

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

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

APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/9/2004	APPLICANT IDENTIFIER									
1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER									
		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER									
5. APPLICANT INFORMATION												
Legal Name: Iowa Department of Public Health		Organizational Unit: Divison of Health Promotion and Chronic Disease Pr										
Address (give city, county, state and zip code) 321 E. 12th Street Lucas Building Des Moines, IA 50319 County: USA		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Jane Borst Tel Number: 515-281-7585										
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">2</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">7</td><td style="width: 20px; text-align: center;">1</td></tr></table>		4	2	6	0	0	4	5	7	1	7. TYPE OF APPLICANT: (Enter appropriate letter in box) A A. State H. Independent School District B. County I. State Controlled Institution of Higher Learning C. Municipality J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipality M. Profit Organization G. Special District N. Other (Specify)	
4	2											
6	0	0	4	5	7	1						
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: Health Resources and Services Administration, Maternal and Child Health Bureau										
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">3</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">4</td></tr></table> TITLE: Maternal and Child Health Services Block Grant		9	3	9	9	4	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Title V Block Grant					
9	3											
9	9	4										
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): State												
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:										
Start Date: 10/01/2004	Ending Date: 09/30/2005	a. Applicant IA Dept. of Public Health	b. Project Title V Block Grant									
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 checked="" type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW										
a. Federal	\$ <u>6,760,133.00</u>											
b. Applicant	\$ <u>796,731.00</u>											
c. State	\$ <u>5,679,015.00</u>											
d. Local	\$ <u>0.00</u>											
e. Other	\$ <u>1,702,628.00</u>											
f. Program Income	\$ <u>190,000.00</u>											
g. TOTAL	\$ <u>15,128,507.00</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 Julie McMahon		b. Title Divison Director	c. Telephone Number 515-281-3104									
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: IA

1. FEDERAL ALLOCATION

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

\$ 6,760,133

A.Preventive and primary care for children:

\$ 2,621,534 (38.78%)

B.Children with special health care needs:

\$ 2,428,840 (35.93%)

(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:

\$ 514,023 (7.6%)

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

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

\$ 796,731

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

\$ 5,679,015

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

\$ 0

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

\$ 1,702,628

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

\$ 190,000

7. TOTAL STATE MATCH (Lines 3 through 6)

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

\$ 5,035,775

\$ 7,571,643

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

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

\$ 15,128,507

9. OTHER FEDERAL FUNDS

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

a. SPRANS: \$ 317,512

b. SSDI: \$ 100,000

c. CISS: \$ 50,000

d. Abstinence Education: \$ 325,003

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 127,600

j. Education: \$ 165,913

k. Other:

AWARe grant \$ 100,000

ECCS grant \$ 100,000

Family Planning \$ 1,052,537

Healthy & Ready Work \$ 300,000

Medical Home \$ 137,606

Newborn CSCHN \$ 126,000

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

\$ 2,902,171

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 18,030,678

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

None

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: IA

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 7,131,009	\$ 6,919,976	\$ 6,940,521	\$ 0	\$ 6,760,133	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 870,969	\$ 1,211,216	\$ 640,318	\$ 0	\$ 796,731	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 5,350,256	\$ 6,785,644	\$ 5,685,629	\$ 0	\$ 5,679,015	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 1,969,913	\$ 1,874,594	\$ 2,108,368	\$ 0	\$ 1,702,628	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 273,200	\$ 259,502	\$ 250,666	\$ 0	\$ 190,000	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 15,595,347	\$ 17,050,932	\$ 15,625,502	\$ 0	\$ 15,128,507	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 3,029,347	\$ 2,910,955	\$ 3,196,001	\$ 0	\$ 2,902,171	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 18,624,694	\$ 19,961,887	\$ 18,821,503	\$ 0	\$ 18,030,678	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: IA

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 6,969,580	\$ 5,316,360	\$ 7,022,990	\$ 5,752,666	\$ 7,016,116	\$ 6,081,511
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 381,202	\$ 1,476,050	\$ 979,296	\$ 981,733	\$ 997,995	\$ 870,971
3. State Funds <i>(Line3, Form 2)</i>	\$ 5,681,565	\$ 5,503,351	\$ 6,004,025	\$ 5,362,591	\$ 5,519,837	\$ 5,284,290
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 1,176,381	\$ 1,220,130	\$ 1,208,080	\$ 1,613,788	\$ 1,743,710	\$ 1,837,147
6. Program Income <i>(Line6, Form 2)</i>	\$ 401,812	\$ 455,289	\$ 401,940	\$ 404,785	\$ 420,000	\$ 315,954
7. Subtotal <i>(Line8, Form 2)</i>	\$ 14,610,540	\$ 13,971,180	\$ 15,616,331	\$ 14,115,563	\$ 15,697,658	\$ 14,389,873
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 1,726,176	\$ 1,786,394	\$ 2,060,987	\$ 2,209,189	\$ 2,330,673	\$ 2,356,863
9. Total <i>(Line11, Form 2)</i>	\$ 16,336,716	\$ 15,757,574	\$ 17,677,318	\$ 16,324,752	\$ 18,028,331	\$ 16,746,736
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2002
Field Note:
The variance is attributable to reductions in IDPH Infrastructure Building expenditures for block grant funded state level MCH activities. Restrictions in state level activities implemented in response to a state budget crisis resulted in decreased expenditures for state level component of MCH program activities. This is an intentional strategy to make the FFY 2002 allocation available for 2003 and hopefully, mitigate the impact of state general funds reductions that occurred in the 2002 legislative session and are likely to continue into 2005.

The goal of this strategy is to provide for near level funding for local contract maternal and child health agencies for the remainder of the current project period (through Sept 05) in spite of decreased state and federal allocations.
- 2. Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2002
Field Note:
"Unobligated" funds were used to offset general fund reductions for local MCH agencies.
- 3. Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2003
Field Note:
The Children with Special Health Care Needs - Child Health Specialty Clinics experienced significant reduction of state funds and Medicaid match funds in FFY2003. Services were maintained by shifting to federal Title V funds.
- 4. Section Number:** Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2002
Field Note:
The variance is directly attributable to midyear de-appropriation of state general funds. State funds for local maternal health services were reduced by 24 percent (\$86,986). Child health services were reduced by eliminating funding for parental notification without rescinding department responsibilities (\$35,000+), reducing state home visiting funds for high risk families by approximately \$200,000 and implementing additional "across the board" reductions. In addition, CHSC state funds for direct support of regional services were also reduced by \$200,000; however, this is not reflected in the total because CHSC increased their match contribution from other state funds.
- 5. Section Number:** Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2003
Field Note:
As state funds decreased, local match was needed to meet requirements. This is the first year, Iowa claimed match provided through local maternal and child health agencies.
- 6. Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2002
Field Note:
State funds not included in the budget and not claimed as match funding for the Child Death Review Team (\$45,823) and Parental Notification (\$35,891). The remainder of the difference is explained by an increase in salary appropriations for cshcn received through the Dept of Education.
- 7. Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2002
Field Note:
The source of Program Income is CHSC direct services. Income from services was less than anticipated and suggests what might be expected as the cshcn program transitions to an emphasis on all levels of the pyramid rather than a concentration on direct care.
- 8. Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2002
Field Note:
Other federal funds closely approximated budgeted amounts except for Family Planning Title X funds which were significantly increased. Iowa applied for and received an additional \$302,700 in Title X funds to reach minority populations and increase family planning services delivered to males.
- 9. Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2003
Field Note:
The other federal funds expended is an estimation of the actual funds spent.

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

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

STATE: IA

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 2,356,138	\$ 1,949,736	\$ 2,256,899	\$ 0	\$ 2,481,551	\$ 0
b. Infants < 1 year old	\$ 416,870	\$ 518,040	\$ 495,412	\$ 0	\$ 296,908	\$ 0
c. Children 1 to 22 years old	\$ 6,660,524	\$ 7,323,351	\$ 5,992,846	\$ 0	\$ 6,528,088	\$ 0
d. Children with Special Healthcare Needs	\$ 5,691,181	\$ 6,863,859	\$ 6,456,580	\$ 0	\$ 5,307,937	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 470,634	\$ 395,946	\$ 423,765	\$ 0	\$ 514,023	\$ 0
g. SUBTOTAL	\$ 15,595,347	\$ 17,050,932	\$ 15,625,502	\$ 0	\$ 15,128,507	\$ 0

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

a. SPRANS	\$ 300,000	\$ 317,512	\$ 317,512
b. SSDI	\$ 100,000	\$ 100,000	\$ 100,000
c. CISS	\$ 100,000	\$ 50,000	\$ 50,000
d. Abstinence Education	\$ 741,512	\$ 325,003	\$ 325,003
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 0	\$ 0	\$ 0
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 127,600	\$ 127,600	\$ 127,600
j. Education	\$ 109,689	\$ 166,908	\$ 165,913
k. Other			
AWARE grant	\$ 0	\$ 0	\$ 100,000
ECCS grant	\$ 0	\$ 0	\$ 100,000
Family Planning	\$ 1,026,644	\$ 1,074,830	\$ 1,052,537
Healthy & Ready Work	\$ 0	\$ 300,000	\$ 300,000
Medical Home	\$ 0	\$ 128,703	\$ 137,606
Newborn CSCHN	\$ 0	\$ 0	\$ 126,000
AWARE - WH Grant	\$ 0	\$ 100,000	\$ 0
ECCS Grant	\$ 0	\$ 100,000	\$ 0
Genetics	\$ 295,199	\$ 299,445	\$ 0
Newborn CSHCN	\$ 0	\$ 106,000	\$ 0
Medical Home/CSHCN	\$ 128,703	\$ 0	\$ 0
Newborn Hearing /CSHCN	\$ 100,000	\$ 0	\$ 0
III. SUBTOTAL	\$ 3,029,347	\$ 3,196,001	\$ 2,902,171

FORM 4

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

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

STATE: IA

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 2,236,582	\$ 2,192,422	\$ 2,427,182	\$ 2,131,762	\$ 2,334,578	\$ 1,951,264
b. Infants < 1 year old	\$ 229,875	\$ 229,559	\$ 437,463	\$ 546,797	\$ 412,472	\$ 592,804
c. Children 1 to 22 years old	\$ 6,042,797	\$ 5,844,295	\$ 6,819,266	\$ 5,704,003	\$ 6,804,954	\$ 5,206,508
d. Children with Special Healthcare Needs	\$ 5,718,169	\$ 5,238,308	\$ 5,439,526	\$ 5,256,150	\$ 5,639,723	\$ 6,215,772
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 383,117	\$ 466,596	\$ 492,894	\$ 476,851	\$ 505,931	\$ 423,525
g. SUBTOTAL	\$ 14,610,540	\$ 13,971,180	\$ 15,616,331	\$ 14,115,563	\$ 15,697,658	\$ 14,389,873

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

a. SPRANS	\$ 188,719	\$ 188,793	\$ 300,000
b. SSDI	\$ 100,000	\$ 100,000	\$ 100,000
c. CISS	\$ 75,000	\$ 122,500	\$ 75,000
d. Abstinence Education	\$ 424,000	\$ 424,000	\$ 424,908
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 0	\$ 0	\$ 0
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 0	\$ 0	\$ 127,000
j. Education	\$ 320,457	\$ 311,603	\$ 129,382
k. Other			
Family Planning	\$ 618,000	\$ 707,300	\$ 684,637
Genetics	\$ 0	\$ 0	\$ 297,861
IDHS-HCCI	\$ 0	\$ 50,000	\$ 91,885
Newborn Hearing	\$ 0	\$ 0	\$ 100,000
Genetics-MCHB	\$ 0	\$ 56,791	\$ 0
Newborn Hearing-MCHB	\$ 0	\$ 100,000	\$ 0
III. SUBTOTAL	\$ 1,726,176	\$ 2,060,987	\$ 2,330,673

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:**

The variance is due to an estimated \$90,000 mid-year decrease in state appropriation for maternal health (adult health). Additionally, restrictions in state level activities implemented in response to a state budget crisis resulted in decreased expenditures for state infrastructure activities.

The remainder of the budget variance is explained by the program's deliberate effort to maintain a minimum carryover of \$250,000 in unobligated funds. This strategy should provide for level funding for local contract maternal health agencies for the remainder of the current project period (through Sept 05) in spite of decreased state and federal allocations.

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

Field Name: PregWomenExpended**Row Name:** Pregnant Women**Column Name:** Expended**Year:** 2003**Field Note:**

Budget projections included spending approximately \$348,000 of unobligated funds. Due to staff vacancies and increased discretionary grants, expenditures from Title V funds were less than budget.

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:**

Budget amounts for Infant Health were under projected. It appears that there was an increase in the number of infants served. In addition, the new data system, CARES, improved documentation of services delivered.

Iowa's number of infants served by Title V and Infant Health budget does not include the Newborn Metabolic Screening Program. This program is administered by the University of Iowa Hygienic lab. While state health agency's Center for Genetics provides oversight for surveillance and follow-up activities, neither budget nor expenses are reported by the Iowa Department of Public Health.

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:**

Budget amounts for Infant Health were under projected. It appears that there was an increase in the number of infants served. In addition, the new data system, CARES, improved documentation of services delivered.

Iowa's number of infants served by Title V and Infant Health budget does not include the Newborn Metabolic Screening Program. This program is administered by the University of Iowa Hygienic lab. While state health agency's Center for Genetics provides oversight for surveillance and follow-up activities, neither budget nor expenses are reported by the Iowa Department of Public Health.

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:**

The variance is due to an estimated \$837,231 mid-year decrease in state appropriation for child health including a decrease to the state's home visiting program for at-risk families. Additionally, restrictions in state level activities implemented in response to a state budget crisis resulted in decreased expenditures for state infrastructure activities.

The remainder of the budget variance is explained by the program's deliberate effort to maintain a minimum carryover of \$500,000 in unobligated funds. This strategy should provide for near level funding for local contract child health agencies for the remainder of the current project period (through Sept 05) in spite of decreased state and federal allocations.

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

Field Name: CSHCNExpended**Row Name:** CSHCN**Column Name:** Expended**Year:** 2002**Field Note:**

The variance is attributable to the increase match expenditures claimed. The budget included \$1,500,000 for professional staff devoted full time to the provision of services to handicapped children paid for by state appropriation. In addition, CHSC claims a 47 percent federally approved indirect rate. This amount was not included in the 2002 budget.

Expenditures for the III & Handicapped Waiver program exceeded the budgeted amount by \$187,663.

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

Field Name: CSHCNExpended**Row Name:** CSHCN**Column Name:** Expended**Year:** 2003**Field Note:**

The Children with Special Health Care Needs program - Child Health Specialty Clinics has had a significant decrease in state funds and Medicaid match funds.

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

Field Name: AdminExpended**Row Name:** Administration**Column Name:** Expended**Year:** 2002**Field Note:**

Restrictions in state level activities implemented in response to a state budget crisis resulted in decreased expenditures for program administrative activities.

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

Field Name: AdminExpended

Row Name: Administration

Column Name: Expended

Year: 2003

Field Note:

Restrictions in state level activities implemented in response to a state budget crisis resulted in decreased expenditures for program administrative activities.

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: IA

TYPE OF SERVICE	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 3,923,386	\$ 4,286,895	\$ 3,881,685	\$ 0	\$ 3,504,392	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 5,412,772	\$ 7,135,520	\$ 5,397,823	\$ 0	\$ 4,978,786	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,441,079	\$ 1,395,963	\$ 1,600,033	\$ 0	\$ 1,612,141	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 4,818,110	\$ 4,232,554	\$ 4,745,961	\$ 0	\$ 5,033,188	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 15,595,347	\$ 17,050,932	\$ 15,625,502	\$ 0	\$ 15,128,507	\$ 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: IA

TYPE OF SERVICE	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 9,717,260	\$ 7,337,554	\$ 8,862,531	\$ 7,264,229	\$ 7,750,978	\$ 6,893,489
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 991,393	\$ 2,669,905	\$ 1,836,194	\$ 2,983,666	\$ 3,105,775	\$ 3,679,900
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 981,170	\$ 1,069,583	\$ 1,006,024	\$ 1,020,876	\$ 861,310	\$ 874,960
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,920,717	\$ 2,894,138	\$ 3,911,582	\$ 2,846,792	\$ 3,979,595	\$ 2,941,525
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 14,610,540	\$ 13,971,180	\$ 15,616,331	\$ 14,115,563	\$ 15,697,658	\$ 14,389,874

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: 2002
Field Note:
Variance in IDPH Direct Care is primarily attributable to a decrease in state appropriations for local MCH agencies and the home visiting program.

The remainder of the variance is attributable to improved reporting by levels of the pyramid by CHSC. When the budget was constructed, CHSC funds (e.g. Program Income) were entered as direct care if not otherwise identified. When expenditure were reported, levels of the pyramid were identified. In addition, CHSC claimed a 47 percent federally approved indirect rate for CDD professional staff claimed as match. This amount was not included in the 2002 budget. See also Form 4 I d. Children with Special Healthcare Needs note.
- 2. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2002
Field Note:
CHSC claimed a 47 percent federally approved indirect rate for CDD professional staff as match, but this was not included in the budget . See also Form 4 I d. Children with Special Healthcare Needs note.
- 3. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2003
Field Note:
The Children with Special Health Care Needs program - Child Health Specialty Clinics had significant reduction of state funds and Medicaid match.
- 4. Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2002
Field Note:
The budget variance is primarily explained by the program's deliberate effort to maintain a minimum carryover of unobligated funds of approximately \$800,000. This strategy should allow for sustaining near level funding for local contract maternal and child health agencies for the remainder of the current project period (through Sept 05) in spite of decreased state and federal allocations. For the Level of Pyramid report, the total amount of "unobligated" is record in the Infrastructure Building category.
The remainder of the variance is attributable to restrictions in state level activities implemented in response to a state budget crisis and mid year deappropriations for state general funds.
- 5. Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2003
Field Note:
Due to staff vacancies and increased discretionary grants expenditures from Tittle V funds were less than budget.

FORM 6

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

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

STATE: IA

Total Births by Occurrence: 38,402

Reporting Year: 2003

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	38,289	99.7	24	4	4	100
Congenital Hypothyroidism	38,289	99.7	17	26	26	100
Galactosemia	38,289	99.7	7	0	0	
Sickle Cell Disease	38,289	99.7	9	10	10	100

Other Screening (Specify)

Biotinidase Deficiency	38,289	99.7	32	2	2	100
Congenital Adrenal Hyperplasia (CAH)	38,289	99.7	17	5	5	100

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

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

FORM NOTES FOR FORM 6

Disorders identified by the Iowa Neonatal Metabolic Screening Program are:
Phenylketonuria (PKU)
Galactosemia
Congenital Hypothyroidism
Congenital Adrenal Hyperplasia (CAH)
Medium chain acyl-CoA dehydrogenase Deficiency (MCAD)
Sickle Cell Anemia
Hemoglobin S, C, E
Biotinidase Deficiency
Expanded Screening using Tandem Mass Spectrometry (MS/MS)

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: SickleCellDisease_OneScreenNo
Row Name: SickleCellDisease
Column Name: Receiving at least one screen
Year: 2005
Field Note:
Sickle Cell Disease:
Disease - # of confirmed cases / needing treatment / percentage
Hemoglobin E - 5/5/100%
Hemoglobin E/Barts - 2/2/100%
Hemoglobin S/C - 1/1/100%
Sickle Cell Anemia - 1/1/100%
Sicke Cell /B - Thalassemia - 1/1/100%
2. **Section Number:** Main
Field Name: Congenital_Confirmed
Row Name: Congenital
Column Name: Confirmed Cases
Year: 2005
Field Note:
13 of 26 were initially reported as borderline and later confirmed as cases needing treatment.
3. **Section Number:** Main
Field Name: SickleCellDisease_Confirmed
Row Name: SickleCellDisease
Column Name: Confirmed Cases
Year: 2005
Field Note:
One of out the 10 was initially reported as borderline and later confirmed as cases needing treatment.
4. **Section Number:** Other Screening Types
Field Name: Other
Row Name: All Rows
Column Name: All Columns
Year: 2005
Field Note:
Expanded Tandem Mass Spectrometry (MS/MS)
Biotinidase Deficiency
Disease - # of confirmed cases / needing treatment / percentage

MCADD - 6/6/100%
VLCAD - 1/1/100%
3- MCC - 2/2/100%

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: IA

Reporting Year: 2003

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	10,258	59.0	0.1	27.0	12.0	2.0
Infants < 1 year old	19,569	91.0	0.0	2.7	61.0	0.0
Children 1 to 22 years old	97,229	87.0	0.2	3.3	9.6	0.0
Children with Special Healthcare Needs	6,106	27.0	1.0	68.0	4.0	0.0
Others	0	0.0	0.0	0.0	0.0	0.0
TOTAL	133,162					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: PregWomen_TS
Row Name: Pregnant Women
Column Name: Title V Total Served
Year: 2005
Field Note:
Data are obtained from the Women's Health Information System (WHIS).
2. **Section Number:** Main
Field Name: Children_0_1_TS
Row Name: Infants <1 year of age
Column Name: Title V Total Served
Year: 2005
Field Note:
Data are obtained from the Child and Adolescent Reporting System (CAREs). The number of infants served by Title V DOES NOT include an accounting of newborns receiving metabolic screening services. Title V funds do not subsidize this program in Iowa. Third party payors support newborn metabolic screening.
3. **Section Number:** Main
Field Name: CSHCN_TS
Row Name: Children with Special Health Care Needs
Column Name: Title V Total Served
Year: 2005
Field Note:
Children on Iowa's Title XXI Program are only known to CHSC by the insurance company which contracts with the Dept. of Human Services to serve Title XXI enrollees.
4. **Section Number:** Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2005
Field Note:
No other population groups are served by Title V.

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: IA

Reporting Year: 2003

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	37,473	34,863	1,260	246	916	9	0	179
Title V Served	10,258	8,423	634	105	143	34	0	919
Eligible for Title XIX	9,405	8,526	474	134	182	0	0	89
INFANTS								
Total Infants in State	38,115	35,602	1,274	0	938	0	0	301
Title V Served	19,569	7,046	477	41	153	17	293	11,542
Eligible for Title XIX	9,405	8,526	474	134	182	0	0	89

II. UNDUPLICATED COUNT BY ETHNICITY

	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	HISPANIC OR LATINO (Sub-categories by country or area of origin)				
				(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	34,716	2,757	0	0	0	0	0	0
Title V Served	8,370	1,857	31	1,458	0	9	100	290
Eligible for Title XIX	8,081	1,324	0	0	0	0	0	0
INFANTS								
Total Infants in State	35,614	2,519	0	0	0	0	0	0
Title V Served	7,666	1,867	10,036	194	0	3	28	1,642
Eligible for Title XIX	8,081	1,324	0	0	0	0	0	0

FORM NOTES FOR FORM 8

The total number of deliveries served by Title V were obtained from the Women's Health Information System (WHIS).
The total number infants served by Title V were obtained from the Child and Adolescent Reporting System (CAREs).
The total numbers of deliveries and infants were obtained from the 2003 Vital Statistics provisional data.
Eligible for Medicaid numbers were taken from 2002 Medicaid data.

FIELD LEVEL NOTES

1. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTotal_All
Row Name: Total Infants in State
Column Name: Total All Races
Year: 2005
Field Note:
The number of infants served by Title V does not include an accounting of newborns receiving metabolic screening services. Title V funds do not subsidize this program in Iowa. Third party payors support newborn metabolic screening.
2. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_TotalHispanic
Row Name: Total Deliveries in State
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
The 2003 Vital Statistics Provisional data does not report the sub-category for country or area of origin for Hispanic or Latino.
3. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalHispanic
Row Name: Title V Served
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
The Women's Health Information System (WHIS) allows clients to report multiple ethnicity categories.
4. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
2002 Medicaid data breakouts of Hispanic or Latino ethnicity into sub-categories were not available.
5. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_TotalHispanic
Row Name: Total Infants in State
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
The 2003 Vital Statistics Provisional data does not report the sub-category for country or area of origin for Hispanic or Latino.
6. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
2002 Medicaid data breakouts of Hispanic or Latino ethnicity into sub-categories were not available.

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

None

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

1. State MCH Administration:
(max 2500 characters)

The Iowa Title V Maternal and Child Health Services Block Grant Program is administered by the Bureau of Family Health, Division of Health Promotion and Chronic Disease Prevention, Iowa Department of Public Health. The bureau's responsibilities include: 1) conducting a statewide needs assessment; 2) developing policies, plans, and programs to improve the health of women, infants, children, adolescents, and families; and 3) administering family planning programs. The bureau is administratively responsible for coordinating Title V services for CSHCN through a contract with the University of Iowa Department of Pediatrics, Child Health Specialty Clinics (CHSC).

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>6,760,133</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>796,731</u>
4. State Funds (Line 3, Form 2)	\$ <u>5,679,015</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>1,702,628</u>
7. Program Income (Line 6, Form 2)	\$ <u>190,000</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>15,128,507</u>

9. Most significant providers receiving MCH funds:

<u>Local contract maternal and child health agencies</u>
<u>Regional Child Health Specialty Clinics</u>

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

a. Pregnant Women	_____ 10,258
b. Infants < 1 year old	_____ 19,569
c. Children 1 to 22 years old	_____ 97,229
d. CSHCN	_____ 6,106
e. Others	_____ 0

11. Statewide Initiatives and Partnerships:

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

Child Health - Twenty-six child health agencies provide education on preventive well child services to all families newly enrolled in Title XIX and ongoing care coordination for families not already served by managed care. Local agencies reach vulnerable populations and provide services regardless of funding source. In medically underserved areas of the state, agencies provide well child screening and preventive health services. Services are supported through collaborative efforts between the Department of Human Services (Iowa's Medicaid agency) and state and local Title V program partnerships. Child health agencies provided care to 103,854 infants and children in FFY02. Maternal Health - Twenty-six local maternal health agencies across the state served 9,673 low income pregnant women in Iowa in FFY03. The agencies are essential to increasing the number of women receiving prenatal care and promoting early entry into care. A wide range of health education and support services are available to low income, pregnant women. The agencies play a critical role in providing access to care. Ill and Handicapped Waiver Program - Child Health Specialty Clinics has an agreement with the Department of Human Services to provide care coordination to approximately 1,450 CSHCN enrolled in the Ill and Handicapped Waiver Program. Continuity of Care Program - CHSC collaborates with the University of Iowa Department of Pediatrics to improve the coordination of care for CSHCN within the hospital setting, as well as between hospital and community-based services. Approximately 300 children with complex conditions are currently served.

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

Newborn Hearing Screening Initiative - Effective January 1, 2004 Iowa hospitals were required to screen every newborn before discharge and report screening and diagnostic assessment for any child under three years old. The web-based reporting system, eScreenerPlus (eSP) has been installed at the Iowa Dept. of Public Health and will be rolled out to hospitals and AEAs. hawk-i outreach - Outreach for the state's child health insurance program (hawk-i) is conducted through local MCH agencies. Collaboration occurs at the local level through the child health agencies identification of community needs and resources. A full-time state hawk-i outreach coordinator directs and coordinates activities at the local level. Hemoglobinopathy Screening and Comprehensive Care Program (HS CCP) - HS CCP was established as a component of the Iowa Newborn Metabolic Screening Program. Under the HS CCP all newborns in Iowa are screened for a variety of hemoglobin disorders. Those diagnosed with a hemoglobin disorder are offered follow-up clinic services. There were 35 clinic visits in FFY03.

c. Infrastructure Building Services:
(max 2500 characters)

Databases for women's health (Women's Health Information System - "WHIS") and child health (Child and Adolescent Reporting System or "CAREs") generate electronic health records that provide critical information for informed decision making. Statewide and community level data reports assist communities in assessing local assets, needs, and services. These data systems have matured since implementation four years ago, making resulting data increasingly useful for monitoring local and statewide populations. Iowa's MCH Title V programs provide leadership for capacity building and program development. The Bureau of Family Health and Child Health Specialty Clinics work together to convene partner agencies and design creative responses to emerging issues. Using Title V funding as the cornerstone, they provide leadership in seeking appropriate funding partners to ensure implementation of needed strategies. Examples of new program and resource development include: 1) the Iowa Covering Kids and Families initiative (funded in part by Robert Wood Johnson Foundation); 2) the telehealth demonstration project to improve access for Children's Mental Health (funded in part by Magellan Corp.); 3) the Early Childhood Comprehensive Systems (ECCS) project (funded by MCHB); 4) Integrated Comprehensive Women's Health Services project for Assuring Women's Access to Health Resources (funded by MCHB); 5) the Iowa Medical Home Initiative (funded by MCHB); and 6) the Assuring Better Child Health Development (funded by Common Wealth Fund). Quality Improvement in Primary Care for CSHCN - CHSC leads a multi-organization effort using facilitation and institutional change strategies to assure that all CSHCN are enrolled in a medical home by 2010.

12. The primary Title V Program contact person:

Name Jane Borst, RN, MA
Title Bureau Chief
Address 321 East 12th Street
City Des Moines
State IA
Zip 50319-0075
Phone (515) 281-4911
Fax (515) 242-6384
Email jborst@idph.state.ia.us
Web www.idph.state.ia.us

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

Name Jeffrey Lobas, MD, MPA
Title Director, Child Health Specialty Clinics
Address 100 Hawkins Drive, Rm 247 CDD
City Iowa City
State IA
Zip 52242-1011
Phone (319) 356-1118
Fax (319) 356-3715
Email jeffrey-lobas@uiowa.edu
Web www.uihealthcare.com/chsc

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

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

PERFORMANCE MEASURE # 01

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	99	99.2	99.5	99.5	99.5
Annual Indicator	99.7	100.0	99.1	99.4	99.7
Numerator	37,579	38,170	37,412	37,598	38,289
Denominator	37,702	38,170	37,756	37,815	38,402
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	99.7	99.7	99.7	99.7	99.7
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 02

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective				40	59.2
Annual Indicator				58.6	58.6
Numerator				225	225
Denominator				384	384
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	59.9	60.6	61.3	62	
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 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	_____	_____	_____	50	58.2
Annual Indicator	_____	_____	_____	57.1	57.1
Numerator	_____	_____	_____	413	413
Denominator	_____	_____	_____	723	723
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	59.4	60.6	61.8	63	_____
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	_____	_____	_____	93	63.9
Annual Indicator	_____	_____	_____	64.5	64.5
Numerator	_____	_____	_____	468	468
Denominator	_____	_____	_____	726	726
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	63.3	63.3	63.9	64.5	_____
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 # 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	_____	_____	_____	67	79.4
Annual Indicator	_____	_____	_____	77.8	77.8
Numerator	_____	_____	_____	301	301
Denominator	_____	_____	_____	387	387
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	81	82.6	84.3	86	_____
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	_____	_____	_____	10	_____
Annual Indicator	_____	_____	_____	5.8	5.8
Numerator	_____	_____	_____	310	310
Denominator	_____	_____	_____	5,351	5,351
Is the Data Provisional or Final?				Final	

<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.

PERFORMANCE MEASURE # 07

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

	Annual Objective and Performance Data				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>82</u>	<u>85</u>	<u>90</u>	<u>90</u>	<u>91</u>
Annual Indicator	<u>86.0</u>	<u>84.4</u>	<u>86.0</u>	<u>89.0</u>	<u>91.4</u>
Numerator	<u>32,363</u>	<u>17,446</u>	<u>15,173</u>	<u>6,786</u>	<u>6,222</u>
Denominator	<u>37,631</u>	<u>20,663</u>	<u>17,635</u>	<u>7,625</u>	<u>6,805</u>
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>91</u>	<u>92</u>	<u>93</u>	<u>93</u>	<u>94</u>
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 08

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

	Annual Objective and Performance Data				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>21.8</u>	<u>21.7</u>	<u>21.6</u>	<u>16.4</u>	<u>16</u>
Annual Indicator	<u>18.2</u>	<u>17.2</u>	<u>16.4</u>	<u>15.7</u>	<u>14.9</u>
Numerator	<u>1,198</u>	<u>1,136</u>	<u>1,049</u>	<u>1,006</u>	<u>912</u>
Denominator	<u>65,686</u>	<u>66,000</u>	<u>64,011</u>	<u>64,011</u>	<u>61,361</u>
Is the Data Provisional or Final?				Provisional	Provisional

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>15</u>	<u>15</u>	<u>15</u>	<u>14.9</u>	<u>14.7</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	46	50	40	41	42
Annual Indicator	38.9	41.4	42.3	39.4	40.0
Numerator	14,198	14,829	14,891	13,259	12,513
Denominator	36,500	35,818	35,204	33,653	31,283
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	43	44	45	46	47
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 10

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	5.9	5.8	5.7	3.5	3.4
Annual Indicator	5.3	3.5	3.4	4.1	4.5
Numerator	29	19	19	23	26
Denominator	548,479	550,000	564,225	564,224	572,000
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3.4	3.3	3.2	3.1	3.1
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.

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	59.1	59.7	60	61	61
Annual Indicator	62.7	63.1	60.2	65.0	65.8
Numerator	23,263	24,085	22,528	24,396	25,124
Denominator	37,080	38,170	37,443	37,558	38,159
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	64	65	66	67	67
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 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	60	75	85	86	88
Annual Indicator	46.5	62.8	89.5	81.4	93.2
Numerator	17,411	23,982	33,633	30,728	16,682
Denominator	37,407	38,170	37,579	37,749	17,899
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	97	98	98	98	98
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	<u>8</u>	<u>6</u>	<u>6</u>	<u>5</u>	<u>4</u>
Annual Indicator	<u>8.6</u>	<u>6.1</u>	<u>6.2</u>	<u>4.7</u>	<u>8.6</u>
Numerator	<u>63,000</u>	<u>45,000</u>	<u>46,000</u>	<u>34,000</u>	<u>60,028</u>
Denominator	<u>734,000</u>	<u>736,000</u>	<u>747,000</u>	<u>723,000</u>	<u>698,000</u>
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>3</u>	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</u>
Annual Indicator					
Numerator					
Denominator					

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

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	<u>82</u>	<u>85</u>	<u>90</u>	<u>92</u>	<u>94</u>
Annual Indicator	<u>84.7</u>	<u>89.8</u>	<u>94.7</u>	<u>97.1</u>	<u>98.7</u>
Numerator	<u>142,179</u>	<u>155,127</u>	<u>173,131</u>	<u>180,433</u>	<u>195,915</u>
Denominator	<u>167,855</u>	<u>172,815</u>	<u>182,821</u>	<u>185,888</u>	<u>198,485</u>
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>98</u>	<u>98</u>	<u>98</u>	<u>99</u>	<u>99</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 # 15

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	1.4	1.4	1.4	1.4	1.3
Annual Indicator	1.1	1.3	1.2	1.2	1.2
Numerator	425	491	437	444	443
Denominator	37,549	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

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

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	13.7	13.8	13.9	13.8	13.7
Annual Indicator	10.2	10.6	14.1	7.9	8.9
Numerator	23	24	32	18	19
Denominator	225,927	226,000	226,420	226,420	214,000
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	11	10.5	10	9.8	9.6
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 17

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	80.1	80.5	63	65	70
Annual Indicator	61.2	64.0	67.0	64.0	87.6
Numerator	235	288	254	260	352
Denominator	384	450	379	406	402
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	80	84	85	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 # 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	86.4	86.5	86.8	87	88
Annual Indicator	86.7	87.1	87.9	88.1	88.7
Numerator	32,439	33,251	33,064	33,244	33,809
Denominator	37,407	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	88.5	88.6	88.7	88.8	89
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 children served by Title V, excluding CSHCN, who report a medical home.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	30	50	70	75	55
Annual Indicator	23.6	46.0	38.8	44.6	54.9
Numerator	4,095	7,820	9,715	46,703	64,165
Denominator	17,373	17,000	25,067	104,632	116,807
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	60	70	80	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.

STATE PERFORMANCE MEASURE # 4

Percent of low income children ages 1-4, enrolled in child health centers who have completed a referral to a dentist.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	16	20	21	22	23
Annual Indicator	15.1	9.0	3.0	1.5	4.5
Numerator	651	605	518	488	1,571
Denominator	4,325	6,725	17,430	31,553	35,033
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	6	8	9	10	12
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 8

The degree to which key data are collected, managed, analyzed, and utilized for strategic assessment of the determinants and consequences of the health status of women, children, and families.

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>14</u>	<u>40</u>	<u>44</u>	<u>64</u>	<u>67</u>
Annual Indicator			<u>61</u>	<u>66</u>	<u>70</u>
Numerator			<u>61</u>	<u>66</u>	<u>70</u>
Denominator	<u>96</u>	<u>96</u>	<u>96</u>	<u>96</u>	<u>96</u>
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>70</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.					

STATE PERFORMANCE MEASURE # 11

Percent of counties that report screenings and referrals for behavioral problems in young children (ages 3-5).

Annual Objective and Performance Data					
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>7</u>	<u>9</u>	<u>10</u>	<u>65</u>	<u>68</u>
Annual Indicator	<u>9.1</u>	<u>56.6</u>	<u>63.6</u>	<u>63.6</u>	<u>55.4</u>
Numerator	<u>9</u>	<u>56</u>	<u>63</u>	<u>63</u>	<u>51</u>
Denominator	<u>99</u>	<u>99</u>	<u>99</u>	<u>99</u>	<u>92</u>
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>69</u>	<u>70</u>	<u>70</u>	<u>70</u>	<u>72</u>
Annual Indicator					
Numerator					
Denominator					
Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.					

STATE PERFORMANCE MEASURE # 13

Percent of infants determined to be at-risk receiving monitoring and follow-up services at age 12 months.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	0	0	10	25	50
Annual Indicator	0.0	4.4	5.3	6.9	7.4
Numerator	0	195	240	310	323
Denominator	4,489	4,480	4,561	4,479	4,360
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	55	60.5	66.5	73.1	
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 14

Ratio of black-to-white preterm births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	2.1	2.1	1.8	1.5	1.2
Annual Indicator	2.1	2.4	2.3	1.1	1.4
Numerator	126.5	104.4	138.1	105	126
Denominator	59	44.1	61.1	95.1	92
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.0	1.0	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.

STATE PERFORMANCE MEASURE # 15

Percent of WIC clients, ages 2-5 years, that are overweight at or above the 95th percentile as defined by PedNSS.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	8.5	8.1	8.1	8.0	7.9
Annual Indicator	8.5	9.5	10.5	10.1	10.3
Numerator	3,700	3,850	4,209	4,387	4,546
Denominator	43,383	40,536	40,086	43,595	44,137
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	9	9	8.8	8.6	8.6
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.

STATE PERFORMANCE MEASURE # 16

Percent of families of 1 year old children enrolled in WIC who have participated in parenting education.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	15	15	20	20	15
Annual Indicator	15.0	15.0	15.2	14.2	14.8
Numerator	2,250	9,180	477	125	1,080
Denominator	15,000	61,197	3,142	880	7,300
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	17	20	22	24	26
Annual Indicator					
Numerator					
Denominator					

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

FORM NOTES FOR FORM 11

FFY02 data were obtained from the Neonatal Metabolic Screening Program. Total births is by occurrence.

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2005
Field Note:
FFY02 data were obtained from the Neonatal Metabolic Screening Program. Total births is by occurrence.
2. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
3. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
4. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
5. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
7. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2005
Field Note:
Immunization data are collected from January 2003 to December 2003 from public sector data.
8. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional data
9. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2005
Field Note:
For the sixth consecutive year, the Iowa Department of Public Health completed a survey to determine the prevalence of dental sealants on permanent molars of third-grade children in Iowa.
10. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional data
11. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
The 2003 breastfeeding rates were obtained from the Iowa Metabolic Screening Profile.
12. **Section Number:** Performance Measure #12
Field Name: PM12

Row Name:
Column Name:
Year: 2005

Field Note:

IDPH conducted a survey with OB Hospitals requesting aggregate newborn hearing screening data. Forty-nine of the 89 hospitals responded. The 48 hospitals had 17,837 total births. Of the 17,837 births, 16,642 were screened. This indicates a screening rate of 93 percent. On January 1, 2004, all OB Hospitals have a mandatory requirement to report newborn hearing screening numbers to IDPH. IDPH selected eScreenerPlus™ (eSPTM) as the software for web-based Early Hearing Detection and Intervention surveillance. Hospitals and audiologists will be able to use eSPTM to manage their screening programs and to report data to the State. eSP™ makes an integrated hearing record available to public health and medical professionals simultaneously.

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

Field Name: PM13

Row Name:
Column Name:
Year: 2005

Field Note:

FFY2003 data were obtained from the current population survey from the U.S. Census Bureau.

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

Field Name: PM14

Row Name:
Column Name:
Year: 2005

Field Note:

Data were obtained from the Annual EPSDT Report from the Medicaid CMS 416 report.

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

Field Name: PM15

Row Name:
Column Name:
Year: 2005

Field Note:

Vital Statistics 2003 Provisional data

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

Field Name: PM16

Row Name:
Column Name:
Year: 2005

Field Note:

Vital Statistics 2003 Provisional data

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

Field Name: PM17

Row Name:
Column Name:
Year: 2005

Field Note:

Vital Statistics 2003 data. The increase in percentage is due to the increase in the number of hospitals being classified as Regional 2 level hospitals.

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

Field Name: PM18

Row Name:
Column Name:
Year: 2005

Field Note:

Vital Statistics 2003 Provisional data

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

Field Name: SM3

Row Name:
Column Name:
Year: 2005

Field Note:

Data were obtained from the Child and Adolescent Reporting System (CAReS) year end report. The data are based on clients who reported a usual source of medical care that was available 24 hours a day, seven days a week, and maintains the client's record.

FFY03 data were obtained from the annual CAReS medical home report covering the entire fiscal year.

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

Field Name: SM4

Row Name:
Column Name:
Year: 2005

Field Note:

Data were obtained from the Child and Adolescent Reporting System (CAReS) 2003 year end report.

21. **Section Number:** State Performance Measure #8

Field Name: SM8

Row Name:
Column Name:
Year: 2005

Field Note:

The data were obtained from a checklist of components that documents data system development. The checklist indicates the degree to which Iowa's Title V data systems have been developed.

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

Field Name: SM11

Row Name:
Column Name:
Year: 2005

Field Note:

A survey was conducted with local public health nurses to identify the number of screenings and referrals for children ages 3-5 at the county level. There were 92 out of the 99 counties that replied to the survey. Fifty-one out of 92 are providing screenings and referrals for children ages 3-5.

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

Field Name: SM13

Row Name:

Column Name:

Year: 2005

Field Note:

Because the Part C database only tracks developmentally delayed infants and not at-risk infants, the indicator value for this performance measure remains substantially lower than the target objective. The Iowa Title V Programs support improved data capacity to track at-risk infants. A new performance measure and/or new data source will be chosen should the related state priority need be reconfirmed by the upcoming 5-year needs assessment.

24. Section Number: State Performance Measure #14

Field Name: SM14

Row Name:

Column Name:

Year: 2005

Field Note:

Vital Statistics 2003 Provisional Data

Numerator - Rate of Black preterm births

Denominator - Rate of White preterm births

Preterm - less than 37 week gestation.

25. Section Number: State Performance Measure #15

Field Name: SM15

Row Name:

Column Name:

Year: 2005

Field Note:

Data were obtained from the Pediatric Nutrition Surveillance System (PedNSS).

26. Section Number: State Performance Measure #16

Field Name: SM16

Row Name:

Column Name:

Year: 2005

Field Note:

Data were obtained from the WIC parent education survey. A standard definition of parent education has been developed by BFH staff and shared with WIC staff and clients.

Only infants receiving their one year WIC visit were reported for the 2003 data.

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

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>7</u>	<u>7</u>	<u>7</u>	<u>6</u>	<u>6</u>
Annual Indicator	<u>5.7</u>	<u>6.2</u>	<u>5.6</u>	<u>5.2</u>	<u>5.7</u>
Numerator	<u>213</u>	<u>238</u>	<u>210</u>	<u>198</u>	<u>216</u>
Denominator	<u>37,549</u>	<u>38,170</u>	<u>37,597</u>	<u>37,749</u>	<u>38,133</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>5.8</u>	<u>5.8</u>	<u>5.7</u>	<u>5.6</u>	<u>5.5</u>
Annual Indicator					
Numerator					
Denominator					

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

OUTCOME MEASURE # 02

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>2.4</u>	<u>2.3</u>	<u>3</u>	<u>2.8</u>	<u>2.5</u>
Annual Indicator	<u>3.8</u>	<u>3.5</u>	<u>2.1</u>	<u>2.6</u>	<u>3.8</u>
Numerator	<u>19.9</u>	<u>20.5</u>	<u>11.1</u>	<u>13.4</u>	<u>19.6</u>
Denominator	<u>5.3</u>	<u>5.9</u>	<u>5.4</u>	<u>5.1</u>	<u>5.2</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>2.9</u>	<u>3.1</u>	<u>3.6</u>	<u>3.6</u>	<u>3.5</u>
Annual Indicator					
Numerator					
Denominator					

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

OUTCOME MEASURE # 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	4.6	4.5	4.4	3.4	3.3
Annual Indicator	3.4	4.1	3.4	3.5	3.5
Numerator	126	156	128	133	135
Denominator	37,549	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3.3	3.2	3.2	3.1	3.1
Annual Indicator					
Numerator					
Denominator					

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

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	2	1.8	2	2	1.9
Annual Indicator	2.3	2.1	2.2	1.7	2.1
Numerator	87	82	82	65	81
Denominator	37,549	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.9	1.8	1.8	1.7	0.6
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 # 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	10.3	10.2	10.1	10.1	10
Annual Indicator	9.3	9.1	9.2	8.4	8.8
Numerator	348	347	347	318	334
Denominator	37,549	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	10	10	9.5	9.3	9.2
Annual Indicator					
Numerator					
Denominator					

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

OUTCOME MEASURE # 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	24.8	24.6	24.4	22	21.8
Annual Indicator	21.0	21.5	22.0	19.1	22.1
Numerator	115	118	124	108	116
Denominator	548,479	550,000	564,225	564,225	526,000
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	21.6	21.4	21.2	21	20
Annual Indicator					
Numerator					
Denominator					

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

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:
Vital Statistics 2003 Provisional Data
2. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional Data.
The projected annual performance objectives were changed for 2004-20008 based on a five year average of data.
3. **Section Number:** Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional Data
4. **Section Number:** Outcome Measure 4
Field Name: OM04
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional Data
5. **Section Number:** Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional Data
6. **Section Number:** Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2005
Field Note:
Vital Statistics 2003 Provisional Data

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

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

 1

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.

 1

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

 3

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

 1

Total Score: 10

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: IA 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. Assure continuity of health care and related services for women and children ages 0-21.
2. Assure access to dental treatment services for children in Iowa.
3. Enhance data collection, management, analysis, and utilization to support identification and investigation of health problems affecting women, infants, and children.
4. Increase development and use of quality improvement strategies applicable to general medical care of pediatric patients with special health care needs.
5. Establish an integrated system of comprehensive mental health services for children in Iowa.
6. Assure quality services for children with special health care needs enrolled in managed care plans. (THIS PRIORITY NEED HAS BEEN DISCONTINUED.)
7. Increase participation of infants in effective programs that provide monitoring and follow-up for the at-risk population.
8. Reduce health disparities among pregnant women and children.
9. Improve fitness of children.
10. Improve the preparation of families to meet the physical, emotional, and social needs of their children.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

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

STATE: IA

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.	State Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> 16 </u>	Advancing pre- service training into the health care professional curriculum.	To better integrated pre-service into health care curriculum.	Plenary or breakout session at the SCRIPT and Early Childhood Symposium. This is jointly sponsored by Iowa Department of Education and Dept of Public Health - ECCS project.
2.	State Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> 8 </u>	Capacity building of data workforce.	Enhance the progress made in Iowa's data integration steering committee and MCH data team.	Public Health Informatix Institute - Dave Russ
3.	Other 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>	Advancing core public health functions in public health.	System capacity building for maternal and child health infrastructure.	Plenary speakers at the 2005 Spring Public Health Conference.
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

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

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

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

SP # 3

PERFORMANCE MEASURE:	Percent of children served by Title V, excluding CSHCN, who report a medical home.
STATUS:	Active
GOAL	To assure continuity of health care and related services for children ages 0-21.
DEFINITION	<p>Client has a usual source of medical care that is available 24 hours a day, seven days a week, and maintains the client's record.</p> <p>Numerator: The number of Title V enrolled children with a reported medical home.</p> <p>Denominator: The total number of Title V children in the Child and Adolescent Reporting System.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>1-5 Usual Primary Care Provider</p> <p>Increase the proportion of persons with a usual primary care provider.</p>
DATA SOURCES AND DATA ISSUES	The data will be obtained from the Child and Adolescent Reporting System (CAREs). Clients who reported having a usual source of medical care that was available 24 hours a day, seven days a week, and maintain the client's record were considered to have a medical home. Selected criteria from the American Academy of Pediatrics' definition have been chosen for determination of medical home. Children with special health care needs are excluded from this performance measure because medical homes for CSHCN are measured in NPM #3.
SIGNIFICANCE	Infants, children, and youth should have preventive and acute or emergency care available continuously and without interruption. The medical care should be coordinated with other health, social, or family support services. Care should be accessible, family centered, continuous, comprehensive, coordinated, compassionate, and culturally appropriate. Title V agencies have the opportunity to secure a medical home for every child served in a child health center and to provide outreach to families and children not participating in health care services. Title V providers as community based agencies are well positioned to work with other public and private entities informing families of availability of medical home services and assisting families in application for various payment plans (Title XXI, Title XIX, private insurance, or Title V).

SP # 4

PERFORMANCE MEASURE:

Percent of low income children ages 1-4, enrolled in child health centers who have completed a referral to a dentist.

STATUS:

Active

GOAL

To assure low income children access to dental health services (preventive and restorative care).

DEFINITION

Children who are enrolled in a Title V Child Health Agencies who have completed a referral to a dentist.

Numerator:

Number of children MCH eligible ages 1-4 referred from child health centers who complete a dental referral.

Denominator:

Number of children enrolled in child health centers, MCH eligible ages 1-4.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

21-21 Dental Services for Low-Income Children.

Increase the proportion of children and adolescents under age 19 years at or below 200 percent of the Federal Poverty level who received any preventive dental services during the past year.

DATA SOURCES AND DATA ISSUES

Data from child health clinics

SIGNIFICANCE

Access and availability of dental health services for children were rated within the top four priorities of the 2000 Iowa Department of Public Health, Maternal, and Child Health Needs Assessment. Dental access to low income families is limited within Iowa due to a number of barriers including: lack of financial resources, lack of pediatric dentists trained to treat very young children with early childhood caries, shortage of dentists participating in the Medicaid program due to low reimbursement rates, issues of patient compliance (e.g., frequency of broken appointments), and perceived bureaucratic barriers associated with participating in the program (e.g., increased paperwork, slow payments).

SP # 8

PERFORMANCE MEASURE:

The degree to which key data are collected, managed, analyzed, and utilized for strategic assessment of the determinants and consequences of the health status of women, children, and families.

STATUS:

Active

GOAL

To identify priority needs and assess progress in meeting those needs for current and new target populations.

DEFINITION

Attached is a checklist of components that document data system development. The checklist indicates the degree to which the Iowa Title V data system has been developed.

Numerator:

NA

Denominator:

NA

Units: 96 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Survey of Title V and other relevant organizations' data system components and utilization. Resources for developing electronic data system for program data that meet the needs of local service providers are not readily available.

SIGNIFICANCE

Elements needed to build a supportive data capacity exist within the state's Title V program. Currently, vital records are a key source of information for needs assessment and most performance monitoring, but utilization is less than optimal. Efforts to link vital records and program data have the potential to enhance surveillance and diagnose emerging issues. Establishing priorities and upgrading resources can improve productivity and effectiveness.

PERFORMANCE MEASURE:	Percent of counties that report screenings and referrals for behavioral problems in young children (ages 3-5).
STATUS:	Active
GOAL	To improve the likelihood that children who are in need of mental health or behavioral services receive those services from a provider with documented specialty skills in child mental/behavioral health.
DEFINITION	<p>A survey is conducted with the Public Health Nurses to determine the number of screenings and referrals for three to five year old children.</p> <p>Numerator: Number of counties reporting screenings and referrals.</p> <p>Denominator: Number of counties in Iowa.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>18-7 Treatment for children with mental health problems.</p> <p>Increase the proportion of children with mental health problems who received treatment.</p>
DATA SOURCES AND DATA ISSUES	A survey will be conducted with the counties to assess access to screening and referral services for children ages 3-5 with behavioral problems.
SIGNIFICANCE	Mental health problems in children have gained increasing attention and priority in the national state public health systems over the last two decades. Using state and local collaborative relationships, Iowa's Title V program has the opportunity to foster the development of an integrated and comprehensive mental health services system are screening and referral activities.

SP # 13

PERFORMANCE MEASURE:

Percent of infants determined to be at-risk receiving monitoring and follow-up services at age 12 months.

STATUS:

Active

GOAL

To increase participation of at-risk infants in programs that provide effective monitoring and follow-up for the at-risk population.

DEFINITION

Numerator:

The number of Iowa live infants in a calendar year birth cohort who have been identified as being at-risk and who are enrolled in the Iowa Early ACCESS Program (IDEA Part C) by 12 months of age.

Denominator:

The number of live Iowa infants in the same calendar year birth cohort who have been identified as being at-risk. (This number initially may be estimated as 12% of the number of live births in a calendar year birth cohort.)

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Use vital statistics, program data sharing agreements, and at-risk incidence rate estimates to determine denominator. Use Iowa Early ACCESS enrollment data to determine the numerator.

SIGNIFICANCE

Selected physiological and psychosocial circumstances are associated with adverse developmental sequelae. Follow-up and monitoring programs are designed to detect developmental problems as early as possible and refer to early intervention services. In Iowa, the Early ACCESS Program is responsible for enrolling all infants in the state who are identified as being at-risk. Early ACCESS will function as a single statewide registry for at-risk infants and will be effective in obtaining early intervention services for infants who show developmental delay during follow-up and monitoring.

SP # 14

PERFORMANCE MEASURE:

Ratio of black-to-white preterm births.

STATUS:

Active

GOAL

To reduce the ratio of black-to-white preterm births to no more than 1.0 (indicating no disparity.)

DEFINITION

Preterm birth is defined as live birth at less than 37 weeks gestation.

Numerator:

Rate of black preterm live births annually (rate per 1000)

Denominator:

Rate of white preterm live births annually (rate of 1000)

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

16-11

Reduce preterm births.

DATA SOURCES AND DATA ISSUES

Iowa Vital Records, Maternal Health Database

SIGNIFICANCE

In Iowa, the black infant preterm birth rate is more than two times the white rate. In calendar year 1998, the black infant preterm birth rate was 131.4 per 1,000 compared with the white rate of 62 per 1,000. Among the leading causes of death in infants, the racial and ethnic disparity is greatest in disorders related to preterm birth, including respiratory disease, infections, and nutritional deficits. Women in low socioeconomic status and girls under the age of 18 statistically have poorer birth outcomes than other women. Enhanced services increase the likelihood of better birth outcomes by providing care coordination services.

PERFORMANCE MEASURE:	Percent of WIC clients, ages 2-5 years, that are overweight at or above the 95th percentile as defined by PedNSS.
STATUS:	Active
GOAL	Improve the fitness of Iowa children
DEFINITION	<p>PedNSS data classifies overweight as 95th percentile based on weight and height.</p> <p>Numerator: Number of children aged 2-5 years of get on the WIC program who meet the definition of obesity.</p> <p>Denominator: Number of children ages 2-5 years of age on the WIC program.</p> <p>Units: 100 Text: Percent</p>

HEALTHY PEOPLE 2010 OBJECTIVE	<p>19-3 Overweight or obesity in children and adolescents. Reduce the proportion of children and adolescents who are overweight or obese.</p>
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DATA SOURCES AND DATA ISSUES	Pediatric Nutrition Surveillance System (PedNSS)
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SIGNIFICANCE	<p>Obesity in children is on the rise in all age groups as demonstrated from the PedNSS data and nationwide surveys such as the National Health and Nutrition Examination Surveys. IDPH conducts WIC programs providing nutrition education in all counties and has infrastructure to ensure provision of child health services in all counties. Through the Iowa Dept. of Education, contact can be made with school nurse, athletic directors, physical education teachers, counselors, and classroom teachers. Nutrition education is promoted through the school lunch program. The Team Nutrition effort has been popular in Iowa and is expanding to 30 schools. The Iowa Nutrition Education Network seeks grant funds to promote nutrition education activities through social marketing campaigns and mini grants to local communities. A Child and Adolescent Obesity Task Force was formed to address the specific problem of child obesity.</p>
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SP # 16

PERFORMANCE MEASURE:

Percent of families of 1 year old children enrolled in WIC who have participated in parenting education.

STATUS:

Active

GOAL

To increase the number of parents who are participating in parenting education.

DEFINITION

The definition of parent education that the Division of Community Health has established: "Parenting education is a planned approach to providing parents with information that can help them promote their child's development."

Numerator:

Number of 1 year of children whose parents participated in a parenting education class.

Denominator:

Number of 1 year old children on WIC program.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Focus Area- Chapter 16 - Maternal, Infants, and Child Health

DATA SOURCES AND DATA ISSUES

WIC database and a survey completed by IDPH

SIGNIFICANCE

Parent education is a broad term applied in this definition to opportunities provided for parents and potential parents of children from birth to 18 years of age in the subject areas of parenting skills and practices, child growth and development, and family interaction/communication. Families fluctuate from stages of secure and nurturing to times of problems and challenges with parenting their children. It is essential every community in Iowa have parent education available from which families can easily access information. Providing parent education through a variety of sources and methods will give families choices for different levels of literacy, culture, format, and focus to meet the individual family needs.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

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

HEALTH SYSTEMS CAPACITY MEASURE # 01

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	57.4	53.0	53.0	53.0	
Numerator	1,049	999	999	962	
Denominator	182,820	188,413	188,413	181,603	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 02

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	88.5	90.4	91.9	92.3	99.9
Numerator	12,264	13,003	13,855	14,649	16,495
Denominator	13,854	14,388	15,075	15,874	16,508
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 03

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	0.0	0.0	100.0	100.0	100.0
Numerator	0	0	11	2	3
Denominator	150	5	11	2	3
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 04

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	72.6	72.7	69.0	77.0	
Numerator	26,440	26,870	25,899	29,024	
Denominator	36,415	36,960	37,545	37,694	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 07

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

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	<u>44.5</u>	<u>42.0</u>	<u>45.7</u>	<u>41.8</u>	<u>55.0</u>
Numerator	<u>15,443</u>	<u>14,513</u>	<u>16,175</u>	<u>16,221</u>	<u>22,440</u>
Denominator	<u>34,700</u>	<u>34,565</u>	<u>35,395</u>	<u>38,771</u>	<u>40,810</u>
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 08

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

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	<u>91.5</u>	<u>93.0</u>	<u>93.0</u>	<u>98.4</u>	<u>98.7</u>
Numerator	<u>993</u>	<u>743</u>	<u>639</u>	<u>803</u>	<u>1,203</u>
Denominator	<u>1,085</u>	<u>799</u>	<u>687</u>	<u>816</u>	<u>1,219</u>
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 17

None

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2005
Field Note:
The 2002 data were obtained from the Iowa Hospital Association data. The 2003 data will not be released until later in December of 2004.
2. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2005
Field Note:
The 2003 data were obtained from the Annual EPSDT Participation Report - CMS 416 Report.
3. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2005
Field Note:
The small number is due to financial eligibilty at 185 percent poverty level. Most infants who qualify for public health insurance qualify for Medicaid.
4. **Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2005
Field Note:
The 2003 data for the percent of women with a live birth during 2002 whose observed to expected prenatal visits is greater than or equal to 80 percent on the Kotelchuck Index has not been realized by vital statistics.
5. **Section Number:** Health Systems Capacity Indicator #07
Field Name: HSC07
Row Name:
Column Name:
Year: 2005
Field Note:
The 2003 data were obtained from the Annual EPSDT Participation Report - CMS416.
6. **Section Number:** Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2005
Field Note:
Our Iowa Title V definition of rehabilitative services includes mailing a detailed letter to each family of a child determined eligible for SSI. The letter reiterates the beneficiary's eligibility for Medicaid, as well as describes additional Title V CYSHCN services that may be useful or of interest.

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

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2002	Matching data files	<u>8.9</u>	<u>5.9</u>	<u>6.7</u>
b) <i>Infant deaths per 1,000 live births</i>	2002	Matching data files	<u>7</u>	<u>5</u>	<u>5.5</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2002	Matching data files	<u>79.6</u>	<u>91.9</u>	<u>88.8</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2002	Matching data files	<u>62.1</u>	<u>74.2</u>	<u>71.2</u>

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

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

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

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2003	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>18</u>) (Age range _____ to _____) (Age range _____ to _____)	2003	<u>200</u> _____ _____
c) <i>Pregnant Women</i>	2003	<u>200</u>

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

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

Field Name: SCHIP_Women

Row Name: Pregnant Women

Column Name:

Year: 2005

Field Note:

Iowa's SCHIP (hawk-i) does not serve pregnant women. Iowa's Medicaid program serves pregnant women up to 200 percent of poverty level.

2. **Section Number:** Indicator 05

Field Name: CareFirstTrimester

Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

Column Name:

Year: 2005

Field Note:

The data source for prenatal care are from 2002 Vital Statistics.

3. **Section Number:** Indicator 05

Field Name: AdequateCare

Row Name: Percent of pregnant women with adequate prenatal care

Column Name:

Year: 2005

Field Note:

The data for Kotelchuk index are taken from 2002 Vital Statistics data.

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

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

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	2	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	2	No
Annual birth defects surveillance system	1	No
Survey of recent mothers at least every two years (like PRAMS)	3	No

*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: IA

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)	2	No
Other:		

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

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	No
Pediatric Nutrition Surveillance System (PedNSS)	2	No
WIC Program Data	3	No
Other:		

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

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

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

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

HEALTH STATUS INDICATOR MEASURE # 01A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	6.2	6.1	6.4	6.7	6.6
Numerator	2,320	2,342	2,410	2,511	2,519
Denominator	37,549	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 01B

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	4.6	4.7	4.8	5.0	4.9
Numerator	1,711	1,718	1,753	1,808	1,800
Denominator	37,402	36,945	36,347	36,438	36,803
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	1.1	1.3	1.2	1.2	1.2
Numerator	425	491	437	444	443
Denominator	37,549	38,170	37,597	37,749	38,133
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02B

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	0.8	0.9	0.9	0.8	0.9
Numerator	315	342	319	301	317
Denominator	37,402	36,945	36,347	36,438	36,803
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>8.9</u>	<u>7.8</u>	<u>6.2</u>	<u>8.5</u>	<u>5.8</u>
Numerator	<u>52</u>	<u>47</u>	<u>37</u>	<u>51</u>	<u>33</u>
Denominator	<u>584,859</u>	<u>601,563</u>	<u>601,563</u>	<u>601,563</u>	<u>572,000</u>
Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 03B

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>5.6</u>	<u>3.3</u>	<u>3.5</u>	<u>4.3</u>	<u>4.5</u>
Numerator	<u>33</u>	<u>20</u>	<u>21</u>	<u>26</u>	<u>26</u>
Denominator	<u>584,859</u>	<u>601,563</u>	<u>601,563</u>	<u>601,563</u>	<u>572,000</u>
Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 03C

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>35.0</u>	<u>28.1</u>	<u>23.0</u>	<u>22.1</u>	<u>26.5</u>
Numerator	<u>146</u>	<u>121</u>	<u>99</u>	<u>95</u>	<u>117</u>
Denominator	<u>417,004</u>	<u>430,083</u>	<u>430,083</u>	<u>430,083</u>	<u>441,000</u>
Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 04A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>340.9</u>	<u>316.8</u>	<u>338.6</u>	<u>NaN</u>	<u>NaN</u>
Numerator	<u>1,994</u>	<u>1,906</u>	<u>2,037</u>	<u>0</u>	<u>0</u>
Denominator	<u>584,859</u>	<u>601,563</u>	<u>601,563</u>	<u>0</u>	<u>0</u>
Is the Data Provisional or Final?				Provisional	

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.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>623.4</u>	<u>608.7</u>	<u>566.0</u>	<u>NaN</u>	<u>NaN</u>
Numerator	<u>3,646</u>	<u>3,662</u>	<u>3,405</u>	<u>0</u>	<u>0</u>
Denominator	<u>584,859</u>	<u>601,563</u>	<u>601,563</u>	<u>0</u>	<u>0</u>
Is the Data Provisional or Final?				Provisional	

HEALTH STATUS INDICATOR MEASURE # 04C

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>2,899.3</u>	<u>2,729.2</u>	<u>2,681.8</u>	<u>NaN</u>	<u>NaN</u>
Numerator	<u>12,090</u>	<u>11,738</u>	<u>11,534</u>	<u>0</u>	<u>0</u>
Denominator	<u>417,004</u>	<u>430,083</u>	<u>430,083</u>	<u>0</u>	<u>0</u>
Is the Data Provisional or Final?				Provisional	

HEALTH STATUS INDICATOR MEASURE # 05A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>16.7</u>	<u>17.3</u>	<u>10.6</u>	<u>16.5</u>	<u>17.9</u>
Numerator	<u>1,844</u>	<u>1,912</u>	<u>1,176</u>	<u>1,827</u>	<u>1,865</u>
Denominator	<u>110,428</u>	<u>110,500</u>	<u>110,644</u>	<u>110,644</u>	<u>104,394</u>
Is the Data Provisional or Final?				Final	Final

HEALTH STATUS INDICATOR MEASURE # 05B

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>3.2</u>	<u>5.0</u>	<u>4.9</u>	<u>5.6</u>	<u>5.8</u>
Numerator	<u>1,593</u>	<u>2,459</u>	<u>2,438</u>	<u>2,792</u>	<u>2,927</u>
Denominator	<u>492,674</u>	<u>493,000</u>	<u>500,570</u>	<u>500,570</u>	<u>504,707</u>
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2005
Field Note:
The DOT is currently in the process of changing the data system. The 2002 and 2003 data are not available until December 2004.
2. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2005
Field Note:
The DOT is currently in the process of changing the data system. The 2002 and 2003 data are not available until December 2004.
3. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2005
Field Note:
The DOT is currently in the process of changing the data system. The 2002 and 2003 data are not available until December 2004.

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

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

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

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	38,133	35,620	1,274	301	938	0	0	0
Children 1 through 4	112,753	100,963	4,571	566	2,208	103	4,342	0
Children 5 through 9	154,939	141,347	6,278	817	2,787	105	3,605	0
Children 10 through 14	167,605	154,892	6,208	919	2,620	98	2,868	0
Children 15 through 19	177,043	165,377	5,393	835	3,025	99	2,314	0
Children 20 through 24	193,052	179,647	5,885	843	4,395	144	2,138	0
Children 0 through 24	843,525	777,846	29,609	4,281	15,973	549	15,267	0

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

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	35,614	2,519	0
Children 1 through 4	134,631	8,207	0
Children 5 through 9	177,515	9,745	0
Children 10 through 14	195,482	8,281	0
Children 15 through 19	206,747	7,434	0
Children 20 through 24	217,100	9,742	0
Children 0 through 24	967,089	45,928	0

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

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

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

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	36	31	4	0	0	0	0	1
Women 15 through 17	907	768	115	0	11	0	0	13
Women 18 through 19	2,365	2,145	164	0	36	0	0	20
Women 20 through 34	30,740	28,851	902	0	765	0	0	222
Women 35 or older	4,069	3,825	89	0	126	0	0	29
Women of all ages	38,117	35,620	1,274	0	938	0	0	285

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

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	31	5	0
Women 15 through 17	789	123	0
Women 18 through 19	2,111	265	0
Women 20 through 34	28,819	1,921	0
Women 35 or older	3,233	205	0
Women of all ages	34,983	2,519	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: IA

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

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

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	214	184	25	3	2	0	0	0
Children 1 through 4	41	36	1	0	3	0	0	1
Children 5 through 9	29	27	2	0	0	0	0	0
Children 10 through 14	48	44	0	1	1	0	0	2
Children 15 through 19	122	111	4	3	2	0	0	2
Children 20 through 24	156	143	7	4	1	0	0	1
Children 0 through 24	610	545	39	11	9	0	0	6

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

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	199	17	0
Children 1 through 4	35	5	0
Children 5 through 9	29	1	0
Children 10 through 14	44	2	0
Children 15 through 19	119	2	0
Children 20 through 24	146	9	0
Children 0 through 24	572	36	0

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

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

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	665,740	598,199.0	23,724.0	3,438.0	11,578.0	549.0	15,267.0	12,985.0	2002
Percent in household headed by single parent	27.5	27.5	32.4	0	25.7	0	31.1	13.6	2002
Percent in TANF (Grant) families	4.2	2.7	23.3	8.8	2.4	0	0	38.0	2003
Number enrolled in Medicaid	147,317	101,319.0	15,459.0	1,023.0	1,485.0	0	0	28,031.0	2003
Number enrolled in SCHIP	16,341	9,899.0	167.0	47.0	80.0	5.0	0	6,143.0	2003
Number living in foster home care	4,953	4,025.0	717.0	116.0	51.0	0	0	44.0	2003
Number enrolled in food stamp program	75,542	49,784.0	11,044.0	559.0	676.0	0	0	13,479.0	2003
Number enrolled in WIC	58,441	51,044.0	5,558.0	396.0	1,443.0	0	0	0	2003
Rate (per 100,000) of juvenile crime arrests	4,390.0	3,890.0	20,060.0	11,690.0	2,810.0	0	0	1,290.0	2002
Percentage of high school drop-outs (grade 9 through 12)	2.0	1.7	4.9	6.2	1.8	0	0	0	2002

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

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	619,452.0	31,021.0	0	2002
Percent in household headed by single parent	2.5	16.4	0	2002
Percent in TANF (Grant) families	4.1	5.8	0	2003
Number enrolled in Medicaid	147,317.0	11,135.0	0	2003
Number enrolled in SCHIP	16,341.0	406.0	0	2003
Number living in foster home care	4,934.0	244.0	0	2003
Number enrolled in food stamp program	75,542.0	5,010.0	0	2003
Number enrolled in WIC	58,441.0	10,202.0	0	2003
Rate (per 100,000) of juvenile crime arrests	2,210.0	2,180.0	0	2002
Percentage of high school drop-outs (grade 9 through 12)	2.0	5.8	0	2002

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

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

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

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	330,192
Living in urban areas	242,767
Living in rural areas	325,650
Living in frontier areas	200,167
Total - all children 0 through 19	768,584

Note:

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

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

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

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

POVERTY LEVELS	TOTAL
Total Population	2,832,392.0
Percent Below: 50% of poverty	4.6
100% of poverty	9.2
200% of poverty	27.0

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

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

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

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	658,199.0
Percent Below: 50% of poverty	6.8
100% of poverty	10.7
200% of poverty	33.1

FORM NOTES FOR FORM 21

Data are taken from the 2002 Census estimate.

FIELD LEVEL NOTES

None