

Maryland Title V CYSHCN Block Grant Update for 2011/2013

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Special Health Care Needs

Title V Background

- What is it?
- What's it for?
- Population groups
- Major goal for CYSHCN
- Accountability – Annual Report
 - 18 National Performance Measures
 - 7 are outcomes for CYSHCN
 - 10 State “Negotiated” Measures
 - in Maryland for 2011-2015, 3 are directed at CYSHCN
 - 26 Other Measures

Participated in Federal review on 08/17/12

- Meredith
- Dr. Badawi
- Josie
- Kelly

Full text of Maryland's 2011 report/2013
application available at:

<https://mchdata.hrsa.gov/TVISReports/Documents/2012/Narratives/MD-Narratives.pdf>

National Performance Measures

- NPMs 1-6 (pgs. 40-63); 12 (pgs.78-81):
 - Maintaining 100% for NPM 1 (Newborn Bloodspot Screening Follow-Up)
 - Staying steady at ~98% for NPM 12 (Infant Hearing Screening)
- Changes in measures 2-6 with release of 2009-10 NS-CSHCN:

NPM/Outcome	2010 (2005-06) %/rank	2011 (2009-10) %/rank	Change %/rank
2. Family Professional Partnerships	54.8/42	69.3/37	* (not comparable)/+5
3. Medical Home	45.6/38	44.2/28	-1.4/+10
4. Adequate Insurance	65.5/14	61.5/25	-4.0/-11
5. ETUCBS	89.3/26	65.1/29	*/-3
6. Youth Transition	37.4/42	36.8/40	-0.6/+2

State Performance Measures

- SPMs 6-8 (pgs. 110-119):

SPM	2010 (2008) %	2011 %	Change %
6. Transition Planning by Families	36.8	48.9	*
7. 5 or more Collaborative Activities [^]	51.8	42.9	*
8. Data Sharing Plan benchmarks	0 (0/6)	33.3 (2/6)	+33.3

[^]corresponds to Maryland's D70 Grant activities; funding and support are being sustained through TVBG for FY13 and beyond

OGPSHCN Challenges

- Critical Congenital Heart Disease (CCHD) Screening and Follow-Up Program – new unfunded state mandated program
- Data Systems and Sharing (SPM#8; pgs.116-119): OGCSHCN has run into several roadblocks in trying to create a database to track data reported from LHDs and other grantees; leveraged outside partnerships to try to overcome and to collect *outcome* data that facilitates QI at state and local levels

Successes and Accomplishments

FY12 Programmatic Successes

- Data Systems and Sharing
 - Resource Database
 - Sickle Cell Disease Database
 - Plans to overhaul website for consumer friendliness and up-to-date content
- Transition Conferences (w/PPMD)
- ASD/DD Strategic Planning Meetings (w/PPMD)
- CCHD Screening Preparation
- My Health Care Notebooks and Flash Drives
- OGPSHCN Newsletter
- IHP Parent Connections (w/PPMD)

Staffing

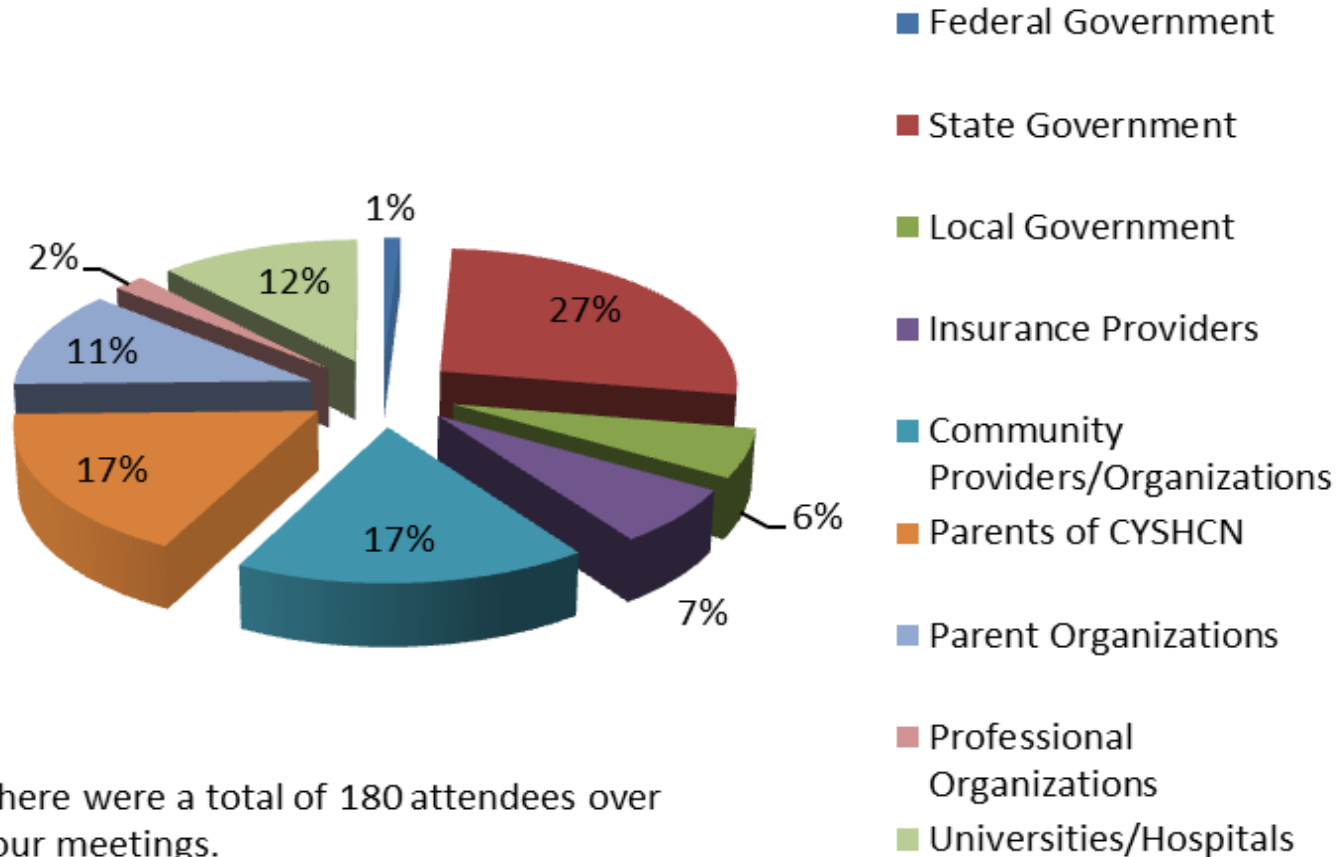
- OGPSHCN has no staffing vacancies
- Two parents of CSHCN are now on staff – Lynn Midgette, Grants Administrator (and MCH PHLI Fellow) and Angela Sittler, CYSHCN Resource Coordinator (see pg. 31); providing family perspective and input included in job functions
- Database Manager Kay Bhide hired; greatly expanded program capacity to organize and analyze data
- One nurse hired as newborn screening follow-up coordinator
- Medical Home Coordinator nurse hired; will also be NBS back up

Organization

- Creation of an Infrastructure and Systems Development Unit
- Reworked Office Strategic Goals and Workplan around the 6 core outcomes for CYSHCN
- Continuing to “move down” the MCHB Funding and Services Pyramid

Ongoing Family and Public Partnerships (Public Input); Community of Care (CoC) Meetings:

FY12 Quarterly Meetings (4) Attendance



There were a total of 180 attendees over four meetings.

Maternal and Child Health Pyramid of Health Services

Reprinted from Understanding Title V of the Social Security Act, US Department of Health and Human Services, Maternal and Child Health Bureau.

Available at <http://ftp.hrsa.gov/mchb/titlevtoday/UnderstandingTitleV.pdf>
(last accessed December 11, 2008)

The conceptual framework for the services of the Title V Maternal and Child Health Block Grant is envisioned as a pyramid with four tiers of services and levels of funding that provide comprehensive services for mothers and children. The pyramid also displays the uniqueness of the MCH Block Grant, which is the only Federal program that consistently provides services at all levels of the pyramid.

DIRECT HEALTH CARE SERVICES

(gap filling)

Basic health services and health services for Children with Special Health Care Needs (CSHCN).

ENABLING SERVICES

Transportation, translations, outreach, respite care, health education, family support services, purchase of health insurance, case management coordination with Medicaid, WIC, and Education.

POPULATION-BASED SERVICES

Newborn screening, lead screening, immunization, sudden infant death syndrome counseling, oral health, injury prevention, nutrition, and outreach/public education.

INFRASTRUCTURE-BUILDING SERVICES

Needs assessment, evaluation, planning, policy development, coordination, quality assurance, standards development, monitoring, training, applied research, systems of care, and information systems.

Strategic Planning for Alignment with MCH Services and Funding Pyramid

What changed? Starting in 2010 reporting year and continuing through 2011 reporting year:

Family involvement in TVBG Report

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OGPSHCN leadership personnel changed in 2010

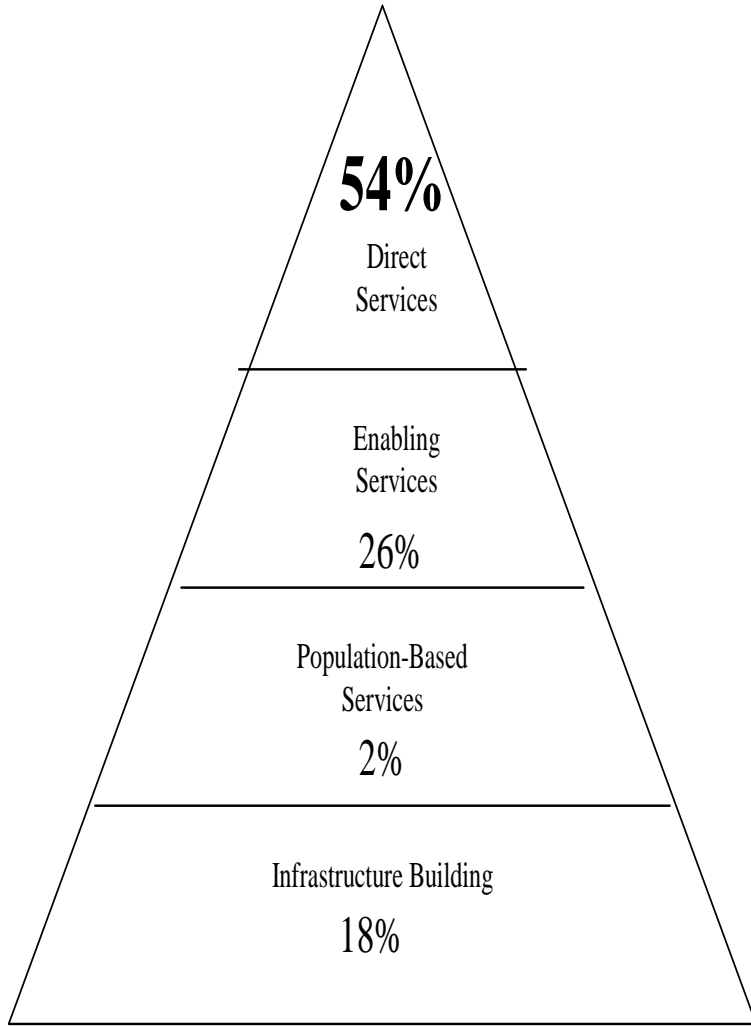
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New leadership and family members apply different understanding of MCHB Services and Funding Pyramid definitions to TVBG-funded activities

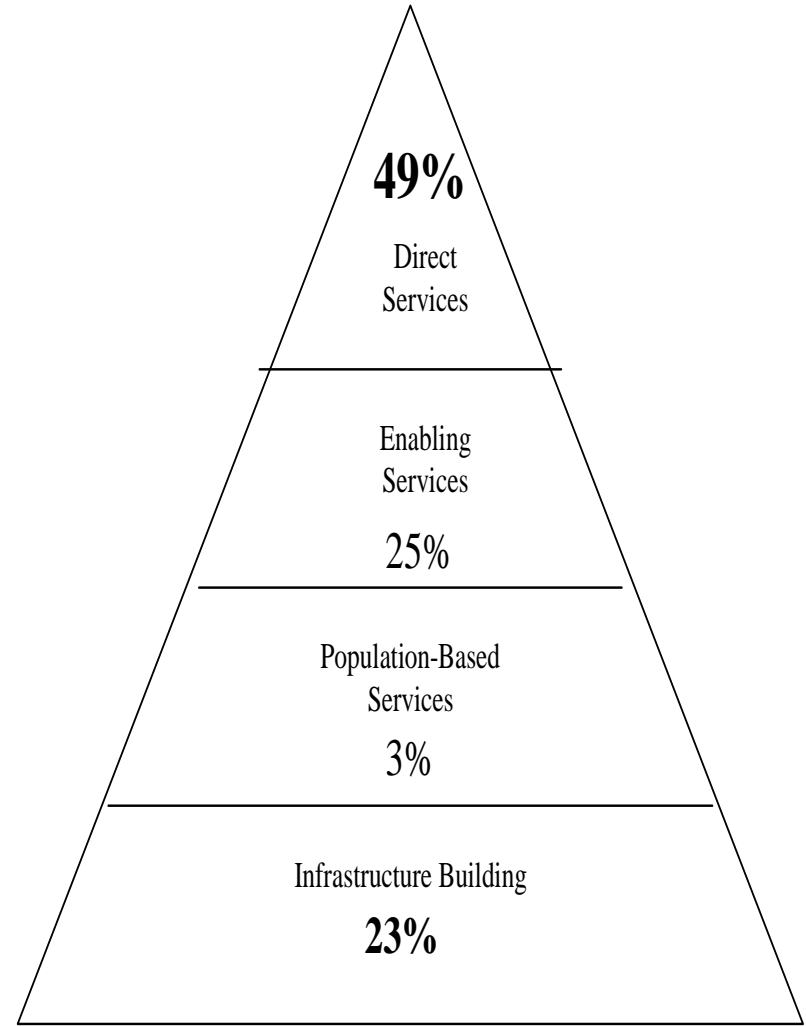
What was the effect?

FY13 OGCSHCN Projected Title V Federal Funds Budget for Grants and Contracts

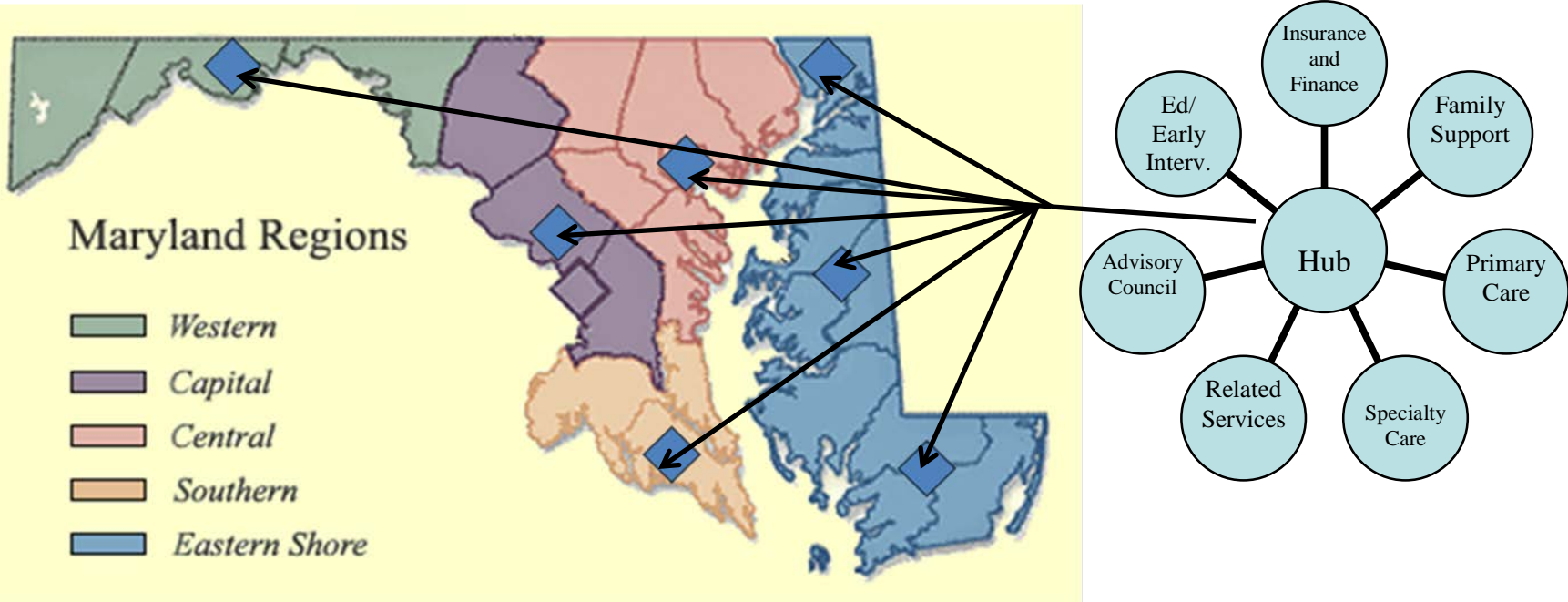
FY 12 OGPSHCN Spending for Grants and Contracts by Pyramid Level



FY 13 OGPSHCN Projected Budget for Grants and Contracts by Pyramid Level



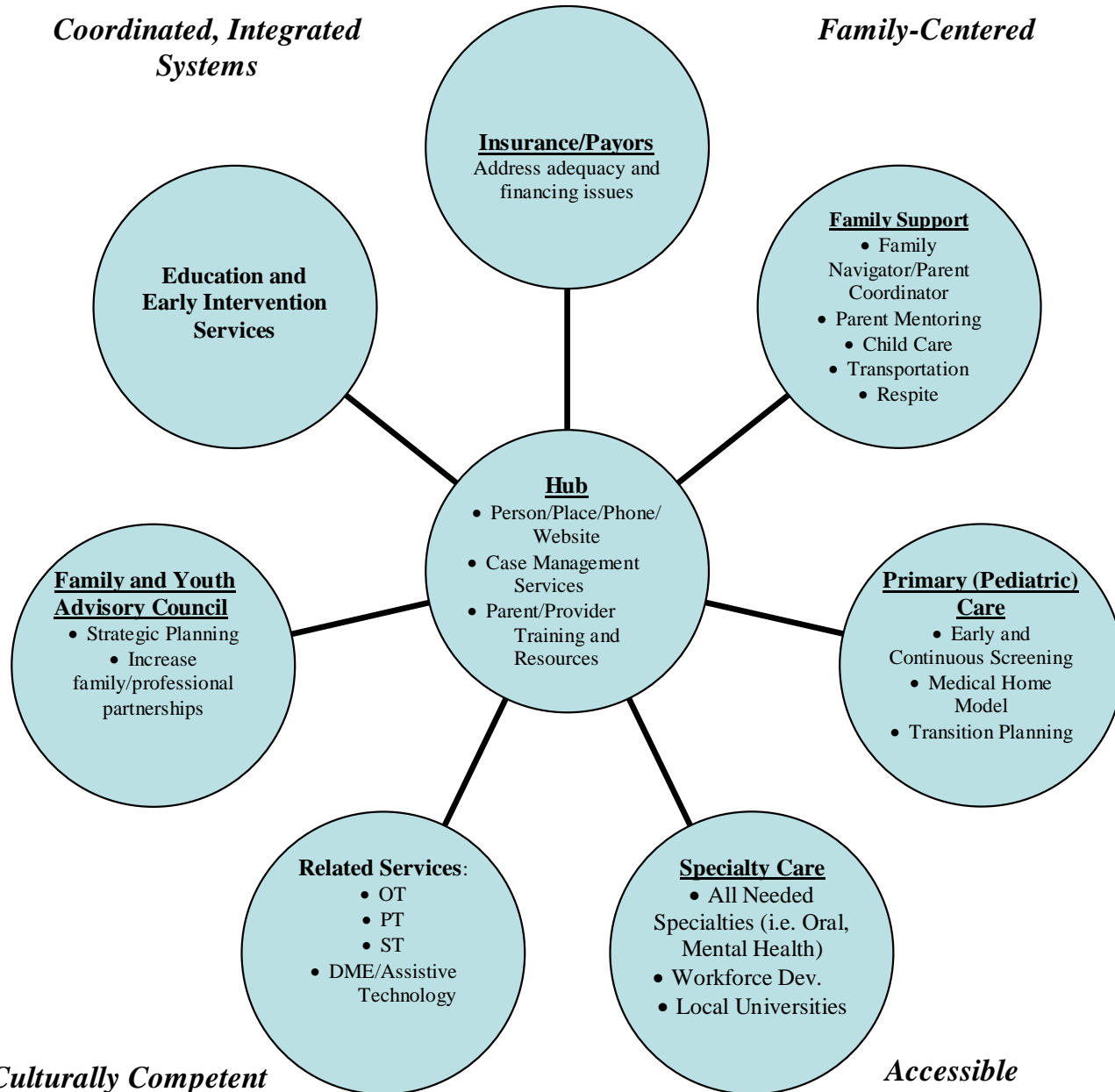
System- Regional Centers for CYSHCN and Families



To address long-term documented regional disparities in unmet needs/delayed care among Maryland CYSHCN.

*Coordinated, Integrated
Systems*

Family-Centered



Culturally Competent

Accessible

Thank You

Questions?