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**Grantee Profile Cover Sheet**

<b>Grantee Legal Name</b>		
<b>Address of Grantee Administrative Offices</b>	Street	
	City	
	State	ZIP + 4
<b>Title X Project Director</b>	Name	
	Title	
	Street	
	City	
	State	ZIP + 4
	Phone	
	Fax	
	E-Mail	
<b>Grantee Contact Person (Person completing FPAR)</b>	Name	
	Title	
	Street	
	City	
	State	ZIP + 4
	Phone	
	Fax	
	E-Mail	
<b>Number of Delegates/Subcontractors Supported by the Title X Grant</b>		
<b>Number of Family Planning Service Sites Supported by the Title X Grant</b>	Check if total number of sites is different from application	

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**Table 1**  
**Unduplicated Number of Family Planning Users by Age and Sex**

<b>Age Group (Years)</b>	<b>Female Users (A)</b>	<b>Male Users (B)</b>	<b>Total Users (Sum Cols A + B) (C)</b>
1 Under 15			
2 15 to 17			
3 18 to 19			
4 20 to 24			
5 25 to 29			
6 30 to 34			
7 35 to 39			
8 40 to 44			
9 Over 44			
10 <b>Total Users (sum rows 1 to 9)</b>			

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**Table 2**  
**Unduplicated Number of Female Family Planning Users by Race and Ethnicity**

	<b>Race</b>	<b>Hispanic or Latino (A)</b>	<b>Not Hispanic or Latino (B)</b>	<b>Unknown/ Not Reported (C)</b>	<b>Total Female Users (Sum Cols A + B + C) (D)</b>
1	American Indian or Alaska Native				
2	Asian				
3	Black or African American				
4	Native Hawaiian or Other Pacific Islander				
5	White				
6	More than one race				
7	Unknown/not reported				
8	<b>Total Female Users (sum rows 1 to 7)</b>				

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**Table 3**  
**Unduplicated Number of Male Family Planning Users by Race and Ethnicity**

	<b>Race</b>	<b>Hispanic or Latino (A)</b>	<b>Not Hispanic or Latino (B)</b>	<b>Unknown/ Not Reported (C)</b>	<b>Total Male Users (Sum Cols A + B + C) (D)</b>
1	American Indian or Alaska Native				
2	Asian				
3	Black or African American				
4	Native Hawaiian or Other Pacific Islander				
5	White				
6	More than one race				
7	Unknown/not reported				
8	<b>Total Male Users (sum rows 1 to 7)</b>				

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**Table 4**  
**Unduplicated Number of Family Planning Users by Income Level**

<b>Income Level as a Percentage of the HHS Poverty Guidelines</b>		<b>Number of Users (A)</b>
1	100% and below	
2	101% to 150%	
3	151% to 200%	
4	201% to 250%	
5	Over 250%	
6	Unknown/not reported	
7	<b>Total Users (sum rows 1 to 6)</b>	

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**Table 5**  
**Unduplicated Number of Family Planning Users by Principal Health Insurance Coverage Status**

<b>Principal Health Insurance Covering Primary Medical Care</b>	<b>Number of Users (A)</b>
1 Public health insurance covering primary medical care	
2 Private health insurance covering primary medical care	
3 Uninsured (no public or private health insurance)	
4 Unknown/not reported	
<b>5 Total Users (sum rows 1 to 4)</b>	

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**Table 6**  
**Unduplicated Number of Family Planning Users with Limited English Proficiency (LEP)**

	<b>Number of Users (A)</b>
1 Number of users with limited English proficiency (LEP)	

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**Table 7**  
**Unduplicated Number of Female Family Planning Users by Primary Method and Age**

<b>Primary Method</b>	<b>Under 15 (A)</b>	<b>15 to 17 (B)</b>	<b>18 to 19 (C)</b>	<b>20 to 24 (D)</b>	<b>25 to 29 (E)</b>	<b>30 to 34 (F)</b>	<b>35 to 39 (G)</b>	<b>40 to 44 (H)</b>	<b>Over 44 (I)</b>	<b>Total Female Users (Sum Cols A to I) (J)</b>
1 Female sterilization										
2 Intrauterine device (IUD)										
3 Hormonal implant										
4 1-Month hormonal injection										
5 3-Month hormonal injection										
6 Oral contraceptive										
7 Contraceptive patch										
8 Vaginal ring										
9 Cervical cap or diaphragm										
10 Contraceptive sponge										
11 Female condom										
12 Spermicide (used alone)										
13 Fertility Awareness or Lactational Amenorrhea Method										
14 Abstinence										
15 Withdrawal or other method										
<b>Rely on Male Method</b>										
16 Vasectomy										
17 Male condom										
<b>No Method</b>										
18 Pregnant or seeking pregnancy										
19 Other reason										
<b>Method Unknown/ Not Reported</b>										
20 Method unknown/not reported										
<b>21 Total Female Users (sum rows 1 to 20)</b>										



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**Table 8**  
**Unduplicated Number of Male Family Planning Users by Primary Method and Age**

<b>Primary Method</b>	<b>Under 15 (A)</b>	<b>15 to 17 (B)</b>	<b>18 to 19 (C)</b>	<b>20 to 24 (D)</b>	<b>25 to 29 (E)</b>	<b>30 to 34 (F)</b>	<b>35 to 39 (G)</b>	<b>40 to 44 (H)</b>	<b>Over 44 (I)</b>	<b>Total Male Users (Sum Cols A to I) (J)</b>
1 Vasectomy										
2 Male condom										
3 Fertility Awareness Method										
4 Abstinence										
5 Withdrawal or other method										
<b>Rely on Female Method</b>										
6 Rely on female method(s)										
<b>No Method</b>										
7 Partner pregnant or seeking pregnancy										
8 Other reason										
<b>Method Unknown/ Not Reported</b>										
9 Method unknown/not reported										
10 <b>Total Male Users (sum rows 1 to 9)</b>										

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**Table 9**  
**Cervical Cancer Screening Activities**

<b>Screening Activity</b>	<b>Number of Users or Number of Tests (A)</b>
1    Unduplicated number of users who obtained a Pap test	
2    Number of Pap tests performed	
3    Number of Pap tests with an ASC or higher result	
4    Number of Pap tests with an HSIL or higher result	

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**Table 10**  
**Clinical Breast Exams and Referrals**

	<b>Screening Activity</b>	<b>Number of Users (A)</b>
1	Unduplicated number of users who received a clinical breast exam (CBE)	
2	Unduplicated number of users referred for further evaluation based on their CBE	

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**Table 11**  
**Unduplicated Number of Family Planning Users Tested for Chlamydia by Age and Sex**

<b>Age Group (Years)</b>	<b>Female Users (A)</b>	<b>Male Users (B)</b>
1 Under 15		
2 15 to 17		
3 18 to 19		
4 20 to 24		
5 25 and over		
6 <b>Total Users (sum rows 1 to 5)</b>		

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**Table 12**  
**Number of Gonorrhea, Syphilis, and HIV Tests**

<b>Test Type</b>	<b>Female Tests (A)</b>	<b>Male Tests (B)</b>	<b>Total Tests (Sum Cols A + B) (C)</b>
1 Gonorrhea			
2 Syphilis			
3 HIV – All confidential tests			
4 HIV – Positive confidential tests			
5 HIV – Anonymous tests			

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**Table 13**  
**Number of Family Planning Encounters by Type of Provider**

Provider Type		Number of FTEs (A)	Number of Family Planning Encounters (B)
1	<b>Clinical Services Providers</b>		
1a	Physicians		
1b	Physician assistants/nurse practitioners/ certified nurse midwives		
1c	Registered nurses with an expanded scope of practice who are trained and permitted by state-specific regulations to perform all aspects of the user physical assessment		
2	<b>Other Services Providers</b>		
3	<b>Total Family Planning Encounters (sum rows 1 + 2)</b>		

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**Table 14  
 Revenue Report**

Revenue Source		Amount	
<b>Title X</b>			
1	<b>Title X grant</b> (Section 1001: family planning services)		
<b>Payment for Services</b>			
2	<b>Total client collections/self-pay</b>		
3	<b>Third-party payers</b>	<b>Amount Prepaid (A)</b>	<b>Amount Not Pre-paid (B)</b>
3a	Medicaid (Title XIX)		
3b	Medicare (Title XVIII)		
3c	State Children's Health Insurance Program (SCHIP)		
3d	Other public health insurance		
3e	Private health insurance		
4	<b>Total – Third-Party Payers (sum rows 3a to 3e)</b>		
5	<b>Total – Payment for Services (sum row 2 + cell 4a + cell 4b)</b>		
<b>Other Revenue</b>			
6	Title V (MCH Block Grant)		
7	Title XX (Social Services Block Grant)		
8	Temporary Assistance for Needy Families (TANF)		
9	Local government revenue		
10	State government revenue		
11	Bureau of Primary Health Care (BPHC)		
12	Other (Specify: _____)		
13	Other (Specify: _____)		
14	Other (Specify: _____)		
15	Other (Specify: _____)		
16	Other (Specify: _____)		
17	<b>Total– Other Revenue (sum rows 6 to 16)</b>		
18	<b>Total Revenue (sum rows 1 + 5 + 17)</b>		

# FPAR NOTES

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**General:**

**Grantee Profile:**

**Table 1:**



**Table 2:**

**Table 3:**

**Table 4:**

**Table 5:**

**Table 6:**

**Table 7:**

**Table 8:**

**Table 9:**

**Table 10:**

**Table 11:**

**Table 12:**

**Table 13:**

**Table 14:**