

TITLE V BLOCK GRANT APPLICATION
FORMS (1-21)
STATE: GA
APPLICATION YEAR: 2005

- [FORM 1 - SF424](#)
- [FORM 2 - MCH BUDGET DETAILS](#)
- [FORM 3 - STATE MCH FUNDING PROFILE](#)
- [FORM 4 - BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED AND SOURCES OF FEDERAL FUNDS](#)
- [FORM 5 - STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES](#)
- [FORM 6 - NUMBER AND PERCENTAGE OF NEWBORN AND OTHERS SCREENED, CASE CONFIRMED, AND TREATED](#)
- [FORM 7 - NUMBER OF INDIVIDUALS SERVED \(UNDUPLICATED\) UNDER TITLE V](#)
- [FORM 8 - DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX](#)
- [FORM 9 - STATE MCH TOLL-FREE TELEPHONE LINE DATA](#)
- [FORM 10 - TITLE V MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT STATE PROFILE FOR FY 2004](#)
- [FORM 11 - NATIONAL AND STATE PERFORMANCE MEASURES](#)
- [FORM 12 - NATIONAL AND STATE OUTCOME MEASURES](#)
- [FORM 13 - CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CHILDREN WITH SPECIAL HEALTH CARE NEEDS](#)
- [FORM 14 - LIST OF MCH PRIORITY NEEDS](#)
- [FORM 15 - TECHNICAL ASSISTANCE \(TA\) REQUEST AND TRACKING](#)
- [FORM 16 - STATE PERFORMANCE/OUTCOME MEASURE DETAIL SHEETS](#)
- [FORM 17 - HEALTH SYSTEM CAPACITY INDICATORS \(01 THROUGH 04,07,08\) - MULTI-YEAR DATA](#)
- **FORM 18**
 - [MEDICAID AND NON-MEDICAID COMPARISON](#)
 - [MEDICAID ELIGIBILITY LEVEL \(HSCI 06\)](#)
 - [SCHIP ELIGIBILITY LEVEL \(HSCI 06\)](#)
- **FORM 19**
 - [GENERAL MCH DATA CAPACITY \(HSCI 09A\)](#)
 - [ADOLESCENT TOBACCO USE DATA CAPACITY \(HSCI 09B\)](#)
 - [OVERWEIGHT AND OBESITY DATA CAPACITY \(HSCI 09C\)](#)
- [FORM 20 - HEALTH STATUS INDICATORS 01-05 - MULTI-YEAR DATA](#)
- **FORM 21**
 - [POPULATION DEMOGRAPHICS DATA \(HSI 06\)](#)
 - [LIVE BIRTH DEMOGRAPHICS DATA \(HSI 07\)](#)
 - [INFANT AND CHILDREN MORTALITY DATA \(HSI 08\)](#)
 - [MISCELLANEOUS DEMOGRAPHICS DATA \(HSI 09\)](#)
 - [GEOGRAPHIC LIVING AREA DEMOGRAPHIC DATA \(HSI 10\)](#)
 - [POVERTY LEVEL DEMOGRAPHIC DATA \(HSI 11\)](#)
 - [POVERTY LEVEL FOR CHILDREN DEMOGRAPHICS DATA \(HSI 12\)](#)

APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2004	APPLICANT IDENTIFIER									
1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER									
		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER DUNS 135970981									
5. APPLICANT INFORMATION												
Legal Name: Georgia Department of Human Resources		Organizational Unit: Division of Public Health, Family Health Branch										
Address (give city, county, state and zip code) 2 Peachtree Street, Room 11-415 Atlanta, GA 30303 County: Fulton		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Rosalyn Bacon, MPH Tel Number: 404-657-2850										
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">8</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">7</td><td style="width: 20px; text-align: center;">8</td></tr></table>		5	8	1	1	3	0	6	7	8	7. TYPE OF APPLICANT: (Enter appropriate letter in box) A A. State H. Independent School District B. County I. State Controlled Institution of Higher Learning C. Municipality J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipality M. Profit Organization G. Special District N. Other (Specify)	
5	8											
1	1	3	0	6	7	8						
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: Health Resources and Services Administration, Maternal and Child Health Bureau										
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">3</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">4</td></tr></table> TITLE: Maternal and Child Health Services Block Grant		9	3	9	9	4	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Maternal & Child Health Block Grant Service System					
9	3											
9	9	4										
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): Georgia												
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:										
Start Date: 10/01/2004	Ending Date: 09/30/2005	a. Applicant 5	b. Project Statewide									
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW										
a. Federal	\$ <u>16,845,888.00</u>											
b. Applicant	\$ <u>0.00</u>											
c. State	\$ <u>126,546,354.00</u>											
d. Local	\$ <u>0.00</u>											
e. Other	\$ <u>132,947,952.00</u>											
f. Program Income	\$ <u>13,171,714.00</u>											
g. TOTAL	\$ <u>289,511,908.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No										
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.												
a. Typed Name of Authorized Representative B. J. Walker		b. Title Commissioner	c. Telephone Number 404-651-6314									
d. Signature of Authorized Representative		e. Date Signed										

FORM 2
MCH BUDGET DETAILS FOR FY 2005

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: GA

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 16,845,888

A. Preventive and primary care for children:

\$ 8,248,308 (48.96%)

B. Children with special health care needs:

\$ 7,670,997 (45.54%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C. Title V administrative costs:

\$ 543,328 (3.23%)

(The above figure cannot be more than 10%) [Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 126,546,354

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 132,947,952

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 13,171,714

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 36,079,622

\$ 272,666,020

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 289,511,908

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 1,327,301

e. Healthy Start: \$ 3,000,000

f. EMSC: \$ 150,000

g. WIC: \$ 163,609,660

h. AIDS: \$ 0

i. CDC: \$ 1,800,417

j. Education: \$ 13,150,839

k. Other:

GA Plan for Early Ch \$ 100,000

GADS \$ 50,000

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 183,288,217

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 472,800,125

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: CDC
Row Name: Other Federal Funds - CDC
Column Name:
Year: 2005
Field Note:
Georgia Early Hearing Detection and Intervention Grant - \$150,000
Rape Prevention and Education Grant - \$1,189,108
Obesity and Chronic Disease Prevention Grant - \$461,309
2. **Section Number:** Main
Field Name: Education
Row Name: Other Federal Funds - Education
Column Name:
Year: 2005
Field Note:
Part C - Individuals with Disabilities Act Grant
3. **Section Number:** Main
Field Name: OtherFedFundsOtherFund
Row Name: Other Federal Funds - Other Funds
Column Name:
Year: 2005
Field Note:
Georgia Access to Dental Services (GADS) - \$50,000
Georgia's Plan for Early Childhood Comprehensive Systems Grant - \$100,000

**FORM 3
STATE MCH FUNDING PROFILE**

[Secs. 505(a) and 506((a))(-3)]

STATE: GA

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 16,832,185	\$ 17,316,887	\$ 16,882,141	\$ 0	\$ 16,845,888	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 133,989,289	\$ 145,120,166	\$ 127,346,598	\$ 0	\$ 126,546,354	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 115,229,801	\$ 104,559,450	\$ 120,271,412	\$ 0	\$ 132,947,952	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 11,607,602	\$ 12,769,999	\$ 13,171,714	\$ 0	\$ 13,171,714	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 277,658,877	\$ 279,766,502	\$ 277,671,865	\$ 0	\$ 289,511,908	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 192,725,939	\$ 190,458,789	\$ 205,548,030	\$ 0	\$ 183,288,217	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 470,384,816	\$ 470,225,291	\$ 483,219,895	\$ 0	\$ 472,800,125	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3
STATE MCH FUNDING PROFILE**

[Secs. 505(a) and 506((a))(1-3)]

STATE: GA

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 16,896,657	\$ 16,990,732	\$ 16,990,732	\$ 16,977,548	\$ 16,832,185	\$ 16,825,725
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 136,089,315	\$ 128,439,668	\$ 140,644,766	\$ 141,173,842	\$ 133,312,721	\$ 142,627,115
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 75,619,972	\$ 76,054,992	\$ 75,217,825	\$ 101,788,168	\$ 119,113,675	\$ 94,751,009
6. Program Income <i>(Line6, Form 2)</i>	\$ 14,093,291	\$ 11,677,112	\$ 9,619,338	\$ 12,194,685	\$ 12,017,168	\$ 12,713,832
7. Subtotal <i>(Line8, Form 2)</i>	\$ 242,699,235	\$ 233,162,504	\$ 242,472,661	\$ 272,134,243	\$ 281,275,749	\$ 266,917,681
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 90,166,267	\$ 163,077,187	\$ 172,668,472	\$ 177,574,039	\$ 178,867,539	\$ 178,767,539
9. Total <i>(Line11, Form 2)</i>	\$ 332,865,502	\$ 396,239,691	\$ 415,141,133	\$ 449,708,282	\$ 460,143,288	\$ 445,685,220
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2002
Field Note:
Vaccine: The budget is based on the projection of price increases, projection in birth cohort, age populations based on the census data, new vaccines, and new combo vaccines (two or more vaccines and make into 1). However, in this past year there was a vaccine shortage of multiple vaccine and Phneumococcal Polysaccharide that was in the budget. Pneumococcal Polysaccharide did not come on the market until this year.
2. **Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2003
Field Note:
FY2003 budgeted amount inadvertently included Program Income.
3. **Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2003
Field Note:
The programs generated and expensed additional income.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: GA

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 25,795,608	\$ 25,580,466	\$ 26,152,364	\$ 0	\$ 24,583,965	\$ 0
b. Infants < 1 year old	\$ 51,450,402	\$ 47,986,729	\$ 54,314,461	\$ 0	\$ 62,940,521	\$ 0
c. Children 1 to 22 years old	\$ 148,302,028	\$ 145,315,210	\$ 146,750,596	\$ 0	\$ 151,436,948	\$ 0
d. Children with Special Healthcare Needs	\$ 34,184,794	\$ 42,283,165	\$ 32,898,330	\$ 0	\$ 33,178,710	\$ 0
e. Others	\$ 15,929,645	\$ 16,413,374	\$ 15,333,201	\$ 0	\$ 15,173,635	\$ 0
f. Administration	\$ 1,996,400	\$ 2,187,558	\$ 2,222,913	\$ 0	\$ 2,198,129	\$ 0
g. SUBTOTAL	\$ 277,658,877	\$ 279,766,502	\$ 277,671,865	\$ 0	\$ 289,511,908	\$ 0

II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).

a. SPRANS	\$ 0	\$ 0	\$ 0
b. SSDI	\$ 100,000	\$ 100,000	\$ 100,000
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 1,327,301	\$ 1,327,301	\$ 1,327,301
e. Healthy Start	\$ 3,000,000	\$ 3,000,000	\$ 3,000,000
f. EMSC	\$ 100,000	\$ 150,000	\$ 150,000
g. WIC	\$ 186,595,818	\$ 186,595,818	\$ 163,609,660
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 1,352,820	\$ 1,352,820	\$ 1,800,417
j. Education	\$ 0	\$ 12,772,091	\$ 13,150,839
k. Other			
GA Plan for Early Ch	\$ 0	\$ 0	\$ 100,000
GADS	\$ 0	\$ 0	\$ 50,000
Healthy Child Care	\$ 100,000	\$ 100,000	\$ 0
UNHS	\$ 0	\$ 150,000	\$ 0
Universal Newborn Hearing	\$ 150,000	\$ 0	\$ 0
III. SUBTOTAL	\$ 192,725,939	\$ 205,548,030	\$ 183,288,217

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: GA

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 26,644,156	\$ 24,030,078	\$ 25,025,833	\$ 24,954,618	\$ 26,074,248	\$ 22,379,557
b. Infants < 1 year old	\$ 42,569,184	\$ 38,144,888	\$ 43,357,515	\$ 43,883,931	\$ 54,785,114	\$ 41,767,603
c. Children 1 to 22 years old	\$ 125,703,574	\$ 115,334,543	\$ 125,968,816	\$ 144,424,405	\$ 152,432,564	\$ 135,702,384
d. Children with Special Healthcare Needs	\$ 32,778,081	\$ 40,604,101	\$ 32,751,564	\$ 41,874,300	\$ 32,869,038	\$ 35,085,048
e. Others	\$ 13,290,843	\$ 14,194,678	\$ 12,960,094	\$ 15,277,714	\$ 13,221,731	\$ 15,008,035
f. Administration	\$ 1,713,397	\$ 854,216	\$ 2,408,839	\$ 1,719,275	\$ 1,893,054	\$ 1,995,379
g. SUBTOTAL	\$ 242,699,235	\$ 233,162,504	\$ 242,472,661	\$ 272,134,243	\$ 281,275,749	\$ 251,938,006

II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 100,000		\$ 0		\$ 0	
d. Abstinence Education	\$ 1,450,083		\$ 1,377,668		\$ 1,327,301	
e. Healthy Start	\$ 3,000,000		\$ 3,000,000		\$ 3,000,000	
f. EMSC	\$ 150,000		\$ 150,000		\$ 150,000	
g. WIC	\$ 84,166,474		\$ 166,741,094		\$ 173,080,000	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 1,149,710		\$ 1,149,710		\$ 910,238	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
GIHSIS	\$ 0		\$ 0		\$ 150,000	
Healthy Child Care	\$ 0		\$ 0		\$ 150,000	
Child Indicator	\$ 0		\$ 50,000		\$ 0	
Comprehensive Child Care	\$ 0		\$ 100,000		\$ 0	
ASPE/Indicator	\$ 50,000		\$ 0		\$ 0	
III. SUBTOTAL	\$ 90,166,267		\$ 172,668,472		\$ 178,867,539	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

- 1. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2002
Field Note:
FY2002 Budgeted Amount Inadvertently included Program Income.
- 2. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2002
Field Note:
Vaccine:The budget is based on the projection of price increases, projection in birth cohort, age populations based on the census data, new vaccines, and new combo vaccines (two or more vaccines and make into 1). However, in this past year there was a vaccine shortage of multiple vaccine and Phneumococcal Polysaccharide that was in the budget. Pneumococcal Polysaccharide did not come on the market until this year.

FY2002 Budgeted Amount Inadvertently included Program Income.
- 3. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2002
Field Note:
Vaccine:The budget is based on the projection of price increases, projection in birth cohort, age populations based on the census data, new vaccines, and new combo vaccines (two or more vaccines and make into 1). However, in this past year there was a vaccine shortage of multiple vaccine and Phneumococcal Polysaccharide that was in the budget. Pneumococcal Polysaccharide did not come on the market until this year.

FY2002 Budgeted Amount Inadvertently included Program Income.
- 4. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2003
Field Note:
Program Income amount was inadvertently included in the Budgeted amount. The Program Income expenditure amount is reflected in Others.
- 5. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2002
Field Note:
There was an increase in Medicaid Earnings.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: GA

TYPE OF SERVICE	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 130,961,698	\$ 134,462,434	\$ 129,265,607	\$ 0	\$ 125,649,521	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 40,538,246	\$ 46,647,928	\$ 39,207,041	\$ 0	\$ 36,882,770	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 76,672,444	\$ 71,441,790	\$ 82,658,781	\$ 0	\$ 102,512,312	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 29,486,489	\$ 27,214,350	\$ 26,540,436	\$ 0	\$ 24,467,305	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 277,658,877	\$ 279,766,502	\$ 277,671,865	\$ 0	\$ 289,511,908	\$ 0

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: GA

TYPE OF SERVICE	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 122,510,889	\$ 125,669,881	\$ 117,290,106	\$ 130,805,707	\$ 128,448,258	\$ 123,361,075
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 42,157,450	\$ 45,861,407	\$ 39,012,224	\$ 49,155,762	\$ 40,479,509	\$ 38,766,298
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 53,983,922	\$ 46,166,904	\$ 57,086,172	\$ 63,605,917	\$ 83,486,960	\$ 58,273,186
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 24,046,974	\$ 15,464,312	\$ 29,084,159	\$ 28,566,857	\$ 28,861,022	\$ 31,537,447
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 242,699,235	\$ 233,162,504	\$ 242,472,661	\$ 272,134,243	\$ 281,275,749	\$ 251,938,006

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2003
Field Note:
There was an increase in program income.

2. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2002
Field Note:
Vaccine: The budget is based on the projection of price increases, projection in birth cohort, age populations based on the census data, new vaccines, and new combo vaccines (two or more vaccines and make into 1). However, in this past year there was a vaccine shortage of multiple vaccine and Phneumococcal Polysaccharide that was in the budget. Pneumococcal Polysaccharide did not come on the market until this year.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: GA

Total Births by Occurrence: 137,238

Reporting Year: 2003

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	134,493	98	319	5	5	100
Congenital Hypothyroidism	134,493	98	4,800	72	72	100
Galactosemia	134,493	98	875	1	1	100
Sickle Cell Disease	134,493	98	187	170	170	100

Other Screening (Specify)

Biotinidase Deficiency	134,493	98	36	1	1	100
Homocystinuria	134,493	98	177	0	0	
Tyrosinemia	134,493	98	120	0	0	
Congenital Adrenal Hyperplasia (CAH)	134,493	98	358	10	10	100
Maple Syrup Urine Disease (MSUD)	134,493	98	147	1	1	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
- (2) Report only those from resident births.
- (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

In 2002, the number of births screened based on data linkage was 122,741 - which is 90% of the total births (136426). However a sample of 100 births was pulled from the births that did not link. Out of these 88% were screened based on hospital records. Therefore, we estimate that the number of births screened in 2002 is closer to 98%.

FIELD LEVEL NOTES

None

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: GA

Reporting Year: 2003

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	131,099	0.0	0.0	0.0	0.0	0.0
Infants < 1 year old	133,200	34.0	0.0	57.0	21.0	0.0
Children 1 to 22 years old	417,926	23.0	0.0	69.0	15.0	0.0
Children with Special Healthcare Needs	11,480	58.3	9.5	32.0	0.0	0.0
Others	0	0.0	0.0	0.0	0.0	0.0
TOTAL	693,705					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: PregWomen_TS
Row Name: Pregnant Women
Column Name: Title V Total Served
Year: 2005
Field Note:
This is the total number of deliveries in the state (reported in Form 8).
2. **Section Number:** Main
Field Name: PregWomen_XIX
Row Name: Pregnant Women
Column Name: Title XIX %
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period.
3. **Section Number:** Main
Field Name: PregWomen_XXI
Row Name: Pregnant Women
Column Name: Title XXI %
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period.
4. **Section Number:** Main
Field Name: PregWomen_Private
Row Name: Pregnant Women
Column Name: Private/Other %
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period. Hence, this component cannot be completed at this time.
5. **Section Number:** Main
Field Name: PregWomen_None
Row Name: Pregnant Women
Column Name: None %
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period. Hence, this component cannot be completed at this time.
6. **Section Number:** Main
Field Name: Children_0_1_TS
Row Name: Infants <1 year of age
Column Name: Title V Total Served
Year: 2005
Field Note:
This data represents the actual population estimate, whereas the insurance coverage information comes from survey data. This data does not add up to 100 percent because people report multiple sources of insurance.
7. **Section Number:** Main
Field Name: Children_0_1_XIX
Row Name: Infants <1 year of age
Column Name: Title XIX %
Year: 2005
Field Note:
We are unable to provide an estimate for Title XIX separately. The estimate provided for "title XIX" includes all "public coverage". This estimate comes from the Current Population Survey merged file for 2001-2003.
8. **Section Number:** Main
Field Name: Children_0_1_XXI
Row Name: Infants <1 year of age
Column Name: Title XXI %
Year: 2005
Field Note:
We are unable to provide an estimate for Title XXI separately. The estimate provided for "title XIX" includes all "public coverage".
9. **Section Number:** Main
Field Name: Children_1_22_TS
Row Name: Children 1 to 22 years of age
Column Name: Title V Total Served
Year: 2005
Field Note:
The insurance data comes from the Current Population Survey Estimates (2001-2003 merged file). Insurance coverage estimates do not add up to a 100 percent because people report multiple sources of coverage.
10. **Section Number:** Main
Field Name: Children_1_22_XIX
Row Name: Children 1 to 22 years of age
Column Name: Title XIX %
Year: 2005
Field Note:
We are unable to provide an estimate for Title XIX separately. The estimate provided for "title XIX" includes all "public coverage". This estimate comes from the Current Population Survey merged file for 2001-2003.
11. **Section Number:** Main
Field Name: Children_1_22_XXI
Row Name: Children 1 to 22 years of age
Column Name: Title XXI %

Year: 2005

Field Note:

We are unable to provide an estimate for Title XX I separately. The estimate provided for "title XIX" includes all "public coverage". This estimate comes from the Current Population Survey merged file for 2001-2003.

12. **Section Number:** Main
Field Name: Children_1_22_Private
Row Name: Children 1 to 22 years of age
Column Name: Private/Other %
Year: 2005
Field Note:
This estimate comes from the Current Population Survey merged file for 2001-2003.
13. **Section Number:** Main
Field Name: Children_1_22_None
Row Name: Children 1 to 22 years of age
Column Name: None %
Year: 2005
Field Note:
This estimate comes from the Current Population Survey merged file for 2001-2003.
14. **Section Number:** Main
Field Name: CSHCN_TS
Row Name: Children with Special Health Care Needs
Column Name: Title V Total Served
Year: 2005
Field Note:
The data represents the total enrollment for the Childrens Medical Services (CMS) program and the High Risk Infant Follow Up Program (HRIFU).
15. **Section Number:** Main
Field Name: CSHCN_XIX
Row Name: Children with Special Health Care Needs
Column Name: Title XIX %
Year: 2005
Field Note:
The data for insurance coverage only represents Childrens Medical Services, because the HRIFU program does not have the capacity to report this data at the current time.
16. **Section Number:** Main
Field Name: CSHCN_XXI
Row Name: Children with Special Health Care Needs
Column Name: Title XXI %
Year: 2005
Field Note:
The data for insurance coverage only represents Childrens Medical Services, because the HRIFU program does not have the capacity to report this data at the current time.
17. **Section Number:** Main
Field Name: CSHCN_Private
Row Name: Children with Special Health Care Needs
Column Name: Private/Other %
Year: 2005
Field Note:
The data for insurance coverage only represents Childrens Medical Services, because the HRIFU program does not have the capacity to report this data at the current time.
18. **Section Number:** Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2005
Field Note:
All available data for persons served has been captured in the preceding categories.
19. **Section Number:** Main
Field Name: AllOthers_XIX
Row Name: Others
Column Name: Title XIX %
Year: 2005
Field Note:
All available data for persons served has been captured in the preceding categories.
20. **Section Number:** Main
Field Name: AllOthers_XXI
Row Name: Others
Column Name: Title XXI %
Year: 2005
Field Note:
All available data for persons served has been captured in the preceding categories.
21. **Section Number:** Main
Field Name: AllOthers_Private
Row Name: Others
Column Name: Private/Other %
Year: 2005
Field Note:
All available data for persons served has been captured in the preceding categories.
22. **Section Number:** Main
Field Name: AllOthers_None
Row Name: Others
Column Name: None %
Year: 2005
Field Note:
All available data for persons served has been captured in the preceding categories.
23. **Section Number:** Main
Field Name: AllOthers_Unknown
Row Name: Others

Column Name: Unknown %

Year: 2005

Field Note:

All available data for persons served has been captured in the preceding categories.

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: GA

Reporting Year: 2002

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	131,099	84,245	41,932	316	4,206	98	302	0
Title V Served	131,099	84,245	41,932	316	4,206	98	302	0
Eligible for Title XIX	61,055	32,685	27,027	126	1,045	29	143	0
INFANTS								
Total Infants in State	140,206	83,550	42,644	460	3,018	169	3,359	7,006
Title V Served	140,206	83,550	42,644	460	3,018	169	3,359	7,006
Eligible for Title XIX	61,998	33,109	27,521	130	1,064	29	145	0

II. UNDUPLICATED COUNT BY ETHNICITY

	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	HISPANIC OR LATINO (Sub-categories by country or area of origin)				
				(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	107,457	20,128	3,514	13,068	163	558	2,685	3,654
Title V Served	107,457	20,128	3,514	13,068	163	558	2,685	3,654
Eligible for Title XIX	51,124	9,931	0	8,277	216	56	1,346	36
INFANTS								
Total Infants in State	118,173	15,027	0	0	0	0	0	15,027
Title V Served	118,173	15,027	0	0	0	0	0	15,027
Eligible for Title XIX	51,962	10,036	0	0	0	0	0	0

FORM NOTES FOR FORM 8

We are unable to report the data for columns B1 to B5 as country of origin data is not available for this population group.

FIELD LEVEL NOTES

- 1. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time. These data pertain to 2001 and will be updated when the data becomes available.
- 2. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_White
Row Name: Eligible for Title XIX
Column Name: White
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time. These data pertain to 2001 and will be updated when the data becomes available.
- 3. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Black
Row Name: Eligible for Title XIX
Column Name: Black or African American
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time. These data pertain to 2001 and will be updated when the data becomes available.
- 4. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Indian
Row Name: Eligible for Title XIX
Column Name: American Indian or Native American
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period.
- 5. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Asian
Row Name: Eligible for Title XIX
Column Name: Asian
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 6. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_Hawaiian
Row Name: Eligible for Title XIX
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 7. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_More
Row Name: Eligible for Title XIX
Column Name: More Than One Race Reported
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 8. Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_RaceOther
Row Name: Eligible for Title XIX
Column Name: Other and Unknown
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 9. Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 10. Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_White
Row Name: Eligible for Title XIX
Column Name: White
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 11. Section Number:** I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Black
Row Name: Eligible for Title XIX
Column Name: Black or African American
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

12. **Section Number:** I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Indian
Row Name: Eligible for Title XIX
Column Name: American Indian or Native American
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

13. **Section Number:** I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Asian
Row Name: Eligible for Title XIX
Column Name: Asian
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

14. **Section Number:** I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_Hawaiian
Row Name: Eligible for Title XIX
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

15. **Section Number:** I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_More
Row Name: Eligible for Title XIX
Column Name: More Than One Race Reported
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

16. **Section Number:** I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_RaceOther
Row Name: Eligible for Title XIX
Column Name: Other and Unknown
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

17. **Section Number:** II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

18. **Section Number:** II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

19. **Section Number:** II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_NotReported
Row Name: Eligible for Title XIX
Column Name: Ethnicity Not Reported
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

20. **Section Number:** II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican
Year: 2005

Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

21. **Section Number:** II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_Cuban
Row Name: Eligible for Title XIX
Column Name: Cuban
Year: 2005

Field Note:

The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

- 22. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_PuertoRican
Row Name: Eligible for Title XIX
Column Name: Puerto Rican
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 23. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_CentralAmerican
Row Name: Eligible for Title XIX
Column Name: Central and South American
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 24. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_EthnicityOther
Row Name: Eligible for Title XIX
Column Name: Other and Unknown
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.
- 25. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_Mexican
Row Name: Total Infants in State
Column Name: Mexican
Year: 2005
Field Note:
We are unable to provide population estimates by country of origin.
- 26. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_Cuban
Row Name: Total Infants in State
Column Name: Cuban
Year: 2005
Field Note:
We are unable to provide population estimates by country of origin.
- 27. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_PuertoRican
Row Name: Total Infants in State
Column Name: Puerto Rican
Year: 2005
Field Note:
We are unable to provide population estimates by country of origin.
- 28. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_CentralAmerican
Row Name: Total Infants in State
Column Name: Central and South American
Year: 2005
Field Note:
We are unable to provide population estimates by country of origin.
- 29. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_EthnicityOther
Row Name: Total Infants in State
Column Name: Other and Unknown
Year: 2005
Field Note:
We are unable to provide data by country of origin.
- 30. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_Mexican
Row Name: Title V Served
Column Name: Mexican
Year: 2005
Field Note:
We are unable to provide this data.
- 31. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_Cuban
Row Name: Title V Served
Column Name: Cuban
Year: 2005
Field Note:
We are unable to provide this data.
- 32. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_PuertoRican
Row Name: Title V Served
Column Name: Puerto Rican
Year: 2005
Field Note:
We are unable to provide this data.
- 33. Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_CentralAmerican

Row Name: Title V Served
Column Name: Central and South American
Year: 2005
Field Note:
We are unable to provide this data.

34. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_EthnicityOther
Row Name: Title V Served
Column Name: Other and Unknown
Year: 2005
Field Note:
We are unable to provide data by country of origin.

35. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

36. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
The Department of Community Health is changing their Information system. They are unable to provide data at the current time for this reporting period. These data pertain to 2001 and will be updated when the data becomes available.

37. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican
Year: 2005
Field Note:
We are unable to provide this data.

38. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_Cuban
Row Name: Eligible for Title XIX
Column Name: Cuban
Year: 2005
Field Note:
We are unable to provide this data.

39. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_PuertoRican
Row Name: Eligible for Title XIX
Column Name: Puerto Rican
Year: 2005
Field Note:
We are unable to provide this data.

40. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_CentralAmerican
Row Name: Eligible for Title XIX
Column Name: Central and South American
Year: 2005
Field Note:
We are unable to provide this data.

41. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_EthnicityOther
Row Name: Eligible for Title XIX
Column Name: Other and Unknown
Year: 2005
Field Note:
We are unable to provide this data.

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2005
[SEC. 506(A)(1)]
STATE: GA

1. State MCH Administration:
(max 2500 characters)

The Family Health Branch, part of the Division of Public Health, Department of Human Resources is Georgia's Title V agency. The charge of the Branch is promoting the health of the State's mother and infants, women of childbearing age, children, adolescents, and children with special health care needs. The Branch works toward: 1) early and comprehensive health services to women of childbearing age and their infants in an environment that fosters personal dignity; 2) timely and comprehensive health services to children which promote the optimal attainment of their individual abilities; and 3) comprehensive health services to adolescents in an environment that fosters personal responsibility, encourages independence, and promotes positive behaviors. To carry out these responsibilities, the Branch is involved in policy and planning activities, oversees the operations of various MCH programs in local health departments and other organizations, and provides technical assistance and training.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>16,845,888</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>126,546,354</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>132,947,952</u>
7. Program Income (Line 6, Form 2)	\$ <u>13,171,714</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>289,511,908</u>

9. Most significant providers receiving MCH funds:

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	<u>131,099</u>
b. Infants < 1 year old	<u>133,200</u>
c. Children 1 to 22 years old	<u>417,926</u>
d. CSHCN	<u>11,480</u>
e. Others	<u>0</u>

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:

(max 2500 characters)

Universal screening and assessment: FHB continues to coordinate the Children 1st system and has developed integrated intake and assessment tools for all FHB programs. Case management: DPH developed a model for Medicaid payment for case management for children enrolled in CMS effective July 2002. The model is based on levels of acuity and can be adapted for any public health program. CMS activities are based on HRSA recommendations for CSHCN. The model is being used for breast and cervical cancer in the Chronic Disease Program. FHB is initiating a coordinated effort to identify best practice approaches and program development in case management including outreach and referral, intake, assessment, and case management activities across the Branch.

b. Population-Based Services:

(max 2500 characters)

Nutrition health education: FHB continues to implement population-based nutrition services through coordination with all of FHB population teams. Newborn screening programs: The Universal Newborn Hearing Screening and Intervention Program maintains and supports a comprehensive, coordinated, statewide system to ensure that all newborns are screened for hearing loss prior to hospital discharge. Currently, the state also screens for 7 metabolic disorders and hemoglobinopathies. Through a partnership with DPH, March of Dimes, CDC and Emory University, the state can now screen for up to 35 disorders (based on guidance from the Newborn Screening Advisory Committee) 7 days a week. Injury Prevention: A position has been established in the Office of Infant and Child Health to coordinate all safety issues within the FHB and to develop key partnerships with entities such as Child Fatality Review.

c. Infrastructure Building Services:

(max 2500 characters)

Perinatal planning: FHB continues to enhance perinatal planning by convening a broad-based stakeholder committee to produce a statewide draft perinatal plan by September 2002. School health nurse training: In collaboration with Georgia State University, school nurse training was offered via GSAMS and videotape. The 14-week course focused on common childhood conditions, physical assessment, infectious diseases, legal issues, scope of practice for school nurses, emergency preparation, mental health, and community development. Youth development framework: FHB staff have participated in a statewide broad-based effort to develop a Youth Development Framework. FHB developed the definition of youth development which the group is using. The Branch also sponsored youth development curriculum modules. Training is underway on the first three modules.

12. The primary Title V Program contact person:

Name Rosalyn K. Bacon, M.P.H.
 Title Director, Family Health Branch
 Address Division of Public Health Department of Human Resources

13. The children with special health care needs (CSHCN) contact person:

Name Eve Bogan, M. A.
 Title Acting Children with Special Needs Population Team Lt
 Address Division of Public Health Department of Human Resources

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Email rbacon@dhr.state.ga.us
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Web <http://health.state.ga.us/programs/family>

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: GA

PERFORMANCE MEASURE # 01

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	100	100	100	100	100
Annual Indicator	NaN	NaN	NaN	98.6	100.0
Numerator	0	0	0	205	260
Denominator	0	0	0	208	260
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					0
Annual Indicator				60.8	60.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	0	0	0	0	0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	_____	_____	_____	_____	_____ 0
Annual Indicator	_____	_____	_____	_____ 49.4	_____ 49.4
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	_____	_____	_____	_____	_____ 0
Annual Indicator	_____	_____	_____	_____ 56.4	_____ 56.4
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	_____	_____	_____	_____	_____ 0
Annual Indicator	_____	_____	_____	_____ 74.9	_____ 74.9
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0
Annual Indicator	_____	_____	_____	_____ 5.8	_____ 5.8
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>80</u>	<u>82</u>	<u>82</u>	<u>83</u>	<u>84</u>
Annual Indicator	<u>82</u>	<u>78</u>	<u>81</u>	<u>79.3</u>	<u>80.4</u>
Numerator	<u> </u>				
Denominator	<u> </u>				
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>85</u>	<u>85</u>	<u>86</u>	<u>86</u>	<u>87</u>
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>38</u>	<u>37</u>	<u>36</u>	<u>35</u>	<u>34</u>
Annual Indicator	<u>38.0</u>	<u>36.0</u>	<u>33.3</u>	<u>31.6</u>	<u>NaN</u>
Numerator	<u>6,227</u>	<u>6,085</u>	<u>5,741</u>	<u>5,549</u>	<u>0</u>
Denominator	<u>163,682</u>	<u>168,842</u>	<u>172,220</u>	<u>175,400</u>	<u>0</u>
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>33</u>	<u>32</u>	<u>31</u>	<u>30</u>	<u>29</u>
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	2.7	6	9	13	13.3
Annual Indicator	5.5	8.5	9.5	13.6	13.5
Numerator	6,328	9,852	10,974	1,627	1,731
Denominator	116,068	115,478	115,678	11,944	12,805
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	13.5	13.8	14	14.3	14.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	5.9	5.8	5.7	5.6	5.5
Annual Indicator	5.7	4.7	5.4	5.1	NaN
Numerator	101	85	101	97	0
Denominator	1,783,797	1,818,493	1,870,777	1,904,600	0
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	5.4	5.3	5.2	5.1	5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	59	60	62	64	66
Annual Indicator	44.4	64	NaN	NaN	NaN
Numerator	19,351		0	0	0
Denominator	43,561		0	0	0
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	68	70	72	74	76
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	50	60	70	95	95
Annual Indicator	34.9	49.0	80.5	93.5	95.3
Numerator	44,170	64,785	108,156	125,881	130,254
Denominator	126,494	132,286	134,402	134,598	136,642
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	95	95	95	95	95
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	15	13	12	12	11
Annual Indicator	12.6	8.0	12.7	12.4	NaN
Numerator	262,033	168,485	277,999	278,974	0
Denominator	2,081,927	2,106,086	2,196,937	2,249,350	0
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	11	10	10	9	8
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

PERFORMANCE MEASURE # 14

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	73	74	75	76	94.5
Annual Indicator	71.2	74.7	93.9	94.4	81.5
Numerator	498,623	592,019	852,799	807,089	810,778
Denominator	699,870	792,108	908,516	854,969	994,789
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	95	95.5	96	96.5	97
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

PERFORMANCE MEASURE # 15

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	1.7	1.7	1.7	1.7	1.6
Annual Indicator	1.7	1.8	1.7	1.7	NaN
Numerator	2,184	2,346	2,309	2,305	0
Denominator	126,494	132,286	133,468	133,285	0
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.6	1.5	1.5	1.5	1.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	8.3	8.2	8.1	8	7.9
Annual Indicator	8.3	7.0	8.7	5.9	NaN
Numerator	49	42	52	36	0
Denominator	589,631	596,277	599,371	605,348	0
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	7.8	7.7	7.7	7.6	7.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	73	73.5	74	74.5	75
Annual Indicator	73.1	75.5	76.8	75.2	NaN
Numerator	1,597	1,772	1,774	1,733	0
Denominator	2,184	2,346	2,309	2,305	0
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	75.5	76	76.5	77	77.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	84.5	85	85.3	85.5	85.8
Annual Indicator	84.8	83.1	82.4	83.3	NaN
Numerator	107,306	109,965	109,966	110,974	0
Denominator	126,494	132,286	133,468	133,285	0
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	86	86.3	86.5	86.8	87
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 1

Degree to which the Georgia Perinatal System has been enhanced to provide a continuum of coordinated services from pre-conceptional to interconceptional care.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	10	10	12	15	17
Annual Indicator	6	8	12	14	14
Numerator	6	8	12	14	14
Denominator	18	18	18	18	18
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	18	18	18	18	18
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 2

Implementation of a comprehensive approach addressing maternal substance abuse.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	9	10	10	11	11
Annual Indicator	5	6	10	10	10
Numerator	5	6	10	10	10
Denominator	12	12	12	12	12
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	11	11	12	12	12
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 3

Degree to which the State addresses prevention of tobacco, alcohol, and other substance abuse by children and adolescents.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	5	8	7	11	12
Annual Indicator	7	10	10	10	10
Numerator	7	10	10	10	10
Denominator	15	15	15	15	15
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	13	14	15	15	15
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 4

Degree to which health districts have established integrated MCH plans.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	10	15	17	18	18
Annual Indicator	11	9	9	9	9
Numerator	11	9	9	9	9
Denominator	24	24	24	24	24
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	22	23	23	24	24
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 5

The degree to which risk positive children, birth to age four, are linked to a primary health care provider, referred to one or more community services, and referred to appropriate public health programs.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>270</u>	<u>250</u>	<u>270</u>	<u>270</u>	<u>275</u>
Annual Indicator	<u>270</u>	<u>298</u>	<u>256</u>	<u>282</u>	<u>271</u>
Numerator	<u>270</u>	<u>298</u>	<u>256</u>	<u>282</u>	<u>271</u>
Denominator	<u>300</u>	<u>300</u>	<u>300</u>	<u>300</u>	<u>300</u>
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>280</u>	<u>280</u>	<u>285</u>	<u>290</u>	<u>295</u>
Annual Indicator					
Numerator					
Denominator					
	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				

STATE PERFORMANCE MEASURE # 6

Degree to which state and local public health agencies are actively involved in the statewide child fatality review process.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>75.0</u>	<u>8</u>	<u>9</u>	<u>12</u>	<u>15</u>
Annual Indicator	<u>0</u>	<u>8</u>	<u>10</u>	<u>14</u>	<u>13</u>
Numerator	<u>0</u>	<u>8</u>	<u>10</u>	<u>14</u>	<u>13</u>
Denominator	<u>21</u>	<u>21</u>	<u>21</u>	<u>21</u>	<u>21</u>
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>15</u>	<u>16</u>	<u>16</u>	<u>17</u>	<u>17</u>
Annual Indicator					
Numerator					
Denominator					
	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				

STATE PERFORMANCE MEASURE # 7

Degree to which age-appropriate parenting and/or child development information for children grades K-5 is made available to families, schools, caregivers, and providers through a statewide system of collaboration and linkages.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>9</u>	<u>4</u>	<u>5</u>	<u>8</u>	<u>8</u>
Annual Indicator	<u>9</u>	<u>3</u>	<u>6</u>	<u>6</u>	<u>6</u>
Numerator	<u>9</u>	<u>3</u>	<u>6</u>	<u>6</u>	<u>6</u>
Denominator	<u>12</u>	<u>12</u>	<u>12</u>	<u>12</u>	<u>12</u>
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>8</u>	<u>12</u>	<u>12</u>	<u>12</u>	<u>12</u>
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

STATE PERFORMANCE MEASURE # 8

Percentage of children enrolled in the CSHCN Program receiving comprehensive case management services.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>30%</u>	<u>30%</u>	<u>40</u>	<u>45</u>	<u>83</u>
Annual Indicator		<u>35.0</u>	<u>42.3</u>	<u>83.5</u>	<u>91.0</u>
Numerator		<u>7,000</u>	<u>7,254</u>	<u>11,385</u>	<u>10,442</u>
Denominator		<u>20,000</u>	<u>17,163</u>	<u>13,632</u>	<u>11,480</u>
Is the Data Provisional or Final?				Provisional	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>84</u>	<u>85</u>	<u>86</u>	<u>87</u>	<u>88</u>
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

STATE PERFORMANCE MEASURE # 9

Percent of Georgia counties with an active "SAFE Kids" type broad-based injury prevention coalition.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	39.5%	52.8%	55.5%	58	61.0%
Annual Indicator	50.3	56.0	61.0	63.5	35.8
Numerator	80	89	97	101	57
Denominator	159	159	159	159	159
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	64.0%	67.0%	69	71	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 10

Asthma-related hospitalizations among children ages 1-19.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	152	151	150	150	149
Annual Indicator	153.9	138.4	146.1	158.4	NaN
Numerator	3,342	3,174	3,422	3,764	0
Denominator	2,171,959	2,293,778	2,341,974	2,376,748	0
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	149	148	148	148	148
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 11

None

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
2. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
3. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
4. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
5. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2005
Field Note:
The data being survey data (The National Immunization Survey), it is not meaningful to report a numerator and denominator. These data pertain to the period July 2002-June 2003, representing the Fiscal Year 2003
7. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2005
Field Note:
Data for 2003 is not yet available, this will be reported in the FY 2006 Block Grant.
8. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2005
Field Note:
The data source was changed in 2002 to reflect school children served by public health only.
9. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2005
Field Note:
Data for 2003 is not yet available, this will be reported in the FY 2006 Block Grant.
The denominator for 2001 has been updated with the 2001 population estimate.
10. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
Data is not available at this time for years 2001, 2002 and 2003. Pregnancy Risk and Morbidity Survey (PRAMS) data was used to report for 2000. Data from the PRAMS 2001 may be available in August 2004.
11. **Section Number:** Performance Measure #12
Field Name: PM12
Row Name:
Column Name:
Year: 2005
Field Note:
The denominator is a preliminary estimate of In-hospital occurrent births in Georgia in 2003. The denominator for 2002 has been updated with the final number.

12. **Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2005
Field Note:
The data are estimates from the March 2001-March 2003 Current Population Survey (CPS merged 3 year file) reflecting coverage for calendar years 2000-2002. Data is not available for 2003 at this time as this will be reported from the CPS for 2002-2004 which will be produced in September, 2004.
13. **Section Number:** Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics data for 2003 is not available at this time and will be reported in the 2006 Block Grant.
14. **Section Number:** Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics data for 2003 is not available at this time and will be reported in the 2006 Block Grant.
15. **Section Number:** Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics data for 2003 is not available at this time and will be reported in the 2006 Block Grant.
16. **Section Number:** State Performance Measure #5
Field Name: SM5
Row Name:
Column Name:
Year: 2005
Field Note:
For FY 03 the measure is now calculated in the following manner: 1) Number of children identified out of 30% of the live births 2) Number of children assessed out of the number of children identified 3) Number of children referred to a primary health care provider out of number of children assessed.
17. **Section Number:** State Performance Measure #8
Field Name: SM8
Row Name:
Column Name:
Year: 2005
Field Note:
For FY 03 this measure now includes data from the High Risk Infant Follow Up Program and the Childrens Medical Services Program. Data has been averaged for Quarters 2 and 3 for the HRIFU program and 2nd quarter data is used as the basis for estimating this number for the CMS program. Starting August 2004, estimates will be based on a randomly selected set of client records for CMS.
18. **Section Number:** State Performance Measure #9
Field Name: SM9
Row Name:
Column Name:
Year: 2005
Field Note:
Other supplemental funding sources did not support coalition building for FFY03, but has been restored for FFY04.
19. **Section Number:** State Performance Measure #10
Field Name: SM10
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics data for 2003 is not available at this time and will be reported in the 2006 Block Grant.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]
STATE: GA

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	8.5	8.4	8.4	8.3	8.3
Annual Indicator	8.2	8.5	8.5	8.9	NaN
Numerator	1,036	1,125	1,141	1,188	0
Denominator	126,494	132,286	133,468	133,285	0
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	8.2	8.2	8.1	8.1	8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	2.4	2.4	2.2	2.1	2
Annual Indicator	2.6	2.3	2.1	2.1	NaN
Numerator	13.9	13.7	13.2	13.7	0
Denominator	5.4	6	6.2	6.6	0
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	2	2	1.9	1.9	1.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	5.5	5.4	5.4	5.7	5.7
Annual Indicator	5.6	5.8	5.8	5.9	NaN
Numerator	707	761	780	787	0
Denominator	126,494	132,286	133,468	133,285	0
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	5.7	5.6	5.6	5.6	5.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	3	2.9	2.8	2.6	2.5
Annual Indicator	2.6	2.8	2.7	3.0	NaN
Numerator	329	364	361	401	0
Denominator	126,494	132,286	133,468	133,285	0
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	2.5	2.4	2.4	2.3	2.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	8	8	7.9	7.9	7.8
Annual Indicator	8.0	7.9	8.2	8.2	NaN
Numerator	1,017	1,044	1,102	1,101	0
Denominator	126,977	132,726	133,946	133,766	0
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	7.8	7.8	7.7	7.7	7.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	30	28	24	24	23
Annual Indicator	27.4	24.2	25.2	22.9	NaN
Numerator	438	411	439	405	0
Denominator	1,599,846	1,697,501	1,742,603	1,771,400	0
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	23	22	22	21	21
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE OUTCOME MEASURE # 7

Percentage of students who graduate from high school on time.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	70%	70%	71%	72%	73%
Annual Indicator	68.9	70.7	71.1	72.7	
Numerator				72,249	
Denominator				99,345	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	74%	75%			
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 12

This data represents the percent of grade 9 enrollment in the graduating class of 2002. Numerator and denominator are not available.

FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2005
Field Note:
2003 data is not available at this time and will be reported in the FY 2006 Block Grant.
2. **Section Number:** Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2005
Field Note:
Data was updated from previous years. Fetal deaths 28 weeks or later was used to match the national standard.
3. **Section Number:** Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2005
Field Note:
The denominator has been updated for 2001.

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: GA

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

2

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

1

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

0

6. Family members of diverse cultures are involved in all of the above activities.

2

Total Score: 9

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: GA FY: 2005

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Improve health status related to conditions with preventable morbidity and mortality (i.e., infant morbidity and mortality, decrease health disparities, HIV/STDs and maternal infections, and asthma).
2. Promote healthy life styles to reduce maternal, infant and childhood mortality (i.e., alcohol and drug use, unplanned pregnancy and high risk sexual behaviors, tobacco use, and poor nutrition).
3. Promote safe behaviors to reduce injury and violence.
4. Work in partnership with families to promote their ability to raise healthy children (i.e., preconceptional health, early brain development, SIDS, and parenting skills throughout childhood).
5. Improve the integration and coordination of the MCH delivery system at the organizational and individual level.
6. Develop effective partnerships with families, providers, community organizations, and businesses as well as other governmental agencies.
7. Develop standards and measures of quality assurance for MCH services.
8. Support health districts in developing plans focused on community assets and resources that address local MCH needs.
9. Develop information systems to improve decision-making at state, district, and local levels.
10. Assure the MCH workforce possesses the skills sets and competencies relevant to the evolving health environment.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

**FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: GA

APPLICATION YEAR: 2005

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested <i>(max 250 characters)</i>	Reason(s) Why Assistance Is Needed <i>(max 250 characters)</i>	What State, Organization or Individual Would You suggest Provide the TA (if known) <i>(max 250 characters)</i>
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Enhancing Men's Health and Women's Health services	Need to improve the Men's Health system and increase provision of Women's Health Services beyond current services, i.e., perinatal, etc.	Not known
2.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Forming partnerships with other MCH service providers	Need to increase linkages with private sector to assure standards of care. Also need to strengthen linkages with Vital Records to increase data integration.	Not known
3.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Integrating FHB services with other MCH providers	Assistance is needed in working with WIC and other MCH providers to integrate services across the Division.	Not known
4.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Understanding middle childhood issues	Need to better understand issues related to middle childhood (ages 5 to 12.	Not known
5.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Analysis to action	Need help in moving from analysis of problems to taking action on those problems.	Not known
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: GA

SP # 1

PERFORMANCE MEASURE:	Degree to which the Georgia Perinatal System has been enhanced to provide a continuum of coordinated services from pre-conceptional to interconceptional care.
STATUS:	Active
GOAL	Improve the quality of reproductive health care through a coordinated perinatal system.
DEFINITION	Attached is a checklist of six (6) milestones that documents implementation and utilization of Georgia Perinatal Guidelines. Numerator: N/A Denominator: Units: 18 Text: Scale
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	Office of Regulatory Services Survey Reports and Regional Perinatal System Program Assessments, Regional Planning Reports
SIGNIFICANCE	Improved outcomes for pregnant women and infants have been associated with the implementation of a regional perinatal system which incorporates the efforts of state and local stakeholders. The need to augment the levels of care designated in this perinatal system is critical to the delivery of quality and risk appropriate care. Such reassessment, coordination, and quality management can continue to enhance our perinatal system so that it can be comprehensive, current and fiscally efficient and responsible, yet sensitive to the particular needs of communities as well as individual mothers and babies.

SP # 2

PERFORMANCE MEASURE:

Implementation of a comprehensive approach addressing maternal substance abuse.

STATUS:

Active

GOAL

Assure that the MCH system addresses maternal substance abuse (alcohol, tobacco, and other drugs) at all levels of the pyramid.

DEFINITION

Attached is a checklist of 12 key components reflecting activity at each level of the pyramid.

Numerator:

N/A

Denominator:

N/A

Units: 12 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Georgia Division of Public Health, Family Health Branch data. Data is based on an assessment of progress being made to develop key components required for assessment, assurance, and policy development activities regarding maternal substance abuse.

SIGNIFICANCE

Despite the impact of maternal substance abuse and childhood outcomes as well as the health of the mother herself, MCH agency activities in Georgia have been limited. The realization of the critical nature of the problem in terms of improved outcomes requires a system-oriented approach that incorporates infrastructure, population-based services, enabling services, and direct services. By the end of the current MCH block grant program cycle, 2001, the key elements will be in place.

SP # 3

PERFORMANCE MEASURE:

Degree to which the State addresses prevention of tobacco, alcohol, and other substance abuse by children and adolescents.

STATUS:

Active

GOAL

Develop the capacity to evaluate tobacco, alcohol, and substance usage in middle and high school aged students.

DEFINITION

Attached is a checklist of five (5) characteristics that document the State capacity to address youth use of tobacco, alcohol, and other substances.

Numerator:

N/A

Denominator:

N/A

Units: 15 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Georgia law enforcement data, screening data from youth surveys, assessment data from Department of Juvenile Justice, data from Health Check and PeachCare for Kids health evaluations, data from HEDIS measures of health plans; and Family Health Branch

SIGNIFICANCE

The use of tobacco, alcohol and other substances has its beginnings in early adolescence. Tobacco is a segueway for substance abusing youth - 87% of persons who use illicit drugs also use tobacco. Tobacco, alcohol and use of other substances are underdiagnosed and undertreated in the adolescent population. Other youth risk behavior with adverse consequences for the individuals and their families and for the community are often associated with substance abuse, especially alcohol. Those activities include, but are not limited to, motor vehicle accidents, juvenile crime, sexual assault, high risk sexual behavior, higher rates of poor school performance and lowered self-esteem.

SP # 4

PERFORMANCE MEASURE:

Degree to which health districts have established integrated MCH plans.

STATUS:

Active

GOAL

Ensure a planned approach to address local MCH issues throughout Georgia.

DEFINITION

Attached is a checklist of eight (8) characteristics that document execution of local MCH planning in every health district.

Numerator:

N/A

Denominator:

N/A

Units: 24 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Georgia Division of Public Health, Family Health Branch data. Data is based on assessment of progress being made in each of the nineteen (19) health districts in implementing comprehensive MCH planning.

SIGNIFICANCE

Traditionally, local health departments provided clinical services dependent on categorical funding. As a broader responsibility for casting public health around the three core functions (policy development, assessment, and assurance) has emerged, the role of local health planning in the design and implementation of a total cohort service delivery system has become evident. This approach to addressing core functions for the MCH population has several critical variables to bring about system-wide, integrated services that address the specific needs of a given locality. This community plan needs to engage a broad array of stakeholders, community partners, and consumers. In Georgia, local public health responsibilities are carried out at the county level (159 counties) grouped into health districts (19 districts) for administrative purposes.

SP # 5

PERFORMANCE MEASURE:

The degree to which risk positive children, birth to age four, are linked to a primary health care provider, referred to one or more community services, and referred to appropriate public health programs.

STATUS:

Active

GOAL

Ensure that children at risk, birth to age four, receive the appropriate health and community services needed to support healthy outcomes.

DEFINITION

Attached is a scoring sheet for each of the three variables that provides an individual and cumulative score for assessing performance over time. For each of the three variables, the score is determined by calculating the percent to which each objective has been met. The resulting percentage is then transferred to a raw score and the three raw scores are added to obtain the final score. The scoring sheet should remain attached.

Numerator:

N/A

Denominator:

N/A

Units: 300 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Children 1st Quarterly Report, submitted by the nineteen (19) health districts. Data completeness quality will depend on accurate reporting by district staff.

SIGNIFICANCE

Recent research on brain development has highlighted the critical importance of the early years of life on long-term child health and development. Children 1st is a population-based system of screening all children at the time of birth and providing community-based follow-up services to those at highest risk for poor health and developmental outcomes. The level of follow-up provided is determined by assessing the risk conditions identified: one or more level 1 socio-environmental risk conditions, one or more level 2 biological/medical risk conditions or both.

SP # 6

PERFORMANCE MEASURE:

Degree to which state and local public health agencies are actively involved in the statewide child fatality review process.

STATUS:

Active

GOAL

Assure that state and local public health agencies actively participate in the child fatality review process to ensure that these reviews are timely and statewide.

DEFINITION

Attached is a checklist of seven (7) characteristics that document public health involvement in the child fatality review process.

Numerator:

NA

Denominator:

Units: 21 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Office of Child Fatality Review

SIGNIFICANCE

In Georgia, legislation regarding child fatality review (CFR) requires interagency sharing and collaboration. Participation of state and local health agencies is critical in ensuring that these reviews are timely and as useful as possible. CFR subcommittees in each of the 159 counties have multi-agency representation and are responsible for reviewing all unexpected and unexplained child deaths. Child fatality reviews can prompt changes in local and/or state policies, procedures, or personnel that reduce the risk of future child deaths. The 1997 report, "The Best of Intentions: An Evaluation of the Child Fatality Review Process in Georgia," describes the CFR process in Georgia as follows: "Although the child fatality review process is supported by hundreds of dedicated professionals statewide, 57 counties with one or more deaths in 1995 did not forward a single review to the Statewide Child Abuse Prevention Panel. Each year, nearly half of eligible deaths statewide are not reviewed." The CFR evaluation sets the following benchmark: "At least 80% of eligible child deaths statewide will be reviewed and reported to the Statewide Child Abuse Prevention Panel."

SP # 7

PERFORMANCE MEASURE:

Degree to which age-appropriate parenting and/or child development information for children grades K-5 is made available to families, schools, caregivers, and providers through a statewide system of collaboration and linkages.

STATUS:

Active

GOAL

Develop and assure that effective parenting information is made available to all families in Georgia with children in grades K-5.

DEFINITION

Attached is a checklist of four (4) characteristics documenting the development and provision of parenting information for the MCH population. Please check the degree to which parenting has been incorporated into the MCH program, using the scale 0-3.

Numerator:

N/A

Denominator:

N/A

Units: 12 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The State MCH Program

SIGNIFICANCE

Parenting transcends each phase of the MCH system. Health promoting behaviors in children mirror those of their parents. Health risk behaviors in children are also similar to those of their parents and other family members. An adult that cares for a child is the most central and enduring influence on a child's behavior. Promoting effective parenting, particularly in a time when the influence of an extended family is less than in previous generations, assists parents in achieving their children's physical health, mental health and overall well-being. In an integrated coordinated MCH delivery system, functional child and adolescent phases of development with differing parenting requirements have been identified. These phases include: 1) preconception; 2) conception to 1 year; 3) 1-2 years; 4) 2-3 years; 5) 3-5 years; 6) 6-11 years; 7) 12-14 years; 8) 15-17 years; and 9) 18-21 years.

SP # 8

PERFORMANCE MEASURE:

Percentage of children enrolled in the CSHCN Program receiving comprehensive case management services.

STATUS:

Active

GOAL

Establish a comprehensive case management system for children with special health care needs.

DEFINITION

Percent of children with special health care needs enrolled in Title V receiving comprehensive assessment and development of care plan.

Numerator:

Number of children for whom a comprehensive assessment and care plan is developed.

Denominator:

Total number of children served by the program.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Children's Medical Services, programmatic data and other child health database information if unduplicated (i.e., Children 1st, Babies Can't Wait, etc.)

SIGNIFICANCE

Families of children with special health care needs often have complex needs which can only be addressed by a multiplicity of providers. A comprehensive, family-centered case management system can increase access to appropriate services and reduce familial stress. It may also reduce costs associated with duplication and inappropriate devices and services. Case management should work collaboratively with primary care providers in conjunction with existing health care delivery systems and incorporate related case management programs. Expansion of the system is dependent on available funding resources.

SP # 9

PERFORMANCE MEASURE:

Percent of Georgia counties with an active "SAFE Kids" type broad-based injury prevention coalition.

STATUS:

Active

GOAL

Reduce the risk of childhood injury in Georgia.

DEFINITION

Numerator:

Number of counties in which an active coalition exists.

Denominator:

Number of counties in Georgia (159 counties)

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division of Public Health Injury Prevention Program

SIGNIFICANCE

Injury is a leading cause of childhood morbidity and mortality. Through SAFE Kids, as well as other coalitions, Georgia has demonstrated leadership in community-based, injury prevention activities. These coalitions, often led by public health staff, bring together diverse community groups and individuals to address specific risk factors that may result in childhood injury. Coalitions include public health, law enforcement, schools, parents, the local business community, and civic organizations among others. A major emphasis has been automobile safety, particularly infant care seats and seat belts. However, many other causes of injury, including fire and bicycles, are addressed. Presently, coalitions do not exist in a majority of Georgia counties and, moreover, are not present in several of the larger cities in the state. The effect of these coalitions has been shown to be significant in terms of bringing attention to a variety of injury concerns as well as changing policies and practices which may result in injury.

SP # 10

PERFORMANCE MEASURE:

Asthma-related hospitalizations among children ages 1-19.

STATUS:

Active

GOAL

Reduce asthma morbidity among children, 1-19 years of age.

DEFINITION

Rate of asthma-related hospitalizations in infants and children age 1-19.

Numerator:

Number of hospital discharges, children 1-19 years of age.

Denominator:

State population, 1-19 years

Units: 100000 **Text:** Rate/100,000

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The Georgia Hospital Inpatient Discharge Data set (GHIDD)

SIGNIFICANCE

A recent survey in Georgia indicates that approximately 11% (210,000) of the state's children birth to 17 years of age have asthma. Among households with children, one in six (16%) has a child with asthma. Asthma is slightly more common among children 5-12 years of age (12%) than children 13-17 (10%) or birth to 4 (9%). Almost one-third of Georgia children with asthma (64,000) have been to the emergency room because of asthma in the last year. Asthma hospitalizations and deaths are highest in the winter. Among children, those birth to 4 years old are the most likely to be hospitalized with asthma. Their hospitalization rate is more than twice as high as any other age group; as children get older, their hospitalization rates decrease. Source: "Asthma in Georgia, 2000." American Lung Association of Georgia, Inc. & Georgia Department of Human Resources, Division of Public Health, Chronic Disease Branch, Family Health Branch & Epidemiology Branch, 2000.

SO # 7

OUTCOME MEASURE:

Percentage of students who graduate from high school on time.

STATUS:

Active

GOAL

Increase the percentage of students who graduate from high school on time.

DEFINITION

The percentage of students entering the ninth grade who graduate from high school four years later.

Numerator:

One minus (sum of dropouts for year x, x-1, x-2, x-3)

Denominator:

Sum total of number of graduates in year X plus the total number of dropouts for years x, x-1, x-2, x-3

Units: 100 **Text:** percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Georgia Department of Education data This measure is most reliable when migration into or out of a school district is minimal, as this statistic can artificially inflate or deflate the "true" graduation rate. Even when there is little migration, the on-time graduation rate underestimates the total population of students who graduate from high school. Some students take longer than four years to graduate, while others return and finish their degree (including the GED) at a later age.

SIGNIFICANCE

Graduating from high school is closely linked to being a productive adult, earning a higher income than those who do not graduate. Employment opportunities for high school dropouts are few and characterized by low pay, instability and limited avenues for advancement. Virtually every health status outcome measure correlates higher income with health well-being. This is true both in terms of the health of the individual who graduates from high school as well as their children. Public health, through preventive health activities as well as access to primary health care and needed specialty care, impacts high school graduation rates by assuring that children are ready and able to learn.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: GA

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	36.6	34.6	39.7	39.9	NaN
Numerator	2,125	2,059	2,483	2,586	0
Denominator	580,222	595,150	625,431	648,667	0
Is the Data Provisional or Final?				Provisional	Final

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose ages less than one year during the reporting year who received at least one initial periodic screen.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	61.4	64.9	71.8	67.7	70.2
Numerator	51,544	90,978	102,388	111,328	138,850
Denominator	83,912	140,216	142,507	164,513	197,710
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	NaN	50.2	59.3	45.7	57.7
Numerator	0	330	1,331	1,474	1,524
Denominator	0	657	2,244	3,223	2,641
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	79.5	78.7	79.0	76.0	NaN
Numerator	97,801	100,273	101,335	100,959	0
Denominator	122,967	127,479	128,343	132,834	0
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 07

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	<u>39.7</u>	<u>46.2</u>	<u>38.7</u>	<u>40.1</u>	<u>46.8</u>
Numerator	<u>62,822</u>	<u>62,626</u>	<u>75,074</u>	<u>111,842</u>	<u>145,318</u>
Denominator	<u>158,311</u>	<u>135,490</u>	<u>193,953</u>	<u>278,964</u>	<u>310,623</u>
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	<u>NaN</u>	<u>11.4</u>	<u>11.1</u>	<u>8.3</u>	<u>8.1</u>
Numerator	<u>0</u>	<u>2,646</u>	<u>2,774</u>	<u>2,133</u>	<u>2,165</u>
Denominator	<u>0</u>	<u>23,180</u>	<u>25,030</u>	<u>25,780</u>	<u>26,751</u>
Is the Data Provisional or Final?				Provisional	Final

FORM NOTES FOR FORM 17

None

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2005
Field Note:
Data for 2003 is not yet available and will be reported only in the FY 2006 Block Grant. The denominator for 2001 has been updated.
2. **Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2005
Field Note:
Data is not available for 2003 and will be reported in the FY 2006 Block Grant.
Data for previous years has been adjusted to exclude cases with missing information from the denominator.
3. **Section Number:** Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2005
Field Note:
The numerator refers to the number of beneficiaries under 16 in the Children's Medical Services (CMS) FY 2004 2nd Quarter Report (October 1- December 30, 2003).

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: GA

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2002	Matching data files	<u>0</u>	<u>0</u>	<u>9</u>
b) <i>Infant deaths per 1,000 live births</i>	2002	Matching data files	<u>0</u>	<u>0</u>	<u>8.9</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2002	Matching data files	<u>0</u>	<u>0</u>	<u>83.3</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2002	Matching data files	<u>0</u>	<u>0</u>	<u>76</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)
STATE: GA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2002	<u>235</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u>) (Age range <u>6</u> to <u>19</u>) (Age range <u> </u> to <u> </u>)	2002	<u>133</u> <u>100</u> <u> </u>
c) <i>Pregnant Women</i>	2002	<u>235</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)
STATE: GA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>		<u> </u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>19</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2002	<u>235</u> <u> </u> <u> </u>
c) <i>Pregnant Women</i>		<u> </u>

FORM NOTES FOR FORM 18

The Department of Community Health is in the process of changing their Information system and will only be able to provide 2002 data in August 2004. Data for 2003 will only be reported in the FY 2006 Block Grant.

FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - SCHIP
Field Name: SCHIP_Infant
Row Name: Infants
Column Name:
Year: 2005
Field Note:
Not Applicable for SCHIP
2. **Section Number:** Indicator 06 - SCHIP
Field Name: SCHIP_Women
Row Name: Pregnant Women
Column Name:
Year: 2005
Field Note:
Not Applicable for SCHIP
3. **Section Number:** Indicator 05
Field Name: LowBirthWeight
Row Name: Percent of ow birth weight (<2,500 grams)
Column Name:
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period.
4. **Section Number:** Indicator 05
Field Name: InfantDeath
Row Name: Infant deaths per 1,000 live births
Column Name:
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period.
5. **Section Number:** Indicator 05
Field Name: CareFirstTrimester
Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
Column Name:
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period.
6. **Section Number:** Indicator 05
Field Name: AdequateCare
Row Name: Percent of pregnant women with adequate prenatal care
Column Name:
Year: 2005
Field Note:
The Department of Community Health is changing their Information system and is unable to provide data at the current time for this reporting period.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: GA

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	2	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: GA

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other: Youth Tobacco Survey	3	Yes

HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity
(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Pediatric Nutrition Surveillance System (PedNSS)	3	Yes
WIC Program Data	3	Yes
Other: Youth Tobacco Survey	3	Yes

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: GA

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	8.7	8.6	8.8	9.0	_____
Numerator	11,047	11,416	11,763	11,933	_____
Denominator	126,494	132,286	133,468	133,285	_____

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	7.1	7.1	7.2	7.3	_____
Numerator	8,693	9,045	9,265	9,355	_____
Denominator	122,635	128,276	129,343	128,991	_____

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	1.7	1.8	1.7	1.7	_____
Numerator	2,184	2,346	2,309	2,305	_____
Denominator	126,494	132,286	133,468	133,285	_____

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	1.4	1.4	1.3	1.4	_____
Numerator	1,718	1,855	1,741	1,806	_____
Denominator	122,635	128,276	129,343	128,991	_____

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	12.8	11.6	11.7	11.3	
Numerator	228	211	219	215	
Denominator	1,783,797	1,818,493	1,870,777	1,904,600	

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	5.9	4.7	5.4	5.1	
Numerator	101	85	101	97	
Denominator	1,720,666	1,818,493	1,870,777	1,904,600	

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	25.2	24.7	31.6	28.1	
Numerator	293	294	383	347	
Denominator	1,164,142	1,188,473	1,211,516	1,232,814	

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	208.7	188.5			
Numerator	3,591	3,427			
Denominator	1,720,666	1,818,493			

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	43.6	34.4			
Numerator	750	626			
Denominator	1,720,666	1,818,493			

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	160.7	156.5			
Numerator	1,785	1,860			
Denominator	1,110,581	1,188,473			

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	37.7	37.8	39.0	38.9	38.9
Numerator	10,450	10,476	11,223	11,362	11,372
Denominator	276,988	276,988	287,916	292,120	292,120

Is the Data Provisional or Final?

Final

Provisional

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	8.2	8.9	9.4	8.0	8.5
Numerator	12,791	13,923	15,211	15,713	16,822
Denominator	1,564,933	1,564,933	1,611,447	1,971,688	1,971,688

Is the Data Provisional or Final?

Final

Provisional

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

None

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2002 Is this data from a State Projection? No

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	133,200	83,550	42,644	460	3,018	169	3,359	
Children 1 through 4	648,667	404,886	212,599	1,567	14,994	619	14,002	
Children 5 through 9	614,101	377,665	209,455	1,822	13,460	518	11,181	
Children 10 through 14	641,832	390,638	226,489	1,978	13,026	494	9,207	
Children 15 through 19	605,348	375,832	205,849	1,993	13,674	486	7,514	
Children 20 through 24	627,466	399,861	202,091	2,366	15,810	679	6,659	
Children 0 through 24	3,270,614	2,032,432	1,099,127	10,186	73,982	2,965	51,922	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	118,173	15,027	
Children 1 through 4	467,901	47,566	
Children 5 through 9	569,639	44,462	
Children 10 through 14	604,908	36,924	
Children 15 through 19	569,312	36,036	
Children 20 through 24	564,618	62,848	
Children 0 through 24	2,894,551	242,863	0

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 1999 Is this data from a State Projection? No

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	419	126	290		2		1	
Women 15 through 17	6,226	3,080	3,080	8	37	1	20	
Women 18 through 19	11,770	6,448	5,196	20	67	5	34	
Women 20 through 34	94,168	61,553	29,850	169	2,424	33	139	
Women 35 or older	13,911	9,737	3,651	24	484	5	10	
Women of all ages	126,494	80,944	42,067	221	3,014	44	204	0

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	282	42	4
Women 15 through 17	4,665	782	102
Women 18 through 19	8,940	1,546	218
Women 20 through 34	85,165	13,115	2,678
Women 35 or older	13,903	1,264	579
Women of all ages	112,955	16,749	3,581

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 0 Is this data from a State Projection? No

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	0							
Children 1 through 4	0							
Children 5 through 9	0							
Children 10 through 14	0							
Children 15 through 19	0							
Children 20 through 24	0							
Children 0 through 24	0	0	0	0	0	0	0	0

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1			
Children 1 through 4			
Children 5 through 9			
Children 10 through 14			
Children 15 through 19			
Children 20 through 24			
Children 0 through 24	0	0	0

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	0								
Percent in household headed by single parent									
Percent in TANF (Grant) families									
Number enrolled in Medicaid	0								
Number enrolled in SCHIP	0								
Number living in foster home care	0								
Number enrolled in food stamp program	0								
Number enrolled in WIC	0								
Rate (per 100,000) of juvenile crime arrests									
Percentage of high school drop-outs (grade 9 through 12)									

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19				
Percent in household headed by single parent				
Percent in TANF (Grant) families				
Number enrolled in Medicaid				
Number enrolled in SCHIP				
Number living in foster home care				
Number enrolled in food stamp program				
Number enrolled in WIC				
Rate (per 100,000) of juvenile crime arrests				
Percentage of high school drop-outs (grade 9 through 12)				

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2002 Is this data from a State Projection? No

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	_____
Living in urban areas	2,037,076
Living in rural areas	472,872
Living in frontier areas	_____
Total - all children 0 through 19	2,509,948

Note:
The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: Is this data from a State Projection? No

POVERTY LEVELS	TOTAL
Total Population	_____
Percent Below: 50% of poverty	_____
100% of poverty	_____
200% of poverty	_____

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: GA**

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: Is this data from a State Projection? No

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	_____
Percent Below: 50% of poverty	_____
100% of poverty	_____
200% of poverty	_____

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

None