

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

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

<b>APPLICATION FOR FEDERAL ASSISTANCE</b>		2. DATE SUBMITTED <b>7/14/2004</b>	APPLICANT IDENTIFIER										
1. TYPE OF SUBMISSION:  Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER										
		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER										
5. APPLICANT INFORMATION													
Legal Name: <b>State of Maine, Dept of Health and Human Services</b>		Organizational Unit: <b>Maine Bureau of Health, Div. of Family Health</b>											
Address (give city, county, state and zip code) <b>286 Water Street, 7th floor State House Station 11 Augusta, ME 04333 County: Kennebec</b>		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: <b>Valerie J. Ricker</b> Tel Number: <b>207-287-5396</b>											
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <table border="1" style="width:100%; text-align: center;"><tr><td>0</td><td>1</td><td>-</td><td>6</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>		0	1	-	6	0	0	0	0	0	0	7. TYPE OF APPLICANT: (Enter appropriate letter in box) <b>A</b> 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)	
0	1	-	6	0	0	0	0	0	0				
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: <b>Health Resources and Services Administration, Maternal and Child Health Bureau</b>											
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <table border="1" style="width:100%; text-align: center;"><tr><td>9</td><td>3</td><td>9</td><td>9</td><td>4</td></tr></table> TITLE: <b>Maternal and Child Health Services Block Grant</b>		9	3	9	9	4	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: <b>MCH and CSHN</b>						
9	3	9	9	4									
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): <b>Statewide</b>													
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:											
Start Date: <b>10/01/2004</b>	Ending Date: <b>09/30/2005</b>	a. Applicant <b>1 &amp; 2</b>	b. Project <b>1 &amp; 2</b>										
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 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>3,557,242.00</u>												
b. Applicant	\$ <u>0.00</u>												
c. State	\$ <u>9,729,926.00</u>												
d. Local	\$ <u>0.00</u>												
e. Other	\$ <u>0.00</u>												
f. Program Income	\$ <u>0.00</u>												
g. TOTAL	\$ <u>13,287,168.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No											
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.													
a. Typed Name of Authorized Representative <b>Gilbert M. Bilodeau</b>		b. Title <b>Deputy Commissioner of Finance, DHHS</b>	c. Telephone Number <b>207-287-1921</b>										
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: ME**

**1. FEDERAL ALLOCATION**

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

\$ 3,557,242

A. Preventive and primary care for children:

\$ 2,241,559 ( 63.01% )

B. Children with special health care needs:

\$ 1,092,049 ( 30.7% )

(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:

\$ 223,634 ( 6.29% )

(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)

\$ 9,729,926

**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)

\$ 3,903,140

\$ 9,729,926

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

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

\$ 13,287,168

**9. OTHER FEDERAL FUNDS**

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

a. SPRANS: \$ 576,850

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 164,747

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 17,061,912

h. AIDS: \$ 0

i. CDC: \$ 579,463

j. Education: \$ 0

k. Other: \$ 0

Hgwy \$ 227,355

HRSA/USDA \$ 3,044,197

SS Family Planning \$ 273,406

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

\$ 22,027,930

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 35,315,098

**FORM NOTES FOR FORM 2**

The amount of the FY05 WIC award has increased due to an anticipated 2-5% increase in the number of clients and food expenses.

**FIELD LEVEL NOTES**

None

**FORM 3  
STATE MCH FUNDING PROFILE**

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

**STATE: ME**

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 3,553,008	\$ 3,056,255	\$ 3,610,000	\$ 0	\$ 3,557,242	\$ 0
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 11,705,112	\$ 11,722,744	\$ 9,716,886	\$ 0	\$ 9,729,926	\$ 0
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 15,258,120	\$ 14,778,999	\$ 13,326,886	\$ 0	\$ 13,287,168	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 14,313,099	\$ 17,106,451	\$ 17,949,748	\$ 0	\$ 22,027,930	\$ 0
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 29,571,219	\$ 31,885,450	\$ 31,276,634	\$ 0	\$ 35,315,098	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3  
STATE MCH FUNDING PROFILE**

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

**STATE: ME**

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 3,487,904	\$ 3,361,379	\$ 3,497,292	\$ 3,730,694	\$ 3,506,368	\$ 3,553,008
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 117,102	\$ 0	\$ 0	\$ 0	\$ 243,627	\$ 168,135
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 5,885,637	\$ 5,266,937	\$ 12,497,780	\$ 12,735,443	\$ 11,193,233	\$ 13,434,765
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 9,490,643	\$ 8,628,316	\$ 15,995,072	\$ 16,466,137	\$ 14,943,228	\$ 17,155,908
<b>(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)</b>						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 14,519,688	\$ 11,954,220	\$ 15,845,628	\$ 12,796,609	\$ 14,870,784	\$ 11,822,088
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 24,010,331	\$ 20,582,536	\$ 31,840,700	\$ 29,262,746	\$ 29,814,012	\$ 28,977,996
<b>(STATE MCH BUDGET TOTAL)</b>						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
The budgeted amount does not equal the granted amount for the 2002 Federal Fiscal Year.
2. **Section Number:** Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
The apparent \$500,000 shortfall in FY03 expenditures and no carryover is due to FY03 invoices were not received within the expected timeframe. The invoices for FY03 expenses were paid within 90 days of the close of the fiscal year.
3. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
The remainder of the funds were used in the Federal Fiscal Year 2001 so this amount did not truly carry over the 2002.
4. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
The budget increased due to receipt of tobacco funds used for Maternal and Child health.
5. **Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
This amount is less than budgeted due to unexpended funds and reductions to some grant award amounts.
6. **Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
The apparent 3 million dollar increase in federal funds is due to an increased number of successful grant applications and carryovers from FY02 grants.

**FORM 4**

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

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

**STATE: ME**

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 1,085,388	\$ 1,824,589	\$ 947,907	\$ 0	\$ 945,091	\$ 0
b. Infants < 1 year old	\$ 7,254,913	\$ 4,747,977	\$ 6,168,626	\$ 0	\$ 6,164,169	\$ 0
c. Children 1 to 22 years old	\$ 2,936,361	\$ 4,245,060	\$ 2,640,363	\$ 0	\$ 2,626,222	\$ 0
d. Children with Special Healthcare Needs	\$ 2,484,954	\$ 2,833,360	\$ 2,266,678	\$ 0	\$ 2,251,945	\$ 0
e. Others	\$ 1,273,136	\$ 1,101,930	\$ 1,076,362	\$ 0	\$ 1,076,107	\$ 0
f. Administration	\$ 223,368	\$ 26,083	\$ 226,950	\$ 0	\$ 223,634	\$ 0
g. SUBTOTAL	\$ 15,258,120	\$ 14,778,999	\$ 13,326,886	\$ 0	\$ 13,287,168	\$ 0

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

a. SPRANS	\$ 300,000	\$ 622,280	\$ 576,850
b. SSDI	\$ 90,300	\$ 100,000	\$ 100,000
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 172,468	\$ 197,696	\$ 164,747
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 12,754,606	\$ 13,292,353	\$ 17,061,912
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 543,479	\$ 731,235	\$ 579,463
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
Hgwy	\$ 78,840	\$ 311,963	\$ 227,355
HRSA/USDA	\$ 0	\$ 2,420,815	\$ 3,044,197
SS Family Planning	\$ 273,406	\$ 273,406	\$ 273,406
Coordinated Women's Health	\$ 100,000	\$ 0	\$ 0
<b>III. SUBTOTAL</b>	\$ 14,313,099	\$ 17,949,748	\$ 22,027,930

**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

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

**STATE: ME**

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 837,667	\$ 570,357	\$ 2,123,160	\$ 2,251,362	\$ 1,853,192	\$ 2,148,918
b. Infants < 1 year old	\$ 1,887,428	\$ 1,806,754	\$ 5,513,507	\$ 6,798,190	\$ 5,082,712	\$ 5,710,656
c. Children 1 to 22 years old	\$ 3,288,551	\$ 3,371,330	\$ 4,071,521	\$ 3,177,055	\$ 4,145,897	\$ 5,317,937
d. Children with Special Healthcare Needs	\$ 2,343,488	\$ 1,769,727	\$ 2,420,550	\$ 2,646,423	\$ 2,348,282	\$ 2,816,981
e. Others	\$ 958,080	\$ 953,134	\$ 1,692,896	\$ 1,376,703	\$ 1,338,942	\$ 1,049,104
f. Administration	\$ 175,429	\$ 157,014	\$ 173,438	\$ 216,404	\$ 174,203	\$ 21,312
g. SUBTOTAL	\$ 9,490,643	\$ 8,628,316	\$ 15,995,072	\$ 16,466,137	\$ 14,943,228	\$ 17,064,908

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

a. SPRANS	\$ 176,767	\$ 176,767	\$ 176,767
b. SSDI	\$ 100,000	\$ 100,000	\$ 100,000
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 172,468	\$ 172,468	\$ 172,468
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 13,262,047	\$ 13,262,047	\$ 11,844,158
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 350,000	\$ 541,458	\$ 443,219
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
HRSA/USDA	\$ 0	\$ 1,507,888	\$ 1,955,689
Hwy	\$ 0	\$ 85,000	\$ 178,483
Birth Defects&Hwy Safety	\$ 185,000	\$ 0	\$ 0
Social Services	\$ 273,406	\$ 0	\$ 0
<b>III. SUBTOTAL</b>	\$ 14,519,688	\$ 15,845,628	\$ 14,870,784

## 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:**  
Tobacco funds were received and used toward services for Pregnant Women.
2. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Categorical expenditure was shifted to fill demographic need. The system for capturing population categories was improved. Now people that previously were counted in the "other" category are now counted in category a, b, c, or d.
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:**  
Tobacco funds were received and used toward services for Infants.
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:**  
Expenses were not received during time period
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:** 2002  
**Field Note:**  
Tobacco funds were received and used for services to children.
6. **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:**  
Categorical expenditure was shifted to fill demographic need. The system for tracking capturing population categories was improved. Now people that previously were counted in the "other" category are now counted in category a, b, c, or d.
7. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
Tobacco funds were received and used toward services to children with special health needs.
8. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Categorical expenditure was shifted to fill demographic need. The system for capturing population categories was improved. Now people that previously were counted in the "other" category are now counted in category a, b, c, or d.
9. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
Better tracking systems are now in place limiting the amount of people previously listed as other that should have been listed as pregnant women, infants, children and children with special health care needs reducing the expenses listed in this category.
10. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenses in this category were defined better making them fit into other categories listed.
11. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**

Several administrative positions were vacant during this time period.

**12. Section Number:** I. Federal-State MCH Block Grant Partnership

**Field Name:** AdminExpended

**Row Name:** Administration

**Column Name:** Expended

**Year:** 2003

**Field Note:**

Expenditures didn't materialize. This category includes some administrative positions which were vacant due to the hiring freeze. Also travel was significantly reduced in order to have money available for purchased public health services.

**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: ME**

TYPE OF SERVICE	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 10,639,956	\$ 8,602,132	\$ 9,025,745	\$ 0	\$ 9,021,019	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 1,175,840	\$ 1,142,162	\$ 1,066,223	\$ 0	\$ 1,059,795	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,291,823	\$ 1,759,266	\$ 1,172,549	\$ 0	\$ 1,165,388	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,150,501	\$ 3,275,439	\$ 2,062,369	\$ 0	\$ 2,040,966	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (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.)	\$ 15,258,120	\$ 14,778,999	\$ 13,326,886	\$ 0	\$ 13,287,168	\$ 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: ME**

TYPE OF SERVICE	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 5,689,171	\$ 4,879,335	\$ 10,850,299	\$ 11,554,158	\$ 10,688,848	\$ 9,973,250
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 702,658	\$ 735,185	\$ 694,337	\$ 1,267,468	\$ 787,651	\$ 1,502,799
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 826,160	\$ 966,787	\$ 1,880,596	\$ 1,331,648	\$ 1,256,429	\$ 2,238,281
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,272,654	\$ 2,047,009	\$ 2,569,840	\$ 2,312,863	\$ 2,210,300	\$ 3,350,578
<b>V. Federal-State Title V Block Grant Partnership Total</b> (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.)	\$ 9,490,643	\$ 8,628,316	\$ 15,995,072	\$ 16,466,137	\$ 14,943,228	\$ 17,064,908

**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:**  
Invoices not received in time period. In addition there may be some of the decrease may be a reflection of efforts to increase the proportion of human and financial resources dedicated to core public health functions such as population based and infrastructure services.
2. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
Tobacco funds provided increased ability to provide services in this category.
3. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
Tobacco funds provided increased ability to provide services in this category.
4. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Needs in this area of service increased. The Title V Program is making efforts to adjust the proportion of human and financial resources available for core public health functions such as population based and infrastructure services.
5. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2002  
**Field Note:**  
Tobacco funds provided increased ability to prove capacity building in this category.
6. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Needs in this services area increased. The Title V Program is making efforts to adjust the proportion of human and financial resources available for core public health functions such as population based and infrastructure services.

**FORM 6**

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

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

**STATE: ME**

Total Births by Occurrence: 13,370

Reporting Year: 2002

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	13,360	99.9	15	2	2	100
Congenital Hypothyroidism	13,360	99.9	168	8	8	100
Galactosemia	13,360	99.9	7	0	0	
Sickle Cell Disease	13,360	99.9	0	0	0	

Other Screening (Specify)

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**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Main  
**Field Name:** SickCellDisease\_Confirmed  
**Row Name:** SickCellDisease  
**Column Name:** Confirmed Cases  
**Year:** 2005  
**Field Note:**  
We had no confirmed cases of sickle cell in 2002.
  
2. **Section Number:** Other Screening Types  
**Field Name:** Other  
**Row Name:** All Rows  
**Column Name:** All Columns  
**Year:** 2005  
**Field Note:**  
Additional testing under Maine's mandatory testing (total of 9 conditions). MSUD-8 presumptive cases, with 0 confirmed or needing treatment; Homocystinuria-16 presumptive cases, with 0 confirmed or needing treatment; CAH-45 presumptive cases with 0 confirmed or needing treatment; Biotinidase- 4 presumptive cases with 2 confirmed and 2 receiving treatment (100%); and MCAD- 3 presumptive cases with 2 confirmed and 2 receiving treatment (100%). Maine also has an optional panel of 19 conditions: In 2002, there were 25 presumptive cases with 2 confirmed (MCC and VLCAD) and 2 in treatment (100%).

**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: ME**

Reporting Year: 2002

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	13,370	38.0				62.0
Infants < 1 year old	13,370	38.0				62.0
Children 1 to 22 years old	90,896	38.0				62.0
Children with Special Healthcare Needs	2,376	38.0				62.0
Others	0	0.0				0.0
<b>TOTAL</b>	<b>120,012</b>					

**FORM NOTES FOR FORM 7**

There is no reliable source of data regarding the primary source of insurance coverage. The percentage listed under Title XIX is based upon the percent of Maine population believed eligible for title XIX, which is 38%. The balance are listed as unknown. No assessment of "others" has been made. We served 1454 fewer people in 2002 than in 2001. This is not surprising in light of budget cuts. The good news is that we served 378 more CSHN.

**FIELD LEVEL NOTES**

1. **Section Number:** Main  
**Field Name:** PregWomen\_XIX  
**Row Name:** Pregnant Women  
**Column Name:** Title XIX %  
**Year:** 2005  
**Field Note:**
  
2. **Section Number:** Main  
**Field Name:** AllOthers\_TS  
**Row Name:** Others  
**Column Name:** Title V Total Served  
**Year:** 2005  
**Field Note:**  
No assessment of "others" has been made.

**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: ME**

Reporting Year: 2002

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	13,370	12,846	169	113	179	39	0	24
Title V Served	13,370	12,846	169	113	179	39	0	24
Eligible for Title XIX	5,077	4,790	114	70	81	17	0	5
<b>INFANTS</b>								
Total Infants in State	13,362	12,605	301	184	213	45	0	14
Title V Served	13,362	12,605	301	184	213	45	0	14
Eligible for Title XIX	5,077	4,790	114	70	81	17	0	5

**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
<b>DELIVERIES</b>								
Total Deliveries in State	13,201	162	7	0	0	0	0	162
Title V Served	13,201	162	7	0	0	0	0	162
Eligible for Title XIX	5,016	62	3	0	0	0	0	62
<b>INFANTS</b>								
Total Infants in State	13,201	162	7	0	0	0	0	162
Title V Served	13,201	162	7	0	0	0	0	162
Eligible for Title XIX	5,016	62	3	0	0	0	0	62

**FORM NOTES FOR FORM 8**

The number served by Title V for "Total Deliveries in State" and "Total Infants in State" are derived from the number of occurrent births (form 6). The number eligible for Title XIX for "Total Deliveries in State" and "Total Infants in State" are estimates based on the percent of Maine population eligible for Title XIX, which is 38 percent. The figure is calculated using the number of deliveries or infants in that column multiplied by 0.38. The birth certificate file does not have infants Hispanic ancestry, therefore those fields are blank. Data for sub-categories B1 through B5 is not known.

**FIELD LEVEL NOTES**

None



**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Main

**Field Name:** calls\_2

**Row Name:** Number of calls received On the State MCH Hotline This reporting period

**Column Name:** FY

**Year:** 2003

**Field Note:**

The number of calls received in calendar year 2003 appear to be significantly lower than the prior year. In researching the significant drop, it was identified that the numbers submitted for prior years are incorrect. Calls received in 2001 totaled 8054 and calls in 2002 totaled 7883. With this corrected information, the calls received in 2003 actually increased by 587. The number of calls continues to be lower than in the late 1990's. It is believed that is attributable to the increased amount of information available via the internet.

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

1. State MCH Administration:  
*(max 2500 characters)*

The Title V program is administered through the Division of Family Health in the Bureau of Health within the Department of Human Services. Programs included in Title V are: Oral Health, Maine Injury Prevention Program, Teen and Young Adult Health, Women and Children's Preventive Health Services, Children with Special Health Needs, Genetics, SSDI, MCH Nutrition, Childhood Lead Poisoning Prevention, Public Health Nursing, and Healthy Families.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>3,557,242</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>9,729,926</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>
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ <u>13,287,168</u></b>

9. Most significant providers receiving MCH funds:

<u>Family Planning Association of Maine</u>
<u>Public Health Nursing</u>
<u>Children with Special Health Needs clinics</u>
<u>School Based Health Centers</u>

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

a. Pregnant Women	<u>13,370</u>
b. Infants < 1 year old	<u>13,370</u>
c. Children 1 to 22 years old	<u>90,896</u>
d. CSHCN	<u>2,376</u>
e. Others	<u>0</u>

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:

*(max 2500 characters)*

School Based Health Clinics, administered by the Teen and Young Adult Program represent an excellent example of improved health care access through existing institutions. The Division focus continues to be to increase the number of clinics available as well as expand the scope of these programs, capitalizing on the opportunity to reach this underserved population. A State level advisory group functions to explore opportunities and increase awareness to ensure on-going funding for SBHC. The Women and Children's Preventive Health Services (WCPHS) in collaboration with WIC, MCH Nutrition and Public Health Nursing is encouraging breastfeeding. More than half of mothers are breastfeeding at hospital discharge. A broad approach focusing on hospitals, as well as individual counseling regarding breastfeeding benefits is being employed in order to substantially increase the incidence and duration of breastfeeding.

b. Population-Based Services:

*(max 2500 characters)*

Newborn Screening through the Genetics Program has been very effective in both screening newborns and identifying those with positive results. This has been facilitated through the cross matching of screening results and birth certificates. The Oral Health Program is taking proven oral health education programs and expanding services as well as data capability. The Oral Health Program works with multiple stakeholders (state and non-governmental agencies) to increase access to dental care/services. The Oral Health Needs Assessment Task Force is continuing its work to critically evaluate current data sources, explore new options and assist with development of ongoing surveillance systems. SIDS - The Maine SIDS Program provides surveillance of all SIDS events in the state. Across the state, Public Health Nurses respond to all cases identified as a possible SIDS death offering support and follow up services to families and individuals.

c. Infrastructure Building Services:

*(max 2500 characters)*

Birth Defects Monitoring program. The Genetics Program receives CDC funding to support the development and implementation of a surveillance system for birth defects. Health care providers are required to report on 18 selected conditions identified at birth or through ongoing health evaluations. Data will be analyzed to identify areas appropriate for preventive interventions and/or improvements in system and service capacities.

12. The primary Title V Program contact person:

Name Valerie J. Ricker, MSN, MS  
 Title Director, Division of Family Health  
 Address Key Bank Plaza, 7th floor 11 State House Station  
 City Augusta  
 State ME

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

Name Toni Wall  
 Title Program Manager, CSHN  
 Address Key Bank Plaza, 7th floor 11 State House Station  
 City Augusta  
 State ME

Zip 04333-0011  
Phone (207) 287-9917  
Fax (207) 287-5355  
Email valerie.j.ricker@maine.gov  
Web

Zip 04333-0011  
Phone (207) 287-3311  
Fax (207) 287-5355  
Email toni.g.wall@maine.gov  
Web

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Statewide Initiatives and Partnerships

**Field Name:** IBS

**Row Name:** Infrastructure building services

**Column Name:**

**Year:** 2005

**Field Note:**

The Maine Humane Systems for Early Childhood Program is cultivating a unified, statewide early childhood services system which provides essential resources, shares common standards for quality, and respects the diversity and uniqueness of individual children and their families.

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

**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
<b>Annual Performance Objective</b>	99	99	99	98	98
<b>Annual Indicator</b>	98.2	99.8	99.8	99.9	99.5
<b>Numerator</b>	13,357	13,559	13,534	13,360	13,589
<b>Denominator</b>	13,608	13,590	13,566	13,370	13,662
<b>Is the Data Provisional or Final?</b>				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
<b>Annual Performance Objective</b>	98	98	98	98	98
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

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
<b>Annual Performance Objective</b>	8	14	15		62.8
<b>Annual Indicator</b>	12	15	14	62.8	62.8
<b>Numerator</b>					
<b>Denominator</b>					
<b>Is the Data Provisional or Final?</b>				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
<b>Annual Performance Objective</b>	62.8	62.8	62.8	75	75
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

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	100	70	75		60
Annual Indicator	69.9	68.0	79.9	60	60
Numerator	35,630	36,884	43,319		
Denominator	50,943	54,223	54,223		
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	60	60	60	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 # 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	60	85	85		67.3
Annual Indicator	82.9	82.0	82.0	67.3	67.3
Numerator	765	742	720		
Denominator	923	905	878		
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	67.3	67.3	67.3	75	75
Annual Indicator					
Numerator					
Denominator					

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

**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					77.3
Annual Indicator				77.3	77.3
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	77.3	77.3	77.3	85	85
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					14.9
Annual Indicator				14.9	14.9
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	14.9	14.9	14.9	25	25
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>90</u>	<u>90</u>	<u>78</u>	<u>77</u>	<u>78</u>
Annual Indicator	<u>76.8</u>	<u>76</u>	<u>75</u>	<u>72.8</u>	<u>70.8</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>73</u>	<u>74</u>	<u>75</u>	<u>76</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>16.5</u>	<u>13.1</u>	<u>13</u>	<u>12.9</u>	<u>12.8</u>
Annual Indicator	<u>14.0</u>	<u>13.5</u>	<u>11.8</u>	<u>12.6</u>	<u>                    </u>
Numerator	<u>373</u>	<u>360</u>	<u>320</u>	<u>314</u>	<u>                    </u>
Denominator	<u>26,630</u>	<u>26,618</u>	<u>27,040</u>	<u>24,958</u>	<u>                    </u>
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>12.6</u>	<u>12.3</u>	<u>12</u>	<u>12</u>	<u>12</u>
Annual Indicator					
Numerator					
Denominator					

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

**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	25	50	50	52	55
Annual Indicator	47.6	48	10.2	34.1	22.7
Numerator			1,207	2,009	1,405
Denominator			11,822	5,895	6,194
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	34	36	38	40	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.

**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	4.9	4.7	3.7	3.6	3.5
Annual Indicator	3.6	3.7	2.9	3.0	
Numerator	42	43	34	34	
Denominator	1,169,278	1,166,447	1,167,011	1,144,898	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3.5	3.2	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.

**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	66	65	67	65	65
Annual Indicator	58.9	64.0	63.3	60.5	60.1
Numerator	7,872	8,678	8,589	8,072	7,870
Denominator	13,368	13,559	13,566	13,336	13,097
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	66	67	68	69	69
Annual Indicator					
Numerator					
Denominator					

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

**PERFORMANCE MEASURE # 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	28	45	82	92	95
Annual Indicator	39.5	79.6	80.3	91.4	98.4
Numerator	5,375	10,821	10,894	12,194	12,883
Denominator	13,608	13,590	13,566	13,336	13,097
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	75	80	82	83	84
Annual Indicator					
Numerator					
Denominator					

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

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	9.7	9.7	6	6	10
Annual Indicator	9.7	6.0	6.0	6.7	
Numerator		19,130	19,130		
Denominator		318,835	318,835		
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	10	10	10	10	10
Annual Indicator					
Numerator					
Denominator					

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

**PERFORMANCE MEASURE # 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	85	50	84	78	80
Annual Indicator	44.4	81.9	76.6	77.2	78.4
Numerator	40,840	73,712	96,256	109,463	118,870
Denominator	91,981	89,958	125,701	141,850	151,651
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	79	80	81	82	83
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>1.2</u>	<u>1.2</u>
Annual Indicator	<u>1.1</u>	<u>1.1</u>	<u>1.1</u>	<u>1.1</u>	<u></u>
Numerator	<u>732</u>	<u>733</u>	<u>732</u>	<u>760</u>	<u></u>
Denominator	<u>68,629</u>	<u>68,344</u>	<u>68,328</u>	<u>68,220</u>	<u></u>
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>1.2</u>	<u>1.2</u>	<u>1.2</u>	<u>1.2</u>	<u>1.2</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.

**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>9.5</u>	<u>9.5</u>	<u>11</u>	<u>11.5</u>	<u>11</u>
Annual Indicator	<u>9.7</u>	<u>11.7</u>	<u>12.3</u>	<u>10.4</u>	<u></u>
Numerator	<u>43</u>	<u>52</u>	<u>55</u>	<u>47</u>	<u></u>
Denominator	<u>444,140</u>	<u>445,061</u>	<u>446,765</u>	<u>450,106</u>	<u></u>
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>11</u>	<u>10.5</u>	<u>10</u>	<u>10</u>	<u>10</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	85	85	85	82.5	80
Annual Indicator	82.8	82.8	81.7	80.1	
Numerator	606	607	598	609	
Denominator	732	733	732	760	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	80.5	81	81.5	82	82.5
Annual Indicator					
Numerator					
Denominator					

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

**PERFORMANCE MEASURE # 18**

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	90	90	90	88	88
Annual Indicator	88.7	88.1	87.7	87.7	
Numerator	12,075	11,973	12,056	11,880	
Denominator	13,608	13,590	13,750	13,549	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	89	89	90	90	90
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 2**

The percent of unintended births in women less than 24 years of age

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	55%	53%	60%	59%	58%
Annual Indicator	60.6	56.0	61.5	60.9	
Numerator	1,973	2,067	2,272	2,153	
Denominator	3,258	3,693	3,693	3,533	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	57%	56%	55	54	53
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 3**

Percent of women enrolled in WIC that are breastfeeding their infants at six months of age.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	28%	30%	26%	24%	23
Annual Indicator	24.1	23.7	23.2	21.6	22.4
Numerator	244	213	255	209	212
Denominator	1,014	898	1,101	967	947
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	24	25	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 # 4**

The percentage of adolescents who have received routine dental care in the last year

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	75	75	78%	78%	80%
Annual Indicator	79.6	79.6	78.6	78.6	80
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	80%	81	81	82	83
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 5**

The motor vehicle death rate per 100,000 among children 15 to 21 years of age

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	28	27	28	27	27
Annual Indicator	28.4	29.5	29.7	31.3	
Numerator	171	177	178	191	
Denominator	601,517	600,053	600,140	610,243	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	26	25	24	24	23
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 7**

To assure timely access to genetics services.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	78%	90%	90%	92%	93
Annual Indicator	89.8	89.9	87	86.3	86.5
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

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

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

**STATE PERFORMANCE MEASURE # 8**

The percent of overweight adolescents in Maine

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	14.0	14.0	14%	14	10
Annual Indicator	13.0	13.0	10.3	10.3	13
Numerator	18,768	18,861			
Denominator	144,373	145,087			
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	13	12	12	11	11
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 9**

The percent of kindergarteners who are overweight.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	_____	_____	_____	_____	13
Annual Indicator	_____	_____	_____	13	15.2
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	15	15	14	14	14
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 10**

The percent of high school students who report being in a physical fight in the past year.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	_____	_____	_____	31	30
Annual Indicator	_____	_____	31	31	27
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	27	26	26	25	25
Annual Indicator					
Numerator					
Denominator					

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

**STATE PERFORMANCE MEASURE # 13**

To increase the percentage of children with special health care needs less than or equal to 18 years of age in Maine receiving comprehensive care coordination.

Annual Objective and Performance Data

	1999	2000	2001	2002	2003
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?					

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	_____	_____	_____	_____	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.

## FORM NOTES FOR FORM 11

Section Number: Performance Measure #1  
Field Name: PM01  
Row Name:  
Column Name:  
Year: 2004  
Field Note:

The percent of newborns who are screened and confirmed with conditions mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) and who receive appropriate follow up as defined by their State. (National Newborn Screening and Genetic Resource Center)

Indicator is for the calendar year 2001 and is based on newborn screening blood spot filter paper specimens. Denominator refers to the number of births that occurred in Maine (occurent births) per year. As of July 2001, Maine screens for 9 mandatory conditions (including hemoglobinopathies) and has an optional panel of 19 metabolic disorders.

### FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Section Number: Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2004

Field Note:

The percent of newborns who are screened and confirmed with conditions mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) and who receive appropriate follow up as defined by their State. (National Newborn Screening and Genetic Resource Center)

The indicators are for the calendar years 2002 and 2003 and are based upon the newborn screening bloodspot filter paper specimens. The results are reported in the columns for their respective years. The denominator refers to the number of births that occurred in Maine (occurent births) per year. As of July 2001, Maine screens for 9 mandatory conditions (including hemoglobinopathies) and has an optional panel of 19 metabolic disorders.

2. **Section Number:** Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The indicator for 2002 of 62.8 % is based on the first SLAITS Survey carried out in 2001. It is comparable to the national indicator of 57.5%. An objective of 75% is projected for 2007 when survey data becomes available from the second administration of SLAITS.

The indicators for 1998 to 2001 are NOT percentages. They reflect the average score (on a 0 to 18 point scale) of a family participation questionnaire. The method for determining the score changed in 2000 so that parents themselves answered the questionnaire. This represents a more accurate measure of parental involvement in the CSHN Program.

3. **Section Number:** Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The 2002 indicator of 60% is the measure for Maine from the SLAITS Survey. This is higher than the national measure of 52.6 %. An objective of 72% is projected for 2007 when the survey data from the next administration of SLAITS becomes available.

The percentages for 1998 to 2001 refer to the original NPM # 3. For 1998 the numerator and denominator were based on estimates from the 1992 National Health Information Survey (NHIS), adjusted for Maine. From 1999-2001, the CSHN Program used an 18% prevalence rate based on the work of Paul Newacheck.

4. **Section Number:** Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The 2002 indicator of 67.3% is from the SLAITS Survey. This is higher than the national indicator of 59.6%. An objective of 75% is projected for 2007 when the survey data from the next administration of SLAITS is available.

The indicator for the years prior to 2002 refer to the percentage of children directly served by the CSHN Program who had adequate insurance.

5. **Section Number:** Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The indicator of 77.3% for 2002 is from the SLAITS Survey. This is comparable to the 74.3 % for the nation as a whole. An objective of 85% is projected for 2007 when the data from the next administration of SLAITS will be available. This was a new measure in 2002 and no data is available prior to 2002.

6. **Section Number:** Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The indicator of 14.9% is based the SLAITS Survey. An objective of 25% is projected for 2007 when the survey data from the next administration of SLAITS is available. This was a new measure in 2002 and there is no data available before 2002. Maine is the only state in the union with enough information to reliably report on this measure. The national indicator is 5.8%.

7. **Section Number:** Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

Year: 2005

**Field Note:**

The indicator of 72.8 (+/- 6.8) is for calendar year 2002, and the indicator of 70.8 (+/- 7.3) is for calendar year 2003. Reporting from 1998 through 2003 is based upon the National Immunization Survey's appropriate 4:3:1:3:3 immunization. The estimated percent of children immunized is similar to national estimates. The objectives have been adjusted based on a historical review of immunization rates in Maine.

**8. Section Number:** Performance Measure #8**Field Name:** PM08**Row Name:****Column Name:**

Year: 2005

**Field Note:**

The Indicator of 12.6 is for calendar year 2002. An objective of 12 per 1,000 was selected based upon review of data from countries with the lowest teen birth rates. The teen birth rate for the nation as a whole in 2001 was 25.

**9. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:**

Year: 2005

**Field Note:**

The indicator of 34.1 in calendar year 2002 and 22.7 in calendar year 2003 is the percent of Medicaid eligible children ages 8 to 9 years of age who had at least one sealant placed on a permanent tooth. Of note is that the procedural coding by dental offices is inconsistent. This influences the ability to determine how many children received sealants (Code D1351) and may partly explain the variation from 2002 to 2003. The data does not include children who received dental care through a provider approved for claims bundling such as a federally qualified health center (FQHC) or a rural health center (RHC). The result is an under reporting of children insured through MaineCare who receive any dental services including sealants. The reduction from 2002 to 2003 may also be due to increased number of dental provider organizations that were approved for claims bundling. Prior to 2001, the indicators for this objective came from the 1999 Smile Survey. Due to the infrequency of the Smile Survey, we chose the Medicaid population for this indicator.

**10. Section Number:** Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:**

Year: 2005

**Field Note:**

The reported rate of 3.0 represents a five (5) year moving average for 1998 to 2002 and is reported in the 2002 column. Due to the small number of motor vehicle deaths, a five (5) year moving average has been reported since 1998, in order to control for large year to year variances.

**11. Section Number:** Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:**

Year: 2005

**Field Note:**

The indicators of 60.5 and 60.1 are for calendar years 2002 and 2003 respectively. The rate reflects exclusively breastfed newborns at hospital discharge. This figure does not include the infants who were breast and bottle fed. The data source is the bloodspot filter paper newborn screening specimen. Thus, the denominator is the number of births that take place in Maine. The indicator shows a slight decrease from prior years. While Maine's rates are lower than those of some other states, many of those states do not report using a measure of exclusive breastfeeding.

**12. Section Number:** Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:**

Year: 2005

**Field Note:**

Please note that the measure reported here is the percentage of newborns who have access to a hearing screen before hospital discharge.

The indicator of 98.4 % is for the calendar year 2003. No data are available until 1997. The data from 1997-2003 represent the percent of newborns who had ACCESS to screening, not the percent of newborns actually screened. The increasing percentage of newborns who had ACCESS reflects increases in the number of hospitals that have screening equipment in place. By 2004, we will be able to assess the actual percentage of newborns screened. Objectives for 2002 and 2003 are based on access. The subsequent objectives for 2004-2007 reflect reasonable estimates for the percentage of infants who actually will be screened.

**13. Section Number:** Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:**

Year: 2005

**Field Note:**

Percent of children without health insurance (Capacity)

The indicator of 6.7 %, for the calendar year 2002, is the first year that we are deriving this measure from the Maine Child Health Survey for kindergarten age children. Interestingly, the 6.7 % estimated uninsured kindergartners from the Maine Child Survey sample is close to the 5.9 % of children birth to 5 estimated to be uninsured from a Year 2000 survey titled, "Health Insurance Coverage Among Maine's Children" (Ormand C., Salley S., Kilbreth E., 2000). The indicators from 1999 to 2001 were derived from random telephone surveys carried out by Mathematica in partnership with the Muskie School of Public Service at the University of Southern Maine. Our objective of 10 % by 2008 is influenced by persisting economic uncertainty mixed with anticipated benefits from Maine's new health care reform, Dirigo Health Plan.

**14. Section Number:** Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:**

Year: 2005

**Field Note:**

The latest indicators are for calendar year 2002 and 2003. The term "potentially Medicaid eligible" needs to be clarified. Medicaid eligibility is defined as the total number of persons who apply to Medicaid and are found eligible. It does NOT include uninsured persons. The large increase in the numerator from 2000 onward reflects a greater understanding by Medicaid of what the data means. Starting in 2000 the Medicaid agency pulled any claim whatsoever, while prior to 2000 it pulled claims by a combination of category of service and procedure codes. Because FQHCs, RHCs, and ambulatory hospital based practices bundle their claims and do not provide procedure codes, the identification of claims by procedure code was not accurate. The denominator is based on children determined to be Medicaid eligible on a month to month basis, rather than the HEDIS method of using 11 months of continuous eligibility. The denominator had a significant increase in 2001 primarily due to the development of the Healthy Maine Prescriptions Rx Program. Participants in the Healthy Maine Prescriptions Rx Program are only eligible for prescription benefits.

**15. Section Number:** Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:**

Year: 2005

**Field Note:**

The latest indicator of 1.1 percent represents the five (5) year moving average for 1998 to 2002 and is reported in the column for 2002. Due to the small number of very low birth weight births, Maine has been reporting on five (5) year moving averages since 1998 in order to control for large year to year variances. The five (5) year moving average of the percentage of very low birth weight in Maine has remained steady for the past 8 years.

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

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The latest indicator of 10.4 represents a five (5) year moving average for 1998-2002 and is reported in the 2002 column. Due to the small number of youth suicide deaths in Maine each year, we have used five (5) year moving averages since 1998, in order to control for large year to year variances.

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

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The latest indicator of 80.1% is a five (5) year moving average from 1998 to 2002 and is reported in the 2002 column. Due to the small number of very low birth weight births, data reported has been five (5) year moving averages since 1998, in order to control for large year to year variances.

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

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The latest indicator of 87.7 is for the calendar year 2002. No observable trends are noted. Maine continues to do better than the nation as a whole on this measure. The 2006 and beyond objective is 90% which is the Healthy Maine 2010 goal.

**19. Section Number:** State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The percent of unintended births in women less than 24 years of age

Even though this measure has not changed since 1996, we decided to keep it because it is one of the few measures that gives us information about the often overlooked population of young adult women. Next year, with the Comprehensive Strengths and Needs Assessment, we'll do further analysis and look at the percent of unintended births according to age groups 18-19 and 20-24, and may adjust this measure accordingly.

We rely on the CDC to provide us with data for this measure.

**20. Section Number:** State Performance Measure #3

**Field Name:** SM3

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Percent of women enrolled in WIC who are breast feeding their infants at six months of age. (Capacity)

Data for this performance measure is obtained through the state WIC Program. Data for 2003 is based on a two month sample of WIC mothers conducted from November to December of 2003. It is difficult to assess the significance of slight variations from year to year.

**21. Section Number:** State Performance Measure #4

**Field Name:** SM4

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The percentage of adolescents (high school students) who have received routine dental care in the last year (Capacity)

The source of data is the Youth Risk Behavioral Survey (YRBS) which reports on the percentage of middle and high school students who have seen a dentist for a check-up, exam, cleaning, or other dental work within the 12 months preceding the survey. The YRBS is conducted every other year during the odd numbered year (1999, 2001, 2003, etc.). Hence, indicators and objectives in even numbered years will mirror those for odd numbered years.

**22. Section Number:** State Performance Measure #5

**Field Name:** SM5

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The motor vehicle death rate per 100,000 among persons 15-21 years of age (outcome).

Beginning in 1998, the rate reported is a 5 year average due to the small number of motor vehicle deaths in this age group each year. The indicator for 1998, for example, is the average for the 5 year period of 1994-1998. The motor vehicle death rate has increased from 27 to 31.3 since the 1998 reporting year.

For 1998-2002, the average rate for the 15-19 age group was 30.4, and for the 20-21 age group, it was 33.7. It appears that neither of these two age groups is driving the overall rate.

**23. Section Number:** State Performance Measure #7

**Field Name:** SM7

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

To assure timely access to genetic services.

The most recent indicator of 86.5% is for State Fiscal Year 2003. This indicator has been measured by calculating the % of pregnant women receiving genetic services who are seen within two weeks of referral.

2003 is the last year that data will be reported on this measure. Planning will begin in the fall of 2004 for the new state measure #12, which will measure the % of primary care providers who have knowledge of the impact of genetics on the health of children.

- 24. Section Number:** State Performance Measure #8  
**Field Name:** SM8  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The percent of overweight adolescents in Maine

Beginning with calendar year 2001, the data we report is based on the YRBS overweight high school students. Overweight defined as  $\geq 95\%$  BMI% for age. The YRBS is done every odd year, so the 2003 indicator reflects the result of the YRBS 2003 survey. The indicator for 2003 (13%) is based on a weighted sample from the YRBS, so no numerator and denominator are available. The sample is based on grade levels 9-12, not on any specific age range. Prior to 2001, the performance measure was based on the National Health and Examination Survey (NHANES III).

- 25. Section Number:** State Performance Measure #9  
**Field Name:** SM9  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The percent of children who are overweight

This is a new measure. For 2002, we used baseline data from the NHANES III. However, starting in 2003, we use the Maine Child Health Survey to measure this indicator. The survey is administered to children in kindergarten, third, and fifth grades. Data is weighted to make it possible to generalize to the whole population. The indicator of 15.2 % (c.i. 10.5 - 21.9) is for Maine children who entered kindergarten in the fall of 2002.

- 26. Section Number:** State Performance Measure #10  
**Field Name:** SM10  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The percent of high school students who report being in a physical fight in the past year.

This is a new measure. The data source will be the biennial Youth Risk Behavioral Survey (YRBS), with baseline data from 2001. Since this survey is administered in odd years, objectives have been set for the upcoming odd years. In 2003, 27% of high school students were in a physical fight in the 12 months preceding the survey. This represents a drop from 31 % in 2001.

- 27. Section Number:** State Performance Measure #13  
**Field Name:** SM13  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
To increase the percentage of CSHN less than or equal to 18 years of age receiving comprehensive care coordination through a medical home.

This is a new measure. We will start reporting on it in the 2005 MCH Block Grant Application for calendar year 2004. The old SPM #6 - the percent of CSHN receiving direct services from the State CSHN Program - has outlived its usefulness and is now discontinued. The new measure will allow us to measure the effectiveness and scope of care coordination for the CSHN population through the medical home. We will use the SLAITS outcome measure #2 for Maine (60 % in 2002) as the baseline for this state measure. We project an objective of 70 % for 2007 after SLAITS is next administered and survey data is available.

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

**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	5.6	5.5	5	5.1	5
Annual Indicator	5.3	5.0	5.3	5.2	
Numerator	366	344	363	356	
Denominator	68,629	68,344	68,328	68,220	
Is the Data Provisional or Final?				Provisional	

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

**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	1	1	1	1	1
Annual Indicator	1.3	1.3	2.2	2.6	
Numerator	6.5	6.5	11.9	13.1	
Denominator	5.2	5	5.3	5.1	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1	1	1	1	1
Annual Indicator					
Numerator					
Denominator					

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

**OUTCOME MEASURE # 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	4	3.9	3.7	3.6
Annual Indicator	3.8	3.6	3.9	3.8	
Numerator	259	246	265	261	
Denominator	68,629	68,344	68,328	68,220	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3.6	3.6	3.6	3.6	3.6
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 # 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	1.6	1.6	1.5	1.4	1.4
Annual Indicator	1.6	1.4	1.5	1.4	
Numerator	107	98	103	95	
Denominator	68,629	68,344	68,328	68,220	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.4	1.4	1.4	1.4	1.4
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 # 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	7.5	7.3	7.5	7.7	7.6
Annual Indicator	8.1	7.6	7.7	7.8	
Numerator	556	521	525	531	
Denominator	68,629	68,344	68,328	68,220	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	7.6	7.5	7.5	7.4	7.4
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 # 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	21	20	20	19.5	19.5
Annual Indicator	20.2	19.8	18.3	18.2	
Numerator	236	231	214	208	
Denominator	1,169,278	1,166,447	1,167,011	1,144,898	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	19	19	18	18	18
Annual Indicator					
Numerator					
Denominator					

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

## FORM NOTES FOR FORM 12

None

### FIELD LEVEL NOTES

- 1. Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The latest indicator of 5.2 is the five (5) year moving average for 1998-2002 and is reported under the column for 2002. Due to the small number of deaths, we have reported the infant mortality rate as a five year moving average since 1998 in order to control for large year to year variances. Maine continues to have one of the lowest infant mortality rates in the country. It is lower than the U. S. infant mortality rate for whites, which was 5.7 in 2001.
- 2. Section Number:** Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The ratio of the black infant mortality rate to the white infant mortality rate (outcome).  
  
The latest indicator of 2.6 represents a five year moving average for 1998 to 2002 and is reported under the column for 2002. However, since only 15 black infants have died during the past 18 years (3 of whom were triplets in 2001), it is very difficult to make any inferences at all on the black to white infant mortality rate ratio in Maine.
- 3. Section Number:** Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The latest indicator of 3.8 is a five (5) year moving average for 1998 to 2002 and reported under the column for 2002. Due to the small number of neonatal deaths, we have reported the neonatal mortality rate based on five (5) year moving averages since 1998, in order to control for large year to year variances. Maine's rate continues to be lower than that for the nation as a whole.
- 4. Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The latest indicator of 1.4 is a five (5) year moving average for 1998 to 2002 and is reported under the column for 2002. Due to the small numbers of postneonatal deaths, we have reported the postneonatal mortality rate as a five year moving average since 1998, in order to control for large year to year variances. The rate has declined significantly from 2.8 in 1987 to 1.4 in 2002.
- 5. Section Number:** Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The latest indicator is the five (5) year moving average for 1998 to 2002 and is reported in the column for 2002. Due to the small number of perinatal deaths, we have reported the perinatal mortality rate as a five (5) year moving average since 1998, in order to control for large year to year variances. The perinatal mortality rate has been on a gradual downward trend since 1985.
- 6. Section Number:** Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The latest indicator of 18.2 is the five (5) year moving average for 1998 to 2002 and is reported under the column for 2002. Due to the small number of deaths, we have reported rates as five (5) year moving averages since 1998, in order to control for large year to year variances. No observable trend has been seen over this time. The 2004 National Kids Count Data Book reported a national rate of 22 for the year 2001. This is higher than Maine's most recent indicator of 18.2.

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

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

    3    

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

    3    

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

    1    

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:**     13    

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Main  
**Field Name:** Question3  
**Row Name:** #3. Family members are involved in the Children with Special Health Care Needs...  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Although members of the Family Advisory Council (FAC) have participated in the MCHBG review the past several years they would like to be more involved in writing the report. Specifically, a yearly overview of strategies that the CSHN Program is using to achieve the 6 federal performance measures by 2010. This would assist the FAC in developing their agenda to support the CSHN Program.
2. **Section Number:** Main  
**Field Name:** Question4  
**Row Name:** #4. Family members are involved in service training of CSHCN staff and providers.  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Members of the FAC have expressed interest in providing training to CSHN staff and other interested providers in addition to the annual parent conference. They have stressed the need to continually provide information on issues regarding children with special health needs and their families. These trainings and/or speaking engagements should become a regular component of the CSHN agenda.
3. **Section Number:** Main  
**Field Name:** Question5  
**Row Name:** #5. Family members hired as paid staff or consultants to the State CSHCN program...  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The CSHN Program routinely provides stipends and reimbursement for travel, however, the FAC strongly recommends that the CSHN Program hire a family member as paid staff to the program. Utilizing family member expertise will enhance program ability to develop and make recommendations that support children with special health needs and their families.
4. **Section Number:** Main  
**Field Name:** Question6  
**Row Name:** #6. Family members of diverse cultures are involved in all of the above activities  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The FAC recognizes the need to include members of diverse cultures. The CSHN Program and FAC will expand membership during FY05.

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

*[Sec. 505(a)(5)]*

**STATE: ME 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. Building systems and community capacities (including mental health)
2. Initiating and advocating for public health policy
3. Developing and delivering programs and services
4. Collaborating with others
5. Providing leadership
6. Establish the Maternal and Child Health Advisory Committee
7. Improve nutrition and physical activity for the MCH population
8. Enhance teen health initiatives and programs
9. Integrate MCH activities with tobacco cessation and prevention activities
10. Coordinate across Programs and Divisions on common issues

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

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

STATE: ME

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.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	Reverse TA w/ a State CSHN program.	CSHN Program needs to adjust human and financial resource distribution on the MCH pyramid. Moving more to pop. based and infrastructure services.	South Carolina, Pennsylvania, Wisconsin, or Virginia.
2.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	TA around adolescent health in areas of building capacity, integration of risk behavior strategies and development of state strategic plan.	TYAH Program needs to work across agencies on integration of strategies addressing risk behaviors and in developing a strategic plan for adolescent health in Maine.	Other Title V agencies with full time active adolescent health programs. Bring programs together to establish best practices.
3.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	TA for cultural and linguistic competency within Title V programs.	Culturally and linguistically competent Title V programs are necessary as Maine becomes more ethnically and racially diverse.	National Center for Cultural Competence
4.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	Assistance with financial analysis of MCH resources & development of a plan for appropriate reallocation.	Federal & State funds are fully utilized w/ no capacity to respond to emerging issues. Reallocations need to be made to avoid negative impacts on positive outcomes such as low adol. birth rate, IMR, high immunization & screening rates.	Not sure. Financial analyst? Economist? Faculty from a School of Public Health or a School of Public Administration?
5.	<b>Data-related Issues - Needs Assessment</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	TA and facilitation for CAST-5 assessment of the CSHN Program.	CSHN Program needs to adjust human and financial resource distribution on the MCH pyramid and in relation to the MCH 10 essential services. Need to assess capacity before developing strategic plan.	Sally Fogerty, Debbie Allen, Millie Jones, Kathy Peppe, or Holly Grayson.
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>          </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>          </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>          </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>          </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

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

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: ME**

SP #     2    

**PERFORMANCE MEASURE:**

The percent of unintended births in women less than 24 years of age

**STATUS:**

Active

**GOAL**

To reduce the incidence of unintended pregnancy in women <24 years of age.

**DEFINITION**

**Numerator:**

Number of women <24 surveyed through Pregnancy Risk Assessment Monitoring System (PRAMS) who indicate that their pregnancy was not wanted at the time of pregnancy or was never wanted.

**Denominator:**

Number of pregnant women <24 surveyed through PRAMS multiply quotient by 100, express as percent.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

PRAMS

**SIGNIFICANCE**

All children should be wanted and loved. Women, particularly women in poverty and adolescents are more likely to experience difficulty raising a child. Their pregnancies are more likely to be high risk. They are more likely to need public assistance, and less likely to obtain appropriate health care for themselves and their children. Providing assurance that pregnancies can occur when families are prepared and desirous of children may help improve health outcomes.

SP #      3

**PERFORMANCE MEASURE:**

Percent of women enrolled in WIC that are breastfeeding their infants at six months of age.

**STATUS:**

Active

**GOAL**

To obtain the benefits for infants from breastfeeding for at least the first year of life (per AAP and LaLeche recommendations); including nutritional, immunologic and psychosocial benefits. Six months serves as an intermediate measure of attainment of one year goal. An additional one year measure will be included once increased processes and interventions are in place

**DEFINITION**

**Numerator:**

Number of mothers of infants enrolled in WIC that are breastfeeding at six months of age.

**Denominator:**

Number of mothers of infants enrolled in WIC at six months of age. Multiply quotient by 100, express as a percent.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

WIC Data

**SIGNIFICANCE**

Breastfed infants have as much as 60% fewer visits to the doctor in the first year of life due to improved immunity and nutritional status. Studies also indicate that the maternal-infant bonding of breastfeeding promote security and may reduce the incidence of child abuse.

SP #        4

**PERFORMANCE MEASURE:**

The percentage of adolescents who have received routine dental care in the last year

**STATUS:**

Active

**GOAL**

To improve the oral health of Maine adolescents. Ongoing dental care is critical to assuring good oral health throughout life. This measure allows for the consistent measure of preventive services attained by teens and young adults.

**DEFINITION**

The % of high school students reporting a visit to a dental provider for routine care in the last year.

**Numerator:**

Number of high school students reporting visit to dental provider for routine care in the last year.

**Denominator:**

Number of high school students in the state.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The Youth Risk Behavioral Survey (YRBS) is a tool administered to teens and young adults in grades 6-12 in Maine on a biannual basis. It uses appropriate epidemiologic methods to obtain a representative sample. The survey reports results for middle and high school students separately.

**SIGNIFICANCE**

Good oral health is necessary to enable people to live healthy, productive lives. Dental disease is common, preventable, and amenable to early intervention. Early intervention in the dental disease process is essential in order to prevent or alleviate pain or infection, and contribute to better overall health. Children are an excellent target for extensive preventive strategies since early dental disease is reversible and treatment can prevent progression to advanced, more painful and destructive disease. This translates into reduced pain and discomfort for consumers as well as financial savings from decreased expensive interventions and restorative services. The proposed performance measure will give an indication of the extent to which teens and young adults are receiving routine dental care.

SP # 5

**PERFORMANCE MEASURE:**

The motor vehicle death rate per 100,000 among children 15 to 21 years of age

**STATUS:**

Active

**GOAL**

To reduce the rate of mortality due to motor vehicle related injuries among children ages 15 to 21.

**DEFINITION**

**Numerator:**

Number of motor vehicle related injury deaths among children 15 to 21 years of age.

**Denominator:**

Number of children aged 15 to 21. Express as rate/100,000

**Units:** 100000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Vital statistics, hospital discharge records and CODES data.

**SIGNIFICANCE**

Motor vehicle related injuries are the leading cause of death among children age 15 to 21. This also serves as a proxy measure for associated high risk behaviors resulting in primarily unintentional injuries. Multiple interventions should impact positively upon this measure, including license restrictions and education focused upon substance abuse and injury prevention.

SP #        7

**PERFORMANCE MEASURE:**

To assure timely access to genetics services.

**STATUS:**

Active

**GOAL**

To assure timely access to genetics services.

**DEFINITION**

Number of pregnant women receiving genetics services within 2 weeks of referral.

**Numerator:**

Number of pregnant women receiving genetics services within 2 weeks of referral.

**Denominator:**

Number of pregnant women referred for genetics services. Multiply quotient by 100, express as a percent.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

HP 2010 Objective 17.20 modified.

**DATA SOURCES AND DATA ISSUES**

Grantee agency reports and clients' surveys.

**SIGNIFICANCE**

Wait time for appointments is directly related to availability of genetics professionals and access to services. Comprehensive genetics services provided in a timely manner enable families to make informed choices regarding their pregnancy. A waiting time greater than 2 weeks serves as a proxy measure of the availability of genetic services and professionals.

SP #        8

**PERFORMANCE MEASURE:**

The percent of overweight adolescents in Maine

**STATUS:**

Active

**GOAL**

To reduce the prevalence of overweight in adolescents in Maine.

**DEFINITION**

This information is gathered from the Youth Risk Behavior Survey, which is administered every two years to middle and high school students in Maine.

**Numerator:**

Number of high school students who have a BMI for age > 95th percentile. BMI= Body Mass Index (weight (kg)/height squared (m))

**Denominator:**

Number of adolescents in the State of Maine

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The 1999 Maine Youth Risk Behavior Survey (YRBS) (grades 7-12) collected demographic data including age, weight and height, BMI is calculated from this data. However since this data is unweighted, it is not reported here. Maine has no surveillance system to collect anthropometric data on adolescents.

**SIGNIFICANCE**

Overweight and obesity are current public health issues and prevalent risk factors for chronic disease. National data show that the percentage of young people who are overweight has more than doubled in the past 30 years. According to the third National Health and Nutrition Examination Survey (NHANES III), approximately 13% of children ages 6-11 and 14% of adolescents ages 12-19 are overweight. Furthermore, more than a third of high school students do not participate in vigorous physical activity on a regular basis. Diet and physical activity are the two primary behavioral factors believed to be associated with overweight. Maine has added collection of self reported height and weight to the YRBS. This information will be collected biannually and represents the best current data regarding overweight and youth in the state.

SP # 9

**PERFORMANCE MEASURE:**

The percent of kindergarteners who are overweight.

**STATUS:**

Active

**GOAL**

To reduce the prevalence of overweight in kindergarteners.

**DEFINITION**

Number of kindergarteners who have a BMI for age greater than or equal to the 95th percentile. BMI=Body Mass Index [weight (kg)/height squared (m)].

**Numerator:**

Number of kindergarteners who have a BMI for age greater than or equal to the 95th percentile. BMI=Body Mass Index [weight(kg)/height squared(m)].

**Denominator:**

Number of kindergarteners who participated in the Maine Child Health Survey.

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

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

**DATA SOURCES AND DATA ISSUES**

Maine's Child Health Survey was conducted during registration and screening of kindergarten children statewide from late spring through fall, 2002. Height and weight measurements of the children reveal that 21% were at risk of overweight, and 15% were overweight. Maine WIC data show that 12% of children were overweight in 2000. Maine has no other surveillance system to collect anthropometric data on children.

**SIGNIFICANCE**

Overweight and obesity are current public health issues and prevalent risk factors for chronic disease. National data show that the percentage of young people who are overweight has more than doubled in the past 30 years. According to the third National Health and Nutrition Examination Survey (NHANES III), approximately 13% of children ages 6-11 are overweight.

**PERFORMANCE MEASURE:**

The percent of high school students who report being in a physical fight in the past year.

**STATUS:**

Active

**GOAL**

To reduce physical fighting among adolescents.

**DEFINITION**

The number of high school students who report taking part in a physical fight within the past 12 months (age 14-19).

**Numerator:**

The number of high school students who report taking part in a physical fight within the past 12 months (age 14-19).

**Denominator:**

The number of high school students participating in the YRBS.

**Units:** 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

Reduce fighting among adolescents.

**DATA SOURCES AND DATA ISSUES**

Youth Risk Behavioral System (YRBS)-- self-reported recall data -- only administered in odd years.

**SIGNIFICANCE**

Violence prevention programs are defined as programs that alter a community, neighborhood or school climate by producing change toward positive attitudes and tolerance of others; and by teaching social and emotional skills. About 20% of Maine students polled by the Dept. of Education reported not feeling safe at school. The importance of implementing age-appropriate prevention programs is critical to building youth tolerance and life skills. Recent Youth Risk Behavioral Surveys of Maine high school students show a significant exposure to violence. 39% of male and 22% of female youth report being in a physical fight within the past year. The Healthy Maine 2010 baseline for physical fighting among adolescents was at 31%, compared with a national rate of 36%. By 2001, the Maine rate was at 31%, and the national at 33%. The primary source of data for this measure will be the Youth Risk Behavioral Survey (YRBS).

**PERFORMANCE MEASURE:**

To increase the percentage of children with special health care needs less than or equal to 18 years of age in Maine receiving comprehensive care coordination.

**STATUS:**

Active

**GOAL**

To accurately identify the number of children in Maine who meet MCH definition of a child with special health needs. To determine to what extent the proportion of those Medicaid children identified with a special health need are receiving care coordination services through Medicaid's Primary Case Management Program. To determine if those care coordination services are different than those care coordination services provided by the Children with Special Health Care Needs Program.

**DEFINITION**

Number of children less than or equal to 18 years of age who received care coordination services through the State Title V CSHCN Program and Medicaid's Primary Case Management Program.

**Numerator:**

Number of children less than or equal to 18 years of age who received services through the State's Medicaid Primary Case Management Program.

**Denominator:**

Number of children in the state less than or equal to 18 years of age who are Medicaid eligible and have special health care needs (SLAITS data, 15.5%). Multiply quotient by 100, express as a percent.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

State CSHCN and Medicaid Programs.

**SIGNIFICANCE**

Identification of the special needs population is necessary in order to conduct appropriate needs assessments and direct initiatives and interventions based on these needs. Maine uses the following definition to define children with special health care needs: those children who have or are at increased risk for chronic physical, developmental, behavioral, or emotional conditions, and who also require health and related services of a type or amount beyond that required by children generally. Acknowledging the importance of the care coordination process which links Children with Special Health Care Needs and their families to health services and resources maximizes the potential for these children to obtain optimal health care and the opportunity to grow into adulthood.

**FORM NOTES FOR FORM 16**

We changed this form to reflect the fact that the YRBS reports separately for middle and high school students. Thus, this measure reports specifically on the % of high school students who received routine dental care in the past year.

**FIELD LEVEL NOTES**

None

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

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
<b>Annual Indicator</b>	33.4	25.2	30.3	25.0	
<b>Numerator</b>	240	178	216	163	
<b>Denominator</b>	71,835	70,726	71,350	65,113	
<b>Is the Data Provisional or Final?</b>				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.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
<b>Annual Indicator</b>	55.7	81.9	91.1	91.3	92.9
<b>Numerator</b>	11,240	4,609	5,714	11,153	11,730
<b>Denominator</b>	20,182	5,625	6,272	12,212	12,632
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
<b>Annual Indicator</b>	55.7	73.7	90.9	91.4	62.3
<b>Numerator</b>	11,240	42	60	171	71
<b>Denominator</b>	20,182	57	66	187	114
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
<b>Annual Indicator</b>	83.9	83.8	84.6	84.9	
<b>Numerator</b>	11,399	11,361	11,609	11,018	
<b>Denominator</b>	13,581	13,557	13,723	12,974	
<b>Is the Data Provisional or Final?</b>				Final	

**HEALTH SYSTEMS CAPACITY MEASURE # 07**

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

	<b>Annual Indicator Data</b>				
	<b>1999</b>	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>
<b>Annual Indicator</b>	<u>41.5</u>	<u>48.0</u>	<u>41.7</u>	<u>35.1</u>	<u>35.5</u>
<b>Numerator</b>	<u>8,139</u>	<u>8,276</u>	<u>7,438</u>	<u>10,479</u>	<u>11,330</u>
<b>Denominator</b>	<u>19,635</u>	<u>17,229</u>	<u>17,843</u>	<u>29,817</u>	<u>31,954</u>
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

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

	<b>Annual Indicator Data</b>				
	<b>1999</b>	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>
<b>Annual Indicator</b>	<u>7.6</u>	<u>10.4</u>	<u>9.3</u>	<u>6.5</u>	<u>9.1</u>
<b>Numerator</b>	<u>206</u>	<u>262</u>	<u>262</u>	<u>182</u>	<u>247</u>
<b>Denominator</b>	<u>2,720</u>	<u>2,510</u>	<u>2,820</u>	<u>2,800</u>	<u>2,713</u>
<b>Is the Data Provisional or Final?</b>				Final	Provisional

## FORM NOTES FOR FORM 17

None

### FIELD LEVEL NOTES

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

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

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

The indicator of 25 is for calendar year 2002. The data comes from Vital Records in the Maine Bureau of Health and from hospital discharge records at the Maine Data Health Organization.

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

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen. (Access)

This indicator is problematic. Due to Claims Bundling by Rural Health Centers, Federally Qualified Health Centers, and ambulatory hospital based clinics, we can not accurately count the number of infants receiving EPSDT procedure codes. There is no way to tell if the service is a periodic screening for infants seen in these settings. All we can do is count whether or not the infant had a claim. The large increase in the numerator in 2000 reflects a greater understanding by Medicaid of what the data means. Specifically, starting in 2000, Medicaid pulled any claim whatsoever, while prior to 2000, it pulled claims by a combination of category of service and procedure codes. Also, Medicaid changed its reporting time frame from federal fiscal year 2000 (ending 9/30/00) to calendar year 2001, so that data on the last three months of 2000 are not reported in either year. The HEDIS methodology of using 11 months of continuous eligibility is not used. The denominator is based on children determined to be Medicaid eligible on a month to month basis. If a child is eligible for any one month, he or she is counted for inclusion. The denominator increased in 2001 primarily due to increased enrollment for the Healthy Maine Prescriptions Rx Program. The Dirigo Health Plan, enacted in 2003, and other state initiatives will hopefully increase this indicator as a result of more people having access to health insurance which includes coverage of preventive health services such as well child checks.

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

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

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.

The most recent data is for calendar years 2002 and 2003. Prior to the development of SCHIP, Maine's Medicaid Program covered infants up to 185% FPL. With the addition of the SCHIP program, coverage was expanded to cover infants between 185% and 200% of FPL. This translates to a small number of infants. Rural Health Centers, Federally Qualified Health Centers, and ambulatory hospital based clinics are permitted to bundle their Medicaid claims. With claims bundling, the Medicaid agency is unable to specifically count the number of persons receiving EPSDT procedure codes, as there is no way to determine if the service was a periodic screen. We believe this results in under reporting for this indicator. There is a significant drop in the percentage of children less than one year of age receiving at least one periodic screen in CY03. To date, the etiology of the drop has not been determined. In 1999, Medicaid blended SCHIP with Title XIX.

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

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

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. (Prevention)

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

**Field Name:** HSC07

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

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

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

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

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.

We report 9.1 % for calendar year 2003. The increase noted from 1999 to 2000 was due in part to the CSHN Program's effort to vigorously focus on this population for inclusion into the Program. The indicator for 2002 went down due to reduced staffing.

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

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 (&lt; 2,500 grams)</i>	2002	Other	<u>6.5</u>	<u>6.1</u>	<u>6.3</u>
b) <i>Infant deaths per 1,000 live births</i>	2002	Matching data files	<u>4.5</u>	<u>4.1</u>	<u>4.3</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2002	Other	<u>83</u>	<u>92</u>	<u>88</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2002	Other	<u>83.1</u>	<u>87.7</u>	<u>86</u>

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

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>5</u> ) (Age range <u>6</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> )	2003	<u>150</u> <u>133</u> <u>    </u>
c) <i>Pregnant Women</i>	2003	<u>185</u>

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

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>	2002	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2002	<u>200</u> <u>    </u> <u>    </u>
c) <i>Pregnant Women</i>	2002	<u>200</u>

## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - Medicaid  
**Field Name:** Med\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Title 19 for infants is up to 185% of FPL.
2. **Section Number:** Indicator 06 - Medicaid  
**Field Name:** Med\_Children  
**Row Name:** Medicaid Children  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Medicaid (Title XIX) for children 1 to 5 goes to 150 % FPL, then Title XXI kicks in to 200 % FPL.  
Title XIX for children 6 to 18 goes to 133 % FPL, then Title XXI kicks in to 200 % FPL.
3. **Section Number:** Indicator 06 - Medicaid  
**Field Name:** Med\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Medicaid for pregnant women goes to 185 %, then Title XXI kicks in to 200 % FPL.
4. **Section Number:** Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Title XIX for infants is up to 185% of FPL. Title XXI covers infants from 186% to 200% of FPL.
5. **Section Number:** Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Children  
**Row Name:** SCHIP Children  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Title XXI eligibility for children age range 1 to 5 starts at 151% of FPL.  
  
Title XXI eligibility for children 6 to 18 starts at 134% FPL.
6. **Section Number:** Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Pregnant women are covered under SCHIP from 186 to 200 % FPL.
7. **Section Number:** Indicator 05  
**Field Name:** LowBirthWeight  
**Row Name:** Percent of ow birth weight (<2,500 grams)  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Vital records is the data source for "all" and "non-Medicaid". The Bureau of Medical Services (our state Medicaid agency) is the data source for "Medicaid".
8. **Section Number:** Indicator 05  
**Field Name:** InfantDeath  
**Row Name:** Infant deaths per 1,000 live births  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Medicaid matches its files with birth and death certificate files.
9. **Section Number:** Indicator 05  
**Field Name:** CareFirstTrimester  
**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Vital Records is the source of data for "all" and "non-Medicaid". The Bureau of Medical Services (the state Medicaid agency) is the source for Medicaid data. The number for "all" under this category differs from FPM #18 because this is one year data and FPM #18 is a five (5) year moving average. In order to have a valid comparison between Medicaid, non-Medicaid, and All, it was necessary to use single year data. We did not obtain 5 year moving averages for the Medicaid data.
10. **Section Number:** Indicator 05  
**Field Name:** AdequateCare  
**Row Name:** Percent of pregnant women with adequate prenatal care  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
PRAMS is the source of data for this indicator.

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

**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)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	Yes
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	3	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

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

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

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other: PTM Survey (Tobacco)	3	Yes
Office of Substance Abuse Survey	2	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)	3	Yes
Pediatric Nutrition Surveillance System (PedNSS)	3	No
WIC Program Data	3	Yes
Other: Maine Child Health Survey	3	Yes

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

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

## FORM NOTES FOR FORM 19

Items listed as "2"- Items given a "2" are data sources that reside in and are controlled by agencies other than the Title V program.

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A  
**Field Name:** BAD  
**Row Name:** Annual linkage of infant birth and infant death certificates  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Access to this data is via the Office of Data Research and Vital Statistics. This office is within the Maine Bureau of Health.
2. **Section Number:** Indicator 09A  
**Field Name:** BAW  
**Row Name:** Annual linkage of birth records and WIC eligibility files  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Linkage of birth certificates and WIC eligibility files will begin in 2006 through SSDI.
3. **Section Number:** Indicator 09A  
**Field Name:** BAN  
**Row Name:** Annual linkage of birth records and newborn screening files  
**Column Name:**  
**Year:** 2005  
**Field Note:**
4. **Section Number:** Indicator 09A  
**Field Name:** Discharge  
**Row Name:** Hospital discharge survey for at least 90% of in-State discharges  
**Column Name:**  
**Year:** 2005  
**Field Note:**
5. **Section Number:** Indicator 09A  
**Field Name:** BirthDefects  
**Row Name:** Annual birth defects surveillance system  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Annual Birth Defects Surveillance System mandatory reporting began 5/1/03.
6. **Section Number:** Indicator 09A  
**Field Name:** RecentMother  
**Row Name:** Survey of recent mothers at least every two years (like PRAMS)  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Access to this data is via the Office of Data Research and Vital Statistics. This office is within the Maine Bureau of Health.
7. **Section Number:** Indicator 09B  
**Field Name:** YRBSS\_09B  
**Row Name:** Youth Risk Behavior Surveillance  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Survey of adolescent health and behaviors occurs every two years. Access to this data is through the Department of Education. The Family Health Programs have a longstanding collaborative relationship with this Department of Education Program; therefore, data is fairly readily available.
8. **Section Number:** Indicator 09B  
**Field Name:** Other1\_09B  
**Row Name:** Other  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
PTM = Partnerships for a Tobacco Free Maine. It's a survey done in high schools by the Bureau of Health.  
  
Office of Substance Abuse survey is a more comprehensive survey, also aimed at high school students, and it is administered by the Department of Behavioral and Developmental Services.
9. **Section Number:** Indicator 09C  
**Field Name:** Other1\_09C  
**Row Name:** Other  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The Maine Child Health Survey. Covers kindergarten, 3rd, and 5th grades every two years. The 5th grade survey is administered in odd years. Kindergarten and 3rd grade survey are administered in even years. The Maine Child Health Survey is a joint effort of the Maine Asthma Program, Oral Health program, and Title V.

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

**HEALTH STATUS INDICATOR MEASURE # 01A**

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

	1999	2000	<u>Annual Indicator Data</u>		
			2001	2002	2003
Annual Indicator	6.0	6.0			
Numerator	822	819			
Denominator	13,608	13,590			
Is the Data Provisional or Final?				Provisional	

**HEALTH STATUS INDICATOR MEASURE # 01B**

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

	1999	2000	<u>Annual Indicator Data</u>		
			2001	2002	2003
Annual Indicator	4.6	4.5			
Numerator	601	594			
Denominator	13,160	13,170			
Is the Data Provisional or Final?				Provisional	

**HEALTH STATUS INDICATOR MEASURE # 02A**

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

	1999	2000	<u>Annual Indicator Data</u>		
			2001	2002	2003
Annual Indicator	1.1	1.1			
Numerator	732	733			
Denominator	68,626	68,341			
Is the Data Provisional or Final?				Provisional	

**HEALTH STATUS INDICATOR MEASURE # 02B**

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

	1999	2000	<u>Annual Indicator Data</u>		
			2001	2002	2003
Annual Indicator	0.8	0.8			
Numerator	529	531			
Denominator	66,550	66,232			
Is the Data Provisional or Final?					

**HEALTH STATUS INDICATOR MEASURE # 03A**

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

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	7.3	8.6			
Numerator	17	20			
Denominator	232,907	232,544			
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.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	3.6	3.7			
Numerator	45	46			
Denominator	1,239,244	1,235,755			
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.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	28.3	28.4			
Numerator	230	229			
Denominator	812,558	806,401			
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.

	1999	2000	Annual Indicator Data		
			2001	2002	2003
Annual Indicator	230.7	202.4			
Numerator	569	498			
Denominator	246,646	246,000			
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	34.9	36.2			
Numerator	86	89			
Denominator	246,646	246,000			

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	244.9	240.7			
Numerator	392	383			
Denominator	160,045	159,141			

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	10.7	11.5			
Numerator	465	501			
Denominator	43,593	43,662			

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	2.0	2.7			
Numerator	457	602			
Denominator	225,154	223,972			

Is the Data Provisional or Final?

**FORM NOTES FOR FORM 20**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Health Status Indicator #03B  
**Field Name:** HSI03B  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
Child Motor Vehical Crash Mortality is calcauted as a five year average. Thus, the indicator reported for 2002 of 3.1 represents a five year average for 1998-2002.
2. **Section Number:** Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The indicator reported for 2002 of 30.4 represents the moving average for the years 1998-2002.
3. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
The data source for this indicator is the hospital discharge record.

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

**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

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
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)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
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: ME**

**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

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
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)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
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: ME**

**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

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
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)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
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: ME**

**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)*

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
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)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
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: ME**

**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	_____
<b>Total - all children 0 through 19</b>	<b>0</b>

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

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

**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: ME**

**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