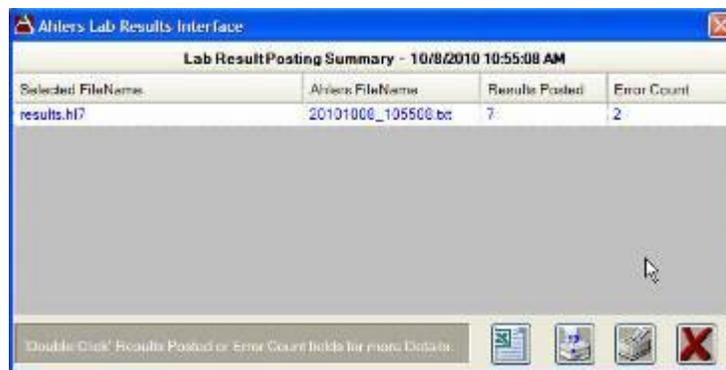


Another window will appear briefly stating that the system is **PROCESSING LAB RESULTS PLEASE WAIT**.



Once completed, a new window will appear with the following information:

- Lab file name – The name of the file that you have imported into the Ahlers system
- Ahlers File Name: The system archives each file that you import into Ahlers. The system automatically renames the file and places it into a Lab folder where your program files are located.
- Results Posted: The number of results that successfully posted into your Ahlers system.
- Error Count: The number of tests that had an error and did not post into the Ahlers system.



There are also buttons located in the bottom right side of the box.



This button allows you to export the information into an excel file.



This button lets you select the printer that you will use to print any of the reports.



This button will give you a print preview of the report and allow you to print the report as well.



This button will allow you to close the current window.

At this point you know how many results posted successfully (Results Posted column) and how many did not (Error Count). To get more detail on either the Results Posted or the Error Count simply double click the number.

If you double click the **Results Posted** number a new window appears with the following information:

- Clinic – The clinic number that the patient had their lab work recorded in.
- Patient – Ahlers patient number.
- Date Collected – The date the specimen was collected.
- Test No – The Ahlers test code for that particular test.
- Ref No. – The reference number of the result in the lab import file.
- Result Posted – The Ahlers code of the result that was posted on the test.
- Closed – Marked as either Y or N. This based on the protocol setup within your system.
- Lab Result – The result as it was identified in the lab file you just imported.

The screenshot shows a window titled "Ahlers Lab Results Interface" with a subtitle "Lab Result Posting Details for 20101008\_105508.txt (LABCDDUS) - 10/8/2010 10:55:38 AM". The table contains the following data:

Clinic	Patient	Date Collected	Test No	Ref No.	Result Posted	Closed	Lab Result
1901	1623501	07/10/2008	PAP	1	01		SPECIMEN ADEQUACY, Satisfact
1901	1643201	07/10/2008	PAP	1	01	Y	SPECIMEN ADEQUACY, Satisfact
1901	910001058	07/08/2008	PAP	1	01	Y	SPECIMEN ADEQUACY, Satisfact
1901	910004475	07/08/2008	AMP	1	08	Y	Negative for H. gonorrhoeae
1901	910004475	07/08/2008	CH	1	08	N	Negative for C. trachomatis
1901	910012490	07/10/2008	AMP	1	08	Y	Negative for H. gonorrhoeae
1901	910012490	07/10/2008	CH	1	08	N	Negative for C. trachomatis

From this screen you can review which tests posted and see if you have any follow-up required from the Closed status. Be sure the Result Posted and the Lab Result are the correct matching values. For instance, on the screen above the Result Posted is 01 which is 'Within Normal Limits' which should match the Lab Result 'Negative for Intraepithelial Lesion or Malignancy' which it does. If the system posted a 01 and the result was ASCUS that would be incorrect. If such a case arises you would need to contact Ahlers Customer Service at 800-888-1836 ext.140.

When you are finished viewing this window simply click either of the red x's to close this window.

If you double click the **Error Count** number a new window appears with the following information:

- Error Code – Internal number assigned to the error. This will help an Ahlers associate determine where the problem exists.
- Error Description – A brief description of why the result did not post.
- Lab Clinic – The lab's internal number assigned to your agency.
- Lab Patient – The patient number sent back in the lab results file.
- Lab Date Collected – The date collected as sent back in the lab results file.
- Lab Test No – The test name sent in the lab results file.
- Lab Result – The result sent in the lab results file.

The screenshot shows a window titled "Ahlers Lab Results Interface" with a subtitle "Lab Result Posting Details for 20101008\_105508.txt (LABCDDUS) - 10/8/2010 11:03:53 AM". The table contains the following data:

Error Code	Error Description	Lab Clinic	Lab Patient	Lab Date Collected	Lab Test No.	Lab Resu
106005	Translation File - Unable to translate	13225	910008964	07/09/2008	297*HPV by Sur	NEGATI
105002	Lab Test Name - Test Not found	13225	910012429	07/08/2008	287*Swabpath'L	

The key information is the error description. This will help you understand why the lab did not post. If you need help with any of the errors please contact the Ahlers Customer Service department at 800-888-1836 ext. 140.

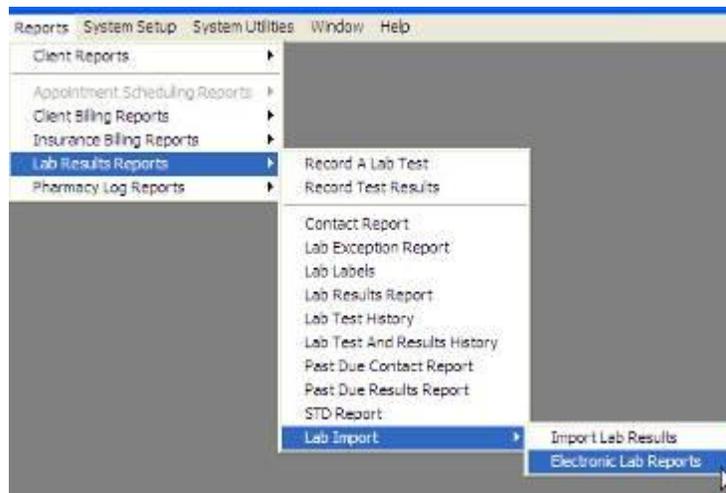
When you are finished viewing this window simply click either of the red x's to close this window.

You will then be taken back the Lab Result Posting Summary Window.

When you are finished viewing this window simply click either of the red x's to close this window.

## LAB IMPORT REPORT

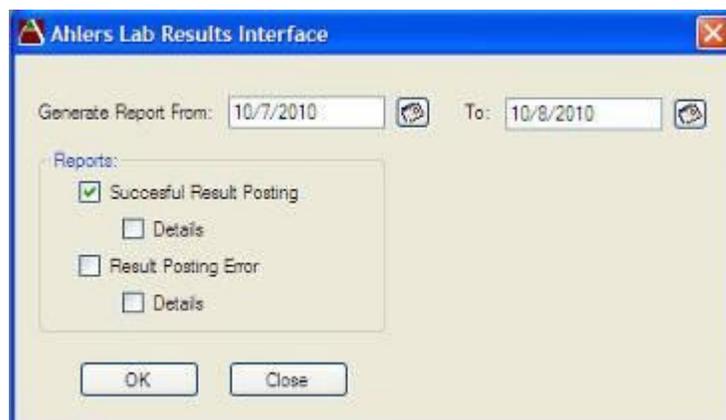
When you want to run a report to see a range of results posted or error results then click on **REPORTS**, **LAB RESULTS REPORTS**, **LAB IMPORT**, and click **ELECTRONIC LAB REPORTS**.



This will open a new window.

You will be able to select a date range and either **Successful Result Posting** or **Result Posting Error**.

**Successful Result Posting** option:



Click **OK** to run the report.  
 The report will appear on your screen as follows:

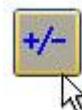
The screenshot shows a window titled "Ahlers Lab Results Interface" with a sub-header "Successful Lab Result Posting Details From 10/1/2010 To 10/30/10". The table contains the following data:

File Name	Lab Name	Clinic	Patient	Date Collected	Test	Closed	Lab Result	Comments
20101008_1095	COOLIS	1801	1843381	07/19/2008	PAP PAP	Y	SPECIMEN ACCE	
20101008_1095	COOLIS	1801	1843381	07/19/2008	PAP PAP	Y	SPECIMEN ACCE	
20101008_1095	COOLIS	1801	810807058	07/08/2008	PAP PAP	Y	SPECIMEN ACCE	
20101008_1095	COOLIS	1801	810804675	07/08/2008	AMP AMP GC	Y	Negative for N. g.	
20101008_1095	COOLIS	1801	810804675	07/08/2008	CH AMP CH	N	Negative for C. tr.	
20101008_1095	COOLIS	1801	810812400	07/19/2008	AMP AMP GC	Y	Negative for N. g.	
20101008_1095	COOLIS	1801	810812400	07/19/2008	CH AMP CH	N	Negative for C. tr.	

You have two new buttons on these windows.



This button will allow you to expand the row to show the entire content.



This button is the Field Chooser button. It allows you to uncheck or check columns in the view. A box appears with all the column names. If you want to view the column on the report then add a check mark by that column name. If you choose not to view a column then uncheck the box next to the column name.

This report has other options to customize your view. You may. . .

- Drag columns from position to another.
- Sort column information in ascending or descending order.
- Filter column information to show only particular tests, results or other information.
- Retrieve counts and summaries on a particular column.

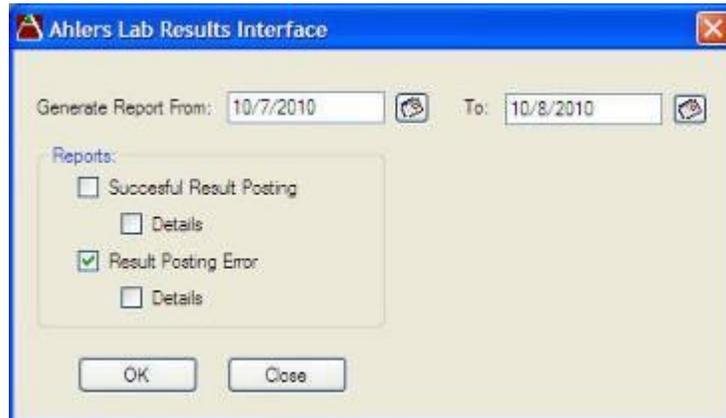
The report contains the following information:

- File Name – This is the archived file name that is stored in the Lab folder typically located in the program file folder.
- Lab Name – Name of the Lab company that generated the result file.
- Clinic - The clinic number where the test was recorded in the Ahlers system.
- Patient - The patient number
- Date Collected – Date the specimen was collected.
- Test – The name of the test that had a successful result posting.
- Closed – Either Y or N based on the result posted and the protocol setup in your Ahlers system.
- Lab Result – The result sent back from the lab.
- Comments – The comments that were sent back with the lab result in the result file.

If you selected the detail option on under the Successful Result Posting option, you will have additional columns on your report.

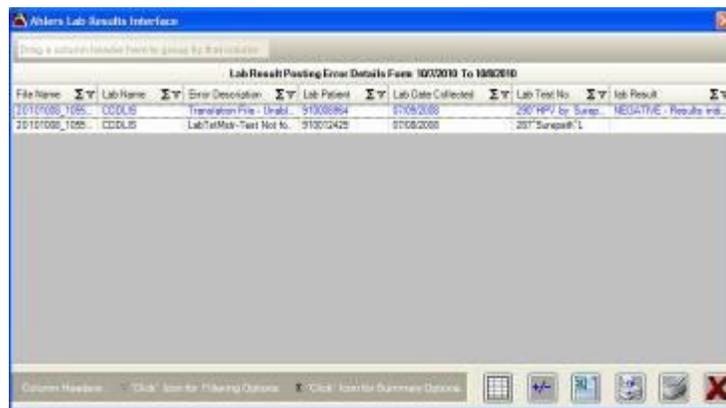
- Ref No. – The reference number in the lab result file associated with the particular test.
- Result Posted – The result posted in the Ahlers system for the particular test.

**Result Posting Error option:**



Click **OK** to run the report.

The report will appear on your screen as follows:



The report contains the following information:

- File Name – This is the archived file name that is stored in the Lab folder typically located in the program file folder.
- Lab Name – Name of the Lab company that generated the result file.
- Error Description – The detail of the error that was produced for the particular test when trying to import into the Ahlers system.
- Lab Patient – The patient number sent back in the lab results file.
- Lab Date Collected – The date the specimen was collected according to the lab result file.
- Lab Test No. – The test code in the lab result file.
- Lab Result – The result that in the result file sent by the lab company.

If you selected the detail option under the Result Posting Error option, you will have additional columns on your report.

- Error Ref No. – Reference number assigned in Ahlers to the problem result for.
- Error Code – The error code that was generated when trying to import the lab result file.
- XML Pos. – If the result file is an XML file, this field would display the position of the result.
- MSH Pos. – If the result is an HL7 file, this will display the position of the MSH segment.
- PID Pos. – If the result is an HL7 file, this will display the position of the PID segment.
- TEST Pos. – If the result is an HL7 file, this will display the test position in the file.
- Lab Clinic – The number assigned by the lab company for your agency.

## **REPORTS**

Ahlers produces two types of reports. The first group is Monthly Accountability Reports and the second group is Management Reports.

### **Monthly Accountability Reports**

Following the 15<sup>th</sup> cut-off date for CVR MONTHLY transmissions, Ahlers uploads all of your transmission files to our mainframe computer. During this process the visit records are edited for accuracy and the database is updated with all records which passed the edit program. Additionally several reports are printed and mailed to the agency, usually within ten days of the cut-off date. These reports are:

**TRANSACTION LIST (Exhibit 1)** - This report is mailed only if the agency has asked to receive it. Call us if you want this report but are not receiving it.

This report is useful in resolving differences between your count of visits for the month and those shown on the CVRs Processed Report.

The Transaction List shows all visit records processed in Date of Visit sequence. This allows a quick spot check to see if a day or group of days' visits were not processed.

This report has no retention value so destroy it once you are satisfied that all visits were processed.

**CVRS PROCESSED REPORT (Exhibit 2)** - Check this report each month to assure that all your visits were processed. If your Transmission Report(s) show 210 visits but the CVRs Processed Report shows 160 visits, check it out with Ahlers promptly.

The agency summary of this report shows the visits processed for each clinic. It allows management to note unusual volumes (high or low) and variations in the Purposes of Visit being coded by clinic staff.

Save these reports until the quarterly Management Reports are prepared. The three monthly reports should approximately equal the quarterly report.

**CVR ERROR LISTING (Exhibit 3)** - This report lists the specifics of which client visit record failed and why it failed. You can access the specific record in WINCVR or your other inhouse system, correct the error, and it will be submitted in your next transmission if you're using the WINCVR system. You may discard the report after correcting the errors.

**SUMMARY OF CVR ERRORS (Exhibit 4)** - This report summarizes the errors discovered during monthly processing. If a particular error is being made often management can focus training around that issue with staff. You may discard the report after review.

## **Management Reports**

Management reports are prepared by Ahlers after the close of each calendar quarter. Your reports are typically available by the 20th of April, July, October and January. Additionally, the standard management reports are prepared for the fiscal year and the FPAR is prepared in January for the preceding calendar year. Management reports are prepared for each clinic and the clinics are accumulated to produce an agency-wide set of reports. The agency totals are accumulated to produce state-wide totals.

While the reports are mailed they are also available on our website ([www.ahlerssoftware.com](http://www.ahlerssoftware.com)) and may be printed. Since two years of reports are maintained on the website some agencies have elected to not receive the printed copies. Access to the reports on the website is password secured. Contact Customer Service if you need a password. The website also allows you to download your data to use in your favorite report writer, or produce your desired report using Ahlers' Build A Report function. Files are updated in the Build A Report option within 24 hours of receipt and allow you to define the data elements you wish to see. And you can even prepare graphs if you wish. Here are the specifics about each of the standard management reports:

**TABLE 1 - VISIT COUNTS BY PURPOSE OF VISIT (Exhibit 5)** - Table 1 provides a count of all Medical, Counseling and Referral Services provided for each type of visit for the reporting period, by gender. The "Visit Types" heading refers to the Purpose of Visit coded on the CVR. This should provide an effective monitoring device for compliance with Title X guidelines. As you look at AL-1, "Visits This Period" refers to visits occurring within the time frame of the date in the upper right-hand corner. By comparing the visit types and medical services, you can monitor the services provided for each type of visit.

**TABLE 2 - UNDUPLICATED BY NEW AND CONTINUING AND GENDER (Exhibit 6)** - This table is segregated into four categories by New and Continuing, Male and Female, all being unduplicated counts. A "Continuing" client is a client that has been provided services before this reporting period. The four time periods refer to current quarter count, clients seen "YTD Calendar" are counted from January 1; "Fiscal" clients are counted since July 1; "Clients-Active All" is the count of clients in your Master File since the last purge. **Source of Payment** is calculated from the way CVRs are coded. This refers to the way clients said they would pay; not how payment was actually made. **Poverty Level - Federal** - The system uses the Family Income and Size, coded on the CVR, to determine how far above or below the federal definition of poverty the clients income lies. Before tables for a first quarter are processed, the federal poverty levels are

updated in the system. **Race** - As coded on the CVR. These statistics produced from Table 2 can be used for determining the provider's growth and client retention, income levels and race, and the effectiveness of client fee policies.

**TABLE 3 - UNDUPLICATED CLIENT COUNTS BY AGE (Exhibit 7)** - This table categorizes and provides the same information as Table 2 except the calculations are based on age. "Age" of clients is based on the age of the client at the first visit of a reporting period. It is valuable in tracking the effectiveness of programs to serve teens besides showing the age groups which are decreasing or increasing.

**TABLE 4 - POVERTY LEVELS BY SOURCE OF PAYMENT AND NEW CLIENTS BY AGE AND TYPE OF VISIT (Exhibit 8)** Table 4 is actually two different types of statistics in one table. Table 4 by itself segregates the assigned Source of Payment by poverty level. This can be used to monitor compliance with Title X regulations as well as local fee policies. Table 4A cross-tabulates the new clients by age and the reason for the first visit, i.e., the age of the client and the reason she came to the clinic the first time.

**TABLE 5 - CONTRACEPTIVE CLIENTS BY MALE OR FEMALE AND AGE (Exhibit 9)** - This table provides a computation of Methods by Male and Female and by Age Group. The "Age" is again based on the first visit of the reporting period. For those not having a method, the reason is shown. Both elements of this table are calculated by the coding on the CVR. The "Method" and "Reason For None" is based on the last visit on file for the reporting period.

**TABLE 6 - CLIENT ZIP CODES BY NEW/CONTINUING AND AGE (Exhibit 10)** - This table prints the zip code of clients as reported on the CVR. It provides an unduplicated count of new and continuing clients and by different age groups. It is beneficial in helping to determine the effectiveness of reaching targeted groups. It has also proven useful in responding to legislative inquiries. All data tables 1 - 6 will contain the same types of information whether they are quarterly, annually, etc. Whatever time period is being processed, only CVRs with a visit date falling within the time frame being processed will be included in any tables.

**TABLE 7 - BIRTHS AVERTED (Exhibit 11)** - This report is produced annually and calculates the number of pregnancies that did not happen due to the client improving her method of contraception. By going from No Method to Orals, for example, her chance for an unintended pregnancy dropped substantially. The calculation is theoretical but represents the best outcome-type report in our package. After determining pregnancies averted, that number is calculated to show how many births, abortions and miscarriages were averted. 12

**Table 8 – HIV TESTING (UNDUPLICATED) BY AGE, RACE, AND ETHNICITY (Exhibit 12)** – This table reports the number of HIV tests as well as the number of clients who received at least 1 HIV test within the reporting period.

**Table 9 – DEMOGRAPHICS OF MALES AND FEMALES SCREENED FOR CHLAMYDIA (Exhibit 13)** – This table reports the ages, races, and ethnicities of all clients screened for Chlamydia within the reporting period. Separate tables are produced for males and females. Positive and Negative result information is also included in these reports, including tests with no results.

**Table 10 – TOBACCO USERS BY AGE, SEX, AND REFERRALS (Exhibit 14)** – This table reports the number of male and female tobacco users, along with referrals provided for those who are tobacco users.

## **FPAR TABLES (Exhibit 15)**

The FPAR (Family Planning Annual Report) tables are produced to meet the Title X reporting requirements. All tables are produced annually. The FPAR tables are numbered to correspond with the table numbers in the federal FPAR report.

**FPAR TABLE 1 - USERS BY RACE, AGE AND GENDER** - This table reports users by age and gender. It includes individuals receiving at least one face-to-face family planning encounter during the reporting period.

**FPAR TABLE 2 & 3 - USERS BY ETHNICITY AND RACE** - Table 2 reports females and Table 3 reports males. In both tables the Race is reported in the left axis and Ethnicity is reported on the top axis.

**FPAR TABLE 4 - NUMBER OF USERS BY INCOME LEVEL** - This table shows unduplicated count of users by poverty level.

**FPAR TABLE 5 - USERS BY INSURANCE COVERAGE STATUS** - This table reports the insurance status of all users. Public health insurance is reported on the top line and Private health insurance is reported in total as well as by family planning coverage. Uninsured and Unknown status is also reported.

**FPAR TABLE 6 - USERS WITH LIMITED ENGLISH PROFICIENCY** - This table reports the total number of users who need an interpreter while being seen in the clinic.

**FPAR TABLE 7 - CONTRACEPTIVE METHODS FOR FEMALE USERS** - This table provides information on the contraceptive method adopted or continued by female users (only) at the end of their last visit. The method does not have to have been provided by the agency and it may have been dispensed/performed during an earlier visit. In addition to the Method the client age groups are shown.

**FPAR TABLE 8 - CONTRACEPTIVE METHODS FOR MALES** - Same as Table 7 except that this report is for male clients.

**FPAR TABLE 9 - CERVICAL CANCER SCREENING ACTIVITIES** - Only the first two lines of this report will be produced by Ahlers. Those are (1) unduplicated users who received a Pap test and (2) total Pap tests performed. The specific Pap results will have to be kept by the clinic. Ahlers' Lab Results software will prove useful in this collection.

**FPAR TABLE 10 - CLINICAL BREAST EXAMS AND REFERRALS** - All clients who received a breast exam are reported on line one. Those who are referred for breast concerns and further evaluation are reported on line two.

**FPAR TABLE 11 - USERS TESTED FOR CHLAMYDIA** - All clients who received a Chlamydia test during the year and reported by sex and by several age categories.

**FPAR TABLE 12 - SELECTED SERVICES FOR MALE AND FEMALE DURING VISITS** - This table provides information on the number of Gonorrhea, Syphilis and HIV Tests during the period. These are important indicators for family planning providers and include all individuals who have received at least one of the named tests during the period.

**FPAR TABLE 13 - MID-LEVEL AND PHYSICIAN STAFFING** - This table reports the number of encounters for Clinical Service Providers and for Non-Clinical Service Providers. The number of FTE's (full time equivalent) must be reported by the agency.

## **Special Reports**

Ahlers produces several hundred special reports each year for family planning agencies. Among them are fiscal year reports (July to June) of patient visits and demographics, lists of patients receiving Implanon, and lists of patients who did not return for an Annual Exam.

Before your staff spends any time going through stacks of charts or developing a 3 x 5 card follow-up method, give the state office or your grantee a call to discuss what Ahlers may be able to do for you. These special reports are often produced at no cost.

## LIST OF EXHIBITS

1. Transaction List
2. CVRs Processed Report
3. CVR Error Listing
4. Summary of CVR Errors
5. Table 1 - Visit Counts by Purpose of Visit
6. Table 2 - Unduplicated by New and Continuing and Sex
7. Table 3 - Unduplicated Client Counts by Age
8. Table 4 - Poverty Levels by Source of Payment and New Clients by Age and Type of Visit
9. Table 5 - Contraceptive Clients by Male or Female and Age
10. Table 6 - Client Zip Codes by New/Continuing and Age
11. Table 7 - Births Averted
12. Table 8 - HIV Testing by Age, Race, and Ethnicity
13. Table 9 - Demographics of Males and Females Screened for Chlamydia
14. Table 10 - Tobacco Users by Age, Sex, and Referrals
15. FPAR Tables
  - Table 1 - Users by Race, Age and Gender
  - Tables 2 & 3 - Users by Ethnicity and Race
  - Table 4 - Number of Users by Income Level
  - Table 5 - Users by Insurance Coverage Status
  - Table 6 - Users with Limited English Proficiency
  - Table 7 - Contraceptive Methods for Female Users
  - Table 8 - Contraceptive Methods for Male Users
  - Table 9 - Cervical Cancer Screening Activities
  - Table 10 - Clinical Breast Exams and Referrals
  - Table 11 - Users Tested for Chlamydia
  - Table 12 - Selected Services for Male and Female During Visits
  - Table 13 - Mid-Level and Physician Staffing
16. CVR - Clinic Visit Record
17. Error Message Master File List

### Exhibit 1, Transaction List

NORTH DAKOTA FAMILY PLANNING DATA SYSTEM TRANSACTIONS LIST AUGUST, 2010														RUN DATE 9/16/2010 RDH125 PAGE 1	
D.O.B.	PATIENT #	T.O.U.	FAIL	D.O.B.	PATIENT #	T.O.U.	FAIL	D.O.B.	PATIENT #	T.O.U.	FAIL	D.O.B.	PATIENT #	T.O.U.	FAIL
SHIPMENT # 00913				08/17/2010	000002305	SUPPLY		08/24/2010	00000966	MEDICAL		09/09/2010	00000995	INIT	
08/02/2010	000001565	HAIRT		08/17/2010	000007937	SUPPLY		08/25/2010	000001072	SUPPLY					
08/02/2010	000003446	HAIRT		08/18/2010	000003761	NETN CHK		08/25/2010	000007319	SUPPLY					
08/02/2010	000006189	PREC		08/18/2010	000004059	NETN CHK		08/25/2010	000008758	SUPPLY					
08/02/2010	000007532	HAIRT		08/18/2010	000006047	SUPPLY		08/26/2010	000008982	INIT					
08/02/2010	000008413	HAIRT		08/18/2010	000007195	SUPPLY		08/26/2010	000008984	INIT					
08/02/2010	000008790	HAIRT		08/18/2010	000007820	STD CHK		08/26/2010	000008985	PREC					
08/02/2010	000008837	HAIRT		08/18/2010	000008561	SUPPLY		08/27/2010	000008964	SUPPLY					
08/02/2010	000008858	HAIRT		08/18/2010	000008632	SUPPLY		08/30/2010	000002663	SUPPLY					
08/02/2010	000008945	HAIRT		08/18/2010	000008846	PROBLER		08/30/2010	000006337	NETN CHK					
08/03/2010	000007689	SUPPLY		08/18/2010	000008861	NETN CHK		08/30/2010	000006485	MEDICAL					
08/03/2010	000008435	SUPPLY		08/18/2010	000008977	INIT		08/30/2010	000008175	NETN CHK					
08/03/2010	000008620	SUPPLY		08/19/2010	000006516	SUPPLY		08/30/2010	000008447	NETN CHK					
08/04/2010	000008984	NETN CHK		08/19/2010	000006820	STD CHK		08/30/2010	000008706	INIT					
08/04/2010	000002981	SUPPLY		08/19/2010	000007428	MEDICAL		08/30/2010	000008987	STD CHK					
08/04/2010	000005991	SUPPLY		08/19/2010	000008220	AMBL		08/31/2010	000002345	SUPPLY					
08/04/2010	000007197	NETN CHK		08/19/2010	000008259	NETN CHK		09/01/2010	000003237	SUPPLY					
08/04/2010	000008035	STD CHK		08/19/2010	000008484	STD CHK		09/01/2010	000003988	MEDICAL					
08/04/2010	000008508	STD CHK		08/19/2010	000008813	NETN CHK		09/01/2010	000007026	SUPPLY					
08/04/2010	000008555	NETN CHK		08/20/2010	000001536	AMBL		09/01/2010	000007187	NETN CHK					
08/04/2010	000008889	SUPPLY		08/20/2010	000001980	AMBL		09/01/2010	000008333	STD CHK					
08/04/2010	000008966	INIT		08/20/2010	000005893	AMBL		09/01/2010	000008339	PREC					
08/05/2010	000003237	SUPPLY		08/20/2010	000007145	AMBL		09/01/2010	000008413	SUPPLY					
08/05/2010	000003357	SUPPLY		08/20/2010	000007225	PROBLER		09/01/2010	000008456	SUPPLY					
08/05/2010	000008967	STD CHK		08/20/2010	000007529	AMBL		09/01/2010	000008741	SUPPLY					
08/09/2010	000002215	NETN CHK		08/20/2010	000007532	AMBL		09/01/2010	000008934	PREC					
08/09/2010	000005761	SUPPLY		08/20/2010	000008429	AMBL		09/01/2010	000008988	MEDICAL					
08/09/2010	000005771	SUPPLY		08/20/2010	000008558	AMBL		09/01/2010	000008989	PREC					
08/09/2010	000007553	SUPPLY		08/20/2010	000008664	AMBL		09/07/2010	000008643	SUPPLY					
08/09/2010	000007598	SUPPLY		08/20/2010	000008681	SUPPLY		09/07/2010	000002357	SUPPLY					
08/09/2010	000008968	INIT		08/20/2010	000008787	AMBL		09/07/2010	000008309	SUPPLY					
08/09/2010	000008969	SUPPLY		08/20/2010	000008973	AMBL		09/07/2010	000008547	SUPPLY					
08/09/2010	000008970	SUPPLY		08/20/2010	000008879	SUPPLY		09/07/2010	000008802	SUPPLY					
08/11/2010	000008074	SUPPLY		08/20/2010	000008920	AMBL		09/07/2010	000008837	SUPPLY					
08/11/2010	000008214	SUPPLY		08/20/2010	000008930	AMBL		09/08/2010	000001899	SUPPLY					
08/11/2010	000008772	NETN CHK		08/20/2010	000008940	SUPPLY		09/08/2010	000005351	STD CHK					
08/11/2010	000008777	MEDICAL		08/22/2010	000008973	SUPPLY		09/08/2010	000006905	PROBLER					
08/11/2010	000008792	INIT		08/23/2010	000008523	SUPPLY		09/08/2010	000007806	NETN CHK					
08/11/2010	000008971	STD CHK		08/23/2010	000008587	SUPPLY		09/08/2010	000007558	SUPPLY					
08/12/2010	000003089	NETN CHK		08/23/2010	000006335	SUPPLY		09/08/2010	000008399	NETN CHK					
08/12/2010	000008246	NETN CHK		08/23/2010	000006467	SUPPLY		09/08/2010	000008733	SUPPLY					
08/12/2010	000008948	PROBLER		08/23/2010	000007297	SUPPLY		09/08/2010	000008704	SUPPLY					
08/12/2010	000008973	STD CHK		08/23/2010	000007444	SUPPLY		09/08/2010	000008990	STD CHK					
08/12/2010	000008974	INIT		08/23/2010	000007463	SUPPLY		09/08/2010	000008991	INIT					
08/13/2010	000001536	SUPPLY		08/23/2010	000008082	INIT		09/09/2010	000005637	SUPPLY					
08/13/2010	000008715	SUPPLY		08/23/2010	000008890	SUPPLY		09/09/2010	000005987	SUPPLY					
08/14/2010	000008560	SUPPLY		08/23/2010	000008976	INIT		09/09/2010	000006638	PREC					
08/14/2010	000008594	SUPPLY		08/23/2010	000008979	INIT		09/09/2010	000007559	NETN CHK					
08/14/2010	000008875	MEDICAL		08/23/2010	000008980	PREC		09/09/2010	000008416	SUPPLY					
08/14/2010	000008883	SUPPLY		08/23/2010	000008981	STD CHK		09/09/2010	000008935	MEDICAL					
08/14/2010	000008975	PREC		08/24/2010	000002984	SUPPLY		09/09/2010	000008992	MEDICAL					
08/14/2010	000008976	INIT		08/24/2010	000003116	SUPPLY		09/09/2010	000008993	STD CHK					

CLINIC SUMMARY:      TOTAL 156      REJECTED      ACCEPTED 156      ACCEPT RATE 100 %

### Exhibit 2, CVRs Processed Report

NORTH DAKOTA FAMILY PLANNING DATA SYSTEM CVRs PROCESSED REPORT													RUN DATE RDH110 PAGE 8		
CLINIC NUMBER	CLINIC NAME	INITIAL VISITS	ANNUAL VISITS	MEDICAL VISITS	PROBLEM VISITS	STD CHK VISITS	METH CK VISITS	COURS VISITS	PREG VISITS	SUPPLY VISITS	MAINT TRANS	TOTAL VISITS	REJECTS	TOTAL CURS	% REJ
		22	157	92	14	109	86	49	27	453	15	1009	0	1024	.0
		20	1	7	0	1	1	0	0	3	0	33	0	33	.0
		42	158	99	14	110	87	49	27	456	15	1042	0	1057	.0
P/C PROCESSING :		0													

### Exhibit 3, CVRs Error Listing

NORTH DAKOTA FAMILY PLANNING DATA SYSTEM										RUN DATE 9/16/2010	
CURs ERROR LISTING										NDH115 PAGE 1	
AUGUST, 2010											
PATIENT NO.	MM VISIT DATE MM	MM LAST	TYPE	MM BIRTH DATE MM	MM MASTER	BATCH	SEQ.	ERROR	ERROR DESCRIPTION	CORRECTED BY AHLERS	
44265	8/31/2010		05	5/05/1979		4	37	01300	REJECT: CHLAMYDIA SECTION NOT COMPLETE	YES	NO
24260	9/02/2010		04	9/01/1987		18	9	01005	REJECT: MEDICAL PROVIDERS MISSING ON A MEDICAL VI	YES	NO
59242	9/07/2010		02	8/23/1971		18	34	01300	REJECT: CHLAMYDIA SECTION NOT COMPLETE	YES	NO

### Exhibit 4, Summary of CVR Errors

PROJECT TOTAL				NORTH DAKOTA FAMILY PLANNING DATA SYSTEM				RUN DATE 9/16/2010	
				SUMMARY OF CVR ERRORS				NDH120 PAGE 7	
				AUGUST, 2010					
				CURS PROCESSED	144				
				CURS REJECTED	3 2.08				
TYPE	ERROR	ERROR MESSAGE			NUMBER	%			
REJECT	01005	REJECT: MEDICAL PROVIDERS MISSING ON A MEDICAL VI			1	.69			
REJECT	01300	REJECT: CHLAMYDIA SECTION NOT COMPLETE			2	1.39			

Exhibit 5, Table 1, Page 1

NORTH DAKOTA - DATA SYSTEM												
TABLE AL-1A SERVICES BY PURPOSE OF VISIT (FEMALES)											PAGE 1	
TOTAL FOR NORTH DAKOTA											1/01/2010-12/31/2010	
	TOTAL	INITIAL	%	ANNUAL	%	MEDICAL	PROBLEMS	STD/INF	METH CK	EDUC/	PREG	SUPPLY
VISITS THIS QUARTER	539	43	8.0	93	17.3	71	12	54	47	2	26	191
VISITS YTD - CALENDAR	7,974	602	7.5	1,635	20.5	1,013	217	721	596	136	228	2,826
VISITS YTD - FISCAL	7,918	601	7.6	1,620	20.5	1,011	217	717	595	136	224	2,797
MEDICAL SERVICES:												
01 BW TX	100	17	2.8	45	2.8	16	14	94	2			
02 BLOOD PRESSURE	3,562	524	87.0	1,596	97.6	473	88	376	317	103	85	
03 CANDIDA TX	180	16	2.7	54	3.3	17	8	83	2			
04 CBE	1,419	303	50.3	1,083	66.2	19	7	4		2	1	
05 CERV. CAP FIT/CHK	1	1	.2									
06 CHLAMYDIA TX	151	1	.2	5	.3	24	17	99	3	1	1	
07 COLPOSCOPY	31					25	6					
08 CONTRACEP. REFILL	4,256	213	35.4	845	51.7	166	44	45	51	53	13	2,826
09 CRYOTHERAPY	5			3	.2	2						
10 3-MONTH INJECTION	754	43	7.1	93	5.7	96	7	7	500	7	1	
11 DIAPHRAGM FIT/CHK	6	1	.2	1	.1	1		1	2			
12 EC	370	24	4.0	25	1.5	258	21	7	14	9	12	
13 GONORRHEA TX	8			1	.1	3		4				
14 HEIGHT/WEIGHT	2,936	488	81.1	1,471	90.0	322	52	154	282	100	67	
15 HPU TX	70	6	1.0	14	.9	16	6	28				
16 HPU VACCINE	154	13	2.2	23	1.4	101	2	4	8	3		
17 IMPLANT INSERT	4	1	.2			2			1			
18 IMPLANT REMOVAL	1			1	.1							
19 IUD INSERTION	37	4	.7	6	.4	26		1				
20 IUD REMOVAL	21	1	.2	6	.4	11	1	1	1			
21 IUD CHECK	44	1	.2	15	.9	8	5	10	5			
22 MEDICAL RX	1,707	357	59.3	790	48.3	244	25	183	7	89	12	
23 MOLLUSCUM TX	22	1	.2	7	.4	6		7		1		
24 PELVIC EXAM	2,022	338	56.1	1,342	82.1	71	50	206	10	4	1	
25 PHYS ASSESS	2,056	385	64.0	1,437	87.9	62	24	137	3	4	4	
26 RX CHANGE	286	61	10.1	87	5.3	59	44	8	25		2	
27 TESTICULAR EXAM												
28 TRICH TX	11	1	.2	3	.2	1		6				
30 BLOOD-GLUCOSE	1			1	.1							
31 CBC	4			1	.1			3				
32 CHLAMYDIA TEST	1,955	331	55.0	907	55.5	103	27	523	17	17	30	
33 GONORRHEA TEST	1,943	328	54.5	903	55.2	101	27	520	17	17	30	
34 HEMOGLOBIN	105	35	5.8	18	1.1	45	3	2	1	1		
35 HEPATITIS B	4	2	.3			1		1				
36 HEPATITIS C	7	2	.3	1	.1	1		3				
37 HERPES TEST	26	1	.2	1	.1	7		17				
38 HIV TEST	279	23	3.8	58	3.5	37	3	143	6	5	4	
39 HPV TYPING	17	2	.3	12	.7	1	1	1				
40 LIPID PROFILE	20	1	.2	9	.6	7	2	1				
41 METABOLIC PANEL	6	1	.2	3	.2	1		1				
42 PAP SMEAR	1,089	213	35.4	843	51.6	17	12	4				
43 PH TEST	524	52	8.6	237	14.5	34	18	180	2	1		
44 NEG PREG TEST	527	60	10.0	79	4.8	111	11	80	59	13	114	
45 POS PREG TEST	118	3	.5	2	.1	7		4		1	101	
46 REPEAT PAP	63			11	.7	26	23	1		1	1	
47 RPR/VDRL	7			1	.1	2		4				
48 SYDOL OCCULT	8	2	.3	5	.3		1					
49 TRICHOMONIASIS	7	1	.2	1	.1	1		4				
50 TSH/T4	15	2	.3	8	.5	3		2				
51 URINALYSIS	160	6	1.0	20	1.2	32	12	85	3		2	
52 NET MOUNT	522	42	7.0	158	9.7	43	28	249	2			

Exhibit 5, Table 1, Page 2

10/27/2010 394		NORTH DAKOTA - DATA SYSTEM											PAGE 2
		TABLE AL-1A SERVICES BY PURPOSE OF VISIT (FEMALES)											1/01/2010-12/31/2010
		TOTAL FOR NORTH DAKOTA											
	TOTAL	INITIAL COMP	%	ANNUAL COMP	%	MEDICAL VISIT	PROBLEM REVISIT	STD/INF CHECK	METH CK DEPO	EDUC/ COUNSEL	PREG TEST	SUPPLY VISIT	
COUNSELING SERVICES:													
61 ABC	1,231	214	35.5	475	29.1	260	25	195	37	5	19	1	
62 BLOOD PRESSURE	145	21	3.5	72	4.4	21	5	7	15	2	2		
63 COLONRECTAL SCRIN.	11	1	.2	6	.4	3		1					
64 CONTRACEPTION	2,543	377	62.6	931	56.9	471	91	180	265	116	74	38	
65 DOMESTIC VIOLENCE	20	2	.3	2	.1	4	2	10					
66 EXERCISE	678	158	26.2	432	26.4	52	2	22	8	1	3		
67 FAM	25	4	.7	7	.4	3		1	2			8	
68 FEMALE EXAM	1,144	238	39.5	739	45.2	69	20	64	6	5	3		
69 GENETIC COUNSEL	17			16	1.0		1						
70 HIV	300	50	8.3	100	6.1	35	3	96	5	5	6		
71 IMMUNIZATIONS	516	136	22.6	265	18.2	70	1	27	12	2	3		
72 INFERTILITY	16	7	1.2	4	.2	2	1	1			1		
73 MALE EXAM	8	1	.2	1	.1			6					
74 MENTAL HEALTH	65	10	1.7	40	2.4	3	4	6	1		1		
75 NUTRITION	1,047	225	37.4	602	36.8	101	4	39	60	4	12		
76 OBESITY	127	28	4.7	91	5.6	5	1	1	1				
77 PAP FOLLOW-UP	370	66	11.0	171	10.5	85	27	11	6	2	1	1	
78 PRECONCEPTION	68	5	.8	35	2.1	3	1	10	2	3	9		
79 PREGNANCY	186	13	2.2	16	1.0	30	2	10	8	2	105		
80 RAPE CRISIS/ABUSE	14	4	.7	3	.2	3		4					
81 REA ADOL COUNSEL	69	19	3.2	17	1.0	19	1	4	5	2	2		
82 SBE/BREAST HEALTH	991	210	34.9	664	40.6	82	7	13	5	5	3	2	
83 STERILIZATION	6			3	.2	1		1		1			
84 SUBSTANCE ABUSE	13	2	.3	3	.2		1	5	1	1			
85 STD FOLLOW-UP	695	72	12.0	139	8.5	76	31	327	10	30	10		
86 TOBACCO CESSATION	367	70	11.6	172	10.5	36	6	26	25	7	23	2	
87 TSE	5			1	.1			4					
REFERRED ELSEWHERE:													
01 ABNORMAL PAP	1							1					
02 BREAST CONCERNS	21	4	.7	10	.6	3		3	1				
03 DOMESTIC VIOLENCE	73	10	1.7	17	1.0	11	3	14	1		2	15	
04 FAM	39					7	1	4	4			23	
05 HIV SERVICES/SCREENING													
06 INFERTILITY	2	1	.2					1					
07 MENTAL HEALTH	25	1	.2	8	.5	7	2	4	1		2		
08 NUTRITIONAL SERVICES	6	1	.2	3	.2	2							
09 OPDP	23			2	.1	2		2			17		
10 OTHER - MEDICAL	91	7	1.2	39	2.4	11	4	14	6	5	5		
11 POSITIVE PREGNANCY	77	1	.2	3	.2	10	2	3	3	3	52		
12 RAPE CRISIS/ABUSE	9	1	.2	2	.1	3		3					
13 SOCIAL SERVICES	35	1	.2	3	.2	3		1	1		26		
14 STERILIZATION	2					1				1			
15 SUBSTANCE ABUSE	7	1	.2	2	.1		1	2		1			
16 TOBACCO CESSATION	117	20	3.3	38	2.3	19	1	6	12	2	18	1	
17 WIC	39			1	.1	2		1		1	34		
18 WOMEN'S WAY	13	5	.8	6	.4	1					1		
UNDUPLICATED REFERRAL VISITS	446	45	7.5	120	7.3	70	17	49	23	10	73	39	
UNDUPLICATED COUNSELING VISIT	4,101	529	87.9	1,506	92.1	680	166	562	302	136	171	49	

### Exhibit 6, Table 2

10/27/2010 397		NORTH DAKOTA - DATA SYSTEM								PAGE 5
		TABLE AL-2 UNDUPLICATED CLIENT COUNTS BY NEW OR CONTINUING AND SEX								1/01/2010-12/31/2010
		TOTAL FOR NORTH DAKOTA								
	TOTAL	PCNT	NEW	PCNT	CONT	PCNT	MALE	PCNT	FEMALE	PCNT
CLIENTS THIS QUARTER	545	100.0	275	50.5	270	49.5	31	5.7	514	94.3
CLIENTS YTD - CALENDAR	6,361	100.0	6,361	100.0			368	5.8	5,993	94.2
CLIENTS YTD - FISCAL	6,345	100.0	6,306	99.4	39	.6	366	5.8	5,979	94.2
CLIENTS ACTIVE - ALL	6,361	100.0	6,361	100.0			368	5.8	5,993	94.2
<b>SOURCE OF PAYMENT</b>										
1 NO FEE	2,365	37.2	2,365	37.2			128	34.8	2,237	37.3
2 PARTIAL FEE	1,879	29.5	1,879	29.5			105	28.5	1,774	29.6
3 FULL FEE	680	10.7	680	10.7			73	19.8	607	10.1
4 TITLE XIX (MEDICAID)	369	5.8	369	5.8			16	4.3	353	5.9
5 PRIVATE INSURANCE	1,068	16.8	1,068	16.8			46	12.5	1,022	17.1
TOTAL	6,361	100.0	6,361	100.0			368	100.0	5,993	100.0
<b>POVERTY LEVEL: FEDERAL</b>										
100% OR LESS	2,952	46.4	2,952	46.4			156	42.4	2,796	46.7
101% - 125%	539	8.5	539	8.5			17	4.6	522	8.7
126% - 150%	466	7.3	466	7.3			23	6.3	443	7.4
151% - 175%	410	6.4	410	6.4			18	4.9	392	6.5
176% - 200%	413	6.5	413	6.5			25	6.8	388	6.5
201% - 250%	533	8.4	533	8.4			33	9.0	500	8.3
> 250%	1,004	15.8	1,004	15.8			92	25.0	912	15.2
UNKNOWN	44	.7	44	.7			4	1.1	40	.7
TOTAL	6,361	100.0	6,361	100.0			368	100.0	5,993	100.0
<b>RACE</b>										
1 WHITE	5,880	92.4	5,880	92.4			304	82.6	5,576	93.0
2 BLACK	111	1.7	111	1.7			32	8.7	79	1.3
3 AM. IND./AK NATIVE	250	3.9	250	3.9			24	6.5	226	3.8
4 ASIAN	42	.7	42	.7			2	.5	40	.7
5 PACIFIC ISLANDER	3	.0	3	.0					3	.1
6 UNKNOWN/NOT REPORTED	34	.5	34	.5			3	.8	31	.5
7 MULTI-RACIAL	41	.6	41	.6			3	.8	38	.6
TOTAL	6,361	100.0	6,361	100.0			368	100.0	5,993	100.0
<b>HISPANIC ORIGIN</b>										
WHITE	85	1.3	85	1.3			5	1.4	80	1.3
BLACK	3	.0	3	.0			1	.3	2	.0
OTHER	31	.5	31	.5			2	.5	29	.5
<b>INTERPRETER NEEDED</b>										
YES	44	.7	44	.7			3	.8	41	.7
NO	6,317	99.3	6,317	99.3			365	99.2	5,952	99.3

Exhibit 7, Table 3

10/27/2010 390		NORTH DAKOTA - DATA SYSTEM								PAGE 6
TABLE AL-3 UNDUPLICATED CLIENT COUNTS BY AGE		TOTAL FOR NORTH DAKOTA								1/01/2010-12/31/2010
	TOTAL	< 15	15-17	18-19	20-24	25-29	30-34	35-40	41+	
CLIENTS THIS QUARTER	545	10	51	73	173	128	48	29	33	
CLIENTS YTD - CALENDAR	6,361	54	501	875	2,370	1,334	534	325	368	
CLIENTS YTD - FISCAL	6,345	54	499	875	2,361	1,332	532	324	368	
CLIENTS ACTIVE ALL	6,361	54	501	875	2,370	1,334	534	325	368	
CLIENTS - NEW TO PROGR	6,361	54	501	875	2,370	1,334	534	325	368	
CLIENTS - CONTINUING										
SOURCE OF PAYMENT										
1 NO FEE	2,365	27	320	526	952	304	115	58	63	
2 PARTIAL FEE	1,879	1	48	185	817	436	183	99	110	
3 FULL FEE	680	5	29	29	168	231	80	61	77	
4 TITLE XIX (MEDICAID)	369	13	51	45	89	96	38	25	12	
5 PRIVATE INSURANCE	1,068	8	53	90	344	267	118	82	106	
TOTAL	6,361	54	501	875	2,370	1,334	534	325	368	
POVERTY LEVEL: FEDERAL										
100% OR LESS	2,952	42	403	637	1,166	388	144	95	77	
101% - 125%	539	4	19	70	237	103	52	28	26	
126% - 150%	466		22	59	203	95	43	19	25	
151% - 175%	410	1	9	31	153	122	49	22	23	
176% - 200%	414	1	4	31	179	105	43	19	32	
201% - 250%	533		8	16	187	156	65	44	57	
> 250% UNKNOWN	1,047	6	36	31	245	365	138	98	128	
TOTAL	6,361	54	501	875	2,370	1,334	534	325	368	
RACE										
1 WHITE	5,880	41	445	813	2,202	1,241	483	304	351	
2 BLACK	111	1	6	16	40	20	17	5	6	
3 AM. IND/AN NATIVE	250	9	45	34	73	45	24	12	8	
4 ASIAN	42			3	27	7	2	1	2	
5 PACIFIC ISLANDER	3		1		1		1			
6 UNKNOWN/NOT REPORTED	34	1	1	3	16	9	3	1		
7 MULTIRACIAL	41	2	3	6	11	12	4	2	1	
TOTAL	6,361	54	501	875	2,370	1,334	534	325	368	
HISPANIC ORIGIN										
WHITE	85		6	16	33	17	6	3	4	
BLACK	3			1	1			1		
OTHER	31		1	5	14	8	2	1		
GENDER										
1 FEMALE	5,993	51	480	843	2,229	1,219	506	313	352	
2 MALE	368	3	21	32	141	115	28	12	16	
INTERPRETER NEEDED										
1 YES	44			6	19	11	1	4	3	
2 NO	6,317	54	501	869	2,351	1,323	533	321	365	

**Exhibit 8, Table 4**

NORTH DAKOTA - DATA SYSTEM										
10/27/2010	399	TABLE AL-4 INITIAL & ANNUAL CLIENT POVERTY LEVEL BY SOURCE OF PAYMENT TOTAL FOR NORTH DAKOTA							PAGE 7	1/01/2010-12/31/2010
SOURCE OF PAYMENT	TOTAL	100% <	101%-125%	126%-150%	151%-175%	176%-200%	201%-250%	> 250%	UNKNOWN	
1 NO FEE	757	711	25	7	6	2	1	5		
2 PARTIAL FEE	538	27	107	104	97	92	93	18		
3 FULL FEE	156	3		2	2	1	5	143		
4 TITLE XIX (MEDICAID)	132	96	21	6	5		2	2		
5 PRIVATE INSURANCE	634	148	40	49	36	52	92	217		
TOTAL	2,217	985	193	168	146	147	193	385		

TABLE AL-4A NEW CLIENTS BY AGE AND TYPE OF FIRST VISIT							
AGE							
TYPE OF FIRST VISIT	TOTAL	< 15	15-17	18-19	20-24	25-29	30+
1 INITIAL COMP VISIT	8		1	1	5	1	
INITIAL COMP W/PG TEST	490	19	78	98	148	74	73
2 ANNUAL COMP VISIT	1,266	2	55	125	478	306	300
3 MEDICAL VISIT	800	11	88	143	327	131	100
4 PROBLEM RE-VISIT	158		13	22	51	41	31
5 STD/INFECTION CHECK	826	5	51	90	325	210	145
6 METHOD CHECK/DEPO	506	2	55	72	149	91	137
7 EDUCATION/COUNSELING ON	123	4	18	16	39	29	17
8 PREGNANCY TEST ONLY	192	2	22	29	81	34	24
9 SUPPLY VISIT	1,992	9	120	279	767	417	400
TOTAL	6,361	54	501	875	2,370	1,334	1,227

**Exhibit 9, Table 5**

NORTH DAKOTA - DATA SYSTEM											
10/27/2010	400	TABLE AL-5 CONTRACEPTIVE CLIENTS BY MALE AND FEMALE AND AGE TOTAL FOR NORTH DAKOTA								PAGE 8	1/01/2010-12/31/2010
AGE											
CONTRACEPTIVE METHOD (AT END OF PERIOD)	TOTAL	PCNT	FEMALE	MALE	< 15	15-17	18-19	20-24	25-29	30+	
01 STERILIZATION (MALE)	11	.2	10	1				4	1	6	
02 STERILIZATION (FEMALE)	63	1.0	63					1	10	52	
03 ORALS	3,864	60.7	3,860	4	30	317	608	1,510	746	653	
04 IUD	153	2.4	153			1	7	45	52	48	
05 FERTILITY AWARENESS N	2		2					1		1	
06 HORMONE IMPLANT	11	.2	11			1	1	6	1	2	
07 CONDOM (MALE)	638	10.0	345	293	4	46	66	259	158	105	
08 CONDOM (FEMALE)	24	.4	16	8		4	1	11	4	4	
09 SPERRICIDE	1		1							1	
10 DIAPHRAGM											
11 3 - MONTH INJECTION	769	12.1	769		7	79	106	228	149	200	
12 HORMONAL PATCH	76	1.2	76		1	12	13	20	18	12	
13 VAGINAL RING	280	4.4	280			10	22	123	84	41	
14 SPONGE	1		1						1		
15 WITHDRAWAL	8	.1	8		1		3	1	2	1	
16 ABSTINENCE	73	1.1	66	7	4	9	4	23	13	20	
17 EC	53	.8	53		1	4	15	23	5	5	
18 CERVICAL CAP											
19 NONE	322	5.1	270	52	6	17	28	114	85	72	
20 OTHER	12	.2	9	3		1	1	1	5	4	
TOTAL	6,361	100.0	5,993	368	54	501	875	2,370	1,334	1,227	
REASON FOR NO METHOD											
1 PREGNANT	111	34.5	111		1	4	18	51	22	15	
2 SEEKING PREGNANCY	59	18.3	58	1			1	23	25	10	
3 OTHER REASON	59	18.3	46	13	5	7	2	16	16	13	
4 INFERTILITY	3	.9	3							3	
5 OTHER MEDICAL REASON	26	8.1	22	4		2	2	5	3	14	
6 RELYING ON PARTNER ME	64	19.9	30	34		4	5	19	19	17	
TOTAL	322	100.0	270	52	6	17	28	114	85	72	

### Exhibit 10, Table 6

10/27/2010		401		NORTH DAKOTA - DATA SYSTEM								PAGE 9
TABLE AL-6 CLIENT ZIP CODES BY NEW OR CONTINUING & AGE				TOTAL FOR NORTH DAKOTA								1/01/2010-12/31/2010
ZIP CODE	TOTAL	NEW	CONT	< 15	15 - 17	18 - 19	20 - 24	25 - 29	30 - 34	35 - 40	41 >	
00058	1	1										
04578	1	1										
04730	1	1					1					
05401	1	1					1					
05810	1	1					1					
28326	1	1				1						
31015	1	1							1			
32433	1	1						1				
33173	1	1								1		
35244	1	1						1				
36330	1	1					1					
46277	1	1						1				
46835	1	1					1					
51245	1	1									1	
52806	1	1					1					
53960	2	2					1				1	
55001	1	1				1						
55033	1	1				1						
55044	1	1				1						
55336	1	1									1	
55370	1	1				1						
55407	1	1						1				
55413	1	1							1			
55414	1	1					1					
55423	1	1					1					
55433	1	1					1					
55443	1	1							1			
55446	1	1					1					
55721	1	1					1					
55744	2	2				1			1			
55902	1	1					1					
56236	1	1							1			
56240	1	1				1						
56296	1	1				1						
56308	1	1					1					
56360	1	1							1			
56387	1	1				1						
56501	4	4				1	2	1				
56502	1	1					1					
56514	1	1								1		
56515	1	1					1					
56520	18	18			5	5	3	1	1	3		
56522	2	2				1		1				
56523	2	2						2				
56528	1	1				1						
56529	10	10					4	4		2		
56533	1	1				1						
56536	1	1						1				
56537	4	4				1		2	1			
56542	1	1					1					
56546	1	1					1					
56547	1	1						1				
56549	3	3						3				
56554	1	1								1		
56556	1	1									1	
56560	75	75			2	4	30	29	4	2	4	
56561	2	2				1	1					
56562	1	1						1				
56567	1	1							1			

Exhibit 11, Table 7, Page 1

NORTH DAKOTA - DATA SYSTEM											
10/27/2010	409	TABLE A1-7 BIRTHS AVERTED TOTAL FOR NORTH DAKOTA							PAGE 17 1/01/2010-12/31/2010		
CONTRACEPTIVE METHOD (2) (BEGINNING OF FIRST FP VISIT)	EXPECTED PREG. PER 1000 PATIENTS (1)	ADOLESCENTS (19 AND UNDER)			ADULTS (20 AND OVER)			TOTAL FAMILY PLANNING CLIENTS			
		PATIENTS	PERCENT	PREGS.	PATIENTS	PERCENT	PREGS.	PATIENTS	PERCENT	PREGS.	
01 STERILIZATION (MALE)	5				9	.2		9	.2		
02 STERILIZATION (FEMALE)	5				54	1.2		54	.9		
03 ORALS	80	599	43.6	48	2,304	49.9	184	2,903	48.4	232	
04 IUD	8	5	.4		112	2.4	1	117	2.0	1	
05 FERTILITY AWARENESS ME	250	1	.1		3	.1	1	4	.1	1	
06 HORMONE IMPLANT	1	1	.1		2			3	.1		
07 CONDOM (MALE)	150	361	26.3	54	811	17.6	122	1,172	19.6	176	
08 CONDOM (FEMALE)	150	9	.7	1	32	.7	5	41	.7	6	
09 SEPRNICIDE	290				4	.1	1	4	.1	1	
10 DIAPHRAGM	200										
11 3 - MONTH INJECTION	30	138	10.0	4	423	9.2	13	561	9.4	17	
12 HORMONAL PATCH	80	14	1.0	1	41	.9	3	55	.9	4	
13 VAGINAL RING	80	18	1.3	1	188	4.1	15	206	3.4	16	
14 SPONGE	240										
15 WITHDRAWAL	270	6	.4	2	21	.5	6	27	.5	8	
16 ABSTINENCE		54	3.9		93	2.0		147	2.5		
17 EC	80	7	.5	1	4	.1		11	.2	1	
18 CERVICAL CAP	200										
19 NONE	850	158	11.5	134	506	11.0	430	664	11.1	564	
20 OTHER		3	.2		12	.3		15	.3		
<b>CONTRACEPTIVE METHOD (END OF LAST FP VISIT)</b>											
01 STERILIZATION (MALE)	5				10	.2		10	.2		
02 STERILIZATION (FEMALE)	5				63	1.4		63	1.1		
03 ORALS	80	955	69.5	76	2,905	62.9	232	3,860	64.4	308	
04 IUD	8	8	.6		145	3.1	1	153	2.6	1	
05 FERTILITY AWARENESS ME	250				2		1	2		1	
06 HORMONE IMPLANT	1	2	.2		9	.2		11	.2		
07 CONDOM (MALE)	150	75	5.5	11	270	5.9	41	345	5.8	52	
08 CONDOM (FEMALE)	150	4	.3	1	12	.3	2	16	.3	3	
09 SEPRNICIDE	290				1			1			
10 DIAPHRAGM	200										
11 3 - MONTH INJECTION	30	192	14.0	6	577	12.5	17	769	12.8	23	
12 HORMONAL PATCH	80	26	1.9	2	50	1.1	4	76	1.3	6	
13 VAGINAL RING	80	32	2.3	3	248	5.4	20	280	4.7	23	
14 SPONGE	240				1			1			
15 WITHDRAWAL	270	4	.3	1	4	.1	1	8	.1	2	
16 ABSTINENCE		16	1.2		50	1.1		66	1.1		
17 EC	80	20	1.5	2	33	.7	3	53	.9	5	
18 CERVICAL CAP	200										
19 NONE	850	39	2.8	33	231	5.0	196	270	4.5	229	
20 OTHER		1	.1		8	.2		9	.2		
<b>ESTIMATED PREGNANCIES AVERTED (3)</b>					111			263			374

**Exhibit 11, Table 7, Page 2**

		NORTH DAKOTA - DATA SYSTEM						PAGE 18
10/27/2010	410	TABLE AL-7A BIRTHS AVERTED TOTAL FOR NORTH DAKOTA						1/01/2010-12/31/2010
		% DISTRIBUTION OF UNINTENDED PREGNANCIES BY OUTCOME (4)			ESTIMATED BIRTHS, ABORTIONS, AND MISCARRIAGES AVERTED			
		BIRTHS	ABORTIONS	MISCARRS.	BIRTHS	ABORTIONS	MISCARRS.	
19 AND UNDER	111	42.5	44.6	12.9	47	50	14	
20 AND OVER	263	43.4	43.5	13.1	114	114	35	
TOTAL	374				161	164	49	

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(1) BASED ON THE AMERICAN JOURNAL OF PUBLIC HEALTH  
 (2) A FIRST FAMILY PLANNING VISIT TO THE SERVICE SITE WHICH MAY HAVE OCCURRED ANY TIME PREVIOUSLY  
 (3) THE ABOVE APPROACH MOST LIKELY UNDERESTIMATES THE TOTAL PREGNANCIES AVERTED  
 (4) PERCENTAGES ARE BASED ON NATIONAL RESEARCH ESTIMATES

**Exhibit 12, Table 8**

		NORTH DAKOTA - DATA SYSTEM									PAGE 19	
10/27/2010	411	TABLE AL-8 HIV TESTING (UNDUPLICATED) BY AGE, RACE & ETHNICITY TOTAL FOR NORTH DAKOTA									1/01/2010-12/31/2010	
		TOTAL	WHITE	BLACK	AM. IND ALASKAN	ASIAN	PAC ISL HAWAIIAN	MULTI RACIAL	UNKNOWN UNREPORTED	TOTAL	HISPANIC	NON- HISPANIC
TOTAL TESTS		427	371	25	16	3		3	9	427	10	389
TOTAL CLIENTS TESTED		423	367	25	16	3		3	9	423	10	385
FEMALE AGE (YEARS)												
UNDER 15												
AGES 15 - 17		29	22	1	4				2	29		27
AGES 18 - 19		39	37	1					1	39		34
AGES 20 - 24		105	95	4	2	2		1	1	105	1	100
AGES 25 - 29		65	57	2	4			1	1	65	4	55
AGES 30 - 34		25	21		2				2	25	1	22
AGES 35 - 39												
AGES 40 - 44		14	13		1					14		14
AGES 45 +												
TOTAL		277	245	8	13	2		2	7	277	6	252
FEMALE ETHNICITY												
HISPANIC		6	5					1				
NON-HISPANIC		252	224	8	12	1		1	6			
UNKNOWN		19	16		1	1			1			
TOTAL		277	245	8	13	2		2	7			
MALE AGE (YEARS)												
UNDER 15												
AGES 15 - 17		4	2		1				1	4		4
AGES 18 - 19		11	9	2						11		10
AGES 20 - 24		54	48	5		1				54	1	51
AGES 25 - 29		55	47	5	1			1	1	55	3	49
AGES 30 - 34												
AGES 35 - 39		12	8	4						12		10
AGES 40 - 44		10	8	1	1					10		9
AGES 45 +												
TOTAL		146	122	17	3	1		1	2	146	4	133
MALE ETHNICITY												
HISPANIC		4	3					1				
NON-HISPANIC		133	112	15	3	1			2			
UNKNOWN		9	7	2								
TOTAL		146	122	17	3	1		1	2			

Exhibit 13, Table 9A

10/27/2010 412		NORTH DAKOTA - DATA SYSTEM TABLE AL-9A DEMOGRAPHICS OF FEMALES SCREENED FOR CHLAMYDIA TOTAL FOR NORTH DAKOTA						PAGE 20 1/01/2010-12/31/2010
	TOTAL	NEGATIVE	% NEG.	POSITIVE	% POS.	NO RESULT	% NO RESULT	
<b>AGE</b>								
0 - 14								
15 - 17	209	149	71.3	12	5.7	48	23.0	
18 - 19	304	228	75.0	22	7.2	54	17.8	
20 - 24	834	655	78.5	58	7.0	121	14.5	
25 - 29	362	291	80.4	12	3.3	59	16.3	
30 - 34	114	96	84.2	2	1.8	16	14.0	
35 - 40	68	58	85.3	1	1.5	9	13.2	
40 +	64	49	76.6	1	1.6	14	21.9	
UNKNOWN								
TOTAL	1,955	1,526	78.1	108	5.5	321	16.4	
<b>RACE</b>								
WHITE	1,795	1,408	78.4	99	5.5	288	16.0	
BLACK	32	26	81.3	2	6.3	4	12.5	
AMER. INDIAN	85	57	67.1	6	7.1	22	25.9	
ASIAN	13	13	100.0					
HAW./PAC. ISL.	1	1	100.0					
OTHER								
UNKNOWN	10	9	90.0			1	10.0	
MULTI-RACIAL	19	12	63.2	1	5.3	6	31.6	
TOTAL	1,955	1,526	78.1	108	5.5	321	16.4	
<b>ETHNICITY</b>								
HISPANIC	41	33	80.5	2	4.9	6	14.6	
NON-HISPANIC	1,815	1,419	78.2	102	5.6	294	16.2	
UNKNOWN	99	74	74.7	4	4.0	21	21.2	
TOTAL	1,955	1,526	78.1	108	5.5	321	16.4	

Exhibit 13, Table 9B

10/27/2010 413		NORTH DAKOTA - DATA SYSTEM TABLE AL-9B DEMOGRAPHICS OF MALES SCREENED FOR CHLAMYDIA TOTAL FOR NORTH DAKOTA						PAGE 21 1/01/2010-12/31/2010
	TOTAL	NEGATIVE	% NEG.	POSITIVE	% POS.	NO RESULT	% NO RESULT	
<b>AGE</b>								
0 - 14								
15 - 17	9	6	66.7	1	11.1	2	22.2	
18 - 19	26	15	57.7	6	23.1	5	19.2	
20 - 24	129	85	65.9	22	17.1	22	17.1	
25 - 29	108	77	71.3	12	11.1	19	17.6	
30 - 34	25	19	76.0	3	12.0	3	12.0	
35 - 40	9	8	88.9			1	11.1	
40 +	14	10	71.4	1	7.1	3	21.4	
UNKNOWN								
TOTAL	320	220	68.8	45	14.1	55	17.2	
<b>RACE</b>								
WHITE	276	196	71.0	33	12.0	47	17.0	
BLACK	30	17	56.7	10	33.3	3	10.0	
AMER. INDIAN	7	4	57.1	2	28.6	1	14.3	
ASIAN	2	1	50.0			1	50.0	
HAW./PAC. ISL.								
OTHER								
UNKNOWN	3	1	33.3			2	66.7	
MULTI-RACIAL	2	1	50.0			1	50.0	
TOTAL	320	220	68.8	45	14.1	55	17.2	
<b>ETHNICITY</b>								
HISPANIC	7	5	71.4	1	14.3	1	14.3	
NON-HISPANIC	287	198	69.0	41	14.3	48	16.7	
UNKNOWN	26	17	65.4	3	11.5	6	23.1	
TOTAL	320	220	68.8	45	14.1	55	17.2	

### Exhibit 13, Table 9C

10/27/2010 414		NORTH DAKOTA - DATA SYSTEM TABLE AL-9C FAMILY PLANNING CHLAMYDIA TESTING TOTAL FOR NORTH DAKOTA				PAGE 22 1/01/2010-12/31/2010
		TOTAL TESTS		# POSITIVE TESTS		
		FEMALE	MALE	FEMALE	MALE	
YTD 2009						
2010		1,955	320	108	45	
YTD TOTAL		1,955	320	108	45	

### Exhibit 14, Table 10

10/27/2010 415		NORTH DAKOTA - DATA SYSTEM TABLE AL-10 TOBACCO USERS BY AGE, SEX & REFERRALS TOTAL FOR NORTH DAKOTA									PAGE 23 1/01/2010-12/31/2010
		TOTAL	< 15	15-17	18-19	20-24	25-29	30-34	35-40	41+	
<b>FEMALE</b>											
<b>TBACCO USER</b>											
	NO	4,463	47	392	670	1,673	841	338	231	271	
	YES	1,530	4	88	173	556	378	168	82	81	
	TOTAL	5,993	51	480	843	2,229	1,219	506	313	352	
<b>REFERRALS</b>											
	01 ABNORMAL PAP	1				1					
	02 BREAST CONCERNS	4				2	1	1			
	03 DOMESTIC VIOLENCE	17		4	2	7	3	1			
	04 FAM	6				1	2		2	1	
	05 HIV SERVICES/SCREENING						2				
	06 INFERTILITY	2					1	1			
	07 MENTAL HEALTH	9			2	4	1			1	
	08 NUTRITIONAL SERVICES	1				1					
	09 OPDP	7			3	4					
	10 OTHER - MEDICAL	29			2	7	9	5	3	3	
	11 POSITIVE PREGNANCY	28			5	14	4	4		1	
	12 RAPE CRISIS/ABUSE	4		1		1	1	1			
	13 SOCIAL SERVICES	16			3	6	2	4		1	
	14 STERILIZATION										
	15 SUBSTANCE ABUSE	4			1		2			1	
	16 TOBACCO CESSATION	80	1	9	7	26	13	12	4	8	
	17 NIC	16			2	7	1	4	1	1	
	18 WOMEN'S WAY	4							1	3	
<b>MALE</b>											
<b>TBACCO USER</b>											
	NO	223	3	17	23	83	64	13	8	12	
	YES	145		4	9	58	51	15	4	4	
	TOTAL	368	3	21	32	141	115	28	12	16	
<b>REFERRALS</b>											
	01 ABNORMAL PAP										
	02 BREAST CONCERNS										
	03 DOMESTIC VIOLENCE										
	04 FAM										
	05 HIV SERVICES/SCREENING										
	06 INFERTILITY										
	07 MENTAL HEALTH	4				3		1			
	08 NUTRITIONAL SERVICES										
	09 OPDP										
	10 OTHER - MEDICAL	1					1				
	11 POSITIVE PREGNANCY										
	12 RAPE CRISIS/ABUSE										
	13 SOCIAL SERVICES										
	14 STERILIZATION										
	15 SUBSTANCE ABUSE										
	16 TOBACCO CESSATION	2			1		1				
	17 NIC										
	18 WOMEN'S WAY										

### Exhibit 15, FPAR Table 1

NORTH DAKOTA - DATA SYSTEM				
10/08/2010	118	FPAR TABLE 1: UNDUPLICATED USERS BY AGE AND GENDER	PAGE 1	
TOTAL FOR NORTH DAKOTA				
FOR PERIOD BEGINNING 1/01/2010 ENDING 12/31/2010				
AGE GROUP	FEMALES	MALES	TOTAL	
UNDER 15	38	3	41	
15 - 17	332	16	348	
18 - 19	522	29	551	
20 - 24	1,361	114	1,475	
25 - 29	726	88	814	
30 - 34	287	21	308	
35 - 39	155	7	162	
40 - 44	109	3	112	
OVER 44	140	10	150	
<b>TOTAL</b>	<b>3,670</b>	<b>291</b>	<b>3,961</b>	

### Exhibit 15, FPAR Table 2

NORTH DAKOTA - DATA SYSTEM				
10/08/2010	119	FPAR TABLE 2: UNDUPLICATED FEMALES BY ETHNICITY AND RACE	PAGE 2	
TOTAL FOR NORTH DAKOTA				
FOR PERIOD BEGINNING 1/01/2010 ENDING 12/31/2010				
RACE	HISPANIC OR LATINO	NOT HISPANIC OR LATINO	UNKNOWN NOT REPORTED	TOTAL FEMALE USERS
AMERICAN INDIAN OR ALASKA NATIVE	6	150	13	169
ASIAN		22	1	23
BLACK OR AFRICAN AMERICAN	1	53	4	58
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	1	2		3
WHITE	59	3,143	162	3,364
MORE THAN ONE RACE	3	22	5	30
UNKNOWN/NOT REPORTED	14	7	2	23
<b>TOTAL FEMALE USERS</b>	<b>84</b>	<b>3,399</b>	<b>187</b>	<b>3,670</b>

### Exhibit 15, FPAR Table 3

NORTH DAKOTA - DATA SYSTEM					
10/08/2010	120	FPAR TABLE 3:	UNDUPLICATED MALES BY ETHNICITY AND RACE	PAGE 3	
TOTAL FOR SOUTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010
RACE		HISPANIC OR LATINO	NOT HISPANIC OR LATINO	UNKNOWN NOT REPORTED	TOTAL MALE USERS
AMERICAN INDIAN OR ALASKA NATIVE			18	2	20
ASIAN			2		2
BLACK OR AFRICAN AMERICAN		1	18	3	22
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER					
WHITE		2	220	20	242
MORE THAN ONE RACE		1	1		2
UNKNOWN/NOT REPORTED		2	1		3
TOTAL MALE USERS		6	260	25	291

### Exhibit 15, FPAR Table 4

NORTH DAKOTA - DATA SYSTEM					
10/08/2010	121	FPAR TABLE 4:	UNDUPLICATED USERS BY INCOME LEVEL	PAGE 4	
TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010
INCOME AS % OF POVERTY	NUMBER OF USERS				
100% OR LESS	1,915				
101% - 150%	625				
151% - 200%	497				
201% - 250%	317				
OVER 250%	572				
UNKNOWN	35				
TOTAL	3,961				

### Exhibit 15, FPAR Table 5

NORTH DAKOTA - DATA SYSTEM					
10/08/2010	122	FPAR TABLE 5:	UNDUPLICATED USERS BY HEALTH INSURANCE		PAGE 5
TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010
					NUMBER OF USERS
PRINCIPAL HEALTH INSURANCE COVERING PRIMARY MEDICAL CARE					319
PUBLIC HEALTH INSURANCE COVERING PRIMARY MEDICAL CARE					687
PRIVATE HEALTH INSURANCE COVERING PRIMARY MEDICAL CARE					65
COVERAGE FOR ALL OR SOME FAMILY PLANNING SERVICES					499
COVERAGE FOR NO FAMILY PLANNING SERVICES					2,245
COVERAGE UNKNOWN FOR FAMILY PLANNING SERVICES					146
UNINSURED (NO PUBLIC OR PRIVATE HEALTH INSURANCE)					3,961
UNKNOWN/NOT REPORTED					
TOTAL					

### Exhibit 15, FPAR Table 6

NORTH DAKOTA - DATA SYSTEM					
10/08/2010	123	FPAR TABLE 6:	UNDUPLICATED USERS WITH LIMITED ENGLISH PROFICIENCY (LEP)		PAGE 6
TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010
					NUMBER OF USERS
USERS WITH LIMITED ENGLISH PROFICIENCY (LEP)					26

### Exhibit 15, FPAR Table 7

NORTH DAKOTA - DATA SYSTEM											
10/08/2010	124	FPAR TABLE 7:	UNDULICATED FEMALES BY PRIMARY METHOD AND AGE					PAGE	7		
TOTAL FOR NORTH DAKOTA											
FOR PERIOD BEGINNING 1/01/2010 ENDING 12/31/2010											
PRIMARY METHOD	< 15	15-17	UNDULICATED NUMBER OF FEMALE USERS BY AGE						> 44	TOTAL FEMALES	
			18-19	20-24	25-29	30-34	35-39	40-44			
FEMALE SURGICAL STERILIZATION					4	11	9	10	14	48	
INTRAUTERINE DEVICE (IUD)		1	4	37	36	21	11	2	5	117	
HORMONAL IMPLANT		1		6	1					8	
1-MONTH HORMONAL INJECTION											
3-MONTH HORMONAL INJECTION	6	69	97	197	134	58	45	38	40	684	
ORAL CONTRACEPTIVE	20	193	324	794	367	133	64	36	45	1,976	
HORMONAL/CONTRACEPTIVE PATCH		7	10	12	11	3		2		45	
VAGINAL RINGS		6	11	62	37	12		4	1	133	
CERVICAL CAP/DIAPHRAGM											
CONTRACEPTIVE SPONGE					1					1	
FEMALE CONDOM		2	1	9	2	2			1	17	
SPERMICIDE (USED ALONE)									1	1	
FERTILITY AWARENESS METHOD (FAM)				1		1				2	
ABSTINENCE	3	6	3	17	8	5		2	7	53	
OTHER METHOD	2	5	16	24	10	4			3	65	
METHOD UNKNOWN											
<b>NO METHOD</b>											
PREGNANT OR SEEKING PREGNANCY	1	3	16	53	38	9	2	3	1	126	
OTHER REASON	2	7	6	25	21	7	4	9	12	93	
<b>RELY ON MALE METHOD</b>											
VASECTOMY				3		3	1			7	
MALE CONDOM	4	32	34	121	56	18	12	6	11	294	
<b>TOTAL FEMALE USERS</b>	<b>38</b>	<b>332</b>	<b>522</b>	<b>1,361</b>	<b>726</b>	<b>287</b>	<b>155</b>	<b>109</b>	<b>140</b>	<b>3,670</b>	

### Exhibit 15, FPAR Table 8

NORTH DAKOTA - DATA SYSTEM											
10/08/2010	125	FPAR TABLE 8:	UNDULICATED MALES BY PRIMARY METHOD AND AGE					PAGE	8		
TOTAL FOR NORTH DAKOTA											
FOR PERIOD BEGINNING 1/01/2010 ENDING 12/31/2010											
PRIMARY METHOD	< 15	15-17	UNDULICATED NUMBER OF MALE USERS BY AGE						> 44	TOTAL MALES	
			18-19	20-24	25-29	30-34	35-39	40-44			
VASECTOMY				1						1	
MALE CONDOM		8	25	96	70	19	4	2	8	232	
FERTILITY AWARENESS METHOD											
ABSTINENCE		1		1	2				1	5	
OTHER METHOD			1		2					3	
METHOD UNKNOWN											
<b>NO METHOD</b>											
PREGNANT OR SEEKING PREGNANCY											
OTHER REASON	3	5	1	2	1	1			1	14	
RELYING ON FEMALE METHOD		2	2	14	13	1	3	1		36	
<b>TOTAL</b>	<b>3</b>	<b>16</b>	<b>29</b>	<b>114</b>	<b>88</b>	<b>21</b>	<b>7</b>	<b>3</b>	<b>10</b>	<b>291</b>	

### Exhibit 15, FPAR Table 9

		NORTH DAKOTA - DATA SYSTEM					
10/08/2010	126	FPAR TABLE 9:	CERVICAL CANCER SCREENING ACTIVITIES		PAGE	9	
		TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010		
SCREENING ACTIVITY		UNDUPLICATED NUMBER OF USERS OR NUMBER OF TESTS					
UNDUP. USERS WITH PAP TEST		936					
PAP TEST PERFORMED		936					
THE SPECIFIC PAP RESULTS WILL HAVE TO BE KEPT BY THE CLINIC. AHLERS LAB WILL PROVIDE USEFUL IN THIS COLLECTION AND CONTAINS A REPORT WHICH WILL PROVIDE RESULTS DATA							

### Exhibit 15, FPAR Table 10

		NORTH DAKOTA - DATA SYSTEM					
10/08/2010	127	FPAR TABLE 10:	CLINICAL BREAST EXAMS AND REFERRALS		PAGE	10	
		TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010		
		NUMBER OF USERS					
UNDUP. USERS RECEIVING A CLINICAL BREAST EXAM (CBE)		1,158					
UNDUP. USERS REFERRED FOR FUTHER EVAL BASED ON (CBE)		17					

### Exhibit 15, FPAR Table 11

		NORTH DAKOTA - DATA SYSTEM					
10/08/2010	128	FPAR TABLE 11:	UNDUPLICATED USERS TESTED FOR CHLAMYDIA BY AGE AND GENDER		PAGE	11	
		TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010		
AGE GROUP	NUMBERS OF USERS						
	FEMALES	MALES					
UNDER 15	14						
15 - 17	163	5					
18 - 19	249	22					
20 - 24	647	100					
25 - 29	285	78					
30 - 34	85	18					
35 - 39	45	4					
40 - 44	26	3					
OVER 44	39	8					
TOTAL	1,553	238					

**Exhibit 15, FPAR Table 12**

NORTH DAKOTA - DATA SYSTEM					
10/08/2010	129	FPAR TABLE 12:	NUMBER OF GONORRHEA, SYPHILIS, AND HIV TESTS		PAGE 12
TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010
TEST TYPE	NUMBER OF TESTS		TOTAL TESTS		
	FEMALE	MALE			
GONORRHEA	1,582	241	1,823		
SYPHILIS	6	4	10		
HIV - ALL CONFIDENTIAL TESTS	220	111	331		
HIV - POSITIVE CONFIDENTIAL TESTS					
HIV - ANONYMOUS TESTS					

**Exhibit 15, FPAR Table 13**

NORTH DAKOTA - DATA SYSTEM					
10/08/2010	130	FPAR TABLE 13:	NUMBER OF FAMILY PLANNING ENCOUNTERS BY TYPE OF PROVIDER		PAGE 13
TOTAL FOR NORTH DAKOTA					
		FOR PERIOD BEGINNING	1/01/2010	ENDING	12/31/2010
PROVIDER TYPE	NUMBER OF ENCOUNTERS				
CLINICAL SERVICE PROVIDERS	4,612				
PHYSICIAN	289				
PHYSICIANS ASSISTANTS/NURSE PRACTITIONERS/CERTIFIED NURSE MIDWIFES	2,769				
OTHER CLINICAL SERVICES PROVIDERS (E. G. NURSES)	1,554				
NON-CLINICAL SERVICES PROVIDERS	9				
TOTAL FAMILY PLANNING ENCOUNTERS	4,621				

Exhibit 16

NORTH DAKOTA CLINIC VISIT RECORD

COMPLETE AT FIRST VISIT, UPDATE FOR CHANGES AND AT ANNUAL EXAM

CLINIC NO. \_\_\_\_\_

CLIENT NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GENDER: F M CONTACT STATUS \_\_\_\_\_

YEARS OF EDUCATION \_\_\_\_\_ ANNUAL INCOME \_\_\_\_\_

HOUSEHOLD SIZE \_\_\_\_\_ ZIP \_\_\_\_\_

TOBACCO USER  Y  N

COMPLETE AT FIRST VISIT ONLY

RACE (check all that apply)

- 1. White 4. Asian
2. Black or African American 5. Pacific Is. / Hawaiian
3. Am. Ind./Alaskan 6. Unknown / Unreported

LIMITED ENGLISH PROFICIENCY:  Y  N

HISPANIC  Y  N  Unknown/Not Reported

COMPLETE AT EACH VISIT

4. VISIT DATE \_\_\_\_\_ 20\_\_\_\_

5. PRIMARY SOURCE OF PAYMENT (check one)

- 1. No Fee 4. Title XIX
2. Partial Fee 5. Private Insurance
3. Full Fee

6. CLIENT INSURANCE STATUS (check one)

- 1. Public Health Insurance
2. Private Health Insurance Covering all or some Family Planning
3. Private Health Insurance Covering no Family Planning
4. Private Health Insurance unknown for Family Planning
5. Uninsured
6. Unknown

7. PURPOSE OF VISIT (check one)

- 1. Initial Comprehensive 6. Method Check/Depo
2. Annual Comprehensive 7. Education/Counseling Only
3. Medical Visit 8. Pregnancy Test Only
4. Problem Re-Visit 9. Supply Visit
5. STD/Infection Check

8. CONTRACEPTIVE METHOD (Complete before and after blocks)

- 01. Steril Male 08. Condom (female) 14. Sponge
02. Steril Female 09. Spermicide 15. Withdrawal
03. Orals 10. Diaphragm 16. Abstinence
04. IUD 11. 3 - Month Injection 17. EC
05. FAM 12. Hormonal Patch 18. Cervical Cap
06. Hormonal Implant 13. Vaginal Ring 19. None
07. Condom (male) 20. Other

Initial Visit

After Visit

9. IF NONE AT THE END OF THIS VISIT GIVE REASON

- 1. Pregnant 4. Infertility
2. Seeking Pregnancy 5. Other Medical Reason
3. Other Reason 6. Relying on Partner Method

10. PROVIDERS OF MEDICAL/COUNSELING SERVICES

- 1. Physician \_\_\_\_\_ 5. Health Educator/Nutritionist
2. Midlevel Clinician \_\_\_\_\_ 6. Lab Tech
3. RN 7. Medical Assistant
4. LPN

VISIT CODES

NEXT EXAM DATE \_\_\_\_\_

11. MEDICAL SERVICES PROVIDED

- 01. BV Tx 11. Diaphragm Fit/Chk 21. IUD Check
02. Blood Pressure 12. EC 22. Medical Hx
03. Candida Tx 13. Gonorrhea Tx 23. Molluscum Tx
04. CBE 14. Height/Weight 24. Pelvic exam
05. Cerv. Cap Fit/Chk 15. HPV Tx 25. Phys Assess
06. Chlamydia Tx 16. HPV Vaccine 26. Rx Change
07. Colposcopy 17. Implant Insert 27. Testicular exam
08. Contracep. Refill 18. Implant Removal 28. Trich Tx
09. Cryotherapy 19. IUD Insertion
10. 3-Month Injection 20. IUD Removal

12. LAB SERVICES PROVIDED

- 30. Blood Glucose 38. HIV Test 46. Repeat Pap
31. CBC 39. HPV Typing 47. RPR/VDRL
32. Chlamydia Test 40. Lipid Profile 48. Stool Occult
33. Gonorrhea Test 41. Metabolic Panel 49. Trichomoniasis
34. Hemoglobin 42. Pap Smear 50. TSH/T4
35. Hepatitis B 43. Ph Test 51. Urinalysis
36. Hepatitis C 44. Neg. Preg Test 52. Wet Mount
37. Herpes Test 45. Pos. Preg Test

13. CHLAMYDIA

Reason for Visit

- 1. Symptomatic 6. Patient Request
3. Exposed to STD in Past 60 days 7. Client Meets Screening
4. IUD Insertion 8. Rescreen Prev Pos > 3 Mon.
5. Preg Test Only Visit

Clinical Signs

- 1. Cervical Friability 3. PID 5. None
2. Mucopus 4. Urethritis

Risk History

- 1. > 1 partner in past 60 days 3. + Chlamydia in past year
2. New partner in past 60 days 4. No Risk History
Treated Presumptively 1. Yes 2. No

Test Type  03. DFA  17.1 TMP/GP/Aptima Combo

Specimen Source

- 0. Other 3. Vaginal 5. Pharyngeal
1. Cervical 4. Urine 6. Rectal
2. Urethral

14. COUNSELING SERVICES PROVIDED

- 61. ABC 71. Immunizations 79. Pregnancy
62. Blood Pressure 72. Infertility 80. Rape Crisis/Abuse
63. Colorectal Scrn. 73. Male Exam 81. Req. Adol Counsel
64. Contraception 74. Mental Health 82. SBE/Breast Health
65. Domestic Viol. 88. PHQ-2 83. Sterilization
66. Exercise 89. PHQ-9 84. Substance Abuse
67. FAM 75. Nutrition 85. STD Follow-Up
68. Female Exam 76. Obesity 86. Tobacco Cessation
69. Genetic Counsel 77. Pap Follow-Up 87. TSE
70. HIV 78. Preconception

15. REFERRED ELSEWHERE (check all applicable)

- 01. Abnormal Pap 08. Nutritional Services
02. Breast Concerns 09. OPOP
03. Domestic Violence 10. Other - Medical
04. FAM 11. Positive Pregnancy
05. HIV Services/Screening 12. Rape Crisis/Abuse
06. Infertility 13. Social Services
07. Mental Health 14. Sterilization
19. Nat Lifeline (fax) 15. Substance Abuse
20. Priv. Counselor 16. Tobacco Cessation
21. Human Svcs. Center 17. WIC
22. Taken to Hospital 18. Women's Way
23. Physician Counseled
24. None Warranted (PHQ-2 or 9)
25. Client Declined

## Exhibit 17

### NORTH DAKOTA FAMILY PLANNING DATA SYSTEM ERROR MESSAGE MASTER FILE LIST

ERROR ID	ERROR DESCRIPTION
100	REJECT: INVALID VERSION NUMBER
110	REJECT: SERVICE SITE NUMBER INVALID
120	REJECT: PATIENT NUMBER MISSING/INVALID
130	REJECT: DATE OF BIRTH MISSING/INVALID
132	REJECT: CLIENT'S AGE LESS THAN 10 YEARS OLD
133	REJECT: DATE OF BIRTH IS A FUTURE DATE
140	REJECT: GENDER CODE REQUIRED FOR 1 <sup>ST</sup> VISIT
141	REJECT: GENDER CODE IS INVALID
200	REJECT: YEARS OF EDUCATION INVALID
210	REJECT: INCOME REQUIRED FOR 1 <sup>ST</sup> , INITIAL AND ANNUAL VISIT
211	REJECT: INCOME IS INVALID
215	REJECT: FAMILY SIZE IS INVALID
220	REJECT: ZIP CODE REQUIRED FOR 1 <sup>ST</sup> , INITIAL AND ANNUAL VISIT
221	REJECT: ZIP CODE IS INVALID
230	REJECT: TOBACCO USER INVALID
251	WARNING: FAMILY SIZE BLANK, ASSUME 1
300	REJECT: RACE REQUIRED FOR 1 <sup>ST</sup> VISIT
301	REJECT: RACE CODE IS INVALID
310	REJECT: INTERPRETER NEEDED IS INVALID
320	REJECT: ETHNICITY CODE IS INVALID
321	REJECT: ETHNICITY CODE REQUIRED FOR 1 <sup>ST</sup> VISIT
400	REJECT: VISIT DATE MISSING/INVALID
401	REJECT: DATE OF VISIT IS A FUTURE DATE
402	REJECT: DUPLICATE VISIT ON FILE
500	REJECT: SOURCE OF PAY IS MISSING
510	REJECT: SOURCE OF PAYMENT IS INVALID
600	REJECT: CLIENT INSURANCE STATUS IS INVALID
700	REJECT: PURPOSE OF VISIT IS MISSING
710	REJECT: PURPOSE OF VISIT IS INVALID
800	REJECT: BEGINNING METHOD MANDATORY ON THE 1 <sup>ST</sup> VISIT
801	REJECT: CONTRACEPTIVE METHODS MISSING
802	REJECT: CONTRACEPTIVE METHODS INVALID
851	WARNING: STERILIZATION UNDER 21
901	REJECT: REASON FOR NO METHOD BLANK
931	REJECT: INVALID REASON FOR NO METHOD CODED
1000	REJECT: MEDICAL PROVIDERS ARE INVALID
1005	REJECT: MEDICAL PROVIDERS MISSING ON A MEDICAL VISIT
1010	REJECT: MEDICAL PROVIDER CODE MISSING OR INVALID
1015	REJECT: MEDICAL PROVIDER CODE NOT WITHIN RANGE

1100	REJECT:	MEDICAL SERVICES INVALID
1105	REJECT:	MEDICAL VISIT BUT NO MEDICAL SERVICES CODED
1110	REJECT:	MED SERVICE 08 NOT CODED FOR SUPPLY VISIT
1115	REJECT:	MED SERVICE OTHER THAN 08 CODED FOR SUPPLY VISIT
1120	REJECT:	FEMALE CLIENT HAS MALE ONLY SERVICE (27)
1125	REJECT:	MALE HAS FEMALE SERVICE
1200	REJECT:	POSITIVE/NEGATIVE PREGNANCY TEST ON THE SAME DAY
1205	REJECT:	MEDICAL SERVICE 42, 46 ON THE SAME DAY
1300	REJECT:	CHLAMYDIA SECTION NOT COMPLETE
1301	REJECT:	CHLAMYDIA SECTION ANSWERED WITH NO TEST CODED
1302	REJECT:	CHLAMYDIA SECTION CONTAINS INVALID ANSWERS
1310	REJECT:	CONFLICTING ANSWERS IN BOX 13 – CLINICAL SIGNS
1320	REJECT:	CHLAMYDIA RESULTS INVALID
1325	REJECT:	CHLAMYDIA RESULTS NO TEST CODED
ADD	REJECT:	GONORRHEA RESULTS INVALID
ADD	REJECT:	GONORRHEA RESULTS NO TEST CODED
1400	REJECT:	COUNSELING ONLY VISIT BUT NONE CODED
1401	REJECT:	COUNSELING SERVICES INVALID
1402	REJECT:	MALE HAS FEMALE COUNSELING SERVICE (77)
1500	REJECT:	REFERRED ELSEWHERE INVALID