


**Region II
Infertility Prevention Project**

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Disclaimer: The findings and conclusions in this presentation are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention.




Topics Addressed

- Budget
- Infrastructure Update
- CSPS 2009 Update
 - » Data Driven Programs
 - » Changes to Project Area Performance Measures




Budget 2008

- Omnibus Spending Bill
 - » Rescission of 1.747%
 - CSPS 2008
 - Infrastructure 08-09
- Infrastructure Funding July '08–June '09
 - Base Award
 - Range \$173 - \$204 K
 - Special Project Competition (\$5K)
 - Adolescent Health Care Confidentiality




IPP Infrastructure Grant

- Inter-Agency Agreement with OPA
 - » Competition Year (3 Year Cycle)
 - » Infrastructure Activities
 - Administration
 - Coordination
 - Communication
 - Prevalence Monitoring
 - Data Management
 - Education and Program Promotion



IPP Infrastructure Grant


- Infrastructure Program Evaluation
 - Infrastructure Performance Measures
 - Estimates of Screening Coverage [FPAR Data]
 - Proportion of Tests Used, stratified by age
 - National Objectives
 - AI/AN Health Care Services Delivery Systems
 - Pregnancy-Test Only



Infrastructure Performance Measures


Estimated Screening Coverage (%)
Females 24 years old and younger

Region	2005	2006
I	40	34
II	44	45
III	48	51
IV	50	54
V	41	43
VI	47	55
VII	46	42
VIII	35	36
IX	51	56
X	30	37




Infrastructure Performance Measures
Proportion of Tests
Females 15-24 years of age (%)

Region	2005	2006
I	61	62
II	59	60
III	45	63
IV	No Data	65
V	73	71
VI	67	66
VII	84	82
VIII	74	72
IX	63	63
X	81	78




Future of IPP

- Mature Program
- Congressional Intent
 - Public Health Law Section 318A
 - » Provide clinical services to at-risk women (and their sex partners) for the purpose of preventing STD-related infertility.



CSPS 2009

- 5 year Cooperative Agreement
 - » Due Date: Mid-August
 - » 2009 Funding: No more than 08 Base Funding
 - » “New” Syphilis Elimination Formula
 - » Broad emphasis on routine CT screening
 - » Integration and Health Disparities
 - Focus on American Indians and Alaskan Natives
 - » Data-Driven Implementation and Evaluation Plans
 - » Project Area Performance Measures
 - Some shift to broad outcomes and sub-measures
 - Timeliness of Treatment remain
 - Family Planning and STD clinics



CSPS-IPP 2009

- Continued emphasis on completing required IPP activities
 - » Ensure CT and GC screening and treatment
 - Do not screen if you cannot treat
 - » Support laboratory testing
 - » Ensure collection and reporting of all CDC core data elements
 - » Program Management
 - » Provider Training



Data Driven Programs

- 3% Positivity Threshold
 - Among women < 26 years of age
 - Applies to ALL facilities reporting data into the prevalence monitoring system
 - Plans
 - » Increase positivity in facilities with less than 3%
 - OR
 - » Resource re-allocation



IPP Activities Funding Conditions

- Title X Concurrence Letter
 - » Spending plans for the 50% should be developed in partnership with all project area level Title X grantees as documented by the required concurrence letter.
 - » Does not require the 50% be spent on Title X grantee clients exclusively.
- Prohibits IPP financial support of DIS
 - » Does not preclude CSPS- or SE-funded DIS from performing CT- and GC-related disease intervention activities
- Male Screening up to 15%



Gonorrhea Screening

- Targeted Gonorrhea Screening
 - Up to 10% of total awarded IPP funds must be used to target gonorrhea screening among women <26 years of age.
 - Example:
 - » 3000 CT cases and 150 GC cases reported in women under 26 years of age
 - » Total disease burden is 3150 cases
 - » The amount attributed to GC is 150/3150=4.76%
 - » A minimum of 4.76% of the total award (up to 10%) must be spent targeting GC screening in women under 26.



Infertility Prevention Workgroup

- National Chlamydia Coalition
 - » Partnership for Prevention
 - » Steering Committee
 - AFY, AAP, ASHA, ACOG, PPFA, NCSD, NBWHI, and NPWF
 - » IPP Representative
- National Chlamydia Screening Coordinator
 - » Co-chair of the IPW
 - » Initial charge: Facilitate NCC activities