NORTH DAKOTA FAMILY PLANNING DATA SYSTEM MANUAL

January 2016

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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 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	customerservice@ahlerssoftware.com

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 15th 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.

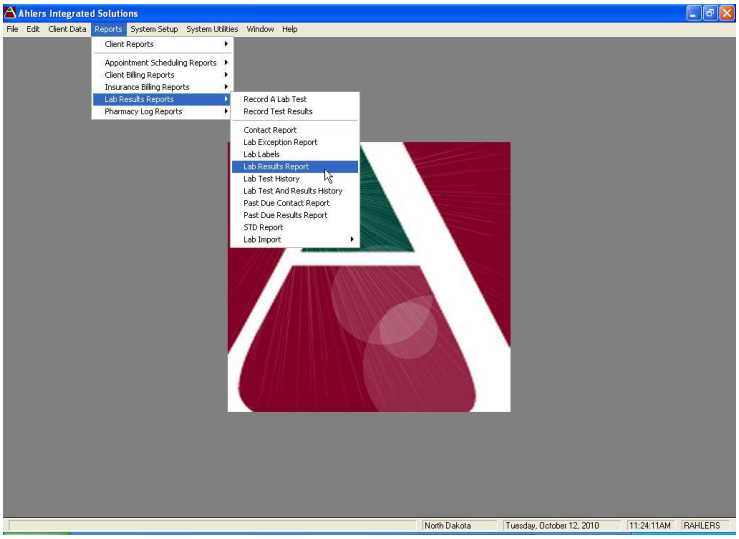


Figure 1

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.

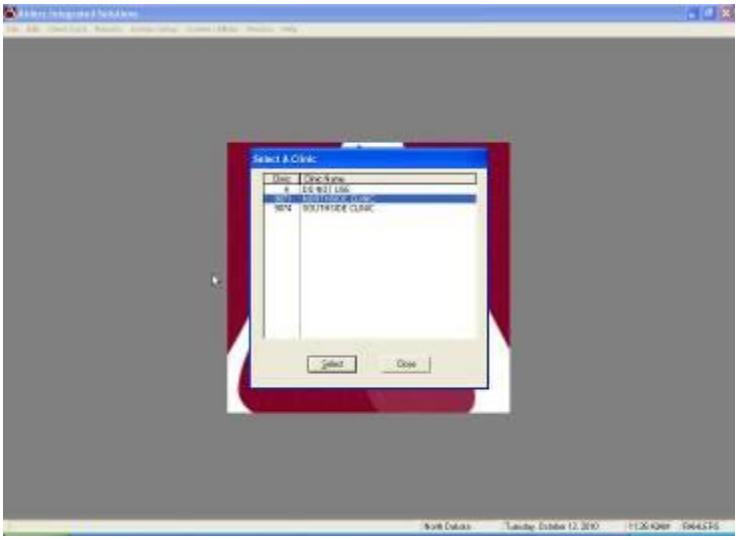


Figure 2

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.

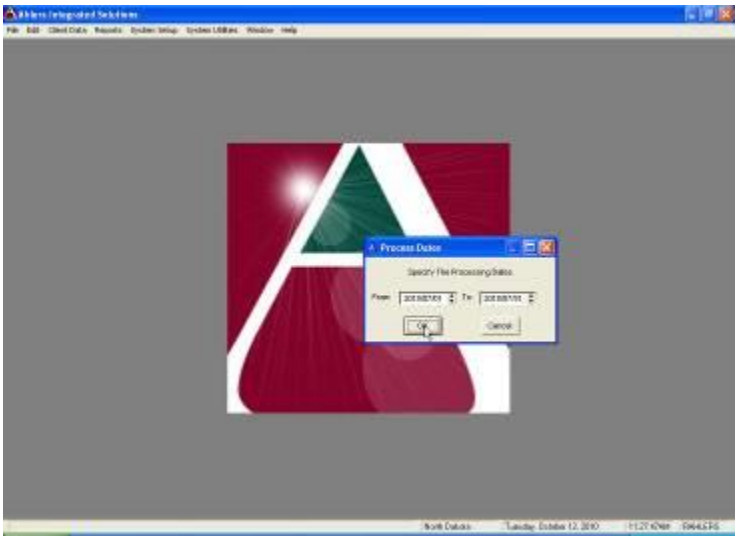


Figure 3

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.

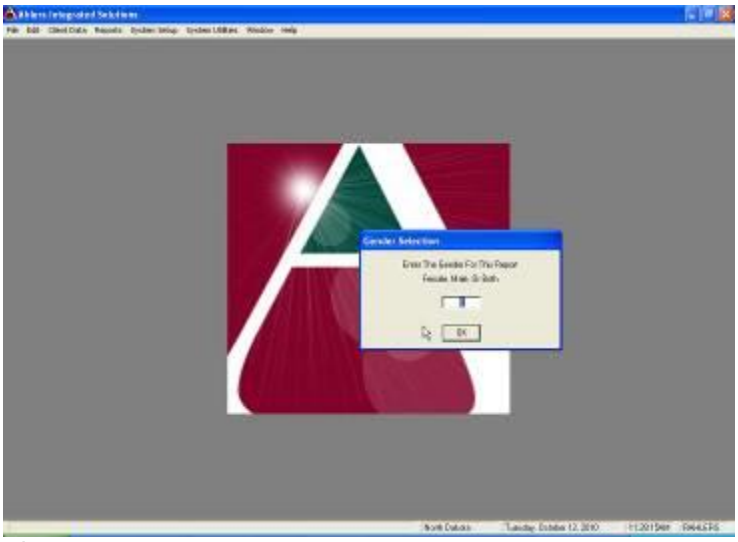


Figure 4

The next screen prompts for which tests need to be included in the output report. Clicking on the conventional and thin prep Pap tests as shown in Figure 5 will include both types of Paps for those agencies which perform both. Your list may vary as all clinics do not perform both types of Paps and therefore would not maintain both Pap tests in their setup files.

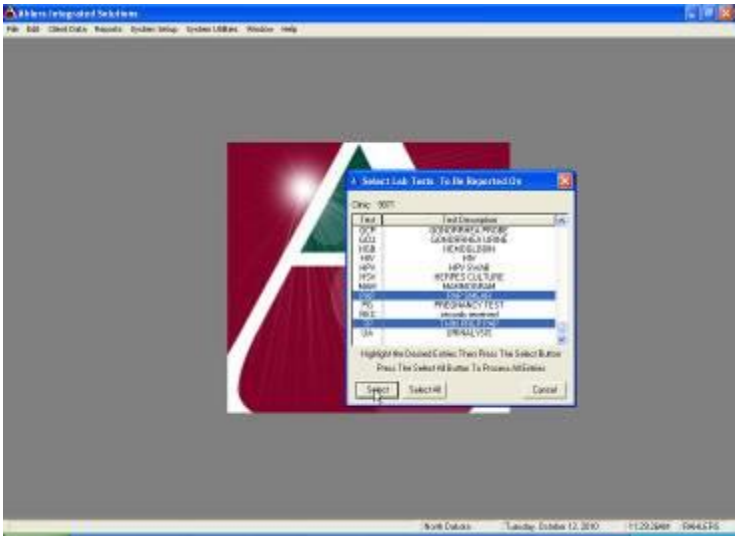


Figure 5

The next screen asks how you would like for the Pap report to be categorized. Figure 6 illustrates the Age selection was chosen for this report.

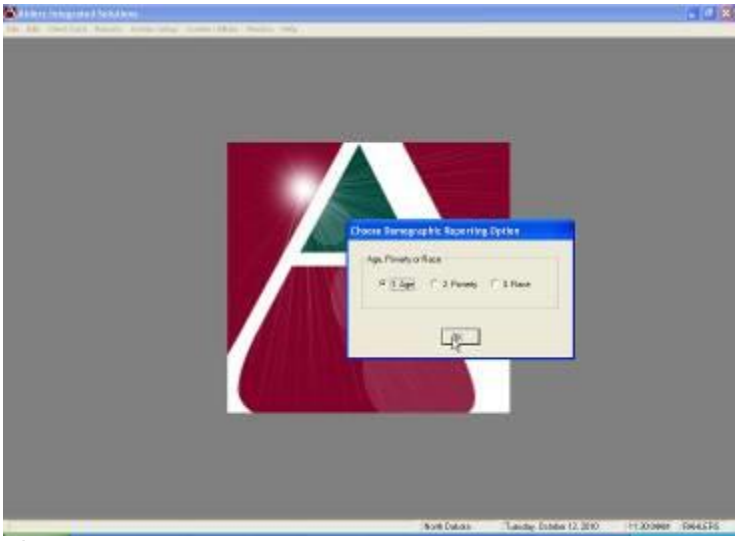


Figure 6

The next screen is a Print Preview prompt. Answering “yes” will display the report on the screen. Because this report needs to be emailed to the state FP coordinator, the answer is always “yes” as shown in Figure 7.

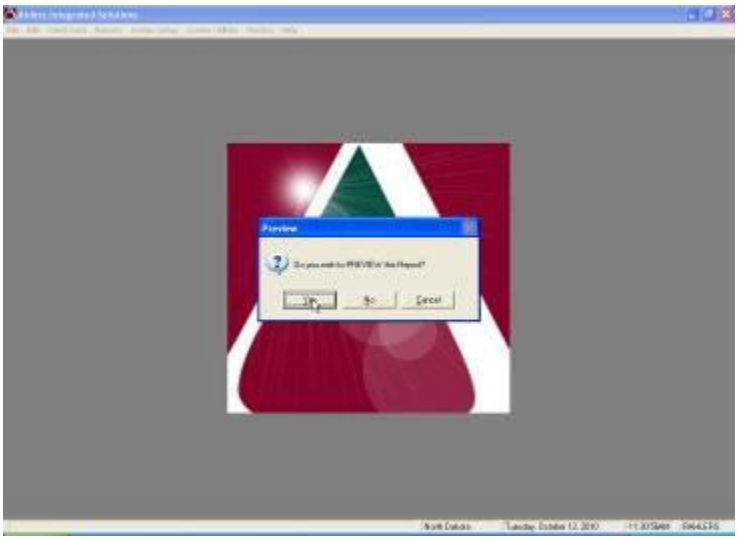


Figure 7

Figure 8 illustrates how the output will look on the screen. Notice the pointer is on the “T” button at the top of the screen. Clicking on this button will create a text file which will need to be emailed to the state FP coordinator.

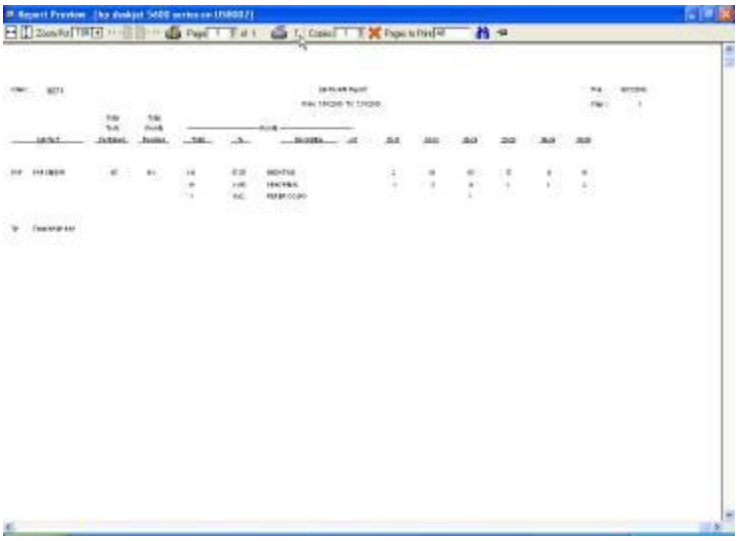


Figure 8

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.

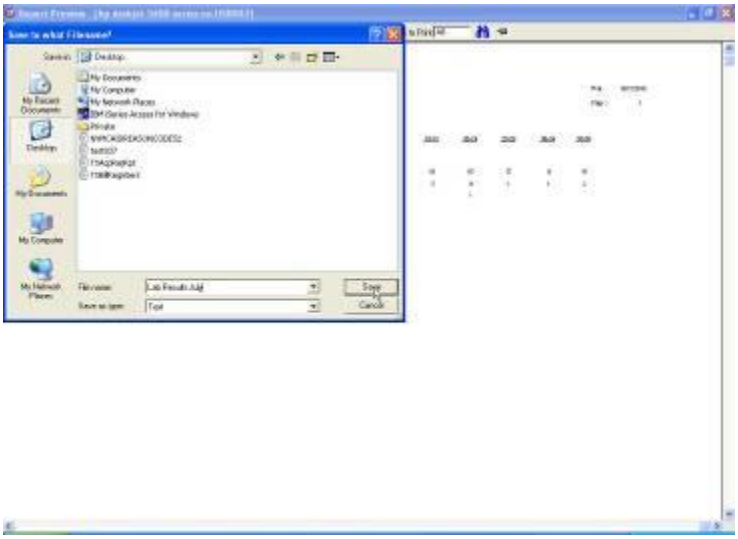


Figure 9

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.

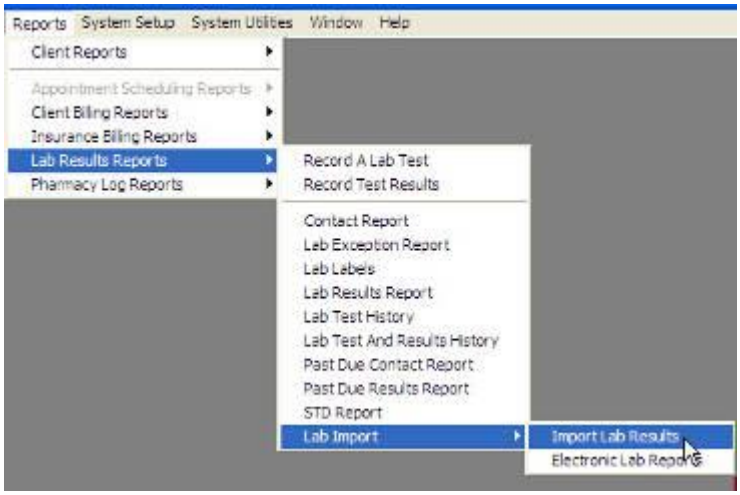
The final step is to open your email program and send an email with the lab report attached to Dubi Schwanz at dschwanz@nd.gov. In the example above, the file named Lab Results July.txt on the Desktop would be the file to attach to the email.

ELECTRONIC LAB RESULT POSTING FUNCTION

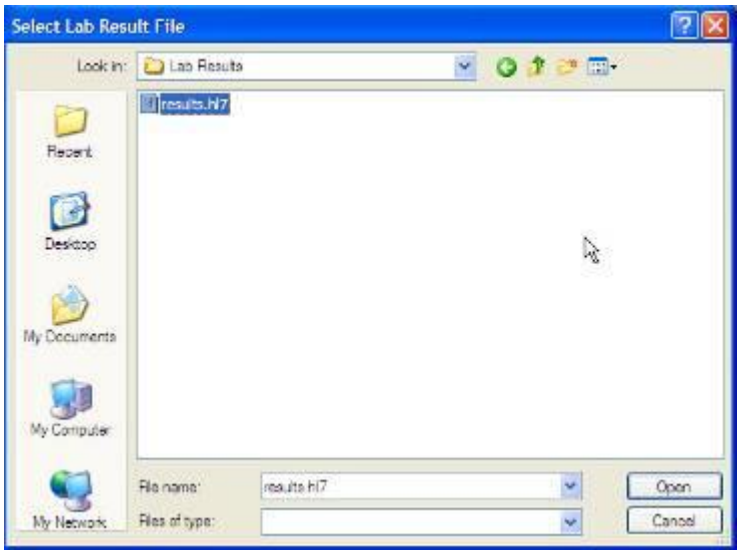
The Ahlers Lab Results Reporting module allows for importation and posting of electronic lab results from any lab which supports the HL7 message file format for lab result data. Electronic posting of lab result data has proven to be a huge timesaver for those agencies who utilize it, and facilitates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

IMPORT LAB RESULTS:

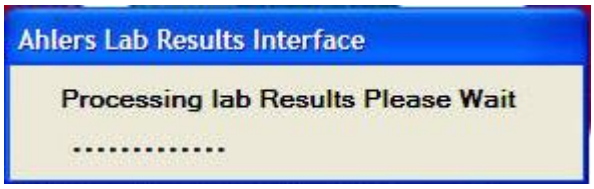
Once you have logged into the system select **REPORTS**, **LAB RESULTS REPORTS**, **LAB IMPORT**, and click **IMPORT LAB RESULTS**.



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**.

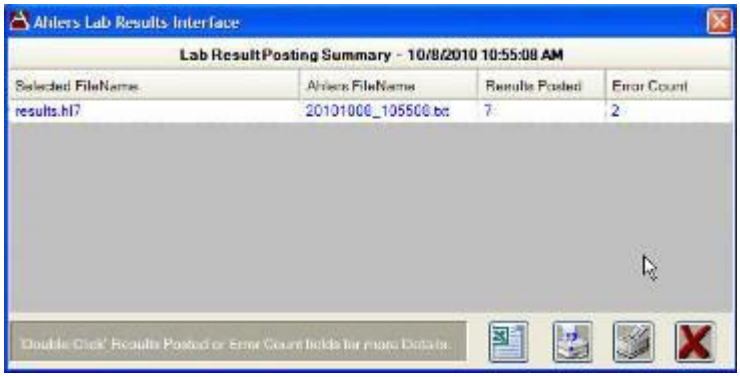


Another window will appear briefly stating that the system is **PROCESSING LAB RESULTS PLEASE WAIT**.



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.

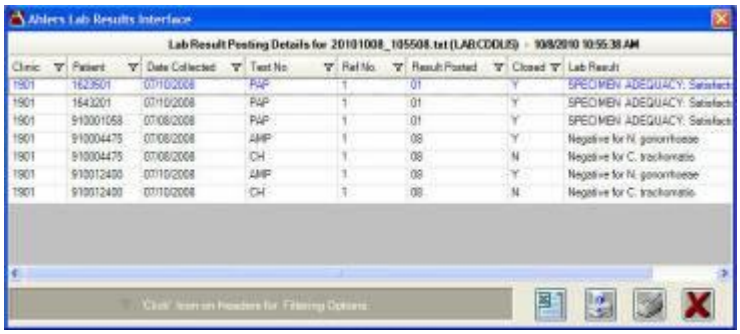
This button will give you a print preview of the report and allow you to print the report as well.

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.



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 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.

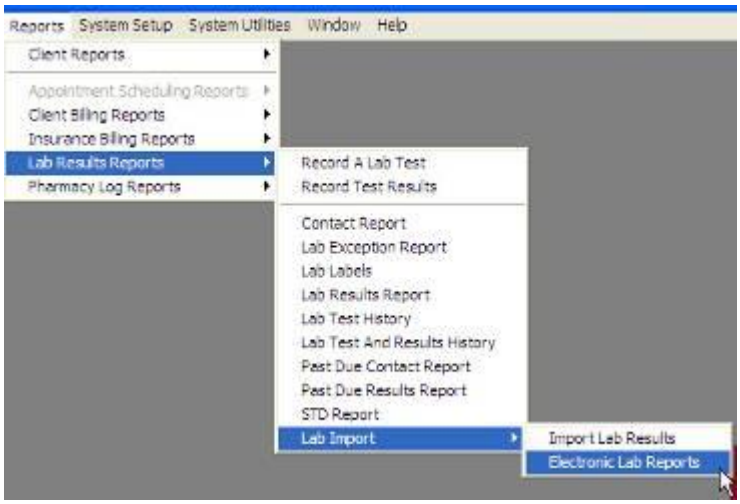
When you are finished viewing this window simply click either of the red x's to close this window.

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

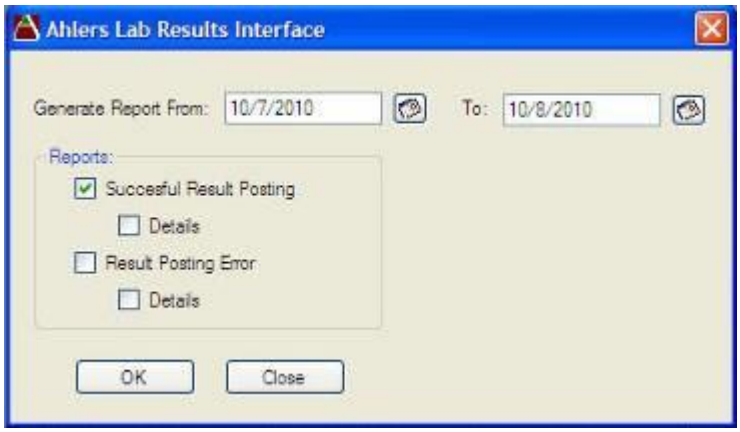
When you want to run a report to see a range of results posted or error results then click on **REPORTS**, **LAB RESULTS REPORTS**, **LAB IMPORT**, and click **ELECTRONIC LAB REPORTS**.



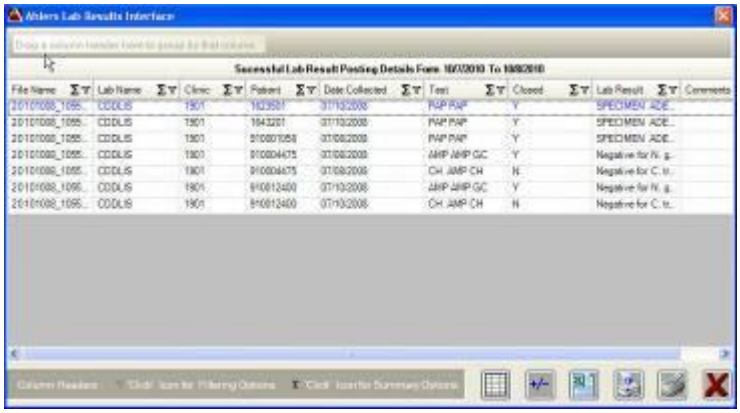
This will open a new window.

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

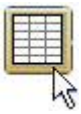
Successful Result Posting option:



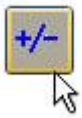
Click **OK** to run the report.
The report will appear on your screen as follows:



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.

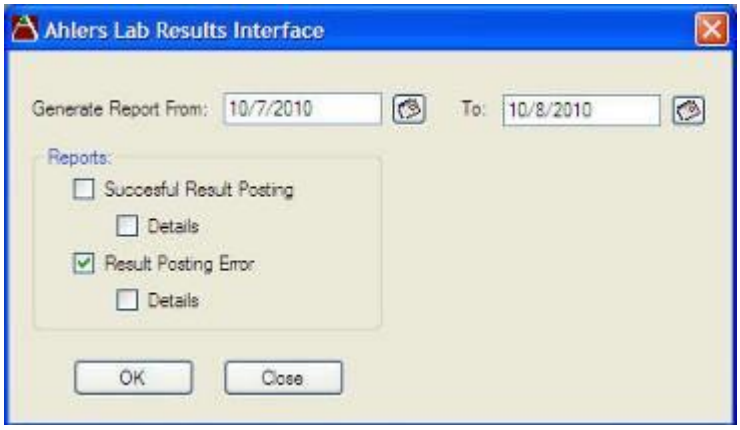
The report contains the following information:

- 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.

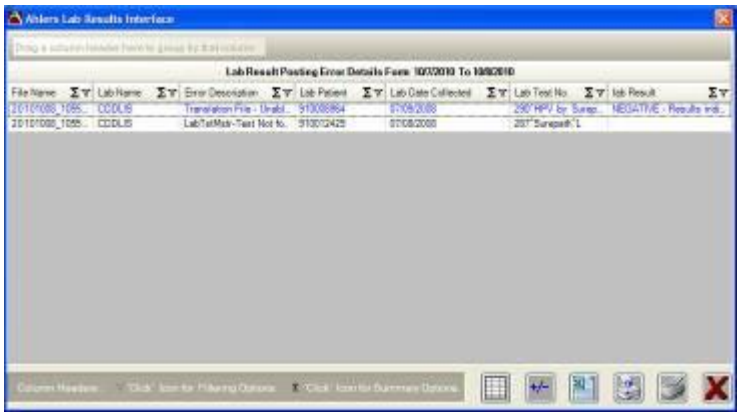
If you selected the detail option on under the Successful Result Posting option, you will have additional columns on your report.

- 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 15th 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) 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
TABLE 2 - UNDUPLICATED BY NEW AND CONTINUING AND GENDER
TABLE 3 - UNDUPLICATED CLIENT COUNTS BY AGE
TABLE 4 - POVERTY LEVELS BY SOURCE OF PAYMENT AND NEW CLIENTS BY AGE AND TYPE OF VISIT
TABLE 5 - CONTRACEPTIVE CLIENTS BY MALE OR FEMALE AND AGE
TABLE 6 - CLIENT ZIP CODES BY NEW/CONTINUING AND AGE
TABLE 7 - BIRTHS AVERTED
TABLE 8 - HIV TESTING (UNDUPLICATED) BY AGE, RACE, AND ETHNICITY
TABLE 9 - DEMOGRAPHICS OF MALES AND FEMALES SCREENED FOR CHLAMYDIA
TABLE 10 - TOBACCO USERS BY AGE, SEX, AND REFERRALS

FPAR TABLES (Exhibit 5)

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. 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
6. CVR - Clinic Visit Record
7. Error Message Master File List

Exhibit 1, Transaction List

NORTH DAKOTA FAMILY PLANNING DATA SYSTEM
TRANSACTIONS LIST
AUGUST, 2010

RUN DATE 9/16/2010
NDM125 PAGE 1

D.O.V.	PATIENT #	T.O.V.	FAIL	D.O.V.	PATIENT #	T.O.V.	FAIL	D.O.V.	PATIENT #	T.O.V.	FAIL	D.O.V.	PATIENT #	T.O.V.	FAIL	D.O.V.	PATIENT #	T.O.V.	FAIL
SHEPHERT # 08913				08/17/2010	000002385	SUPPLY		08/24/2010	000008966	MEDICAL		09/09/2010	000008995	INIT					
08/02/2010	000001565	MAINT		08/17/2010	000007937	SUPPLY		08/25/2010	000001072	SUPPLY									
08/02/2010	000003446	MAINT		08/18/2010	000003761	METH CHK		08/25/2010	000007319	SUPPLY									
08/02/2010	000006189	PREG		08/18/2010	000004099	METH CHK		08/25/2010	000008758	SUPPLY									
08/02/2010	000007532	MAINT		08/18/2010	000006047	SUPPLY		08/26/2010	000008982	INIT									
08/02/2010	000008413	MAINT		08/18/2010	000007195	SUPPLY		08/26/2010	000008984	INIT									
08/02/2010	000008780	MAINT		08/18/2010	000007828	STD CHK		08/26/2010	000008985	PREG									
08/02/2010	000008837	MAINT		08/18/2010	000008561	SUPPLY		08/27/2010	000008964	SUPPLY									
08/02/2010	000008858	MAINT		08/18/2010	000008632	SUPPLY		08/30/2010	000002665	SUPPLY									
08/02/2010	000008945	MAINT		08/18/2010	000008840	PROBLEM		08/30/2010	000006337	METH CHK									
08/03/2010	000007689	SUPPLY		08/18/2010	000008861	METH CHK		08/30/2010	000006403	MEDICAL									
08/03/2010	000008435	SUPPLY		08/18/2010	000008977	INIT		08/30/2010	000008175	METH CHK									
08/03/2010	000008628	SUPPLY		08/19/2010	000006516	SUPPLY		08/30/2010	000008447	METH CHK									
08/04/2010	000008704	METH CHK		08/19/2010	000006830	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	AWAL		08/31/2010	000002345	SUPPLY									
08/04/2010	000007197	METH CHK		08/19/2010	000008259	METH CHK		09/01/2010	000003237	SUPPLY									
08/04/2010	000008035	STD CHK		08/19/2010	000008484	STD CHK		09/01/2010	000003908	MEDICAL									
08/04/2010	000008568	STD CHK		08/19/2010	000008813	METH CHK		09/01/2010	000007020	SUPPLY									
08/04/2010	000008555	METH CHK		08/20/2010	000001536	AWAL		09/01/2010	000007187	METH CHK									
08/04/2010	000008889	SUPPLY		08/20/2010	000003980	AWAL		09/01/2010	000008033	STD CHK									
08/04/2010	000008966	INIT		08/20/2010	000005083	AWAL		09/01/2010	000008339	PREG									
08/05/2010	000003237	SUPPLY		08/20/2010	000007145	AWAL		09/01/2010	000008413	SUPPLY									
08/05/2010	000008397	SUPPLY		08/20/2010	000007226	PROBLEM		09/01/2010	000008456	SUPPLY									
08/05/2010	000008967	STD CHK		08/20/2010	000007529	AWAL		09/01/2010	000008741	SUPPLY									
08/09/2010	000002215	METH CHK		08/20/2010	000007532	AWAL		09/01/2010	000008934	PREG									
08/09/2010	000005761	SUPPLY		08/20/2010	000008429	AWAL		09/01/2010	000008980	MEDICAL									
08/09/2010	000005771	SUPPLY		08/20/2010	000008558	AWAL		09/01/2010	000008989	PREG									
08/09/2010	000007553	SUPPLY		08/20/2010	000008664	AWAL		09/02/2010	000008643	SUPPLY									
08/09/2010	000007590	SUPPLY		08/20/2010	000008681	SUPPLY		09/07/2010	000002357	SUPPLY									
08/09/2010	000008968	INIT		08/20/2010	000008707	AWAL		09/07/2010	000008303	SUPPLY									
08/09/2010	000008969	SUPPLY		08/20/2010	000008731	AWAL		09/07/2010	000008547	SUPPLY									
08/09/2010	000008970	SUPPLY		08/20/2010	000008829	SUPPLY		09/07/2010	000008802	SUPPLY									
08/11/2010	000006074	SUPPLY		08/20/2010	000008920	AWAL		09/07/2010	000008937	SUPPLY									
08/11/2010	000008714	SUPPLY		08/20/2010	000008930	AWAL		09/08/2010	000001899	SUPPLY									
08/11/2010	000008772	METH CHK		08/20/2010	000008940	SUPPLY		09/08/2010	000005351	STD CHK									
08/11/2010	000008777	MEDICAL		08/22/2010	000008773	SUPPLY		09/08/2010	000006905	PROBLEM									
08/11/2010	000008792	INIT		08/23/2010	000005723	SUPPLY		09/08/2010	000007006	METH CHK									
08/11/2010	000008971	STD CHK		08/23/2010	000005987	SUPPLY		09/08/2010	000007550	SUPPLY									
08/12/2010	000003089	METH CHK		08/23/2010	000006335	SUPPLY		09/08/2010	000008399	METH CHK									
08/12/2010	000008266	METH CHK		08/23/2010	000006947	SUPPLY		09/08/2010	000008733	SUPPLY									
08/12/2010	000008941	PROBLEM		08/23/2010	000007237	SUPPLY		09/08/2010	000008784	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									
08/16/2010	000006960	SUPPLY		08/23/2010	000008978	INIT		09/09/2010	000006838	PREG									
08/16/2010	000008596	SUPPLY		08/23/2010	000008979	INIT		09/09/2010	000007559	METH CHK									
08/16/2010	000008875	MEDICAL		08/23/2010	000008980	PREG		09/09/2010	000008416	SUPPLY									
08/16/2010	000008883	SUPPLY		08/23/2010	000008981	STD CHK		09/09/2010	000008935	MEDICAL									
08/16/2010	000008975	PREG		08/24/2010	000002984	SUPPLY		09/09/2010	000008992	MEDICAL									
08/16/2010	000008976	INIT		08/24/2010	000008116	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
NDM110 PAGE 8

CLINIC NUMBER	CLINIC NAME	INITIAL VISITS	ANNUAL VISITS	MEDICAL VISITS	PROBLEM VISITS	STD CHK VISITS	METH CK VISITS	COUNS VISITS	PREG VISITS	SUPPLY VISITS	MAINT TRANS	TOTAL VISITS	REJECTS	TOTAL CVRS	% 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
CVRs ERROR LISTING
AUGUST, 2010

RUN DATE 9/16/2010
NDM115 PAGE 1

PATIENT NO.	*** VISIT DATE *** CVR	LAST	TYPE	*** BIRTH DATE *** CVR	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
SUMMARY OF CVR ERRORS
AUGUST, 2010

RUN DATE 9/16/2010
NDM120 PAGE 7

CVRS PROCESSED 144
CVRS 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, 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
TOTAL	3,670	291	3,961

Exhibit 5, 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
TOTAL FEMALE USERS	84	3,399	187	3,670

Exhibit 5, 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 5, 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 5, 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 ENDING12/31/2010

PRINCIPAL HEALTH INSURANCE COVERING PRIMARY MEDICAL CARE	NUMBER OF USERS
PUBLIC HEALTH INSURANCE COVERING PRIMARY MEDICAL CARE	319
PRIVATE HEALTH INSURANCE COVERING PRIMARY MEDICAL CARE	
COVERAGE FOR ALL OR SOME FAMILY PLANNING SERVICES	687
COVERAGE FOR NO FAMILY PLANNING SERVICES	65
COVERAGE UNKNOWN FOR FAMILY PLANNING SERVICES	499
UNISURED (NO PUBLIC OR PRIVATE HEALTH INSURANCE)	2,245
UNKNOWN/NOT REPORTED	146
TOTAL	3,961

Exhibit 5, 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 5, FPAR Table 7

NORTH DAKOTA - DATA SYSTEM

10/08/2010 124 FPAR TABLE 7: UNDUPLICATED FEMALES BY PRIMARY METHOD AND AGE PAGE 7

TOTAL FOR NORTH DAKOTA

FOR PERIOD BEGINNING 1/01/2010 ENDING 12/31/2010

PRIMARY METHOD	UNDUPLICATED NUMBER OF FEMALE USERS BY AGE < 15	15-17	18-19	20-24	25-29	30-34	35-39	40-44	> 44	TOTAL FEMALES
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 RING		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	2	7	53
OTHER METHOD	2	5	16	24	10	4	1		3	65
METHOD UNKNOWN										
NO METHOD										
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
RELY ON MALE METHOD										
VASECTOMY				3		3	1			7
MALE CONDOM	4	32	34	121	56	18	12	6	11	294
TOTAL FEMALE USERS	38	332	522	1,361	726	287	155	109	140	3,670

Exhibit 5, FPAR Table 8

NORTH DAKOTA - DATA SYSTEM

10/08/2010 125 FPAR TABLE 8: UNDUPLICATED MALES BY PRIMARY METHOD AND AGE PAGE 8

TOTAL FOR NORTH DAKOTA

FOR PERIOD BEGINNING 1/01/2010 ENDING 12/31/2010

PRIMARY METHOD	UNDUPLICATED NUMBER OF MALE USERS BY AGE < 15	15-17	18-19	20-24	25-29	30-34	35-39	40-44	> 44	TOTAL MALES
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										
NO METHOD										
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
TOTAL	3	16	29	114	88	21	7	3	10	291

Exhibit 5, 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 PROVE USEFUL IN THIS COLLECTION AND CONTAINS A REPORT WHICH WILL PROVIDE RESULTS DATA

Exhibit 5, 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 5, 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 5, 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 FEMALE	MALE	TOTAL TESTS
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 5, 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 CLINCAL SERVICES PROVIDERS (E.G. NURSES)	1,554	
NON-CLINICAL SERVICES PROVIDERS		9
TOTAL FAMILY PLANNING ENCOUNTERS		4,621

Exhibit 6

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 ☐ New Patient ☐ Established Patient

COMPLETE AT FIRST VISIT ONLY

RACE (check all that apply)
- ☐ 1. White
- ☐ 2. Black or African American
- ☐ 3. Am. Ind./Alaskan
- ☐ 4. Asian
- ☐ 5. Pacific Is. / Hawaiian
- ☐ 6. Unknown / Unreported

LIMITED ENGLISH PROFICIENCY: ☐ Y ☐ N

HISPANIC ☐ Y ☐ N ☐ Unknown/Not Reported

COMPLETE AT EACH VISIT

4. VISIT DATE | | | – | | | – 2 0 | |

5. PRIMARY SOURCE OF PAYMENT (check one)
- ☐ 1. No Fee
- ☐ 2. Partial Fee
- ☐ 3. Full Fee
- ☐ 4. Title XIX
- ☐ 5. Private Insurance

6. CLIENT INSURANCE STATUS (check one)
- ☐ 1. Public Health Insurance
- ☐ 2. Private Health Insurance
- ☐ 5. Uninsured
- ☐ 6. Unknown

7. PURPOSE OF VISIT (check one)
- ☐ 1. Initial Exam
- ☐ 2. Annual Exam
- ☐ 3. Medical Visit
- ☐ 4. Problem Visit
- ☐ 5. STD/Infection
- ☐ 6. Contraceptive Surveillance
- ☐ 7. Education/Counseling
- ☐ 8. Pregnancy Test
- ☐ 9. Supply Visit

8. CONTRACEPTIVE METHOD (Complete before and after blocks)

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

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

IF PREGNANT:
- ☐ 1. Planned
- ☐ 7. Unplanned

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

10. PROVIDERS OF MEDICAL/COUNSELING SERVICES
- ☐ 1. Physician | | |
- ☐ 2. Midlevel Clinician | | |
- ☐ 3. RN
- ☐ 4. LPN
- ☐ 5. Health Educator/Nutritionist
- ☐ 6. Lab Tech
- ☐ 7. Medical Assistant

11. MEDICAL SERVICES PROVIDED

☐ 01. BV Tx	☐ 11. Herpes Tx	☐ 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. Diaph/Cap Fit/Chk	☐ 15. HPV Tx	☐ 25. Phys Assess
☐ 06. Chlamydia Tx	☐ 16. HPV Vaccine	☐ 26. Contraceptive Change
☐ 07. Colpo /Cryo	☐ 17. Implant Insert	
☐ 08. Contracep.Refill	☐ 18. Implant Removal	☐ 27. Testicular exam
☐ 09. Syphilis Tx	☐ 19. IUD Insertion	☐ 28. Trich Tx
☐ 10. 3-Month Injection	☐ 20. IUD Removal	☐ 29. UTI Tx

12. LAB SERVICES PROVIDED

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

13. CHLAMYDIA

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

Risk History
- ☐ 1. > 1 partner in past 60 days
- ☐ 2. New partner in past 60 days
- ☐ 3. History of STDs
- ☐ 4. No Risk History
- ☐ 5. MSM
- ☐ 6. Infrequent Condom Use

Treated Presumptively ☐ 1. Yes ☐ 2. No

Specimen Source
- ☐ 1. Cervical
- ☐ 2. Urethral
- ☐ 3. Vaginal
- ☐ 4. Urine
- ☐ 5. Pharyngeal
- ☐ 6. Rectal

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. Breast Awareness
☐ 65. Domestic Viol.	☐ 88. PHQ-2	☐ 83. Sterilization
☐ 66. Exercise	☐ 89. PHQ-9	☐ 84. Substance Abuse
☐ 67. FAM/LAM	☐ 75. Nutrition	☐ 85. STD Follow-Up
☐ 68. Female Exam	☐ 76. Obesity	☐ 86. Tobacco Cessation
☐ 69. Genetic Counsel	☐ 77. Pap Follow-Up	☐ 87. Genital Awareness
☐ 70. HIV	☐ 78. Preconception	☐ 90. Reprod Life Plan

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

AHLERS & ASSOCIATES, WACO, TX

FORM XXII (01/16)

Exhibit 7

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 1ST VISIT
141	REJECT:	GENDER CODE IS INVALID
200	REJECT:	YEARS OF EDUCATION INVALID
210	REJECT:	INCOME REQUIRED FOR 1ST, INITIAL AND ANNUAL VISIT
211	REJECT:	INCOME IS INVALID
215	REJECT:	FAMILY SIZE IS INVALID
220	REJECT:	ZIP CODE REQUIRED FOR 1ST, 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 1ST 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 1ST 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 1ST 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