

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

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APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2004	APPLICANT IDENTIFIER 3620-141600									
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 99B1NMCHS									
		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER									
5. APPLICANT INFORMATION												
Legal Name: Indiana		Organizational Unit: Indiana State Department of Health										
Address (give city, county, state and zip code) 2 North Meridian Street Indianapolis, IN 46204 County: Marion		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Eric Vermeulen, J.D., Program Tel Number: 317.233.7755										
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <table border="1" style="width:100%; text-align: center;"><tr><td>3</td><td>5</td><td>-</td><td>6</td><td>0</td><td>0</td><td>0</td><td>1</td><td>5</td></tr></table>		3	5	-	6	0	0	0	1	5	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)	
3	5	-	6	0	0	0	1	5				
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="width:100%; text-align: center;"><tr><td>9</td><td>3</td><td>9</td><td>9</td><td>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 & Children's Special Health Care					
9	3	9	9	4								
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): Statewide												
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:										
Start Date: 10/01/2004	Ending Date: 09/30/2005	a. Applicant Tenth	b. Project State of Indiana									
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>12,500,265.00</u>											
b. Applicant	\$ <u>5,125,941.00</u>											
c. State	\$ <u>26,364,816.00</u>											
d. Local	\$ <u>678,670.00</u>											
e. Other	\$ <u>2,401,513.00</u>											
f. Program Income	\$ <u>2,481,975.00</u>											
g. TOTAL	\$ <u>49,553,180.00</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 Renee Miller, M.P.H.		b. Title Asst. Commissioner Operational Services	c. Telephone Number 317/233-7102									
d. Signature of Authorized Representative		e. Date Signed										

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: LocalMCHFunds
Row Name: Local MCH Funds
Column Name:
Year: 2005
Field Note:
This amount is lower than the amount listed for FY 2004. ISDH MCSHC now operates local grantees on a two-year cycle. Some of the applicants were awarded probationary funding for FY 2004. ISDH MCSHC has not yet determined if and how much those probationary grantees will be funded for FY 2005. Until that determination is made, the local, other matching and program income amounts for those grantees can not be included in the budget. This note will also cover items 5 and 6 for this form.
- 2. Section Number:** Main
Field Name: CISS
Row Name: Other Federal Funds - CISS
Column Name:
Year: 2005
Field Note:
These funds are awarded to Indiana Department of Education. IDOE allocates some of this funding to ISDH to meet part of the requirements of the grant. IDOE may be reporting this amount to another Federal agency as "other funds controlled by IDOE" for purposes of some other Federal grant.
- 3. Section Number:** Main
Field Name: WIC
Row Name: Other Federal Funds - WIC
Column Name:
Year: 2005
Field Note:
WIC funds are not controlled by MCSHC
- 4. Section Number:** Main
Field Name: CDC
Row Name: Other Federal Funds - CDC
Column Name:
Year: 2005
Field Note:
This total represents four programs: Childhood Lead Poisoning Prevention - \$837,193; Genetics Implementation Grant - \$300,000; Universal Newborn Hearing Screening - \$173,105; and Addressing Asthma - \$275,096.
- 5. Section Number:** Main
Field Name: OtherFedFundsOtherFund
Row Name: Other Federal Funds - Other Funds
Column Name:
Year: 2005
Field Note:
Prenatal Substance Use Prevention Program funds come to Indiana Family and Social Services Administration Department of Mental Health. FSSA DMH provides some of this money to ISDH to meet the requirements of this program. FSSA DMH may be reporting these funds to another Federal agency as "Other Federal Funds Controlled by" for the purposes of another Federal grant.

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: IN

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,464,897	\$ 6,953,201	\$ 12,746,245	\$ 0	\$ 12,500,265	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 4,470,545	\$ 3,566,383	\$ 5,182,100	\$ 0	\$ 5,125,941	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 23,665,050	\$ 12,320,518	\$ 27,324,290	\$ 0	\$ 26,364,816	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 1,009,045	\$ 0	\$ 678,670	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 2,659,241	\$ 0	\$ 2,401,513	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 2,813,686	\$ 0	\$ 2,481,975	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 40,600,492	\$ 22,840,102	\$ 51,734,607	\$ 0	\$ 49,553,180	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 1,865,420	\$ 947,299	\$ 2,691,121	\$ 0	\$ 2,982,599	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 42,465,912	\$ 23,787,401	\$ 54,425,728	\$ 0	\$ 52,535,779	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: IN

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,365,770	\$ 7,889,601	\$ 12,476,277	\$ 8,878,013	\$ 12,476,277	\$ 9,130,084
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 1,223,630	\$ 4,547,600	\$ 1,579,316	\$ 4,586,676	\$ 1,803,234	\$ 3,586,883
3. State Funds <i>(Line3, Form 2)</i>	\$ 15,440,986	\$ 23,280,975	\$ 23,200,228	\$ 20,026,276	\$ 22,890,571	\$ 13,152,873
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 29,030,386	\$ 35,718,176	\$ 37,255,821	\$ 33,490,965	\$ 37,170,082	\$ 25,869,840
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 1,671,666	\$ 1,645,480	\$ 1,815,642	\$ 1,388,646	\$ 1,818,342	\$ 1,158,965
9. Total <i>(Line11, Form 2)</i>	\$ 30,702,052	\$ 37,363,656	\$ 39,071,463	\$ 34,879,611	\$ 38,988,424	\$ 27,028,805
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES**1. Section Number:** Main**Field Name:** FedAllocExpended**Row Name:** Federal Allocation**Column Name:** Expended**Year:** 2002**Field Note:**

In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

In addition to these expenditure reductions for personnel, the Children's Special Health Care Services (CSHCS) Division centralized case application and management at their central office. This facilitated an improvement in quality assurance while allowing the closure of individual CSHCS field offices throughout the state. These office closures generated another large savings (expenditure reduction) for the state and allowed us to focus our limited resources on client services.

Another significant change in the budget information in this year's block grant application is the inclusion of projected amounts for Local MCH Funds (\$1,009,045), Other Funds (\$2,659,241) and Program Income (\$2,813,686). Previously, Indiana has not included these estimates in our official budget submission. These amounts are reflected on Form 2, Form 3, Form 4, Form 5, and Form 10, and provide a more accurate picture of the resources that Indiana is dedicating to MCH program. In FY 2002, these local funding sources were not included in the Title V Block Grant application, but were, in fact, used to support Title V programs.

2. Section Number: Main**Field Name:** FedAllocExpended**Row Name:** Federal Allocation**Column Name:** Expended**Year:** 2003**Field Note:**

The State continued strict cost saving measures due to a shortfall in state revenue during 2002 - 2004. These included hiring freeze, early retirement incentives, employee furloughs and salary freeze, as well as increased restrictions on purchasing and contracting. As a result, ISDH MCSHC increased allocations to grantees for FY 2004 and has initiated a special one-time grant process to fund short-term projects through FY 2005-2007. These increased spending measures are projected to reduce the carryover to acceptable amounts by FY 2007 while using the money saved to build infrastructure and provide some population based services to targeted populations.

This note also applies to lines 3. and 8., State Funds and Other Federal Funds.

3. Section Number: Main**Field Name:** UnobligatedBalanceExpended**Row Name:** Unobligated Balance**Column Name:** Expended**Year:** 2002**Field Note:**

The unobligated balance for FY 2002 is \$3,586,883. This exceeded the projected amount by more than 10% due to the cost-savings initiatives implemented, as noted in the Budget Expenditure Narrative. The unobligated balance will be used for program costs and to fund special projects that address Indiana priorities. Indiana operates its program on a first in first out basis; therefore the unobligated carryover will be expended first.

4. Section Number: Main**Field Name:** UnobligatedBalanceExpended**Row Name:** Unobligated Balance**Column Name:** Expended**Year:** 2003**Field Note:**

In FY 2003 there was a substantial increase in expenditures on contracts above the estimated amount for federal funds, reducing the amount of unobligated balance by more than 10% of the estimated amount for FY 2003.

5. Section Number: Main**Field Name:** StateMCHFundsExpended**Row Name:** State Funds**Column Name:** Expended**Year:** 2002**Field Note:**

As explained in the note explaining the variance in Federal expenditures, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze in response to a tightening state budget. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

In addition to these expenditure reductions for personnel, the Children's Special Health Care Services (CSHCS) Division centralized case application and management at their central office. This facilitated an improvement in quality assurance while allowing the closure of individual CSHCS field offices throughout the state. These office closures generated another large savings (expenditure reduction) for the state and allowed us to focus our limited resources on client services.

Another significant change in the budget information in this year's block grant application is the inclusion of projected amounts for Local MCH Funds (\$1,009,045), Other Funds (\$2,659,241) and Program Income (\$2,813,686). Previously, Indiana has not included these estimates in our official budget submission. These amounts are reflected on Form 2, Form 3, Form 4, Form 5, and Form 10, and provide a more accurate picture of the resources that Indiana is dedicating to MCH program. In FY 2002, these local funding sources were not included in the Title V Block Grant application, but were, in fact, used to support Title V programs.

6. Section Number: Main**Field Name:** StateMCHFundsExpended**Row Name:** State Funds**Column Name:** Expended**Year:** 2003**Field Note:**

See note 1. above.

7. Section Number: Main**Field Name:** LocalMCHFundsExpended**Row Name:** Local MCH Funds**Column Name:** Expended**Year:** 2003**Field Note:**

ISDH MCSHC began tracking these expenditures and projecting these amounts for FY 2004. This note is for lines 5 and 6, Other Funds and Program Income as well as line 4, Local MCH funds.

8. **Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2003
Field Note:
See note 4. above.

9. **Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2003
Field Note:
See note 4. above.

10. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2002
Field Note:
In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

11. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2003
Field Note:
See note 1. above.

FORM 4

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

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

STATE: IN

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 5,262,931	\$ 3,325,702	\$ 8,305,215	\$ 0	\$ 8,443,978	\$ 0
b. Infants < 1 year old	\$ 814,788	\$ 446,537	\$ 1,206,577	\$ 0	\$ 1,211,677	\$ 0
c. Children 1 to 22 years old	\$ 6,416,429	\$ 4,072,286	\$ 8,992,693	\$ 0	\$ 7,878,696	\$ 0
d. Children with Special Healthcare Needs	\$ 27,581,379	\$ 14,418,116	\$ 32,626,139	\$ 0	\$ 31,414,846	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 524,965	\$ 577,461	\$ 603,983	\$ 0	\$ 603,983	\$ 0
g. SUBTOTAL	\$ 40,600,492	\$ 22,840,102	\$ 51,734,607	\$ 0	\$ 49,553,180	\$ 0

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

a. SPRANS	\$ 270,000	\$ 0	\$ 0
b. SSDI	\$ 135,153	\$ 90,000	\$ 90,000
c. CISS	\$ 0	\$ 0	\$ 100,000
d. Abstinence Education	\$ 857,042	\$ 857,042	\$ 868,605
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 0	\$ 0	\$ 0
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 264,625	\$ 1,406,752	\$ 1,585,394
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
PSUPP	\$ 338,600	\$ 337,327	\$ 338,600
III. SUBTOTAL	\$ 1,865,420	\$ 2,691,121	\$ 2,982,599

FORM 4

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

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

STATE: IN

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 3,896,738	\$ 3,709,091	\$ 4,073,649	\$ 4,431,827	\$ 4,426,023	\$ 3,699,559
b. Infants < 1 year old	\$ 1,287,662	\$ 1,031,927	\$ 1,157,863	\$ 687,268	\$ 981,658	\$ 636,806
c. Children 1 to 22 years old	\$ 5,126,666	\$ 4,664,285	\$ 5,169,046	\$ 4,862,864	\$ 5,211,778	\$ 4,893,438
d. Children with Special Healthcare Needs	\$ 18,181,010	\$ 25,826,503	\$ 26,306,443	\$ 23,034,341	\$ 25,997,273	\$ 15,960,072
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 538,310	\$ 486,370	\$ 548,820	\$ 474,665	\$ 553,350	\$ 679,966
g. SUBTOTAL	\$ 29,030,386	\$ 35,718,176	\$ 37,255,821	\$ 33,490,965	\$ 37,170,082	\$ 25,869,841

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

a. SPRANS	\$ 200,000	\$ 270,000	\$ 270,000
b. SSDI	\$ 100,000	\$ 100,000	\$ 100,000
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 855,624	\$ 857,042	\$ 857,042
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 0	\$ 0	\$ 0
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 250,000	\$ 250,000	\$ 252,700
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
PSUPP	\$ 266,042	\$ 338,600	\$ 338,600
III. SUBTOTAL	\$ 1,671,666	\$ 1,815,642	\$ 1,818,342

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenBudgeted
Row Name: Pregnant Women
Column Name: Budgeted
Year: 2004
Field Note:

2. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenBudgeted
Row Name: Pregnant Women
Column Name: Budgeted
Year: 2005
Field Note:

Budget projections for the one-time, short-term grant programs for FY 2005 - 2007 are not yet available and are not included in this total.

This note applies to b., c. and d., Infants, Children, and Children with special Health Care needs

3. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2002
Field Note:

In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

Another significant change in the budget information in this year's block grant application is the inclusion of projected amounts for Local MCH Funds (\$1,009,045), Other Funds (\$2,659,241) and Program Income (\$2,813,686). Previously, Indiana has not included these estimates in our official budget submission. These amounts are reflected on Form 2, Form 3, Form 4, Form 5, and Form 10, and provide a more accurate picture of the resources that Indiana is dedicating to MCH program. In FY 2002, these local funding sources were not included in the Title V Block Grant application, but were, in fact, used to support Title V programs.

4. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2003
Field Note:

The State continued strict cost saving measures due to a shortfall in state revenue during 2002 - 2004. These included hiring freeze, early retirement incentives, employee furloughs and salary freeze, as well as increased restrictions on purchasing and contracting. As a result, ISDH MCSHC increased allocations to grantees for FY 2004 and has initiated a special one-time grant process to fund short-term projects through FY 2005-2007. These increased spending measures are projected to reduce the carryover to acceptable amounts by FY 2007 while using the money saved to build infrastructure and provide some population based services to targeted populations.

This note applies to lines b., c. and d., Infants, Children and Children with Special Healthcare Needs.

5. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Budgeted
Row Name: Infants <1 year old
Column Name: Budgeted
Year: 2005
Field Note:

See 2005 row a. above.

6. **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:

In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

Another significant change in the budget information in this year's block grant application is the inclusion of projected amounts for Local MCH Funds (\$1,009,045), Other Funds (\$2,659,241) and Program Income (\$2,813,686). Previously, Indiana has not included these estimates in our official budget submission. These amounts are reflected on Form 2, Form 3, Form 4, Form 5, and Form 10, and provide a more accurate picture of the resources that Indiana is dedicating to MCH program. In FY 2002, these local funding sources were not included in the Title V Block Grant application, but were, in fact, used to support Title V programs.

7. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2003
Field Note:

See note a. above.

8. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Budgeted
Row Name: Children 1 to 22 years old
Column Name: Budgeted
Year: 2005
Field Note:

See 2005 row a. above.

9. **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: 2003
Field Note:
See note a. above.

10. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNBudgeted
Row Name: CSHCN
Column Name: Budgeted
Year: 2005
Field Note:
See 2005 row a. above.

11. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2002
Field Note:

In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

In addition to these expenditure reductions for personnel, the Children's Special Health Care Services (CSHCS) Division centralized case application and management at their central office. This facilitated an improvement in quality assurance while allowing the closure of individual CSHCS field offices throughout the state. These office closures generated another large savings (expenditure reduction) for the state and allowed us to focus our limited resources on client services.

12. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2003
Field Note:
See note a. above.

13. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2002
Field Note:

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: IN

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.)	\$ 5,712,285	\$ 3,999,772	\$ 8,289,415	\$ 0	\$ 7,292,335	\$ 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.)	\$ 23,858,099	\$ 12,399,348	\$ 28,002,126	\$ 0	\$ 28,208,560	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,920,976	\$ 2,563,474	\$ 3,945,588	\$ 0	\$ 3,908,912	\$ 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.)	\$ 8,109,132	\$ 3,877,508	\$ 11,497,478	\$ 0	\$ 10,143,373	\$ 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.)	\$ 40,600,492	\$ 22,840,102	\$ 51,734,607	\$ 0	\$ 49,553,180	\$ 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: IN

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.)	\$ 5,086,315	\$ 4,390,448	\$ 4,964,506	\$ 5,149,125	\$ 5,617,125	\$ 4,707,448
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.)	\$ 15,422,783	\$ 23,221,456	\$ 22,712,216	\$ 20,658,038	\$ 22,991,894	\$ 13,286,243
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,957,752	\$ 2,260,485	\$ 2,549,968	\$ 2,503,177	\$ 2,231,888	\$ 2,407,077
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.)	\$ 5,563,536	\$ 5,845,787	\$ 7,029,131	\$ 5,180,625	\$ 6,329,175	\$ 5,469,072
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.)	\$ 29,030,386	\$ 35,718,176	\$ 37,255,821	\$ 33,490,965	\$ 37,170,082	\$ 25,869,840

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: DirectHCBudgeted
Row Name: Direct Health Care Services
Column Name: Budgeted
Year: 2005
Field Note:
Budget projections for the one-time, short-term grant program for FY 2005 - 2007 are not yet available and are not reflected in this budget.

This note applies to II., III. and IV., Enabling, Population-Based and Infrastructure Building services.
- 2. Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2002
Field Note:
In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

In addition to these expenditure reductions for personnel, the Children's Special Health Care Services (CSHCS) Division centralized case application and management at their central office. This facilitated an improvement in quality assurance while allowing the closure of individual CSHCS field offices throughout the state. These office closures generated another large savings (expenditure reduction) for the state and allowed us to focus our limited resources on client services.

Another significant change in the budget information in this year's block grant application is the inclusion of projected amounts for Local MCH Funds (\$1,009,045), Other Funds (\$2,659,241) and Program Income (\$2,813,686). Previously, Indiana has not included these estimates in our official budget submission. These amounts are reflected on Form 2, Form 3, Form 4, Form 5, and Form 10, and provide a more accurate picture of the resources that Indiana is dedicating to MCH program. In FY 2002, these local funding sources were not included in the Title V Block Grant application, but were, in fact, used to support Title V programs.
- 3. Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2003
Field Note:
The State continued strict cost saving measures due to a shortfall in state revenue during 2002 - 2004. These included hiring freeze, early retirement incentives, employee furloughs and salary freeze, as well as increased restrictions on purchasing and contracting. As a result, ISDH MCSHC increased allocations to grantees for FY 2004 and has initiated a special one-time grant process to fund short-term projects through FY 2005-2007. These increased spending measures are projected to reduce the carryover to acceptable amounts by FY 2007 while using the money saved to build infrastructure and provide some population based services to targeted populations.

This note applies to lines II., III. and IV., Enabling Services, Population-Based Services and Infrastructure Building Services.
- 4. Section Number:** Main
Field Name: EnablingBudgeted
Row Name: Enabling Services
Column Name: Budgeted
Year: 2005
Field Note:
See note I. for 2005 projections above.
- 5. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2002
Field Note:
In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

In addition to these expenditure reductions for personnel, the Children's Special Health Care Services (CSHCS) Division centralized case application and management at their central office. This facilitated an improvement in quality assurance while allowing the closure of individual CSHCS field offices throughout the state. These office closures generated another large savings (expenditure reduction) for the state and allowed us to focus our limited resources on client services.

Another significant change in the budget information in this year's block grant application is the inclusion of projected amounts for Local MCH Funds (\$1,009,045), Other Funds (\$2,659,241) and Program Income (\$2,813,686). Previously, Indiana has not included these estimates in our official budget submission. These amounts are reflected on Form 2, Form 3, Form 4, Form 5, and Form 10, and provide a more accurate picture of the resources that Indiana is dedicating to MCH program. In FY 2002, these local funding sources were not included in the Title V Block Grant application, but were, in fact, used to support Title V programs.
- 6. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2003
Field Note:
See note I. above.
- 7. Section Number:** Main
Field Name: PopBasedBudgeted
Row Name: Population-Based Services
Column Name: Budgeted
Year: 2005
Field Note:
See note I. for 2005 projections above.
- 8. Section Number:** Main
Field Name: PopBasedExpended

Row Name: Population-Based Services

Column Name: Expended

Year: 2003

Field Note:

See note I. above.

9. **Section Number:** Main

Field Name: InfrastrBuildBudgeted

Row Name: Infrastructure Building Services

Column Name: Budgeted

Year: 2005

Field Note:

See note I. for 2005 projections above.

10. **Section Number:** Main

Field Name: InfrastrBuildExpended

Row Name: Infrastructure Building Services

Column Name: Expended

Year: 2002

Field Note:

In response to a tightening state budget, Indiana implemented several cost-cutting measures, including early retirement incentives, a personnel furlough program, and a statewide hire freeze. These programs have been implemented for all state personnel positions, whether funded by state funds or other (Federal) funds. These measures resulted in significant expenditure reductions for both state and Federal funds, as reflected on Form 3, Form 4, and Form 5.

11. **Section Number:** Main

Field Name: InfrastrBuildExpended

Row Name: Infrastructure Building Services

Column Name: Expended

Year: 2003

Field Note:

See note I. above.

FORM 6

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

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

STATE: IN

Total Births by Occurrence: 84,744

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	84,490	99.7	6	6	6	100
Congenital Hypothyroidism	84,490	99.7	40	30	30	100
Galactosemia	84,490	99.7	2	1	1	100
Sickle Cell Disease	84,490	99.7	42	21	21	100

Other Screening (Specify)

Galactosemia (variant)	84,490	99.7	55	47	47	100
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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

Source of Data: ISDH Newborn Screening Program, ISDH Epidemiology Resource Center. 2003 ERC figures are projections.

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: BirthOccurence
Row Name: Total Births By Occurence
Column Name: Total Births By Occurence
Year: 2005
Field Note:

2. **Section Number:** Main
Field Name: Phenylketonuria_Confirmed
Row Name: Phenylketonuria
Column Name: Confirmed Cases
Year: 2005
Field Note:
Per ISDH Newborn Screening Program, all presumptive positives were confirmed cases; all confirmed cases needing treatment received treatment.

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: IN

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	21,877	52.8	3.2	36.0	8.0	
Infants < 1 year old	84,490	51.2	4.1	31.3	13.4	
Children 1 to 22 years old	45,256	25.0	1.2	27.3	46.5	
Children with Special Healthcare Needs	9,490	43.0	0.0	46.0	11.0	
Others	29,209	12.0	0.0	24.0	64.0	
TOTAL	190,322					

FORM NOTES FOR FORM 7

Source of Data: ISDH Newborn Screening Program, ISDH Epidemiology Resource Center. 2003 ERC figures are projections.

FIELD LEVEL NOTES

None

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: IN

Reporting Year: 2003

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	84,744	73,929	9,232	118	1,245	23	111	86
Title V Served	84,490	73,663	9,243	117	1,243	23	118	83
Eligible for Title XIX	21,211	18,503	2,311	30	312	6	28	21
INFANTS								
Total Infants in State	85,375	73,021	8,993	93	987	0	2,281	0
Title V Served	84,728	72,446	8,937	93	981	0	2,271	0
Eligible for Title XIX	21,277	18,198	2,241	23	246	0	569	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	78,258	6,138	348					6,138
Title V Served	78,024	6,120	346					6,120
Eligible for Title XIX	19,588	1,536	87					1,536
INFANTS								
Total Infants in State	79,386	5,636	353					5,636
Title V Served	78,784	5,594	350					5,594
Eligible for Title XIX	19,784	1,405	88					1,405

FORM NOTES FOR FORM 8

Source of Data: ISDH Newborn Screening Program, ISDH Epidemiology Resource Center. 2003 ERC figures are projections.

FIELD LEVEL NOTES

None

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: IN

1. State MCH Administration:
(max 2500 characters)

The Indiana State Department of Health (ISDH) administers the Title V grant through Maternal and Children's Special Health Care Services (MCSHCS), which resides in the Community and Family Health Services Commission (CFHSC). MCSHCS administered programs include: Prenatal Substance Use Prevention Program, Indiana Perinatal Network, Preventive and Primary Child Health Care, Indiana RESPECT (Reducing Early Sex and Pregnancy by Educating Children and Teens), Family Care Coordination, Prenatal Care Services, Prenatal Care Coordination, Adolescent Health Centers, Family Planning Services, and the Genomics Program. MCSHCS includes the state program for children with special health care needs as well as the Early Childhood Comprehensive Systems Program, the Child Care Health Consultant Program, Universal Newborn Hearing Screening, Newborn Metabolic Screening, and the Sickle Cell Program. Other programs administered by CFHSC include Immunization, Oral Health and WIC.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>12,500,265</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>5,125,941</u>
4. State Funds (Line 3, Form 2)	\$ <u>26,364,816</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>678,670</u>
6. Other Funds (Line 5, Form 2)	\$ <u>2,401,513</u>
7. Program Income (Line 6, Form 2)	\$ <u>2,481,975</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>49,553,180</u>

9. Most significant providers receiving MCH funds:

<u>Indiana Perinatal Network</u>
<u>County Health Departments, Hospitals</u>
<u>School-Based Adolescent Health Centers</u>
<u>Free-Standing Health Centers</u>

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

a. Pregnant Women	<u>21,877</u>
b. Infants < 1 year old	<u>84,490</u>
c. Children 1 to 22 years old	<u>45,256</u>
d. CSHCN	<u>9,490</u>
e. Others	<u>29,209</u>

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

During FY '03, MCSHCS used the Title V grant to fund 10 family planning projects, 5 genetics centers, 16 infant health projects, 22 prenatal care clinics, 17 child health projects, 5 school-based adolescent health grantees, 1 high risk infant follow-up program, 30 prenatal care coordination programs, 6 family care coordination programs, and 2 special projects. Of the grants issued, 65% of them provided direct health care service or direct specialty care services (genetics) to fill a need or service gap. In FY '03, Indiana University (IU) in collaboration with ISDH launched the Seal Indiana Program, a state-of-the-art mobile dental unit providing dental sealants statewide to students in Title I schools and children attending Head Start programs. Title V provides consultation and funding for personnel for the program. Services provided by SEAL INDIANA include dental sealants, examinations, x-rays, and fluoride varnish. The Free Pregnancy Test Program was reinitiated to provide to agencies working with women of childbearing age. Agencies used the tests for outreach and referred clients to appropriate prenatal care and primary care or family planning services, educational services, Medicaid, and WIC as appropriate. PSUPP (Prenatal Substance Use Prevention Program): The program began in 1988 to help pregnant women quit their cigarette habit as well as their drug and alcohol use. Statistics showed a significant decrease by women using alcohol, tobacco, or street drugs. A grant from Indiana Tobacco and Cessation doubled the number of PSUPP sites in FY '03. b. (Population-Based information added here) In FY '03, Indiana's Universal Newborn Hearing Screening Program (UNHS) implemented an audiologic evaluation report system and audiologists started reporting to ISDH on all diagnostic evaluation results. A new tracking and follow-up data system was developed to include diagnostic evaluation information on all questionable hospital screens that are referred for further diagnosis and follow-ups.

b. Population-Based Services:
(max 2500 characters)

Indiana RESPECT (Reducing Early Sex and Pregnancy by Educating Children and Teens): In FY '03 this adolescent pregnancy prevention initiative continued to fund 59 grantees to provide either sexual abstinence until marriage education or adolescent pregnancy prevention education programs. A media campaign, Sex Can Wait - I'm Worth It, concluded and in FY'04 a newly chosen ad agency will produce new creative materials for a new campaign. The Indiana Family Helpline (IFHL) is designed to assist in promoting MCSHCS, WIC and other programs and services throughout the state. The IFHL continued to provide education and referrals to callers and received a record number of calls in FY'03. The IFHL also continued to screen all callers for private insurance and Hoosier Healthwise and to refer clients that appeared to be eligible to Hoosier Healthwise. Newborn Screening Program: The program assured that 99.6% of newborns received screening for metabolic diseases. All newborns with confirmed conditions that require medical care were linked to a medical provider. As of August 2003, it was determined that by using tandem mass spectrometry, screening can be done for up to 39 conditions. All hospitals are participating in Universal Newborn Hearing Screening. The Genomics program is implementing the State Genetics Plan. As of December 2003, the Meconium Screening program had 100% of the birthing facilities participating. Indiana is chosen to participate in the Association of Maternal and Child Health Programs Action Learning Lab (ALL) on Reducing Perinatal Disparities. The ALL State Team created an Action plan that includes strategies to reduce African American perinatal disparity in the five counties identified with the largest African American population and poorest perinatal disparities. The plan includes development of a comprehensive perinatal data book for each targeted county, and technical assistance to each county to develop a county team or network to address identified county disparities. The Indiana Child Care Health Consultant Program was established in FY'03 with funding from the Family Social Services Administration. The goal of the program is to increase the level of health and safety in out-of-home child care settings across Indiana through technical assistance and training for child care providers.

c. Infrastructure Building Services:
(max 2500 characters)

Indiana Perinatal Network: IPN, an alliance of individuals and community groups committed to lowering Indiana's high infant mortality rate continued implementation of the Indiana Perinatal Systems Strategic Plan, a state-wide, community-based blueprint for action. In FY '03, the Youth Risk Behavior Survey was completed for the second time since 1991 using CDC funds. The State Adolescent Health Coordinator, with the Department of Education and grad students administered the test in 48 selected Indiana schools, resulting in a weighted sample. The Indiana data was released in May 2004. The ISDH Office of Cultural Diversity and Enrichment was created to help address the public health needs of Indiana minority groups. A two-day workshop on Cultural Competence is offered twice each month. The workshop emphasizes cultural knowledge and differences, strategies for working with different racial/ethnic populations, and the principles of interpreter services. An advanced class is available. MCHB funded the Early Childhood Comprehensive Systems grant for two years beginning in July 2003. The program will create an integrated, coordinated, comprehensive system of services for children from birth to five. The system will support ease of access to needed services, increase the utilization of appropriate services, and support the role of the family as their child's first teacher.

12. The primary Title V Program contact person:

Name Judith A. Ganser, M.D., M.P.H.
 Title Medical Director
 Address 2 North Meridian Street, Section 8C
 City Indianapolis
 State IN
 Zip 46204
 Phone (317) 233-1240
 Fax (317) 233-1300
 Email jganser@isdh.state.in.us
 Web www.state.in.us/isdh/programs/mch/

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

Name Eric J. Vermeulen, J.D.
 Title Director
 Address 2 North Meridian Street, Section 8C
 City Indianapolis
 State IN
 Zip 46204
 Phone (317) 233-7755
 Fax (317) 233-1300
 Email evermeul@isdh.state.in.us
 Web www.state.in.us/isdh/programs/cshcs/

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: IN

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	_____	_____	_____	99	99
Annual Indicator	_____	_____	_____	99.4	99.6
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	99	99	99	99	99
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	_____	_____	_____	_____	61.1
Annual Indicator	_____	_____	_____	61.1	61.1
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	63	63	65	65	67
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	_____	_____	_____	_____	55.7
Annual Indicator	_____	_____	_____	55.7	55.7
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	56	56	57	57	58
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	_____	_____	_____	_____	63.3
Annual Indicator	_____	_____	_____	63.3	63.3
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	65	65	67	67	69
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	_____	_____	_____	_____	79.5
Annual Indicator	_____	_____	_____	79.5	79.5
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	80	80	82	82	84
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	_____	_____	_____	_____	5.8
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	6	6	8	8	10
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.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>79</u>	<u>80</u>	<u>81</u>	<u>82</u>	<u>83</u>
Annual Indicator	<u>84.9</u>	<u>75.3</u>	<u>80.8</u>	<u>78.5</u>	
Numerator	<u>210,056</u>	<u>183,852</u>	<u>204,534</u>	<u>201,453</u>	
Denominator	<u>247,416</u>	<u>244,159</u>	<u>253,136</u>	<u>256,710</u>	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>80</u>	<u>81</u>	<u>82</u>	<u>83</u>	<u>84</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.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>28</u>	<u>27</u>	<u>26</u>	<u>25</u>	<u>23</u>
Annual Indicator	<u>27.4</u>	<u>26.6</u>	<u>23.7</u>	<u>22.5</u>	
Numerator	<u>3,528</u>	<u>3,357</u>	<u>3,032</u>	<u>2,931</u>	
Denominator	<u>128,629</u>	<u>126,124</u>	<u>128,140</u>	<u>130,141</u>	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>22</u>	<u>21</u>	<u>20</u>	<u>19</u>	<u>18</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	30	30	30	33	35
Annual Indicator	33.6	33.5	34.7	41.2	42.7
Numerator	27,627	29,519	28,448		
Denominator	82,223	88,116	81,984		
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	42.7	50	51	52	53
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	5.4	5.3	5.2	5.1	4
Annual Indicator	3.4	3.7	3.4	3.4	
Numerator	43	47	48	45	
Denominator	1,264,148	1,276,963	1,394,421	1,328,071	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3	3	3	3	2.5
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	61	62	63
Annual Indicator	56.3	59.8	62.6	64.9	63.9
Numerator	48,549	52,554	52,644	54,484	52,936
Denominator	86,194	87,948	84,076	83,950	82,822
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	66	67	68	69	70
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	75	95	99	99
Annual Indicator	56.5	83.9	97.0	98.0	99.7
Numerator	48,724	73,788	85,310	85,374	84,490
Denominator	86,194	87,948	87,948	87,116	84,744
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	99	99	99	99	99.5
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 # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	12	11.5	11	10.5	10
Annual Indicator	11.8	7.8	7.8	7.6	
Numerator	179,910	119,919	121,360	119,129	
Denominator	1,528,991	1,537,423	1,555,907	1,574,390	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	6	6	6	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.

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	92	80	74	83	84
Annual Indicator	72.6	82.3	82.3	82.3	
Numerator	290,203	369,144	407,780	404,455	
Denominator	400,000	448,511	495,480	491,440	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	85	86	87	88	88
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	1.3	1.3	1.3	1.2	1.2
Annual Indicator	1.5	1.4	1.4	1.4	
Numerator	1,257	1,214	1,227	1,149	
Denominator	85,489	87,697	86,122	85,107	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.3	1.3	1.3	1.3	1.2
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	7.5	7.3	7.1	6.9	8
Annual Indicator	8.1	8.7	9.0	9.1	
Numerator	36	39	41	40	
Denominator	443,779	446,558	453,482	440,239	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	8	8	8	8	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 # 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	56	56.5	57	57.5	58
Annual Indicator	53.1	54.6	53.6	56.4	
Numerator	668	663	658	664	
Denominator	1,257	1,214	1,227	1,177	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	58	59	60	61	62
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	78	78.2	78.4	80	80.2
Annual Indicator	79.5	79.4	78.8	80.5	
Numerator	67,981	69,642	67,835	68,330	
Denominator	85,489	87,697	86,122	84,839	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	80.4	80.6	80.8	81	81.2
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

Establish a system of routine data access with internal and external data sources.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective			1	2	3
Annual Indicator			2	3	4
Numerator			2	3	4
Denominator	5	5	5	5	5
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	4	5	5	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.

STATE PERFORMANCE MEASURE # 10

The rate per 10,000 for asthma hospitalizations (ICD 9 Codes: 493.0 - 493.9) among children less than five years old.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective			78.5	76.8	75.1
Annual Indicator	85.3	76.0	75.4	74.8	
Numerator	3,529	3,216	3,263	3,213	
Denominator	413,675	423,215	432,755	429,293	
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	73.3	71.6	70.9	69	67.1
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 # 11

The percent of live births to mothers who smoke.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	21	20.7	20.4	20.1	19.8
Annual Indicator	20.9	20.2	20.2	19.1	
Numerator	17,852	17,722	17,380	16,210	
Denominator	85,489	87,697	86,122	84,744	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	19.5	19	18.8	18.6	18.4
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 # 12

The percent of black women (15 through 44) with a live birth whose prenatal care visits were adequate.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective			64	65	66
Annual Indicator	63.5	60.2	63.2	61.6	
Numerator	5,870	5,671	6,023	5,694	
Denominator	9,244	9,421	9,531	9,243	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	67	68	69	70	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 # 13

The degree to which the State assures family participation in program and policy activities in the State MCH program.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective			6	10	10
Annual Indicator			8	9	10
Numerator			8	9	10
Denominator	18	18	18	18	18
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	11	12	13	14	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 # 14

The number of children (6 months to 6 years) on Medicaid screened for blood lead levels.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective			15,000	15,000	15,000
Annual Indicator			12,741	13,378	17,926
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	17,500	18,000	18,500	19,000	19,500
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 # 15

To facilitate the integration of genetics and build genetics capacity within other areas of public health.

Annual Objective and Performance Data

	1999	2000	2001	2002	2003
Annual Performance Objective			1	2	3
Annual Indicator			1	3	3
Numerator			1	3	3
Denominator	5	5	5	5	5
Is the Data Provisional or Final?				Final	

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	4	5	5	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.

FORM NOTES FOR FORM 11

None

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2005
Field Note:
Provisional figure calculated from information previously provided by ISDH NBS Program Director.
2. **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.
3. **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.
4. **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.
5. **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.
6. **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.
7. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2005
Field Note:
Figure provided by ISDH Immunization section.

Due to lower figure for last three years consecutively, objectives for 2004 and future were lowered.
8. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator: ISDH ERC. Source of denominator: USCB
9. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2005
Field Note:
Source of Percentage for 2003: ISDH Oral Health program.

Note: In the past, multiple methods have been used to find this measure, including questions on the BRFSS and in-mouth surveys. Questionnaire surveys from 2000 and 2001 and in-mouth survey from Fall 2000 were conducted. Using these three surveys, an estimate of this measure has been calculated for the 2001 figure. If the questionnaire survey is continued, data from the questionnaire will be used for future reports. Otherwise, projections based on previous information obtained will be used to calculate this measure.
10. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2005
Field Note:
Source of data: ISDH Epidemiology Resource Center.

No provisional data available yet for FY 2003 from ERC. No reliable estimate possible due to extremely small numbers for numerator.
11. **Section Number:** Performance Measure #11

Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
Source of Data: ISDH Epidemiology Resource Center.

12. **Section Number:** Performance Measure #12

Field Name: PM12
Row Name:
Column Name:
Year: 2005
Field Note:

These totals are for the calendar year and not the fiscal year.

Source of Percentage for 2003: ISDH Newborn Screening Program (provisional).

13. **Section Number:** Performance Measure #13

Field Name: PM13
Row Name:
Column Name:
Year: 2005
Field Note:

For FY2001 and forward, Source of data is IOMPP and Census Bureau Data, Current Population Survey. A three year average is used because of the large variability of this item from year to year. The numerator is a calculated value.

14. **Section Number:** Performance Measure #14

Field Name: PM14
Row Name:
Column Name:
Year: 2005
Field Note:

Source of data: Indiana Office of Medicaid Policy and Planning.

15. **Section Number:** Performance Measure #15

Field Name: PM15
Row Name:
Column Name:
Year: 2005
Field Note:

All data are for the calendar year and not the fiscal year.

Source of Numerator and Denominator: Indiana Birth Records, ISDH Epidemiology Resource Center. Percentage actually 1.38 (application program rounds up to 1.4).

16. **Section Number:** Performance Measure #16

Field Name: PM16
Row Name:
Column Name:
Year: 2005
Field Note:

All data are for the calendar year and not the fiscal year.

Source of Numerator and Denominator: Indiana Birth Records, ISDH Epidemiology Resource Center.

17. **Section Number:** Performance Measure #17

Field Name: PM17
Row Name:
Column Name:
Year: 2005
Field Note:

All data are for the calendar year and not the fiscal year.

Source of Numerator and Denominator: Indiana Birth Records, ISDH Epidemiology Resource Center.

The numerator is total number of occurrent births of Very Low Birth Weight at hospitals who have self-declared their status as a level 3 hospital. Although Indiana does not have a formal perinatal system in place, the Indiana Perinatal Network conducted a new survey in FY 2001 which requested that hospitals identify their level according to established standards. The denominator is the total occurrent births of Very Low Birth Weight.

18. **Section Number:** Performance Measure #18

Field Name: PM18
Row Name:
Column Name:
Year: 2005
Field Note:

All data are for the calendar year and not the fiscal year.

Source of Numerator and Denominator: Indiana Birth Records, ISDH Epidemiology Resource Center.

19. **Section Number:** State Performance Measure #9

Field Name: SM9
Row Name:
Column Name:
Year: 2005
Field Note:

For 2003 the figure is based on the previous five-part scale of data access measures. This scale is anticipated to be modified during the next fiscal year to align it with the HSCI as listed in Form 19.

20. **Section Number:** State Performance Measure #10

Field Name: SM10
Row Name:
Column Name:
Year: 2005
Field Note:

Source of Numerator: ERC.

Source of Denominator: ERC.

Rate calculated based on trend analysis as current information unavailable from discharge records.

21. **Section Number:** State Performance Measure #11

Field Name: SM11

Row Name:

Column Name:

Year: 2005

Field Note:

Source of data: ERC. Data for 2003 unavailable.

22. Section Number: State Performance Measure #12

Field Name: SM12

Row Name:

Column Name:

Year: 2005

Field Note:

Source of data: ERC. Data for 2003 unavailable.

23. Section Number: State Performance Measure #13

Field Name: SM13

Row Name:

Column Name:

Year: 2005

Field Note:

The six characteristics documenting family participation in MCH programs are as follows, graded on a scale of 0-3, with 0 being not met, 1 being partially met, 2 being mostly met and 3 being completely met:

1. Family members participate on advisory committees or task forces and are offered training, mentoring, and reimbursement when appropriate. Score: 2.

2. Financial support (grants, technical assistance, travel, child care) is offered for parent activities or parent groups. Score: 1.

3. Family members are involved in MCH services block grant application process. Score: 1.

4. Family members are involved in inservice training of MCH staff and providers. Score: 1.

5. Family members are hired as paid staff or consultants to the State MCH program (hired for expertise as a family member). Score: 2.

6. Family members of diverse cultures are involved in all of the above activities. Score: 3.

Total score: 10

24. Section Number: State Performance Measure #14

Field Name: SM14

Row Name:

Column Name:

Year: 2005

Field Note:

Source of data: Indiana LEAD program.

25. Section Number: State Performance Measure #15

Field Name: SM15

Row Name:

Column Name:

Year: 2005

Field Note:

The measure for the facilitation of the genetics integration and capacity building is to achieve at least one of the following five objectives each year over five years. As of 2003, the ISDH genetics program has achieved success in three of the five areas and has begun work on the remaining two. The needs assessment will be completed in FY04, and the final report on the feasibility of integration with various public health systems will be completed no later than FY05.

1. Conduct a needs assessment of genetic services.

2. Develop a state genetics plan.

3. Implement the state genetics plan.

4. Ascertain the feasibility of integrating various public health information systems to improve the quality of birth defects surveillance.

5. Develop educational materials for genetic conditions and services.

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

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

	Annual Objective and Performance Data				
	1999	2000	2001	2002	2003
Annual Performance Objective	7.4	7.3	7.2	7.1	7
Annual Indicator	7.8	7.7	7.6	7.6	7.5
Numerator	671	676	652	649	635
Denominator	85,489	87,697	86,122	84,839	84,744
Is the Data Provisional or Final?				Final	Provisional

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	7.5	7.4	7.3	7.2	7.1
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.

	Annual Objective and Performance Data				
	1999	2000	2001	2002	2003
Annual Performance Objective	2.6	2.5	2.4	2.3	2.2
Annual Indicator	2.5	2.4	2.0	2.4	
Numerator	16.984	15.9	13.6	15.5	
Denominator	6.765	6.66	6.8	6.5	
Is the Data Provisional or Final?				Final	

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	2.1	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	4.9	4.8	4.7	4.6
Annual Indicator	5.2	5.2	4.8	5.2	
Numerator	441	454	414	441	
Denominator	85,489	87,697	86,122	84,839	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	4.5	4.4	4.3	4.2	4.1
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	2.4	2.3	2.2	2.1	2
Annual Indicator	2.7	2.5	2.8	2.5	
Numerator	230	222	238	208	
Denominator	85,489	87,697	86,122	84,839	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	2.4	2.3	2.2	2.1	2
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	9.7	9.6	9.5	9.4	8
Annual Indicator	6.9	7.4	7.1	7.1	
Numerator	594	655	618	607	
Denominator	85,988	88,293	86,701	85,374	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	7.5	7	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 # 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	25	24	23	22	21
Annual Indicator	27.5	25.5	21.8	22.6	
Numerator	325	305	267	279	
Denominator	1,181,191	1,195,585	1,225,387	1,236,386	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	20	19	18	17	16
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

None

FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 1
Field Name: OM01
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator and denominator: Indiana Birth and Death Records, ISDH Epidemiology Resource Center.
2. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator and denominator: Indiana Birth and Death Records, ISDH Epidemiology Resource Center. FY2002 data is most current available.
3. **Section Number:** Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator and denominator: Indiana Birth and Death Records, ISDH Epidemiology Resource Center. FY2002 is most current data available.
4. **Section Number:** Outcome Measure 4
Field Name: OM04
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator and denominator: Indiana Birth and Death Records, ISDH Epidemiology Resource Center. FY2002 is most current data available.
5. **Section Number:** Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator and denominator: Indiana Birth and Death Records, ISDH Epidemiology Resource Center. FY2002 is most current data available.
6. **Section Number:** Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2005
Field Note:
FY2001 data corrected after actual total population figures received for ages 1-14. Source of corrected data: ISDH ERC.

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

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

3

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

2

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.

3

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).

3

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

3

Total Score: 16

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: IN 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. To improve pregnancy outcomes especially Infant Mortality, Fetal Deaths, and Low Birth Weight and decrease disparities.
2. To lower high risk pregnancy and adolescent pregnancy rates.
3. To reduce barriers to delivery of health and dental care to pregnant women, infants, children, children with special health care needs, adolescents and women.
4. To build and strengthen systems of family support and family involvement that will assist families in seeking and receiving health and social services, including families with children with special health care needs
5. To reduce environmentally related health conditions like lead poisoning, asthma and injury in all infants and children.
6. To decrease tobacco use in Indiana.
7. To promote systems that allow for early identification and tracking of children with special health care needs and that enhance the provision of services to them.
8. To lower risk behaviors in adolescents.
9. To increase immunization rates.
10. To decrease obesity in Indiana.

FORM NOTES FOR FORM 14

Unchanged in 2004.

FIELD LEVEL NOTES

None

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

STATE: IN

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>	Bright Futures whos mission is to improve the health and well-being of infants, children, and adolescents. Technical assistance is needed for Mental Health, Oral Health, Nutrition, and Physical Activity.	Bright Futures suggest using the Content Experts for training and Technical Assistance under a privately negotiated fee arrangements as suggested on their Web-Site.	Mary Froelhle, PH.D. for Mental Health, Katrina Holt, MPH , MS, RD. for Nutrition and Physical Activity, and the content Expert for Oral Health is unknown at this time.
2.	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>			
3.	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>			
4.	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>			
5.	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>			
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

No request in 2004.

FIELD LEVEL NOTES

None

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

SP # 9

PERFORMANCE MEASURE:

Establish a system of routine data access with internal and external data sources.

STATUS:

Active

GOAL

To assure the timely collection of performance measure, health status indicator and other necessary data from multiple data sources.

DEFINITION

Full data access is defined for each of the five areas in the note to this performance measure. This measure will range from 0 to 5, indicating the number of the areas where full data access has been achieved.

Numerator:

N/A

Denominator:

N/A

Units: 5 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Indiana MCHS, CSHCS, Office of Medicaid Policy and Planning, Indiana Health and Hospital Association.

SIGNIFICANCE

For some time, Indiana has had difficulty collecting information for some measures and indicators. For many of the measures listed above, either no information, or estimated information has been provided in the past. To properly track the performance of Indiana MCHS, these data problems must be resolved.

SP # 10

PERFORMANCE MEASURE:

The rate per 10,000 for asthma hospitalizations (ICD 9 Codes: 493.0 - 493.9) among children less than five years old.

STATUS:

Active

GOAL

To reduce asthma hospitalizations among children less than five years old.

DEFINITION

Numerator:

Number of resident asthma (ICD 9 Codes: 493.0 - 493.9) hospital discharges for children less than five years old.

Denominator:

Estimate of all children less than five years old in the state.

Units: 10000 **Text:** Rate per 10,000

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Numerator: Hospital discharge data from the Indiana Health and Hospital Association. Denominator: Census estimates.

SIGNIFICANCE

Please see Core Health Status Indicator 1. Indiana has chosen to use the indicator as a performance measure because of the critical importance of asthma as the primary cause of hospitalization for children.

SP # 11

PERFORMANCE MEASURE:

The percent of live births to mothers who smoke.

STATUS:

Active

GOAL

To reduce the prevalence of smoking in mothers.

DEFINITION

Numerator:

Number of live births to mothers who smoke.

Denominator:

Number of live births.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Numerator and Denominator: Indiana Birth Records. These definitions will not include women whose pregnancy ends in fetal demise or miscarriage.

SIGNIFICANCE

This measure is an attempt at measuring the impact of public health activities at reducing the prevalence of smoking among pregnant women. Smoking during pregnancy leads to low birth weight and increased risk of infant death in the first year of life. Smoking cessation in the whole population is an ISDH priority.

SP # 12

PERFORMANCE MEASURE:

The percent of black women (15 through 44) with a live birth whose prenatal care visits were adequate.

STATUS:

Active

GOAL

To increase the adequacy of prenatal care for black mothers in Indiana.

DEFINITION

Numerator:

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

Denominator:

Total number of black women (15 through 44) with a live birth.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Numerator and Denominator: Indiana Birth Records. These definitions will not include women whose pregnancy ends in fetal demise or miscarriage. Early, quality prenatal care can help to significantly reduce perinatal mortality and morbidity. The proportion of mothers with inadequate care among Blacks and Hispanics was more than twice that among whites throughout the 1990's. Only White adult (20 years and older) mothers achieved the goal of 90% initiating prenatal care in the first trimester as set by Healthy People 2010.

SIGNIFICANCE

There is a large disparity between black and white women in Indiana in the adequacy of prenatal care received.

SP # 13

PERFORMANCE MEASURE:

The degree to which the State assures family participation in program and policy activities in the State MCH program.

STATUS:

Active

GOAL

To ensure family participation in program and policy activities in the State MCH program.

DEFINITION

In the note for this measure is a checklist of 6 characteristics that documents family participation. This checklist will be used to measure the degree to which the characteristics of the State MCH program have been implemented. The checklist is essentially the same checklist used for performance measure 14. The measure ranges from 0 to 18.

Numerator:

N/A

Denominator:

N/A

Units: 18 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The State MCH program.

SIGNIFICANCE

The role of families as advisors and participants in policy-making activities is vital. The Omnibus Budget Reconciliation Act of 1989 (OBRA '89) created the legislative mandate that health programs supported by MCHB would provide and promote family centered, community based, coordinated care.

SP # 14

PERFORMANCE MEASURE:

The number of children (6 months to 6 years) on Medicaid screened for blood lead levels.

STATUS:

Active

GOAL

To reduce the prevalence of blood lead levels exceeding 10 micrograms/deciliter in children aged 6 months through 6 years.

DEFINITION

On Medicaid is defined as the number of children on Medicaid at any time during the year.

Numerator:

N/A

Denominator:

N/A

Units: Text: Number of Children

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Childhood Lead Poisoning Prevention Program's database. The database is maintained by using the CDC software STELLAR. Marion County Health Department and the Vanderburgh County Health Department each maintain a lead database for their geographical area and transmit to the State's database files. In Yr. 2000, the program will be submitting Indiana's Lead Poisoning database to the National Childhood Surveillance Database maintained by CDC.

SIGNIFICANCE

It is a significant state performance measure in the growth and development of young children. Lead is highly toxic, especially to young children. It can harm a child's brain, kidneys, bone marrow and other body systems. Lead poisoning is a completely preventable disease.

SP # 15

PERFORMANCE MEASURE:

To facilitate the integration of genetics and build genetics capacity within other areas of public health.

STATUS:

Active

GOAL

To increase the integration of genetics and genetics capacity in other areas of public health.

DEFINITION

Numerator:

N/A

Denominator:

N/A

Units: 5 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

State birth and death certificates, BRFSS data, and regional genetics project data.

SIGNIFICANCE

Recent advances in genetics knowledge and technologies have changed the face of genetics health care and public health. Nearly all human diseases have at least some genetic component, and specific gene variants have now been linked with chronic diseases, such as cancer, cardiovascular disease, and diabetes. Chronic Diseases, Genetics, and other public health programs must now collaborate in order to provide optimal services.

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: IN

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	<u>85.3</u>	<u>76.0</u>	<u>75.4</u>	<u>37.1</u>	<u> </u>
Numerator	<u>3,529</u>	<u>3,216</u>	<u>3,263</u>	<u>1,591</u>	<u> </u>
Denominator	<u>413,675</u>	<u>423,215</u>	<u>432,755</u>	<u>429,345</u>	<u> </u>
Is the Data Provisional or Final?				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	<u>70.7</u>	<u>69.8</u>	<u>70.2</u>	<u>70.2</u>	<u>72.1</u>
Numerator	<u>49,121</u>	<u>52,078</u>	<u>54,783</u>	<u>55,686</u>	<u>58,251</u>
Denominator	<u>69,494</u>	<u>74,576</u>	<u>78,040</u>	<u>79,325</u>	<u>80,791</u>
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	<u>56.9</u>	<u>62.9</u>	<u>53.8</u>	<u>37.5</u>	<u>59.0</u>
Numerator	<u>70</u>	<u>168</u>	<u>565</u>	<u>605</u>	<u>1,662</u>
Denominator	<u>123</u>	<u>267</u>	<u>1,050</u>	<u>1,613</u>	<u>2,817</u>
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	<u>75.2</u>	<u>72.4</u>	<u>74.1</u>	<u>73.5</u>	<u> </u>
Numerator	<u>64,288</u>	<u>63,493</u>	<u>63,816</u>	<u>62,221</u>	<u> </u>
Denominator	<u>85,489</u>	<u>87,697</u>	<u>86,122</u>	<u>84,654</u>	<u> </u>
Is the Data Provisional or Final?				Provisional	

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>28.4</u>	<u>39.4</u>	<u>42.1</u>	<u>46.6</u>	<u>46.1</u>
Numerator	<u>41,099</u>	<u>50,274</u>	<u>58,243</u>	<u>65,709</u>	<u>66,880</u>
Denominator	<u>144,666</u>	<u>127,494</u>	<u>138,284</u>	<u>141,006</u>	<u>145,088</u>
Is the Data Provisional or Final?				Final	Provisional

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>10.2</u>	<u>11.6</u>	<u>14.2</u>	<u>15.5</u>	<u>16.4</u>
Numerator	<u>1,496</u>	<u>1,701</u>	<u>2,092</u>	<u>2,277</u>	<u>2,409</u>
Denominator	<u>14,690</u>	<u>14,690</u>	<u>14,690</u>	<u>14,690</u>	<u>14,690</u>
Is the Data Provisional or Final?				Final	Provisional

FORM NOTES FOR FORM 17

HSCI 01:

Source of Numerator: ERC.
Source of Denominator: ERC.

Rate calculated based on trend analysis as current information unavailable from discharge records.

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2005

Field Note:

Source of Numerator & Denominator: Medical Epidemiologist for Chronic Diseases.

Previous years' figures were overstated due to Indiana Health and Hospital Corporation reporting that included duplicates.

2. **Section Number:** Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2005

Field Note:

Source of Numerator & Denominator: Office of Medicaid Policy & Planning.

3. **Section Number:** Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2005

Field Note:

Source of Numerator & Denominator: Office of Medicaid Policy & Planning. Figures for 2002 are being checked for accuracy by OMPP.

4. **Section Number:** Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2005

Field Note:

This value is calculated from birth certificate records by ISDH's Epidemiology Center using a SAS program, as the actual numerator is unavailable. The actual numerator is then calculated from the denominator and the percentage.

Provisional indicator calculated for 2003 based on multi-year data.

5. **Section Number:** Health Systems Capacity Indicator #07

Field Name: HSC07

Row Name:

Column Name:

Year: 2005

Field Note:

Source of Numerator & Denominator: Office of Medicaid Policy & Planning.

6. **Section Number:** Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2005

Field Note:

Source of denominator: Estimate provided by Social Security Administration.

Source of numerator: Provisional data, CSHCN Program.

Due to changes in both SSA's and CSHCN's databases, the figures as provided will be maintained for another year to better ensure accuracy.

Provisional FY2003 indicator is a projection based on multi-year data.

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

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	Other	<u>9.5</u>	<u>6.3</u>	<u>7.3</u>
b) <i>Infant deaths per 1,000 live births</i>	2002	Other	<u>8.7</u>	<u>6.2</u>	<u>7.6</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2002	Other	<u>70.6</u>	<u>65.6</u>	<u>80.5</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	Other	<u>68.9</u>	<u>75.5</u>	<u>73.5</u>

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

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>	2003	<u>150</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>19</u>) (Age range _____ to _____) (Age range _____ to _____)	2003	<u>150</u> _____ _____
c) <i>Pregnant Women</i>	2003	<u>150</u>

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

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>	2003	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>19</u>) (Age range _____ to _____) (Age range _____ to _____)	2003	<u>200</u> _____ _____
c) <i>Pregnant Women</i>	2003	<u>200</u>

FORM NOTES FOR FORM 18

See individual notes for Medicaid population.

FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - SCHIP

Field Name: SCHIP_Women

Row Name: Pregnant Women

Column Name:

Year: 2005

Field Note:

Note: 200% for pregnant women age 19 or less only.

2. **Section Number:** Indicator 05

Field Name: LowBirthWeight

Row Name: Percent of ow birth weight (<2,500 grams)

Column Name:

Year: 2005

Field Note:

Source of percentage data (total): ISDH Epidemiology Resource Center.

Information to compare the Medicaid to the non-Medicaid population is not available. ISDH is still working on an MOU with the OMPP to obtain this information. Estimate from OMPP used.

3. **Section Number:** Indicator 05

Field Name: InfantDeath

Row Name: Infant deaths per 1,000 live births

Column Name:

Year: 2005

Field Note:

Source of percentage data (total): ISDH Epidemiology Resource Center.

Information to compare the Medicaid to the non-Medicaid population is not available. ISDH is still working on an MOU with the OMPP to obtain this information. Estimate from OMPP used.

4. **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:

Source of percentage data (total): ISDH Epidemiology Resource Center.

Information to compare the Medicaid to the non-Medicaid population is not available. ISDH is still working on an MOU with the OMPP to obtain this information. Estimate from OMPP used.

5. **Section Number:** Indicator 05

Field Name: AdequateCare

Row Name: Percent of pregnant women with adequate prenatal care

Column Name:

Year: 2005

Field Note:

Source of percentage data (total): ISDH Epidemiology Resource Center.

Information to compare the Medicaid to the non-Medicaid population is not available. ISDH is still working on an MOU with the OMPP to obtain this information. Estimate from OMPP used.

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

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	1	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	2	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	2	No
Annual birth defects surveillance system	3	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: IN

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:		

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)	2	Yes
WIC Program Data	2	No
Other:		

*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

Significant progress has been made in 5 of 7 areas, achieving 15 of 21 points on the data access scale.

FIELD LEVEL NOTES

None

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

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	<u>7.8</u>	<u>7.3</u>	<u>7.6</u>	<u>7.6</u>	<u> </u>
Numerator	<u>6,689</u>	<u>6,444</u>	<u>6,559</u>	<u>6,445</u>	<u> </u>
Denominator	<u>85,489</u>	<u>87,697</u>	<u>86,122</u>	<u>84,839</u>	<u> </u>
Is the Data Provisional or Final?				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	<u>6.2</u>	<u>5.8</u>	<u>7.6</u>	<u>7.6</u>	<u> </u>
Numerator	<u>5,124</u>	<u>4,953</u>	<u>6,559</u>	<u>6,445</u>	<u> </u>
Denominator	<u>82,702</u>	<u>85,018</u>	<u>86,122</u>	<u>84,839</u>	<u> </u>
Is the Data Provisional or Final?				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	<u>1.5</u>	<u>1.4</u>	<u>1.4</u>	<u>1.4</u>	<u> </u>
Numerator	<u>1,257</u>	<u>1,214</u>	<u>1,227</u>	<u>1,178</u>	<u> </u>
Denominator	<u>85,489</u>	<u>87,697</u>	<u>86,122</u>	<u>84,839</u>	<u> </u>
Is the Data Provisional or Final?				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	<u>1.1</u>	<u>1.1</u>	<u>1.1</u>	<u>1.1</u>	<u> </u>
Numerator	<u>928</u>	<u>913</u>	<u>896</u>	<u>933</u>	<u> </u>
Denominator	<u>82,702</u>	<u>85,018</u>	<u>83,330</u>	<u>84,839</u>	<u> </u>
Is the Data Provisional or Final?				Provisional	

HEALTH STATUS INDICATOR MEASURE # 03A

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

	1999	2000	Annual Indicator Data		2003
			2001	2002	
Annual Indicator	10.0	11.4	11.5	12.9	
Numerator	127	145	160	171	
Denominator	1,264,148	1,276,963	1,394,421	1,328,071	
Is the Data Provisional or Final?				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.

	1999	2000	Annual Indicator Data		2003
			2001	2002	
Annual Indicator	3.4	3.7	3.4	3.4	
Numerator	43	47	48	45	
Denominator	1,264,148	1,276,963	1,394,421	1,328,071	
Is the Data Provisional or Final?				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.

	1999	2000	Annual Indicator Data		2003
			2001	2002	
Annual Indicator	27.1	26.2	28.0	27.9	
Numerator	228	227	246	250	
Denominator	841,333	866,188	879,213	895,477	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 04A

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

	1999	2000	Annual Indicator Data		2003
			2001	2002	
Annual Indicator			3.7	3.7	
Numerator			51	49	
Denominator			1,394,421	1,328,071	
Is the Data Provisional or Final?				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		2003
			2001	2002	
Annual Indicator			3.1	3.1	
Numerator			43	41	
Denominator			1,394,421	1,328,071	
Is the Data Provisional or Final?				Provisional	

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		2003
			2001	2002	
Annual Indicator			24.1	24.1	
Numerator			212	216	
Denominator			879,213	895,477	
Is the Data Provisional or Final?				Provisional	

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		2003
			2001	2002	
Annual Indicator	18.5	21.7	23.8	23.8	
Numerator	4,006	4,715	5,263	5,115	
Denominator	216,787	217,361	220,760	214,923	
Is the Data Provisional or 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		2003
			2001	2002	
Annual Indicator	4.6	5.7	7.1	7.1	
Numerator	5,034	6,202	7,825	7,792	
Denominator	1,101,939	1,092,056	1,103,245	1,097,449	
Is the Data Provisional or Final?				Provisional	

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #01A
Field Name: HSI01A
Row Name:
Column Name:
Year: 2005
Field Note:
Source of data: ISDH Epidemiology Resource Center.
2. **Section Number:** Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2005
Field Note:
Source of data: ISDH Epidemiology Resource Center.
3. **Section Number:** Health Status Indicator #02A
Field Name: HSI02A
Row Name:
Column Name:
Year: 2005
Field Note:
Source of data: ISDH Epidemiology Resource Center.
4. **Section Number:** Health Status Indicator #02B
Field Name: HSI02B
Row Name:
Column Name:
Year: 2005
Field Note:
Source of data: ISDH Epidemiology Resource Center.
5. **Section Number:** Health Status Indicator #03A
Field Name: HSI03A
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator: ISDH Epidemiology Resource Center.
Source of denominator: US Census Bureau.
6. **Section Number:** Health Status Indicator #03B
Field Name: HSI03B
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator: ISDH Epidemiology Resource Center.
Source of denominator: US Census Bureau.
7. **Section Number:** Health Status Indicator #03C
Field Name: HSI03C
Row Name:
Column Name:
Year: 2005
Field Note:
Source of numerator: ISDH Epidemiology Resource Center .
Source of denominator: US Census Bureau.
8. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2005
Field Note:
Source of Denominator: U.S. Census Bureau.
ISDH Epidemiology Resource Center is working on getting additional information regarding hospital discharges to update historical figures. Source of Projection for FY2002
Numerator: Indiana Hospital Discharge data, ISDH Epidemiology Resource Center.
9. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2005
Field Note:
Source of Denominator: U.S. Census Bureau.
ISDH Epidemiology Resource Center is working on getting additional information regarding hospital discharges to update historical figures. Source of Projection for FY2002
Numerator: Indiana Hospital Discharge data, ISDH Epidemiology Resource Center.
10. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2005
Field Note:
Source of Denominator: U.S. Census Bureau.
ISDH Epidemiology Resource Center is working on getting additional information regarding hospital discharges to update historical figures. Source of Projection for FY2002
Numerator: Indiana Hospital Discharge data, ISDH Epidemiology Resource Center.
11. **Section Number:** Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2005

Field Note:

Source of Numerator: ISDH HIV/STD Program.

Source of Denominator: US Census Bureau.

12. **Section Number:** Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2005

Field Note:

Source of Numerator: ISDH HIV/STD Program.

Source of Denominator: US Census Bureau.

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

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? Yes

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	85,107	72,791	8,965	_____	_____	_____	_____	3,351
Children 1 through 4	344,238	292,299	37,475	_____	_____	_____	_____	14,464
Children 5 through 9	438,443	374,542	48,189	_____	_____	_____	_____	15,712
Children 10 through 14	460,283	396,790	50,048	_____	_____	_____	_____	13,445
Children 15 through 19	440,239	384,938	42,912	_____	_____	_____	_____	12,389
Children 20 through 24	455,238	398,867	42,402	_____	_____	_____	_____	13,969
Children 0 through 24	2,223,548	1,920,227	229,991	0	0	0	0	73,330

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	79,465	5,642	_____
Children 1 through 4	322,083	22,155	_____
Children 5 through 9	414,794	23,649	_____
Children 10 through 14	440,170	20,113	_____
Children 15 through 19	421,975	18,264	_____
Children 20 through 24	428,937	26,301	_____
Children 0 through 24	2,107,424	116,124	0

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

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: 2002 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	131	72	58					1
Women 15 through 17	2,931	2,240	655					36
Women 18 through 19	6,639	5,461	1,129					49
Women 20 through 34	66,447	58,449	6,753					1,245
Women 35 or older	8,683	7,785	648					250
Women of all ages	84,831	74,007	9,243	0	0	0	0	1,581

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	121	9	1
Women 15 through 17	2,707	212	12
Women 18 through 19	6,134	481	24
Women 20 through 34	61,367	4,813	267
Women 35 or older	8,017	630	36
Women of all ages	78,346	6,145	340

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

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: 2002 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	649	479	144	1	9	2		14
Children 1 through 4	120	96	20	0	1	0		3
Children 5 through 9	75	64	10	0	0	0		1
Children 10 through 14	84	70	12	0	1	0		1
Children 15 through 19	322	274	41	0	3	0		4
Children 20 through 24	423	334	82	0	1	1		5
Children 0 through 24	1,673	1,317	309	1	15	3	0	28

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	596	49	4
Children 1 through 4	102	18	0
Children 5 through 9	74	1	0
Children 10 through 14	79	5	0
Children 15 through 19	307	14	1
Children 20 through 24	397	25	1
Children 0 through 24	1,555	112	6

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

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	1,768,310	1,521,360.0	187,589.0					59,361.0	2002
Percent in household headed by single parent	22.0								2001
Percent in TANF (Grant) families	4.2	44.0	44.9	0.1	0.1		9.3	0.5	2001
Number enrolled in Medicaid	550,871	397,042.0	144,258.0	376.0	2,162.0			7,033.0	2003
Number enrolled in SCHIP	216,933	112,976.0	82,701.0	19,531.0	432.0	58.0		1,235.0	2003
Number living in foster home care	4,483	2,688.0	1,534.0	57.0	11.0		177.0	16.0	2001
Number enrolled in food stamp program	227,352	143,361.0	81,141.0	197.0	450.0			2,203.0	2001
Number enrolled in WIC	154,796	112,933.0	33,416.0	261.0	282.0	1,038.0		6,866.0	2003
Rate (per 100,000) of juvenile crime arrests	11,030.0	6,915.0	3,929.0	5.0	19.0			4.0	2003
Percentage of high school drop-outs (grade 9 through 12)	2.3	1.7	0.4	0	0			0	2002

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	1,678,487.0	89,823.0		2002
Percent in household headed by single parent			22.0	2001
Percent in TANF (Grant) families	99.0	1.0		2001
Number enrolled in Medicaid	550,871.0	52,098.0	7,033.0	2003
Number enrolled in SCHIP	103,957.0	9,019.0	1,235.0	2003
Number living in foster home care	4,228.0	255.0		2001
Number enrolled in food stamp program	227,606.0	14,825.0		2001
Number enrolled in WIC	154,796.0	26,423.0		2003
Rate (per 100,000) of juvenile crime arrests				2003
Percentage of high school drop-outs (grade 9 through 12)	2.1	0.1		2002

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

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? Yes

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	1,150,956
Living in urban areas	1,271,549
Living in rural areas	496,761
Living in frontier areas	0
Total - all children 0 through 19	1,768,310

Note:

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

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

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

Reporting Year: 2002 Is this data from a State Projection? Yes

POVERTY LEVELS	TOTAL
Total Population	100.0
Percent Below: 50% of poverty	4.2
100% of poverty	9.5
200% of poverty	25.7

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

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: 2002 Is this data from a State Projection? Yes

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	100.0
Percent Below: 50% of poverty	3.8
100% of poverty	12.8
200% of poverty	22.5

FORM NOTES FOR FORM 21

Source of data (unless otherwise noted): ISDH Epidemiology Resource Center.

FIELD LEVEL NOTES

1. **Section Number:** Indicator 06A
Field Name: S06_Race_Infants
Row Name: Infants 0 to 1
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black.
2. **Section Number:** Indicator 06A
Field Name: S06_Race_Children1to4
Row Name: children 1 through 4
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black.
3. **Section Number:** Indicator 06A
Field Name: S06_Race_Children5to9
Row Name: children 5 through 9
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black.
4. **Section Number:** Indicator 06A
Field Name: S06_Race_Children10to14
Row Name: children 10 through 14
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black.
5. **Section Number:** Indicator 06A
Field Name: S06_Race_Children15to19
Row Name: children 15 through 19
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black.
6. **Section Number:** Indicator 06A
Field Name: S06_Race_Children20to24
Row Name: children 20 through 24
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black.
7. **Section Number:** Indicator 06B
Field Name: S06_Ethnicity_Infants
Row Name: Infants 0 to 1
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
8. **Section Number:** Indicator 06B
Field Name: S06_Ethnicity_Children1to4
Row Name: children 1 through 4
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
9. **Section Number:** Indicator 06B
Field Name: S06_Ethnicity_Children5to9
Row Name: children 5 through 9
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
10. **Section Number:** Indicator 06B
Field Name: S06_Ethnicity_Children10to14
Row Name: children 10 through 14
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
11. **Section Number:** Indicator 06B
Field Name: S06_Ethnicity_Children15to19
Row Name: children 15 through 19
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
12. **Section Number:** Indicator 06B
Field Name: S06_Ethnicity_Children20to24
Row Name: children 20 through 24

Column Name:

Year: 2005

Field Note:

Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

13. **Section Number:** Indicator 07A
Field Name: Race_Women15
Row Name: Women < 15
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black races, including more than one race reported. Other data not reported separately.
14. **Section Number:** Indicator 07A
Field Name: Race_Women15to17
Row Name: Women 15 through 17
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black races, including more than one race reported. Other data not reported separately.
15. **Section Number:** Indicator 07A
Field Name: Race_Women18to19
Row Name: Women 18 through 19
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black races, including more than one race reported. Other data not reported separately.
16. **Section Number:** Indicator 07A
Field Name: Race_Women20to34
Row Name: Women 20 through 34
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black races, including more than one race reported. Other data not reported separately.
17. **Section Number:** Indicator 07A
Field Name: Race_Women35
Row Name: Women 35 or older
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center. Data for "Other/Unknown" includes all non-white and non-black races, including more than one race reported. Other data not reported separately.
18. **Section Number:** Indicator 07B
Field Name: Ethnicity_Women15
Row Name: Women < 15
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

Ethnicity not reported distributed based on reported percentages.
19. **Section Number:** Indicator 07B
Field Name: Ethnicity_Women15to17
Row Name: Women 15 through 17
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

Ethnicity not reported distributed based on reported percentages.
20. **Section Number:** Indicator 07B
Field Name: Ethnicity_Women18to19
Row Name: Women 18 through 19
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

Ethnicity not reported distributed based on reported percentages.
21. **Section Number:** Indicator 07B
Field Name: Ethnicity_Women20to34
Row Name: Women 20 through 34
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

Ethnicity not reported distributed based on reported percentages.
22. **Section Number:** Indicator 07B
Field Name: Ethnicity_Women35
Row Name: Women 35 or older
Column Name:
Year: 2005

Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

Ethnicity not reported distributed based on reported percentages.

23. **Section Number:** Indicator 08A
Field Name: S08_Race_Infants
Row Name: Infants 0 to 1
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

"More Than One Race Reported" included in "Other and Unknown"
24. **Section Number:** Indicator 08A
Field Name: S08_Race_Children1to4
Row Name: children 1 through 4
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

"More Than One Race Reported" included in "Other and Unknown"
25. **Section Number:** Indicator 08A
Field Name: S08_Race_Children5to9
Row Name: children 5 through 9
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

"More Than One Race Reported" included in "Other and Unknown"
26. **Section Number:** Indicator 08A
Field Name: S08_Race_Children10to14
Row Name: children 10 through 14
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

"More Than One Race Reported" included in "Other and Unknown"
27. **Section Number:** Indicator 08A
Field Name: S08_Race_Children15to19
Row Name: children 15 through 19
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

"More Than One Race Reported" included in "Other and Unknown"
28. **Section Number:** Indicator 08A
Field Name: S08_Race_Children20to24
Row Name: children 20 through 24
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

"More Than One Race Reported" included in "Other and Unknown"
29. **Section Number:** Indicator 08B
Field Name: S08_Ethnicity_Infants
Row Name: Infants 0 to 1
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
30. **Section Number:** Indicator 08B
Field Name: S08_Ethnicity_Children1to4
Row Name: children 1 through 4
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
31. **Section Number:** Indicator 08B
Field Name: S08_Ethnicity_Children5to9
Row Name: children 5 through 9
Column Name:
Year: 2005
Field Note:
Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.
32. **Section Number:** Indicator 08B
Field Name: S08_Ethnicity_Children10to14
Row Name: children 10 through 14
Column Name:
Year: 2005
Field Note:

Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

33. Section Number: Indicator 08B

Field Name: S08_Ethnicity_Children15to19

Row Name: children 15 through 19

Column Name:

Year: 2005

Field Note:

Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

34. Section Number: Indicator 08B

Field Name: S08_Ethnicity_Children20to24

Row Name: children 20 through 24

Column Name:

Year: 2005

Field Note:

Source of all information (unless otherwise noted): ISDH Epidemiology Resource Center.

35. Section Number: Indicator 10

Field Name: Urban

Row Name: Living in urban areas

Column Name:

Year: 2005

Field Note:

Includes those living in metropolitan areas.