A family planning client has at least one family planning encounter during a reporting period. The purpose of a family planning encounter is to provide family planning clinical and education services and related preventive health services to female and male clients who want to avoid unintended pregnancies or achieve intended pregnancies. Family planning encounters are documented by Family Planning Encounter Records (FPERS). Data from FPERS are used to determine the state’s Title X grant award and Title X funding levels to agencies.

**When do you complete an FPER?**

Complete an FPER for any family planning client listed below who receives one or more of the primary services listed below. All other required Title X secondary services listed below also must be provided.

**CLIENT TYPE**

**Who is a family planning client?**

- Female and male adults under 65 years old
- Sexually active female and male adolescents
- Non-sexually active female and male adolescents
- Individuals who have concerns about infertility
- Pregnant women who receive pregnancy-related counseling
- Pregnant women who receive counseling to address their post-delivery family planning needs

**Who is not a family planning client?**

- Females and males 65 years of age and older
- Female clients who are post-menopausal
- Anonymous HIV CTR clients (Anonymous HIV CTR clients can be reported on HIV CTR forms)

**PRIMARY SERVICES**

**What services for family planning clients justify the completion of an FPER?**

- Pregnancy tests with pregnancy-related counseling/education
- Birth control visits with counseling/education (including follow-up visits)
- Emergency contraception visits with counseling/education
- Pap smears with family planning counseling/education
- Breast exams with family planning counseling/education
- Level I infertility visits
- Sterilization/hysterectomy counseling/education
- HIV/STD education with family planning counseling/education

- Family planning counseling/education
- Prenatal and post-partum visits with family planning counseling/education
- Physical examinations with family planning counseling/education
- HIV counseling, testing, & referral (CTR) services with birth control counseling/education
- Menopause/peri-menopause counseling/education
- STD counseling & testing with birth control counseling/education
- Puberty and/or menstruation counseling/education
- Reproductive anatomy/physiology/sexuality counseling/education

**SECONDARY SERVICES**

**What secondary services are required for family planning clients?**

- Education and counseling consistent with Title X requirements
- History consistent with Title X requirements
- Physical assessments consistent with Title X requirements

- Lab testing consistent with Title X requirements
- Family involvement and sexual coercion prevention counseling for minor clients consistent with Title X requirements
### Tips for Completing FPERs

**Patient Number**
- Right justify patient number.
- Leave unused fields blank.
- Do not include non-numeric components.
- Include leading zeros if they are part of the patient number (e.g. patient number 00-500-6654 should be entered as 009006654).

**Date of Birth**
- Only complete FPERs for family planning patients under 65 years of age.

**Family Size**
- Complete at every visit.
- Always fill in family size and right justify it.
- Use family size of “1” for confidential patients.
- FPER family size must match agency’s financial records.

**Gross Weekly Income**
- Complete at every visit.
- Allow patients to self-report income if they come in without or refuse to give income verification.
- FPER gross weekly income must match agency’s financial records.
- Select “Unavailable/Unknown” only for privately insured patients.

**Race & Ethnicity**
- Complete for all new patients on their first visit and update as necessary.
- Allow patients to self-report race and ethnicity.

**Provider Type**
- Complete at every visit.
- Select only one provider.
- Chose the highest level provider seen.

**Principal Health Insurance Coverage**
- Complete at every visit.
- Choose how the visit will be paid.
- Do not select “Unknown/Not Reported” health insurance status.

**Primary Method of Reimbursement**
- Complete at every visit.
- If patient is uninsured and income is:
  - Less than 100% of poverty level: select “100% Grant/Title X’.
  - Between 100% and 250% of poverty level: select “Self Pay – Partial”.
  - More than 250% of poverty level: select “Self-Pay Full”.
- Do not select “Center Care”, “FC Pool”, “State Funding” or “Other”.
- FPER primary method of reimbursement must match agency’s financial records.

**English Proficient**
- Complete at every visit.
- Select “Yes” or “No”.

**Primary Language**
- Complete for all new patients on their first visit and update as necessary.

**Office Visits**
- Complete one of the following combinations for every visit:
  - One new patient/established patient visit or preventative visit or counseling visit (this could be for an established patient or new patient).
  - One procedural visit.
  - One new patient/established patient or preventative or counseling visit and one or more procedural visits.

**Medical Services**
- Select all that apply.
- If pregnancy test is provided and the results are known at the time of visit, select only “Positive” or “Negative”.
- If pregnancy test is provided and the results are unknown at the time of visit, select only “Pregnancy Test”.

**Contraceptive Method**
- Select contraceptive method under “Before (New Patients)” column, for all new patients on their first visit.
- Select contraceptive method under “Primary Method After” column, at the end of each visit.
- Do not select “Method Unknown”.
- “Other Method” includes: withdrawal, emergency contraception, breastfeeding and any other method that is not listed on the list of methods.
- “No Method” selected requires a reason for no method to be chosen.
  - “Relying on Female Method” should only be selected for male clients.
  - “Other Reason” should be selected for sexually active clients who do not want/need a method.

**Please Remember**
- Do not use Local Fee Scale box.
- Do not use Local Use Codes.