1.

DATE 7/21/2009 NEW YORK PGM:NYHIV01 PAGE 1

FPEP HIV COUNSELING SESSIONS BY COUNTY

7/01/2007 - 6/30/2009

PROJECT: (6)

CLINIC: 2558

COUNTY	COUNTY NAME	PRETEST W/O TEST	PRETEST AMOUNT	PRETEST W/ TEST	PRETEST AMOUNT	POSTTEST NEG/INC	POSTTEST AMOUNT	POSTTEST POSITIVE	POSTTEST AMOUNT	TOTAL SESSIONS	TOTAL AMOUNT
27		7	$491.75			1				8	$491.75
CLINIC TOTAL		7	$491.75			1				8	$491.75

DATE 7/21/2009 NEW YORK PGM:NYHIV01 PAGE 2

FPEP HIV COUNSELING SESSIONS BY COUNTY

7/01/2007 - 6/30/2009

PROJECT: 4 (6)

CLINIC: 2561

COUNTY	COUNTY NAME	PRETEST W/O TEST	PRETEST AMOUNT	PRETEST W/ TEST	PRETEST AMOUNT	POSTTEST NEG/INC	POSTTEST AMOUNT	POSTTEST POSITIVE	POSTTEST AMOUNT	TOTAL SESSIONS	TOTAL AMOUNT
34		4	$281.00							4	$281.00
58		2	$140.50							2	$140.50
CLINIC TOTAL		6	$421.50							6	$421.50

DATE 7/21/2009 NEW YORK PGM:NYHIV01 PAGE 3

FPEP HIV COUNSELING SESSIONS BY COUNTY

7/01/2007 - 6/30/2009

PROJECT: 4 (6)

CLINIC: 2562

COUNTY	COUNTY NAME	PRETEST W/O TEST	PRETEST AMOUNT	PRETEST W/ TEST	PRETEST AMOUNT	POSTTEST NEG/INC	POSTTEST AMOUNT	POSTTEST POSITIVE	POSTTEST AMOUNT	TOTAL SESSIONS	TOTAL AMOUNT
58		1	$70.25							1	$70.25
CLINIC TOTAL		1	$70.25							1	$70.25

FPEP HIV CLIENT DETAIL REPORT

PROJECT: 4
COUNTY: 27

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF PRETEST COUNSELING	TESTED	TEST RESULTS	DATE OF POSTTEST COUNSELING	AMOUNT
2556	xxxxxxx	12/25/19xx	4/28/20xx	NONE		$70.25	
2558	xxxxxxx	1/08/19xx	5/07/20xx	NONE		$70.25	
2558	xxxxxxx	8/03/19xx	5/14/20xx	NONE		$70.25	
2558	xxxxxxx	3/27/19xx	6/11/20xx	NONE		$70.25	
2558	xxxxxxx	7/12/19xx	4/30/20xx	NONE		$70.25	
2558	xxxxxxx	7/13/19xx	5/19/20xx	NONE		$70.25	
2558	xxxxxxx	11/09/19xx	4/12/20xx	NONE		$70.25	
				COUNTY AMOUNT			$491.75 *

COUNTY: 33

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF PRETEST COUNSELING	TESTED	TEST RESULTS	DATE OF POSTTEST COUNSELING	AMOUNT
2781	xxxxxxx	9/14/19xx	5/11/20xx	NONE		$70.25	
2781	xxxxxxx	7/15/19xx	5/17/20xx	NONE		$70.25	
2781	xxxxxxx	12/31/19xx	4/05/20xx	NONE		$70.25	
2781	xxxxxxx	5/21/19xx	6/01/20xx	NONE		$70.25	
				COUNTY AMOUNT			$281.00 *

FAMILY PLANNING EXTENSION PROGRAM
HIV COUNSELING
AGENCY REIMBURSEMENT AMOUNTS
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

		PRETEST COUNSELING SESSIONS				POSTTEST COUNSELING SESSIONS					
		WITHOUT TEST		WITH TEST		NO/NEG/INC TEST		POSITIVE TEST		TOTAL SESSIONS	
MMIS #	AGENCY	COUNT	AMOUNT	COUNT	AMOUNT	COUNT	AMOUNT	COUNT	AMOUNT	COUNT	AMOUNT
382403		13	$1,264.50							13	$1,264.50
583697		10	$702.50	7	$596.20	7				24	$1,235.70
362863		5	$456.32	3	$190.17	3				14	$646.49
245103		1	$101.44	1	$108.63	1				3	$210.07
245135		21	$2,187.55	30	$3,347.70	30				81	$5,535.69
243503				1	$112.12					1	$112.12
301139		1	$70.25							1	$70.25
245258		42	$2,950.50	18	$1,378.80	16				76	$4,329.30
355521		1	$70.25							1	$70.25
473643		2	$140.50	4	$306.40	4				10	$446.90
245423				1	$96.47	1				2	$96.47
394752		257	$23,160.64	31	$2,990.57					288	$26,151.41
243352				2	$192.94	1				3	$192.94
3011735		4	$228.16							4	$228.16
473029		35	$3,244.32	30	$2,894.10	19				85	$6,135.42
473170		9	$511.08	8	$771.76	2				19	$1,582.84
244202		1	$104.68	7	$754.84					8	$889.52
245153				1	$111.59					1	$111.59
245065		1	$104.19	49	$5,467.91	49				99	$5,572.10
245117		144	$15,003.36	16	$1,755.44	6				166	$16,785.80
474159		11	$772.75	16	$1,225.60	16				43	$1,998.35
243173		67	$7,013.56	18	$2,018.16					85	$9,031.72
473038		37	$3,934.44	2	$192.94	1				40	$3,527.38
244642		1	$90.12							1	$90.12
244642		2	$180.24	5	$452.35	5				12	$662.59
3108454		2	$114.08	3	$190.17	3				8	$304.25
355116				2	$126.73	2				4	$126.73
245043				18	$2,018.62	15				35	$2,005.62
474600		5	$456.32	3	$190.17	3				14	$646.49
365559		2	$114.08							2	$114.08
473125				1	$76.60	1				2	$76.60
1962129		25	$2,213.36	108	$10,140.53	67				200	$12,359.84
355285		1	$70.25							1	$70.25
245528		7	$630.84	98	$9,454.06					105	$10,084.90
463777		7	$399.28	5	$316.95	5				17	$716.23
325140				73	$7,042.31	72		1	$90.12	146	$7,132.43
385135		2	$180.24			2				4	$180.24
249569		15	$1,622.16	39	$3,762.33	35				95	$5,384.49
	TOTAL	746	$67,792.50	600	$58,303.26	372		1	$90.12	1719	$126,185.88

DATE 10/21/2009 NEW YORK PAGE 1

PGM:NYHIV03

FAMILY PLANNING EXTENSION PROGRAM

HIV COUNSELING

COUNTY DISTRIBUTION AMOUNTS

FOR REPORTING PERIOD

10/01/2007 - 9/30/2009

			PRETEST	COUNSELING			POSTTEST COUNSELING					
			WITHOUT TEST		WITH TEST		NEG/INC TEST	POSITIVE TEST			TOTAL	COUNTY
COUNTY	COUNTY NAME	SESSIONS	AMOUNT	SESSIONS	AMOUNT	SESSIONS	AMOUNT	SESSIONS	AMOUNT	SESSIONS	AMOUNT	SHARE
3	BROOME	1	$57.04	2	$126.78	2				5	$183.82	$91.91
6	CHAUTAUQUA	8	$456.32	1	$63.39	1				10	$519.71	$259.86
7	CHEMUNG	3	$171.12							3	$171.12	$85.56
8	CHENANGO	1	$57.04	1	$63.39	1				3	$120.43	$60.22
9	CLINTON	4	$228.16							4	$228.16	$114.08
10	COLUMBIA	1	$70.25							1	$70.25	$35.13
11	CORTLAND	2	$114.08	1	$63.39	1				4	$177.47	$88.74
12	DELAWARE	4	$241.37							4	$241.37	$120.69
13	DUTCHESS	7	$531.49	9	$729.14	9				25	$1,260.63	$630.32
14	ERIE			1	$76.60	1				2	$76.60	$38.30
15	ESSEX			1	$111.59	1				2	$111.59	$55.80
16	FRANKLIN	1	$57.04							1	$57.04	$28.52
18	GENESEE	1	$70.25							1	$70.25	$35.13
19	GREENE	1	$70.25							1	$70.25	$35.13
22	JEFFERSON	11	$772.75	1	$76.60	1				13	$849.35	$424.68
23	KINGS	211	$21,831.28	137	$14,259.67	120				468	$36,090.95	$18,045.48
24	LEWIS	2	$140.50							2	$140.50	$70.25
27	MONROE	5	$351.25							5	$351.25	$175.63
28	MONTGOMERY	1	$70.25							1	$70.25	$35.13
29	NASSAU	86	$7,320.28	164	$14,762.52	105				355	$22,082.80	$11,041.40
30	MANHATTAN	89	$9,258.33	65	$7,073.97	21				175	$16,332.30	$8,166.15
33	ONONDAGA	29	$2,037.25	12	$919.20	12				53	$2,956.45	$1,478.23
34	ONTARIO	3	$210.75							3	$210.75	$105.38
35	ORANGE	14	$983.50	16	$1,225.60	16				46	$2,209.10	$1,104.55
37	OSWEGO	1	$70.25							1	$70.25	$35.13
38	OTSEGO	2	$114.08							2	$114.08	$57.04
39	PUTNAM	5	$450.60							5	$450.60	$225.30
40	QUEENS	30	$2,972.40	111	$10,844.78	109		1	$90.12	251	$13,907.30	$6,953.65
42	RICHMOND	1	$104.68	7	$769.19	1				9	$873.87	$436.94
43	ROCKLAND	4	$360.48	10	$964.70	8				22	$1,325.18	$662.59
44	ST. LAWRENCE	5	$351.25	4	$306.40	4				13	$657.65	$328.83
45	SARATOGA	1	$70.25	2	$153.20	2				5	$223.45	$111.73
48	SCHUYLER	1	$57.04							1	$57.04	$28.52
50	STEUBEN	4	$228.16	1	$63.39					5	$291.55	$145.78
51	SUFFOLK	89	$8,020.68	99	$9,484.37	8				196	$17,505.05	$8,752.53
52	SULLIVAN	9	$632.25	1	$76.60	1				11	$708.85	$354.43
54	TOMPKINS	1	$57.04							1	$57.04	$28.52
55	ULSTER	16	$1,124.00	6	$459.60	6				28	$1,583.60	$791.80
58	WAYNE	1	$70.25	4	$398.16	4				9	$468.41	$234.21
59	WESTCHESTER	234	$21,102.64	23	$2,233.93	4				261	$23,336.57	$11,668.29
60	WYOMING	1	$57.04	2	$126.78	2				5	$183.82	$91.91
61	YATES			1	$63.39					1	$63.39	$31.70
62	BRONX	67	$6,882.87	107	$11,739.05	80				254	$18,621.92	$9,310.96
	STATE TOTAL	957	$87,826.51	789	$77,235.38	520		1	$90.12	2267	$165,152.01	$82,576.01

FAMILY PLANNING EXTENSION PROGRAM
AGENCY REIMBURSEMENT AMOUNTS
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

MMIS #	AGENCY NAME	VISITS	AMOUNT	VISITS @ CUR AMTS	VISITS @ PRIOR AMTS
382403		46	$4,534.22	46 @ $98.57	
583697		61	$6,223.83	61 @ $102.03	
362863		28	$2,801.68	28 @ $100.06	
246108		170	$13,574.50	170 @ $79.85	
246135		450	$34,353.00	450 @ $76.34	
243903		60	$4,781.40	60 @ $79.69	
301139		4	$383.28	4 @ $95.82	
245258		138	$13,936.62	138 @ $100.99	
355931		49	$5,397.84	49 @ $110.16	
473643		22	$2,186.36	22 @ $99.38	
355248		3	$322.50	3 @ $107.50	
245423		3	$268.77	3 @ $89.59	
394752		364	$49,580.44	364 @ $136.21	
243352		165	$24,900.15	165 @ $150.91	
3011736		9	$919.71	9 @ $102.19	
473029		561	$84,873.69	561 @ $151.29	
473170		1068	$138,263.28	1068 @ $129.46	
244202		245	$18,852.75	245 @ $76.95	
695941		8	$1,161.84	8 @ $145.23	
246153		12	$1,008.84	12 @ $84.07	
246066		369	$28,331.82	369 @ $76.78	
246117		246	$21,606.18	246 @ $87.83	
474199		57	$5,773.53	57 @ $101.29	
243178		143	$15,931.63	143 @ $111.41	
473038		123	$22,617.63	108 @ $186.16	15 @ $167.49
244642		8	$1,156.72	8 @ $144.59	
244642		26	$3,759.34	26 @ $144.59	
3108454		10	$453.00	10 @ $45.30	
356116		2	$162.36	2 @ $81.18	
246048		116	$9,363.52	116 @ $80.72	
474800		25	$1,537.00	25 @ $61.48	
365559		8	$575.12	8 @ $71.89	
473125		1	$100.56	1 @ $100.56	
1962129		660	$87,522.60	660 @ $132.61	
356285		1	$64.63	1 @ $64.63	
245538		427	$40,919.41	427 @ $95.83	
468777		26	$2,583.88	26 @ $99.38	
325140		537	$64,837.38	537 @ $120.74	
385135		175	$24,060.75	175 @ $137.49	
249569		82	$10,587.84	82 @ $129.12	
1774029		1	$124.24	1 @ $124.24	
	TOTAL	6509	$750,393.84		

FAMILY PLANNING EXTENSION PROGRAM
COUNTY REIMBURSEMENT AMOUNTS
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

COUNTY	COUNTY OF RESIDENCE	VISITS	AMOUNT	COUNTY SHARE
1	ALBANY	1	$95.82	$47.91
2	ALLEGANY	2	$162.36	$81.18
3	BROOME	19	$1,844.49	$922.25
4	CATTARAUGUS	1	$61.48	$30.74
5	CAYUGA	3	$269.03	$134.52
6	CHAUTAUQUA	20	$1,229.60	$614.80
7	CHEMUNG	15	$1,500.90	$750.45
8	CHENANGO	4	$397.52	$198.76
9	CLINTON	10	$1,020.30	$510.15
10	COLUMBIA	2	$191.64	$95.82
11	CORTLAND	7	$503.23	$251.62
12	DELAWARE	4	$399.13	$199.57
13	DUTCHESS	105	$14,242.99	$7,121.50
14	ERIE	4	$245.92	$122.96
15	ESSEX	7	$562.71	$281.36
18	GENESEE	2	$152.80	$76.40
19	GREENE	1	$100.56	$50.28
21	HERKIMER	4	$397.52	$198.76
22	JEFFERSON	21	$2,142.63	$1,071.32
23	KINGS	869	$78,595.83	$39,297.92
24	LEWIS	2	$204.06	$102.03
25	LIVINGSTON	2	$215.00	$107.50
27	MONROE	19	$1,872.83	$936.42
28	MONTGOMERY	7	$695.66	$347.83
29	NASSAU	828	$110,067.32	$55,033.66
30	MANHATTAN	498	$48,738.31	$24,369.16
32	ONEIDA	2	$204.06	$102.03
33	ONONDAGA	68	$6,857.80	$3,428.90
34	ONTARIO	13	$1,288.65	$644.33
35	ORANGE	86	$9,134.47	$4,567.24
37	OSWEGO	1	$98.57	$49.29
38	OTSEGO	4	$397.52	$198.76
39	PUTNAM	15	$2,128.57	$1,064.29
40	QUEENS	472	$44,492.64	$22,246.32
41	RENSSELAER	2	$195.20	$97.60
42	RICHMOND	244	$19,101.85	$9,550.93
43	ROCKLAND	607	$74,412.31	$37,206.16
44	ST. LAWRENCE	25	$2,550.75	$1,275.38
45	SARATOGA	9	$894.42	$447.21
48	SCHUYLER	1	$100.06	$50.03
50	STEUBEN	14	$1,405.10	$702.55
51	SUFFOLK	1107	$143,573.18	$71,786.59
52	SULLIVAN	15	$1,514.85	$757.43
55	ULSTER	27	$2,726.73	$1,363.37
56	WARREN	1	$99.38	$49.69
58	WAYNE	2	$161.44	$80.72
59	WESTCHESTER	884	$132,403.31	$66,201.66
60	WYOMING	10	$487.55	$243.78
61	YATES	7	$708.09	$354.05
62	BRONX	436	$39,547.70	$19,773.85
	STATE TOTAL	6509	$750,393.84	$375,196.92

PGM: NYFPEPR3 FAMILY PLANNING EXTENSION PROGRAM - SUMMARY REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

AGENCY NUMBER	AGENCY NAME	COUNTY NUMBER	COUNTY NAME	NUMBER OF CLIENTS	NUMBER OF VISITS
4					
		05	CAYUGA	1	2
		27	MONROE	18	19
		33	ONONDAGA	10	11
		34	ONTARIO	8	11
		37	OSWEGO	1	1
		61	YATES	1	2
			TOTAL	39 *	46 *

PGM: NYFPEPR3 FAMILY PLANNING EXTENSION PROGRAM - SUMMARY REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

AGENCY NUMBER	AGENCY NAME	COUNTY NUMBER	COUNTY NAME	NUMBER OF CLIENTS	NUMBER OF VISITS
224					
		09	CLINTON	8	10
		15	ESSEX	1	1
		22	JEFFERSON	17	21
		24	LEWIS	2	2
		32	ONEIDA	2	2
		44	ST. LAWRENCE	21	25
			TOTAL	51 *	61 *

FAMILY PLANNING EXTENSION PROGRAM - DETAIL REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

PROJECT:
COUNTY: 5

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF VISIT	LAST PREG ENDED	AMOUNT
2781		1/08/19	4/08/20	7/2009	$98.57

COUNTY: 27

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF VISIT	LAST PREG ENDED	AMOUNT
2556		7/02/19	6/26/20	3/2010	$98.57
2556		12/25/19	4/28/20	2/2009	$98.57
2556		7/19/19	5/07/20	5/2009	$98.57
2558		4/20/19	4/06/20	2/2009	$98.57
2558		1/08/19	5/07/20	3/2009	$98.57
2558		3/21/19	5/05/20	3/2009	$98.57
2558		4/19/19	4/23/20	11/2008	$98.57
2558		8/03/19	5/14/20	11/2009	$98.57
2558		8/27/19	5/07/20	7/2009	$98.57
2558		5/15/19	5/12/20	3/2009	$98.57
2558		12/27/19	5/14/20	9/2009	$98.57
2558		9/25/19	4/23/20	2/2010	$98.57
2558		3/27/19	4/16/20	10/2008	$98.57

9.

DATE 7/21/2010 NEW YORK DATA SYSTEM PAGE 23
PGM: NYFPEPR5 FAMILY PLANNING EXTENSION PROGRAM - IUD SUMMARY REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

AGENCY NUMBER	AGENCY NAME	COUNTY NUMBER	COUNTY NAME	NUMBER OF CLIENTS	NUMBER OF IUDS
2360					
		29		12	12
		40		1	1
		51		1	1
			TOTAL	14 *	14 *

DATE 7/21/2010 NEW YORK DATA SYSTEM PAGE 24
PGM: NYFPEPR5 FAMILY PLANNING EXTENSION PROGRAM - IUD SUMMARY REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

COUNTY NUMBER	COUNTY NAME	NUMBER OF CLIENTS	NUMBER OF IUDS
003	BROOME	2	2
006	CHAUTAUQUA	3	3
013	DUTCHESS	3	3
014	ERIE	1	1
022	JEFFERSON	1	1
023	KINGS	31	31
029	NASSAU	40	40
030	MANHATTAN	22	22
035	ORANGE	2	2
039	PUTNAM	2	2
040	QUEENS	18	18
042	RICHMOND	10	10
043	ROCKLAND	33	33
050	STEUBEN	1	1
051	SUFFOLK	8	8
052	SULLIVAN	1	1
055	ULSTER	1	1
059	WESTCHESTER	45	47
062	BRONX	20	20
	STATE TOTAL	244 *	246 *

PROJECT: 2360
COUNTY: 29

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF VISIT	LAST PREG ENDED
3079		9/11/19	6/07/20	10/2008
3079		1/20/19	4/26/20	1/2009
3079		9/22/19	4/29/20	12/2009
3079		1/05/19	4/21/20	1/2010
3079		12/20/19	5/17/20	12/2009
3079		5/01/19	5/03/20	6/2009
3079		4/04/19	5/17/20	9/2009
3079		11/07/19	5/18/20	6/2009
3079		9/08/19	4/09/20	11/2008
3080		8/28/19	6/01/20	1/2009
3080		2/19/19	4/21/20	2/2009
3080		2/24/19	6/29/20	8/2008

COUNTY: 40

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF VISIT	LAST PREG ENDED
3079		12/06/19	5/08/20	1/2009

COUNTY: 51

CLINIC NUMBER	PATIENT NUMBER	DATE OF BIRTH	DATE OF VISIT	LAST PREG ENDED
3079		5/30/19	5/28/20	2/2010

NUMBER OF IUD INSERTIONS = 14 *

NUMBER OF IUD INSERTIONS = 246 **

11.

DATE 7/21/2010 NEW YORK DATA SYSTEM PAGE 6
PGM: NYFPEPR7 FAMILY PLANNING EXTENSION PROGRAM - IMPLANT SUMMARY REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

AGENCY NUMBER	AGENCY NAME	COUNTY NUMBER	COUNTY NAME	NUMBER OF CLIENTS	NUMBER OF IMPLANTS
2360					
		29	NASSAU	1	1
			TOTAL	1 *	1 *

DATE 7/21/2010 NEW YORK DATA SYSTEM PAGE 7
PGM: NYFPEPR7 FAMILY PLANNING EXTENSION PROGRAM - IMPLANT SUMMARY REPORT
FOR REPORTING PERIOD
7/01/2008 - 6/30/2010

COUNTY NUMBER	COUNTY NAME	NUMBER OF CLIENTS	NUMBER OF IMPLANTS
007	CHEMUNG	1	1
029	NASSAU	2	2
043	ROCKLAND	1	1
051	SUFFOLK	2	2
059	WESTCHESTER	2	2
062	BRONX	2	2
	STATE TOTAL	10 *	10 *

12.

```
DATE   7/21/2010                                NEW YORK DATA SYSTEM                                          PAGE   5
PGM: NYFPEPR8                      FAMILY PLANNING EXTENSION PROGRAM - IMPLANT DETAIL REPORT
                                                FOR REPORTING PERIOD
                                               7/01/2008 -  6/30/2010
PROJECT:  1850
COUNTY:   62
              CLINIC             PATIENT             DATE OF             DATE OF           LAST PREG
              NUMBER              NUMBER              BIRTH               VISIT              ENDED
              ------              ------             -------             -------           ---------
                4550                                 7/15/19             5/25/20              11/2009
NUMBER OF IMPLANT INSERTIONS =      1 *

DATE   7/21/2010                                NEW YORK DATA SYSTEM                                          PAGE   6
PGM: NYFPEPR8                      FAMILY PLANNING EXTENSION PROGRAM - IMPLANT DETAIL REPORT
                                                FOR REPORTING PERIOD
                                               7/01/2008 -  6/30/2010
PROJECT:  2360
COUNTY:   29
              CLINIC             PATIENT             DATE OF             DATE OF           LAST PREG
              NUMBER              NUMBER              BIRTH               VISIT              ENDED
              ------              ------             -------             -------           ---------
                3080                                12/22/19             6/04/20               5/2009
NUMBER OF IMPLANT INSERTIONS =      1 *
DATE   7/21/2010                                NEW YORK DATA SYSTEM                                          PAGE   7
PGM: NYFPEPR8                      FAMILY PLANNING EXTENSION PROGRAM - IMPLANT DETAIL REPORT
                                                FOR REPORTING PERIOD
                                               7/01/2008 -  6/30/2010
NUMBER OF IMPLANT INSERTIONS =     10 **
```

PGM:NYSPLSOPBB UNDUP. COUNT BY FPEP AND FPBP RUN DATE 7/21/2010

7/01/2008 - 6/30/2010 PAGE 1

FPEP	FDBP
26546	48631