

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

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APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2004	APPLICANT IDENTIFIER NM Dept. of Health									
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 New Mexico									
		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER									
5. APPLICANT INFORMATION												
Legal Name: NM Department of Health		Organizational Unit: Family Health Bureau										
Address (give city, county, state and zip code) 2040 S. Pacheco, Suite 101 Santa Fe, NM 87505 County: Santa Fe		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Jane Peacock Tel Number: 505-476-8901										
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">5</td></tr></table>		8	5	6	0	0	0	5	6	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)	
8	5											
6	0	0	0	5	6	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="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">3</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">4</td></tr></table> TITLE: Maternal and Child Health Services Block Grant		9	3	9	9	4	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Title V Block Grant					
9	3											
9	9	4										
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): State												
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:										
Start Date: 10/01/2004	Ending Date: 09/30/2005	a. Applicant NM Districts 1-2-3	b. Project NM Districts 1-2-3									
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>4,817,700.00</u>											
b. Applicant	\$ <u>0.00</u>											
c. State	\$ <u>5,193,300.00</u>											
d. Local	\$ <u>0.00</u>											
e. Other	\$ <u>0.00</u>											
f. Program Income	\$ <u>0.00</u>											
g. TOTAL	\$ <u>10,011,000.00</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 Jane C. Peacock		b. Title Family Health Bureau Chief	c. Telephone Number 505-476-8901									
d. Signature of Authorized Representative		e. Date Signed										

FORM 2
MCH BUDGET DETAILS FOR FY 2005

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

STATE: NM

1. FEDERAL ALLOCATION

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

\$ 4,817,700

A. Preventive and primary care for children:

\$ 2,400,598 (49.83%)

B. Children with special health care needs:

\$ 2,306,027 (47.87%)

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

C. Title V administrative costs:

\$ 111,075 (2.31%)

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

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

\$ 0

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

\$ 5,193,300

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

\$ 0

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

\$ 0

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

\$ 0

7. TOTAL STATE MATCH (Lines 3 through 6)

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

\$ 3,087,900

\$ 5,193,300

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

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

\$ 10,011,000

9. OTHER FEDERAL FUNDS

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

a. SPRANS: \$ 0

b. SSDI: \$ 96,000

c. CISS: \$ 90,900

d. Abstinence Education: \$ 516,100

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 47,529,800

h. AIDS: \$ 0

i. CDC: \$ 118,400

j. Education: \$ 0

k. Other:

\$ _____

\$ _____

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

\$ 48,351,200

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 58,362,200

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

None

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: NM

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 4,817,700	\$ 4,817,660	\$ 4,798,959	\$ 0	\$ 4,817,700	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 5,677,200	\$ 5,790,520	\$ 5,245,241	\$ 0	\$ 5,193,300	\$ 0
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>	\$ 10,494,900	\$ 10,608,180	\$ 10,044,200	\$ 0	\$ 10,011,000	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 48,944,300	\$ 42,059,818	\$ 37,092,300	\$ 0	\$ 48,351,200	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 59,439,200	\$ 52,667,998	\$ 47,136,500	\$ 0	\$ 58,362,200	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: NM

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 4,755,200	\$ 4,680,378	\$ 4,700,000	\$ 4,677,717	\$ 4,680,400	\$ 4,817,660
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 4,341,300	\$ 5,291,329	\$ 4,833,000	\$ 5,991,453	\$ 5,777,400	\$ 5,371,010
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>	\$ 9,096,500	\$ 9,971,707	\$ 9,533,000	\$ 10,669,170	\$ 10,457,800	\$ 10,188,670
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 32,334,800	\$ 43,892,103	\$ 36,024,900	\$ 36,024,900	\$ 45,912,500	\$ 53,938,418
9. Total <i>(Line11, Form 2)</i>	\$ 41,431,300	\$ 53,863,810	\$ 45,557,900	\$ 46,694,070	\$ 56,370,300	\$ 64,127,088
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2002
Field Note:
FY02 - The New Mexico WIC program received additional federal funding to get the EBT project underway.

2. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2003
Field Note:
Contributions include a new Abstinence Grant for \$516,100 which the program inherited during the last year.

FORM 4

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

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

STATE: NM

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,193,629	\$ 1,285,444	\$ 1,526,140	\$ 0	\$ 1,042,396	\$ 0
b. Infants < 1 year old	\$ 42,837	\$ 220,877	\$ 416,832	\$ 0	\$ 204,076	\$ 0
c. Children 1 to 22 years old	\$ 3,618,441	\$ 4,566,155	\$ 3,751,488	\$ 0	\$ 4,571,919	\$ 0
d. Children with Special Healthcare Needs	\$ 5,469,250	\$ 4,437,479	\$ 4,221,440	\$ 0	\$ 4,081,534	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 170,743	\$ 98,225	\$ 128,300	\$ 0	\$ 111,075	\$ 0
g. SUBTOTAL	\$ 10,494,900	\$ 10,608,180	\$ 10,044,200	\$ 0	\$ 10,011,000	\$ 0

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

a. SPRANS	\$ 0	\$ 0	\$ 0
b. SSDI	\$ 96,000	\$ 100,000	\$ 96,000
c. CISS	\$ 0	\$ 0	\$ 90,900
d. Abstinence Education	\$ 787,700	\$ 516,100	\$ 516,100
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 43,893,200	\$ 33,212,000	\$ 47,529,800
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 195,500	\$ 195,500	\$ 118,400
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
All Other	\$ 0	\$ 2,950,300	\$ 0
PRAMS	\$ 0	\$ 118,400	\$ 0
Other	\$ 672,100	\$ 0	\$ 0
SLD Hemoglobinopathy	\$ 117,300	\$ 0	\$ 0
Title X	\$ 3,182,500	\$ 0	\$ 0
III. SUBTOTAL	\$ 48,944,300	\$ 37,092,300	\$ 48,351,200

FORM 4

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

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

STATE: NM

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,685,152	\$ 1,157,632	\$ 944,436	\$ 1,368,641	\$ 1,188,819	\$ 1,556,846
b. Infants < 1 year old	\$ 280,223	\$ 313,226	\$ 237,386	\$ 60,835	\$ 367,797	\$ 417,992
c. Children 1 to 22 years old	\$ 3,228,476	\$ 3,013,730	\$ 2,813,436	\$ 5,138,698	\$ 3,455,258	\$ 3,761,936
d. Children with Special Healthcare Needs	\$ 3,699,807	\$ 5,284,277	\$ 5,334,900	\$ 4,019,761	\$ 5,243,084	\$ 4,356,633
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 202,842	\$ 202,842	\$ 202,842	\$ 81,235	\$ 202,842	\$ 95,263
g. SUBTOTAL	\$ 9,096,500	\$ 9,971,707	\$ 9,533,000	\$ 10,669,170	\$ 10,457,800	\$ 10,188,670

II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 129,000		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 216,900		\$ 787,700		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 29,500,000		\$ 31,977,900		\$ 41,986,900	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 0		\$ 141,100		\$ 76,200	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
Other Federal Funds	\$ 0		\$ 0		\$ 3,169,000	
SLD Hemoglobinopathy	\$ 0		\$ 0		\$ 93,900	
Title 19 Medicaid	\$ 0		\$ 0		\$ 314,500	
Title X	\$ 2,400,000		\$ 1,879,800		\$ 172,000	
Prevention Block Grant	\$ 0		\$ 21,200		\$ 0	
SLD Hemoglobinopathy	\$ 0		\$ 230,900		\$ 0	
Title 19	\$ 0		\$ 857,300		\$ 0	
See Notes	\$ 117,900		\$ 0		\$ 0	
III. SUBTOTAL	\$ 32,334,800		\$ 36,024,900		\$ 45,912,500	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

- 1. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2002
Field Note:
FY02-The increase in expenditures for Pregnant Women is due to outreach efforts resulting in increased referrals and more service providers. In addition, New Mexico has seen a significant increase in numbers of undocumented women accessing services.
- 2. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2003
Field Note:
Costs increased for high risk prenatal care fund
- 3. 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:
FY02 - Increase in expenditures for infants < 1 year is due to our efforts to fine tune the MCH Block Grant Budget. This is part of an on-going effort to improve accuracy in reporting.
- 4. 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:
This amount represents 5% of the amount spent on Children and Adolescents. There is not a way to differentiate infant services at this time. We will work on this next year.
- 5. 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:
The State expended more than was budgeted for services to Children and Adolescents.
- 6. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2002
Field Note:
FY02- Increase in expenditures for CSHCN is due to increase in Medicaid rate of reimbursement to providers.
- 7. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2003
Field Note:
The budget was reduced midyear.
- 8. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2002
Field Note:
- 9. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2003
Field Note:
This is a place holder
- 10. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2002
Field Note:
FY02- Decrease in Admin costs is a result of high vacancy rate throughout the fiscal year.
- 11. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2003
Field Note:
Monies that were originally budgeted for administration, i.e. media contracts were changed to cover High Risk Prenatal Care Fund costs for immigrants.

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: NM

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.)	\$ 4,009,250	\$ 5,585,066	\$ 4,681,624	\$ 0	\$ 5,017,260	\$ 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.)	\$ 3,632,550	\$ 3,103,323	\$ 3,083,514	\$ 0	\$ 3,076,298	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 206,100	\$ 178,487	\$ 241,300	\$ 0	\$ 188,930	\$ 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.)	\$ 2,647,000	\$ 1,741,304	\$ 2,037,762	\$ 0	\$ 1,728,512	\$ 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.)	\$ 10,494,900	\$ 10,608,180	\$ 10,044,200	\$ 0	\$ 10,011,000	\$ 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: NM

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.)	\$ 3,289,250	\$ 3,671,439	\$ 4,057,900	\$ 4,288,591	\$ 3,771,000	\$ 3,418,743
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.)	\$ 187,960	\$ 3,819,479	\$ 2,927,500	\$ 3,079,962	\$ 3,878,300	\$ 2,991,942
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 962,850	\$ 416,022	\$ 353,600	\$ 273,671	\$ 243,500	\$ 1,732,606
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.)	\$ 4,656,440	\$ 2,064,767	\$ 2,194,000	\$ 3,026,946	\$ 2,565,000	\$ 2,045,379
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.)	\$ 9,096,500	\$ 9,971,707	\$ 9,533,000	\$ 10,669,170	\$ 10,457,800	\$ 10,188,670

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2003
Field Note:
Expenditures increased in direct services due to need for safety net services (high risk prenatal care fund for immigrants) and increases in cost of operations. Funds from state were used to cover the cost of the immigrant prenatal care.
- 2. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2002
Field Note:
FY02- Decrease in expenditures is due to unavailability of figures for client travel costs for this fiscal year. The position responsible for tracking this figure was vacant for most of FY02.
- 3. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2003
Field Note:
Budget amounts were cut in contracts for enabling services later in the year to reflect a 7 million dollar deficit in the department.
- 4. Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2002
Field Note:
FY02 - Increase in Population Based Services expenditures is as result of efforts to fine tune the MCH Block Grant budget. This is an part of an on-going effort to increase accuracy in reporting.
- 5. Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2003
Field Note:
Media contracts were cut by the department in a measure to save state funds. Due to a decrease in SIDS the contract for grief counseling for SIDS families was decreased.
- 6. Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2002
Field Note:
FY02 - Decrease in infrastructure building expenditures is as result of efforts to fine tune the MCH Block Grant budget. This is an part of an on-going effort to increase accuracy in reporting.
- 7. Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2003
Field Note:
Funding for infrastructure was diverted to direct services to meet the need for high risk prenatal counseling for immigrants (over match state funded) and increased costs of providing direct services.

FORM 6

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

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

STATE: NM

Total Births by Occurrence: 27,322

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	26,804	98.1	0	1	1	100
Congenital Hypothyroidism	26,804	98.1	0	16	16	100
Galactosemia	26,804	98.1	0	0	0	
Sickle Cell Disease	26,804	98.1	0	0	0	

Other Screening (Specify)

Biotinidase Deficiency	26,804	98.1	1	1	1	100
Congenital Adrenal Hyperplasia (CAH)	26,804	98.1	3	3	3	100

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

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

FORM NOTES FOR FORM 6

Data for presumptive positive cases was not available at the time of reporting this year. It will be researched and reported. The program did not have a data analyst.

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: Phenylketonuria_Presumptive
Row Name: Phenylketonuria
Column Name: Presumptive positive screens
Year: 2005
Field Note:
There was 1 confirmed cased; presumptive positive data not available at this time.
2. **Section Number:** Main
Field Name: Congenital_Presumptive
Row Name: Congenital
Column Name: Presumptive positive screens
Year: 2005
Field Note:
There were 16 confirmed cases; the actual number of presumptive positive screens is not available at this time.
3. **Section Number:** Main
Field Name: Galactosemia_Presumptive
Row Name: Galactosemia
Column Name: Presumptive positive screens
Year: 2005
Field Note:
There were 0 cases; the number of presumptive positives is not available at this time.
4. **Section Number:** Main
Field Name: SickleCellDisease_Presumptive
Row Name: SickleCellDisease
Column Name: Presumptive positive screens
Year: 2005
Field Note:
There were no cases; the number of presumptive positives is not available at this time.
5. **Section Number:** Main
Field Name: Phenylketonuria_Confirmed
Row Name: Phenylketonuria
Column Name: Confirmed Cases
Year: 2005
Field Note:
The number of presumptive positives was not available.
6. **Section Number:** Main
Field Name: Congenital_Confirmed
Row Name: Congenital
Column Name: Confirmed Cases
Year: 2005
Field Note:
the number of presumptive positives was not available.
7. **Section Number:** Main
Field Name: Galactosemia_Confirmed
Row Name: Galactosemia
Column Name: Confirmed Cases
Year: 2005
Field Note:
the number of presumptive positives not available at this time.
8. **Section Number:** Main
Field Name: SickleCellDisease_Confirmed
Row Name: SickleCellDisease
Column Name: Confirmed Cases
Year: 2005
Field Note:
the number of presumptive positives not available at this time

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: NM

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	2,072	17.7	0.0	0.0	56.3	26.0
Infants < 1 year old	26,804	48.0	0.8	42.0	0.0	9.2
Children 1 to 22 years old	24,748	18.4	0.0	0.2	0.0	81.4
Children with Special Healthcare Needs	5,683	50.3	0.0	17.0	32.7	0.0
Others	34,973	0.0	0.0	0.0	0.0	100.0
TOTAL	94,280					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: PregWomen_TS
Row Name: Pregnant Women
Column Name: Title V Total Served
Year: 2005
Field Note:
906 received prenatal care in local health offices of the NM Dept Health; 431 served by the M&I Project at UNM; and 735 had care paid by the High Risk Prenatal Fund, Title V MCH Program.
- 2. Section Number:** Main
Field Name: Children_0_1_TS
Row Name: Infants <1 year of age
Column Name: Title V Total Served
Year: 2005
Field Note:
This estimate based on the number of infants reported to have newborn genetic screening.
- 3. Section Number:** Main
Field Name: Children_1_22_TS
Row Name: Children 1 to 22 years of age
Column Name: Title V Total Served
Year: 2005
Field Note:
This estimate based on 2,189 children whose primary care was paid by Healthier Kids Fund (HKF); and 22,559 who received immunizations in local health offices.
- 4. Section Number:** Main
Field Name: CSHCN_TS
Row Name: Children with Special Health Care Needs
Column Name: Title V Total Served
Year: 2005
Field Note:
This estimate based on 4,915 children in the CMS program; and 768 children served by CMS social workers and in the early intervention program "Families Infants and Toddlers" or FIT.
- 5. Section Number:** Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2005
Field Note:
The 34,973 clients were Family Planning.

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: NM

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	27,322	22,579	519	3,820	338	64	0	2
Title V Served	2,128	1,987	23	3	7	0	0	108
Eligible for Title XIX	12,993	10,838	248	1,714	161	31	0	1
INFANTS								
Total Infants in State	27,322	22,579	519	3,820	338	64	0	2
Title V Served	26,804	22,109	511	3,536	333	63	0	252
Eligible for Title XIX	12,986	10,733	245	1,697	160	30	0	121

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	12,274	15,048						
Title V Served	674	1,262	192					
Eligible for Title XIX	5,892	7,223						
INFANTS								
Total Infants in State	12,274	15,048						
Title V Served	11,794	15,010						
Eligible for Title XIX	5,892	7,223						

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTotal_All
Row Name: Total Deliveries in State
Column Name: Total All Races
Year: 2005
Field Note:
This is not the total deliveries; it is the total live births.
2. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2005
Field Note:
The distribution of eligibles is based on NM PRAMS estimates from 2000 PRAMS; percents applied to total occurrence births.
3. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleV_All
Row Name: Title V Served
Column Name: Total All Races
Year: 2005
Field Note:
This is an estimate based on newborn genetic screening, total infants screened. The percent live births by race was applied for the estimate.
4. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2005
Field Note:
This estimate based on NM PRAMS 2000 estimate of Medicaid paid infants at 48%
5. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_TotalNotHispanic
Row Name: Total Deliveries in State
Column Name: Total Not Hispanic or Latino
Year: 2005
Field Note:
The data is correct as entered.
6. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_TotalHispanic
Row Name: Total Deliveries in State
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
The data is correct as entered.
7. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalNotHispanic
Row Name: Title V Served
Column Name: Total Not Hispanic or Latino
Year: 2005
Field Note:
The figure is correct.
8. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalHispanic
Row Name: Title V Served
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
The figure is correct.
9. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_NotReported
Row Name: Title V Served
Column Name: Ethnicity Not Reported
Year: 2005
Field Note:
The figure is correct.
10. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2005
Field Note:
NM estimates 48% of occurrence births were Medicaid eligible; this figure is correct.
11. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
NM estimates 48% of occurrence births were Medicaid eligible; this figure is correct.
12. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_TotalNotHispanic
Row Name: Total Infants in State

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

The data are correct as entered.

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

Field Name: InfantsTotal_TotalHispanic

Row Name: Total Infants in State

Column Name: Total Hispanic or Latino

Year: 2005

Field Note:

The data are correct as entered.

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

Field Name: InfantsTitleV_TotalNotHispanic

Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

The figure is correct.

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

Field Name: InfantsTitleV_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2005

Field Note:

The figure is correct.

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

Field Name: InfantsTitleXIX_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

NM estimates 48% of occurrence births were eligible for Medicaid. This estimate is correct.

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

Field Name: InfantsTitleXIX_TotalHispanic

Row Name: Eligible for Title XIX

Column Name: Total Hispanic or Latino

Year: 2005

Field Note:

NM estimates 48% of occurrence births were Medicaid eligible; this figure is correct.

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: cname_2
Row Name: Name of contact person for state MCH hotline
Column Name: FY
Year: 2005
Field Note:
NOTE: the name of the contract for FY2004 was also Sandy Scar.

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

1. State MCH Administration:
(max 2500 characters)

The Family Health Bureau of the Public Health Division, New Mexico Department of Health, administers the Title V MCH Program. It includes the Bureau Chief; the MCH Medical Director; administrative staff; and programs with staff for MCH Epidemiology, Maternal, Child, Adolescent and Family Health unit including County MCH Councils, Children's Medical Services and the Adolescent Pregnancy Prevention Program. The Title V Block Grant funds contracts that include the Maternal and Infant Care (MIC) Project of the University of New Mexico in Albuquerque. Title V funds support immunization services, an epidemiologist position in Vital Records, and a health educator position in the Childhood Injury Prevention program in the Injury Prevention/EMS Bureau. Programs with other funding sources that serve the MCH population and that are in the Family Health Bureau include the Nutrition and WIC Programs, Abstinence Education, Families FIRST Perinatal Case Management and Title X Family Planning.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>4,817,700</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>5,193,300</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>0</u>
7. Program Income (Line 6, Form 2)	\$ <u>0</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>10,011,000</u>

9. Most significant providers receiving MCH funds:

<u>UNM Department of Pediatrics</u>
<u>Clark Reynolds</u>
<u>DYN Corporation Management</u>
<u>UNM Department of Neurology</u>

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

a. Pregnant Women	<u>2,072</u>
b. Infants < 1 year old	<u>26,804</u>
c. Children 1 to 22 years old	<u>24,748</u>
d. CSHCN	<u>5,683</u>
e. Others	<u>34,973</u>

11. Statewide Initiatives and Partnerships:

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

Children's Medical Services (CMS) continues to provide service coordination/case management services, working to assure a medical home for children with special health care needs (CSHCN) and for children who participate in the Healthier Kids Fund (HKF) primary care program. Unfortunately, the HKF program is extremely limited in new enrollments due to fiscal constraints. It is still in effect for children already enrolled. Children who are eligible for direct clinic services under the CMS CSHCN program receive access to specialists who assess their medical condition, make appropriate recommendations and develop a treatment plan. Clinics sponsored by CMS include Cleft Palate, Pulmonary, Dismorphology, Neurology and Endocrine. CMS also provides payment for services for CSHCN who meet medical and financial eligibility guidelines. FY01 began CMS' pilot provision of formula/food to adult clients with PKU who had no other payer source. Legislative change requiring insurance companies to cover this formula was not successful. DOH/CMS is pursuing alternatives. The High Risk Perinatal Fund provides specialty perinatal services to pregnant women who are uninsured or underinsured.

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

Families FIRST Case Management services for Medicaid pregnant women and infants was adopted by the 3 Medicaid MCO's and expanded to a statewide system. The MCH marketing campaign is focusing on intended pregnancies, early prenatal care, and decreasing substance use during pregnancy. The state legislature passed a bill mandating newborn hearing screening through a MCH grant. This effort will strengthen follow up services for further hearing testing which is accomplished in collaboration with community based care coordination services. The Newborn Genetic Screening Program provides follow-up and care coordination services to families and providers statewide for children identified by testing for six conditions. Staff monitor the system and provide statewide outreach/quality assurance interventions to providers and institutions. There are at least 4 wellness activities for men yearly where they explore physical, mental, and spiritual needs, and examine such diverse issues as being better fathers and decreasing male violence. An award winning violence prevention video aimed at perpetrators was developed with last year's MCH marketing funds.

c. Infrastructure Building Services:
(max 2500 characters)

Preconceptional health, reducing maternal smoking, increasing folic acid use and reducing unintentional pregnancies were identified as strategic issues by NM PRAMS and the Birth Defects Prevention and Surveillance Reports. The first Child Fatality Review Report used innovative media strategies to get findings out to communities. A cultural competence self-assessment was done by CMS with TA from Georgetown University's National Center for Cultural Competence; CMS teams are now developing a plan to address issues raised. CMS assessed transition service needs for young adults with special health care needs providing the foundation for CMS and community partners to create Healthy Transition NM, a proposal for funding from the MCH Healthy & Ready to Work RFP. CMS with Family Voices, UNM, private pediatrician and Catch Coordinator developed a 10-year plan to address statewide implementation of the Medical Home concept. MCH promoted initiatives in firearm death review for community action; domestic violence training for providers; best practices for youth development and adolescent health based on community survey findings. MCH with public health partners in 4 districts worked on needs assessment; SSDI funded a synthesis of County MCH and Head Start needs assessment data and an MCH vulnerability index for counties.

12. The primary Title V Program contact person:

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

Name Jane C Peacock, M.S., R.D.
Title Chief, Family Health Bureau, Public Health Division
Address New Mexico Department of Health1190 St. Francis Drive
City Santa Fe
State NM
Zip 87505
Phone (505) 476-8901
Fax (505) 476-8959
Email janep@doh.nm.state.us
Web _____

Name Lynn Christiansen
Title Children's Medical Services Program Manager,Family H
Address New Mexico Department of Health1190 St Francis Drive
City Santa Fe
State NM
Zip 87505
Phone (505) 476-8851
Fax (505) 476-8959
Email lynnc@doh.nm.state.us
Web _____

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: NM

PERFORMANCE MEASURE # 01

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

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	25	20	19	20	21
Denominator	25	20	19	20	21
Is the Data Provisional or Final?				Final	Final

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

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

PERFORMANCE MEASURE # 02

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

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					46
Annual Indicator				46	46
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	46	48	50	52	52
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	_____	_____	_____	_____	45.4
Annual Indicator	_____	_____	_____	45.4	45.4
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	46	48	50	50	50
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	_____	_____	_____	_____	57.4
Annual Indicator	_____	_____	_____	57.4	57.4
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	60	62	64	66	66
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					66.5
Annual Indicator				66.5	66.5
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	68	69	70	72	72
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	5.9	6	6.5	6.7	6.7
Annual Indicator					
Numerator					
Denominator					

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

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>72</u>	<u>72</u>	<u>72</u>	<u>72</u>	<u>72</u>
Annual Indicator	<u>66</u>	<u>66.6</u>	<u>64.5</u>	<u>64.6</u>	<u>71</u>
Numerator	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Denominator	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>72</u>	<u>72</u>	<u>72</u>	<u>72</u>	<u>72</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>45</u>	<u>44</u>	<u>44</u>	<u>43</u>	<u>40</u>
Annual Indicator	<u>40.8</u>	<u>39.1</u>	<u>37.5</u>	<u>37.7</u>	<u>35.9</u>
Numerator	<u>1,810</u>	<u>1,697</u>	<u>1,647</u>	<u>1,635</u>	<u>1,556</u>
Denominator	<u>44,410</u>	<u>43,438</u>	<u>43,973</u>	<u>43,406</u>	<u>43,400</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>40</u>	<u>40</u>	<u>40</u>	<u>40</u>	<u>40</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	58	40	41	42	43
Annual Indicator	42	41.3	44	48	48
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	44	44	44	44	44
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	8.75	8.5	6	6	5.5
Annual Indicator	7.3	6.0	5.5	7.0	6.3
Numerator	30	25	25	29	26
Denominator	408,501	419,108	454,523	411,531	411,531
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	5.5	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.

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	74	75	75.5	76	80
Annual Indicator	78.1	81.2	80.1	80.1	80.1
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	80	81	81	82	82
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	99	99	99	99	94.5
Annual Indicator	98.9	98.7	99.9	91.8	92.0
Numerator	26,571	26,460	26,751	25,311	25,136
Denominator	26,867	26,813	26,791	27,573	27,322
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	95	95.5	95.7	96	96
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	23	22.5	20	20	18
Annual Indicator	17.0	27.7	18	18	21
Numerator	92,218	153,355			
Denominator	542,459	553,628			
Is the Data Provisional or Final?				Provisional	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	18	19	19	20	20
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	76.5	77	60	61	75
Annual Indicator	59.8	74.8	77.8	68.8	75.4
Numerator	222,224	235,136	263,625	249,770	265,640
Denominator	371,364	314,250	338,915	363,169	352,309
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	75	75	78	78	78
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	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
Annual Indicator	<u>1.2</u>	<u>1.3</u>	<u>1.1</u>	<u>1.3</u>	<u>1.1</u>
Numerator	<u>316</u>	<u>357</u>	<u>301</u>	<u>347</u>	<u>291</u>
Denominator	<u>26,794</u>	<u>27,206</u>	<u>27,101</u>	<u>27,708</u>	<u>27,089</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</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 # 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	<u>14</u>	<u>14</u>	<u>13.5</u>	<u>13.5</u>	<u>13.5</u>
Annual Indicator	<u>19.4</u>	<u>18.5</u>	<u>14.0</u>	<u>14.8</u>	<u>11.4</u>
Numerator	<u>28</u>	<u>27</u>	<u>20</u>	<u>22</u>	<u>17</u>
Denominator	<u>144,062</u>	<u>145,751</u>	<u>143,344</u>	<u>148,644</u>	<u>148,700</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>13.5</u>	<u>13.5</u>	<u>13</u>	<u>13</u>	<u>13</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 # 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	65	65	70	71	70
Annual Indicator	73.4	65.3	60.1	70.6	75.9
Numerator	232	233	181	245	221
Denominator	316	357	301	347	291
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	70	70	70	70	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 # 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	70	70	70	71	71
Annual Indicator	62.0	65.3	65.5	66.0	65.7
Numerator	16,604	17,757	17,741	18,293	17,800
Denominator	26,794	27,206	27,101	27,708	27,089
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	71	71	71	71	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 # 19

The number of 33 counties adopting the conceptual framework of Healthy Youth/Healthy Communities through an Assets/Resiliency model approach when working with youth.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	55%	55%	66%	73%	75
Annual Indicator	0.5	0.5	0.5	0.5	0.8
Numerator	18	18	18	18	26
Denominator	33	33	33	33	33
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	75	80	80	80	80
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 # 20

Percent of first newborns/moms receiving support services/parenting through community home visiting/support programs

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	12	14	16	18	26
Annual Indicator	26.4	26	26	26	4.3
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	26	26	27	28	
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 # 21

Reduce unintended pregnancy in New Mexico to less than 30% of births

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	50	45	45	45	43
Annual Indicator	43.6%	43.6	42.2	42.2	42.2
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	42.5	42.5	42.5	42	42
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 # 22

Reduce the number of children witnessing violence (exposed to domestic or sexual violence) as expressed by percent of children present at a domestic violence scene.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	15	15	15	14	14
Annual Indicator	18.7	16.09	14%	14	14
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	13	13	13	13	13
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 # 23

New Mexico's Pregnancy Risk Assessment And Monitoring System (PRAMS)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	7	7	6	6	7
Annual Indicator	5	6	7	7	7
Numerator	5	6	7	7	7
Denominator	7	7	7	7	7
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	7	7	7	7	7
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 24

The state Title V program has a coordinated program of maternal, fetal, infant and child death review

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

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	3	3	3	3	3
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 25

The state has a program for Birth Defects Prevention and Surveillance

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

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	4	4	4	4	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 # 26

The Prevalence of Childhood Overweight & Obesity

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	10	10	10	10	10
Annual Indicator	9.4	9.7	10.1	10	10
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	10	10	10	9.5	9.5
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

National measure#12 In 2001 the data manager for newborn hearing screening passed away suddenly. The program worked to improve reporting during FY2004. The electronic birth certificate registration carries fields to indicate if newborn hearing screening was conducted. This was introduced in July 2003 and was practically statewide by December 2003. Previous year estimates were based on data from selected hospitals and telephone calls to nursery staff to ask if newborns received hearing screening prior to discharge. More accurate estimates are anticipated for FY2004 reporting. The FY2003 report is based on 92% of NM occurrence births. This is a rough estimate and should be used with caution.

State Performance Measure 8 (26 in series): data are estimate of overweight and obese children age 0-5 from NM WIC program; numerator and denominator were not available at this time.

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
2. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
3. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
4. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
5. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2005
Field Note:
Report is for 4:3:1:3:3 from national immunization survey, coverage age 19-35 months; up to date for age. Improved performance attributed to stronger immunization program and no vaccine shortages for the reporting period.
7. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2005
Field Note:
2003 provisional data for number of births to teens; the denominator is a "best guess"; the 2003 data should be considered very provisional.
8. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2005
Field Note:
This is a rough estimate; no surveillance was done in this year; the dental program reported the same level of effort, hence the same estimated level of coverage. This coverage is among children enrolled in schools with a high proportion of children on the free or subsidized meal program.
9. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2005
Field Note:
Intercensal population denominators are an issue in New Mexico. The census estimates are deemed lower than the more correct estimate for the state. The more correct estimates are produced by UNM Bureau Business & Economic Research (BBER). Thus, use these rates with caution. The actual number of deaths reported to vital records is correct: past three years 29, 25, 25 deaths and a 2003 figure of 26 provisional.
10. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
This is actually a report of breast-feeding initiation among all NM resident, NM occurrence mothers from NM PRAMS. The estimate is from 2001 data; and 2002 data will

become available in late fall 2004.

11. **Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2005
Field Note:
The most recent estimate from the Current Population Survey (CPS) for 1999-2001 was 21% of NM children were uninsured. This is the report for 2003.
12. **Section Number:** Performance Measure #14
Field Name: PM14
Row Name:
Column Name:
Year: 2005
Field Note:
Data for FY2002 appear to be under-reported; data for FY2003 appears to be more consistent with previous years. The numerator includes infants and children age 1-20 who received a service. The denominator includes the population estimate for 2002 of infants and children multiplied by 60%. It is estimated that 60% of NM children are at or below 185% of poverty and potentially eligible for Medicaid.
13. **Section Number:** Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2005
Field Note:
The number of teen suicide deaths is provisional; the census estimate for the denominator is not final.
14. **Section Number:** State Performance Measure #20
Field Name: SM20
Row Name:
Column Name:
Year: 2005
Field Note:
The PRAMS estimate of 4.3% is much lower than previous years. This data needs to be checked.
15. **Section Number:** State Performance Measure #21
Field Name: SM21
Row Name:
Column Name:
Year: 2005
Field Note:
Estimate based on 2000-2001 NM PRAMS data. Data for 2002 will become available in fall 2004.
16. **Section Number:** State Performance Measure #22
Field Name: SM22
Row Name:
Column Name:
Year: 2005
Field Note:
The data for this year has not yet been released; NM reports the same estimate as for last year as a very provisional number.
17. **Section Number:** State Performance Measure #24
Field Name: SM24
Row Name:
Column Name:
Year: 2005
Field Note:
The state Title V program has a coordinated program of maternal, fetal, infant and child death review. We do not have, nor do we anticipate having, resources to conduct FIMR/fetal death review. Thus our index of 4 forms of review is shortened to 3 forms of review.
18. **Section Number:** State Performance Measure #26
Field Name: SM26
Row Name:
Column Name:
Year: 2005
Field Note:
State Performance Measure 26 (8). Prevalence of overweight and obesity among children age 0-5. Data for numerator and denominator are not available at this time. We will edit the form when the PEDNES (CDC) data are available.

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

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>7</u>	<u>7</u>	<u>7</u>	<u>7</u>	<u>6.5</u>
Annual Indicator	<u>6.9</u>	<u>6.6</u>	<u>6.4</u>	<u>6.1</u>	<u>5.4</u>
Numerator	<u>186</u>	<u>180</u>	<u>174</u>	<u>168</u>	<u>146</u>
Denominator	<u>27,133</u>	<u>27,206</u>	<u>27,101</u>	<u>27,708</u>	<u>27,089</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>6.5</u>	<u>6.5</u>	<u>6.5</u>	<u>6.5</u>	<u>6.5</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.

OUTCOME MEASURE # 02

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>1.57</u>	<u>1.57</u>	<u>1.6</u>	<u>1.6</u>	<u>2</u>
Annual Indicator	<u>3.5</u>	<u>2.2</u>	<u>1.3</u>	<u>2.2</u>	<u>2.7</u>
Numerator	<u>22.1</u>	<u>14.2</u>	<u>8.6</u>	<u>13.2</u>	<u>13.6</u>
Denominator	<u>6.4</u>	<u>6.6</u>	<u>6.4</u>	<u>6.1</u>	<u>5</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</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.

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	4.5	4.5	4.5	4.5	4.5
Annual Indicator	3.9	3.7	4.0	4.2	3.3
Numerator	105	100	108	116	90
Denominator	27,133	27,206	27,101	27,708	27,089
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	4.5	4.5	4.5	4.5	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.

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	2.5	2.5	2.5	2.5	2.5
Annual Indicator	2.9	2.9	2.4	1.9	2.1
Numerator	80	80	66	52	56
Denominator	27,133	27,206	27,101	27,708	27,089
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	2.5	2.5	2.5	2.5	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	6.5	6.5	6.5	6.5	6.5
Annual Indicator	6.5	8.2	5.3	6.2	6.0
Numerator	177	183	144	172	164
Denominator	27,225	22,319	27,165	27,797	27,179
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	6	6	6	6	6
Annual Indicator					
Numerator					
Denominator					

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

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	29	28	28	27.5	27.5
Annual Indicator	26.2	19.6	22.1	21.3	22.5
Numerator	100	79	94	92	97
Denominator	381,586	402,365	425,118	431,109	431,109
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	27	27	26.5	26.5	26
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

None

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

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

2

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

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.

2

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

2

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

2

Total Score: 12

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: NM 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. Reduce barriers and disparities to accessing community-based health and health related services for women, children and youth. -E/I
2. Reduce fatal and non-fatal family violence. -PB
3. Reduce the incidence of substance abuse and mental health disorders and other high-risk behaviors in youth under age 21 by promotin youth development strategies. -PB
4. Expand primary prevention home visiting services to all teen parents and first-time parents statewide. -E
5. Increase the proportion of women receiving adequate prenatal care. -E/I/PB/D
6. Establish an infrastructure to support and monitor transition services for adolescents with special health care needs. -I
7. Develop policies and programs that assure the oral health needs of the MCH population are met, including CSHCN. -I/PB/D
8. Reduce the proportion of pregnancies that are unintended in women age 13-44 years. -I/E/D
9. Develop capacity for MCH program evaluation and population assessment to attain timely monitoring of program performance, effectiveness of interventions, status, trend in population measures and identification of gaps and disparities in health. -I
10. Prevent birth defects, poor fetal outcomes and MCH morbidity by reducing violence, alcohol, substance and tobacco use & promoting health behaviors (folic acid, healthy diet) among the child bearing/ rearing -E/I/PB

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

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

STATE: NM

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.	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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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 TA requests will be made at this time (June 30, 2004). If needs and a TA source are identified, NM will consult the federal MCH Bureau.

FIELD LEVEL NOTES

None

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

SP # 19

PERFORMANCE MEASURE:

The number of 33 counties adopting the conceptual framework of Healthy Youth/Healthy Communities through an Assets/Resiliency model approach when working with youth.

STATUS:

Active

GOAL

To reduce high risk behaviors in youth by increasing the number of internal and external assets in their lives

DEFINITION

The Healthy Youth initiative is based on developing internal and external assets in youth that are essential to normal growth and development. Models in use include Youth Development of Search Institute including assessment measures; Healthy Communities in NM;

Numerator:

The number of counties adopting the conceptual framework of Healthy Youth/Healthy Communities

Denominator:

The number of counties in the State = 33

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Search Institute Profiles of Student Life: Attitude and Behaviors. Number of Counties requesting training and surveying resources on the Assets/ Resiliency model. Not all counties/schools will choose to survey their students, some sites will select to use different measurement tools, sites engaging in this initiative without our assistance have no obligation to report to the state.

SIGNIFICANCE

Research shows youth reporting lack of assets have a higher correlation with risk behaviors i.e. sex, suicide, violence, school failure, dropout.

SP # 20

PERFORMANCE MEASURE:

Percent of first newborns/moms receiving support services/parenting through community home visiting/support programs

STATUS:

Active

GOAL

The development of a state-wide system of family support which promotes optimal infant & child development and well being.

DEFINITION

The proportion of new mothers who report home visiting or other support services before delivery and after delivery is reported in NM PRAMS.

Numerator:

Numerator: Number of first newborns/moms receiving HV or support services

Denominator:

Denominator: Total number of first births annually (by county) & for state

Units: 100 **Text:** percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

PRAMS and Families First data for #1; would have to explore if there are existing data bases or develop for #2.

SIGNIFICANCE

In today's world there are increasing challenges of parenting and providing stable family life as demonstrated by the following: changes in family structure--increase in teen & single parents and those not prepared to parent their children; increased divorced rate, children spending less time with their parents and more children living in foster homes; increased exposure to violence through media; increasing number of children living in poverty

SP # 21

PERFORMANCE MEASURE:

Reduce unintended pregnancy in New Mexico to less than 30% of births

STATUS:

Active

GOAL

To improve maternal and infant health by reducing unintended pregnancy in New Mexico to less than 30% of live births.

DEFINITION

Unintended pregnancies are those that a mother reported as not wanted or wanted later; Intended pregnancies are those a mother reported as wanted then or sooner.

Numerator:

Number of mistimed and unwanted births from NM PRAMS

Denominator:

Number of NM Resident Births

Units: 100 **Text:** percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

NM PRAMS: 1997 is our first year of data; data will be ready for analysis in November 1998. Vital records for 1997 closed in July 1998; data are weighted by CDC PRAMS, accounting for factors in the sample frame, response rates per stratum, and response rate per question. Henceforth, data for each year will be produced the winter of the following year, 1998 data in November 1999 and so on.

SIGNIFICANCE

Unintended pregnancy is associated with demographic characteristics of teen ages, single women/men, lower education and income levels in women and men; maternal health problems of poor access to family planning services, late prenatal care, smoking, family violence and other family stressors; infant outcomes of low birth weight, late or no infant health care including immunizations.

PERFORMANCE MEASURE:

Reduce the number of children witnessing violence (exposed to domestic or sexual violence) as expressed by percent of children present at a domestic violence scene.

STATUS:

Active

GOAL

Reduce the number of children witnessing violence (exposed to domestic violence or sexual violence).

DEFINITION

The percent of children who were present at a domestic violence scene as reported by law enforcement.

Numerator:

The number of children present at a domestic violence scene as reported by law enforcement.

Denominator:

The number of domestic violence police reports

Units: Text: per cent

HEALTHY PEOPLE 2010 OBJECTIVE**DATA SOURCES AND DATA ISSUES**

UCR data has its own limitations, mainly limited reporting by local law enforcement jurisdictions, and limited disclosure by the victims themselves. We hope to get a better measure developed that includes DV shelter and rape crisis center data. Because of a large degree of under reporting, these sources represent only a portion of the violence experienced by children. There is no direct measure of children witnessing domestic violence.

SIGNIFICANCE

Many children and young adults are exposed to domestic violence in the home or experience some form of sexual violence from people they know. There is increasing documentation about the adverse effects, including increased substance abuse, teen pregnancy, truancy, suicidal behaviors, eating disorders and aggressive acting out behaviors. There is a profound lack of mental health infrastructure to deal with these exposures, high prevalence of domestic violence in our society and significant lack of protective skills in avoiding acquaintance rape. We are using the rape rate as an index at the present time because it is accurate, can be tracked, and there is a clear correlation between children who witness violence and the propensity to engage in violent acts including rape as they get older.

SP # 23

PERFORMANCE MEASURE:

New Mexico's Pregnancy Risk Assessment And Monitoring System (PRAMS)

STATUS:

Active

GOAL

To collect, analyze and disseminate data and information regarding maternal and infant health, in order to improve health, access to and utilization of health & health related services, and reduce preventable morbidity and mortality.

DEFINITION

Numerator:

Ranked scale, from 0-7=1=funding support1=active Steering committee1=full implementation/joint NM+CDC protocols1=response rate 70%1=annual surveillance report1=special analysis projects1=data used in policy, program, education

Denominator:

Ranked Scale, 1 point for each item in scale, total 7 points possible1=funding support1=active Steering committee1=full implementation/joint NM+CDC protocols1=response rate 70%1=annual surveillance report1=special analysis projects1=data used in policy, program, education

Units: 7 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Data source: the PRAMS sample of 2,500 mothers each year is drawn monthly from NM live birth files, and is stratified to over sample low birth weight minorities; it is a mailed survey with telephone follow-up to improve response performance and a community contact protocol to reach selected minority groups. Data issues: response rates, particularly amongst minority women, women in poverty, homeless, and other selected groups.

SIGNIFICANCE

PRAMS data will produce prevalence estimates and increase understanding, regarding important associations between SES status, health status problems [ie, low birth weight], health risk behavior problems [ie violence, alcohol, tobacco, infant sleep position], healthy behaviors [ie family support, infant feeding, early immunization], barriers to use of care [ie preconceptional, prenatal, infant, family planning], and many other topics. PRAMS data will be used to inform policy, plan programs, educate providers and the public. NM PRAMS has funding partnerships with Title V MCH, the CDC's PRAMS project, the NM Children Youth and Families Department and NM Medicaid; data analysis partnerships include other DOH MCH programs, community networks, US Mexico border health programs, Indian Health, Navajo Nation and university researchers.

PERFORMANCE MEASURE:

The state Title V program has a coordinated program of maternal, fetal, infant and child death review

STATUS:

Active

GOAL

To reduce preventable maternal, fetal, infant and child mortality through a coordinated program of mortality-fatality review whose purpose is to use retrospective review methods to identify prevention, risk reduction and systems improvement factors in order to prevent future deaths.

DEFINITION

3 components functioning: maternal mortality review (MMR), child fatality review (CFR) and staff & resources

Numerator:

3

Denominator:

3

Units: Yes **Text:** Text

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Data: Infant and child death reports are from the Office of Medical Investigator (OMI); the OMI is a statewide system and includes all deaths except those that occur on a federal reserve (military, tribal). Maternal mortality data is based on linked files comprising fetal death, live birth and female deaths.

SIGNIFICANCE

Retrospective review of maternal, fetal, infant and child deaths provides insight into prevention of future similar deaths by identifying prevention factors, risk reduction factors and community systems improvement factors. While mortality and fatality data from vital records provides descriptive data about rates, demographic and geographic distributions, the case by case review illuminates key prevention factors. Death review is key to evaluation of selected public health initiatives such as "Back to Sleep" for SIDS prevention, seat belts and infant restraints, the role of alcohol in MVC, Homicide and suicide.

SP # 25

PERFORMANCE MEASURE:

The state has a program for Birth Defects Prevention and Surveillance

STATUS:

Active

GOAL

To prevent or reduce risks of birth defects in New Mexico through a combined program of prevention and surveillance.

DEFINITION

6 functions, 1 point per function: 1. Passive surveillance through linked data bases; 2. Active surveillance and case ascertainment for NTD's and OFC's; 3. A prevention program based on healthy preconceptional health practices; 4. preconceptional and prenatal use of recommended dose of folic acid; 5. adequate staffing for surveillance & prevention; 6. adequate funding for surveillance and prevention. Total 6 points

Numerator:

6 functions

Denominator:

6 functions

Units: Yes **Text:** 4

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Surveillance: live birth files for annual denominator; link to childrens chronic conditions registry based on CSHCN services, Medicaid, IHS newborn data and active surveillance in specialty pediatric offices statewide Prevention: BRFSS and NM PRAMS for folic acid knowledge and use of alcohol, substances and tobacco.

SIGNIFICANCE

The risk of selected birth defects can be reduced by 0.4 mg per day of folic acid before and during pregnancy; and abstention from tobacco, alcohol and other drugs.

SP # 26

PERFORMANCE MEASURE:

The Prevalence of Childhood Overweight & Obesity

STATUS:

Active

GOAL

To assure an environment in communities and schools that promotes healthy eating and physical activity patterns in children and adolescents

DEFINITION

Percent of children who are overweight or obese age 0-5

Numerator:

Number of overweight or obese children age 0-5 in New Mexico (equal to or greater than 90th percentile Body Mass Index (BMI))

Denominator:

Number of children age 0-5 in New Mexico

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

Reduce the proportion of children and adolescents who are overweight or obese

DATA SOURCES AND DATA ISSUES

State WIC dataData Issues: State WIC data is limited and does not reflect the entire population, however, this data is available at this time. The state will use Youth Risk Behavior Survey data next year.

SIGNIFICANCE

Childhood obesity is associated with adverse medical and psycho-social consequences. Overweight acquired during childhood or adolescence may persist into adulthood with increased risks of some chronic disease later in life. As a result, the rising prevalence of obesity and chronic disease will place more burdens on the health care system, including increased costs of medical care. Following the published data from the CDC's Third National Health and Nutrition Examination Survey (NHANES III), concern has been expressed that the prevalence of obesity in children and adolescents may be increasing in New Mexico, but definitive data are lacking. Therefore, Title V leadership are committed to establishing a baseline to assess the extent of obesity on childhood in New Mexico and develop a plan of action for its prevention.

FORM NOTES FOR FORM 16

The state Title V program has a coordinated program of maternal, fetal, infant and child death review. The detailed measure sheet is changed; we are deleting fetal mortality review because the state does not have resources to perform this function. We do not anticipate additional resources in coming years.

FIELD LEVEL NOTES

None

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

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.

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	29.0	25.0	13.5	13.6	14.9
Numerator	391	326	179	180	197
Denominator	134,814	130,628	132,236	132,236	132,236
Is the Data Provisional or Final?				Final	Provisional

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.

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	80.5	86.2	88.1	89.3	71.4
Numerator	13,892	15,401	16,729	17,262	14,060
Denominator	17,255	17,875	18,998	19,331	19,686
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.

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	40	43.0	86	75.9	64.2
Numerator		40		164	136
Denominator		93		216	212
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.

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	56.3	59.0	60.3	61.9	62.6
Numerator	15,276	16,051	16,342	16,118	15,962
Denominator	27,133	27,206	27,101	26,019	25,496
Is the Data Provisional or Final?				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>30.1</u>	<u>33.8</u>	<u>25.1</u>	<u>25.1</u>	<u>54.1</u>
Numerator	<u>16,244</u>	<u>19,370</u>	<u>18,560</u>	<u>18,560</u>	<u>41,308</u>
Denominator	<u>53,990</u>	<u>57,263</u>	<u>73,845</u>	<u>73,845</u>	<u>76,338</u>
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 08

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

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	<u>7.5</u>	<u>6.1</u>	<u>6.5</u>	<u>6.8</u>	<u>5.2</u>
Numerator	<u>420</u>	<u>364</u>	<u>365</u>	<u>397</u>	<u>282</u>
Denominator	<u>5,610</u>	<u>5,974</u>	<u>5,640</u>	<u>5,857</u>	<u>5,456</u>
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 17

2002 and 2003 are estimates. NOTE: in previous years, NM had reported based on asthma ICD-9 in any one of 9 diagnosis positions. The 2002 and 2003 data are estimates based on asthma as primary diagnosis. NM recommends that federal standardization of the detailed definition of this data report is highly desirable.

FIELD LEVEL NOTES

None

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

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>	2000	Matching data files	<u>8.9</u>	<u>7.1</u>	<u>8</u>
b) <i>Infant deaths per 1,000 live births</i>	2000	Matching data files	<u>7</u>	<u>6</u>	<u>6.6</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2000	Matching data files	<u>60</u>	<u>70</u>	<u>65.3</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2000	Matching data files	<u>54.9</u>	<u>63.4</u>	<u>59</u>

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

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>185</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>20</u>) (Age range _____ to _____) (Age range _____ to _____)	2003	<u>185</u> _____ _____
c) <i>Pregnant Women</i>	2003	<u>185</u>

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

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>235</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>19</u>) (Age range _____ to _____) (Age range _____ to _____)	2003	<u>235</u> _____ _____
c) <i>Pregnant Women</i>	2003	<u>185</u>

FORM NOTES FOR FORM 18

Most recent linked Medicaid and birth study was for 2000 data. The first trimester prenatal care is an educated guess. The study does not evaluate infant mortality; thus the infant mortality data is an educated guess as well.

The Kottlechuck Index at 58.9 is correct; the calculated index by this system rounded off, see indicator 4 in Form 17.

New Mexico does not have SCHIP for pregnant women

FIELD LEVEL NOTES

None

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

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	2	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	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	3	No
Annual birth defects surveillance system	2	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

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

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

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)	1	No
Other: Youth Risk Resiliency Survey (YRRS)	3	Yes
Youth Tobacco Survey	3	No

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)	1	No
Pediatric Nutrition Surveillance System (PedNSS)	3	Yes
WIC Program Data	3	Yes
Other: Youth Risk Resiliency Survey for grades 9-12	3	Yes
Behavioral Risk Factor Surveillance Survey for youth 11	3	Yes

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

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

FORM NOTES FOR FORM 19

NM has modified the YRBS to include questions on youth resiliency factors; it is called Youth Risk & Resiliency Survey (YRRS). It includes YRBS questions.

FIELD LEVEL NOTES

None

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

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	7.7	7.5	7.9	8.0	8.3
Numerator	2,078	2,033	2,147	2,224	2,235
Denominator	27,133	27,206	27,101	27,708	27,089
Is the Data Provisional or Final?				Final	Provisional

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	6.5	6.8	6.8	6.6	6.9
Numerator	1,712	1,806	1,814	1,789	1,826
Denominator	26,514	26,540	26,583	27,029	26,430
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	1.2	1.3	1.1	1.3	1.1
Numerator	316	357	301	347	291
Denominator	27,133	27,206	27,101	27,708	27,089
Is the Data Provisional or Final?				Final	Provisional

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	0.9	1.1	1.0	1.0	0.8
Numerator	249	288	264	276	224
Denominator	26,514	26,540	26,583	27,029	26,430
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	8.1	9.1	8.8	8.2	
Numerator	33	38	40	38	
Denominator	408,501	419,108	454,523	460,920	
Is the Data Provisional or Final?				Provisional	

HEALTH STATUS INDICATOR MEASURE # 03B

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	7.3	6.0	5.5	6.1	
Numerator	30	25	25	28	
Denominator	408,501	419,108	454,523	460,920	
Is the Data Provisional or Final?				Provisional	

HEALTH STATUS INDICATOR MEASURE # 03C

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	31.1	40.4	31.4	41.0	
Numerator	82	108	87	115	
Denominator	263,327	267,042	277,347	280,465	
Is the Data Provisional or Final?				Provisional	

HEALTH STATUS INDICATOR MEASURE # 04A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator		264.1	243		
Numerator		1,107			
Denominator		419,108			
Is the Data Provisional or Final?					

HEALTH STATUS INDICATOR MEASURE # 04B

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

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	723.9	632.3	600		
Numerator	2,957	2,650			
Denominator	408,501	419,108			

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 04C

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

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	3,172.5	3,068.8	2,760		
Numerator	8,354	8,195			
Denominator	263,327	267,042			

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 05A

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

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	23.3	24.0	29.8		
Numerator	1,673	1,691	2,119		
Denominator	71,752	70,506	71,004		

Is the Data Provisional or Final?

HEALTH STATUS INDICATOR MEASURE # 05B

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

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	7.6	7.2	8.9		
Numerator	2,330	2,302	2,856		
Denominator	306,781	320,360	320,060		

Is the Data Provisional or Final?

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

None

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

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: 0 Is this data from a State Projection? No

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

HSI #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			
Children 1 through 4			
Children 5 through 9			
Children 10 through 14			
Children 15 through 19			
Children 20 through 24			
Children 0 through 24	0	0	0

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

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: 0 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	0							
Women 15 through 17	0							
Women 18 through 19	0							
Women 20 through 34	0							
Women 35 or older	0							
Women of all ages	0	0	0	0	0	0	0	0

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

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15			
Women 15 through 17			
Women 18 through 19			
Women 20 through 34			
Women 35 or older			
Women of all ages	0	0	0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	_____
Living in urban areas	_____
Living in rural areas	_____
Living in frontier areas	_____
Total - all children 0 through 19	0

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

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

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

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

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

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

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

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

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

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

None