

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

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APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/14/2004	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: Missouri		Organizational Unit: Division of Community Health										
Address (give city, county, state and zip code) Department of Health and Senior Services PO Box 570, 930 Wildwood Drive Jefferson City, MO 65102 County: Cole		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Paula F. Nickelson, M.Ed., Director Tel Number: (573) 751-6252										
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;">4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">7</td></tr></table>		4	4	6	0	0	0	9	8	7	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	4											
6	0	0	0	9	8	7						
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: MO Maternal & Child Health & Children with SHCN					
9	3											
9	9	4										
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): Statewide												
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:										
Start Date: 10/01/2004	Ending Date: 09/30/2005	a. Applicant Fourth	b. Project Statewide									
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?										
a. Federal	\$ <u>16,873,203.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW										
b. Applicant	\$ <u>0.00</u>											
c. State	\$ <u>12,619,902.00</u>											
d. Local	\$ <u>0.00</u>											
e. Other	\$ <u>35,000.00</u>											
f. Program Income	\$ <u>1,000,000.00</u>											
g. TOTAL	\$ <u>30,528,105.00</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 Mark R. Reading		b. Title Director, Division of Administration	c. Telephone Number (573) 751-6014									
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: MO

1. FEDERAL ALLOCATION

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

\$ 16,873,203

A. Preventive and primary care for children:

\$ 5,406,111 (32.04%)

B. Children with special health care needs:

\$ 5,888,813 (34.9%)

(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:

\$ 1,324,320 (7.85%)

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

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

\$ 0

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

\$ 12,619,902

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

\$ 0

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

\$ 35,000

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

\$ 1,000,000

7. TOTAL STATE MATCH (Lines 3 through 6)

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

\$ 9,987,230

\$ 13,654,902

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

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

\$ 30,528,105

9. OTHER FEDERAL FUNDS

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

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 0

d. Abstinence Education: \$ 904,531

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 84,282,004

h. AIDS: \$ 0

i. CDC: \$ 1,002,720

j. Education: \$ 0

k. Other:

HRSA Newborn Hearing \$ 521,994

HRSA Women Health \$ 93,560

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

\$ 86,904,809

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 117,432,914

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

1. **Section Number:** Main

Field Name: WIC

Row Name: Other Federal Funds - WIC

Column Name:

Year: 2005

Field Note:

The Division of Community Health (DCH) was created when DHSS was reorganized in 2003. At that time the WIC program was placed within DCH. Prior to this reorganization the "other federal fund" section did not include WIC funding since the program was not under the control of the Title V director. Since the reorganization the WIC program is now under the Title V director.

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: MO

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 13,091,676	\$ 10,825,300	\$ 13,318,533	\$ 0	\$ 16,873,203	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 600,000	\$ 0	\$ 1,100,000	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 10,268,756	\$ 9,942,837	\$ 10,778,900	\$ 0	\$ 12,619,902	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 35,000	\$ 44,393	\$ 35,000	\$ 0	\$ 35,000	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 1,000,000	\$ 1,288,958	\$ 1,000,000	\$ 0	\$ 1,000,000	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 24,995,432	\$ 22,101,488	\$ 26,232,433	\$ 0	\$ 30,528,105	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 6,042,420	\$ 2,864,939	\$ 2,731,055	\$ 0	\$ 86,904,809	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 31,037,852	\$ 24,966,427	\$ 28,963,488	\$ 0	\$ 117,432,914	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3
STATE MCH FUNDING PROFILE**

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

STATE: MO

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,978,095	\$ 9,135,457	\$ 13,103,064	\$ 11,269,145	\$ 13,103,064	\$ 11,648,532
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 500,000	\$ 4,086,825	\$ 1,500,000	\$ 3,989,816	\$ 1,500,000	\$ 1,814,012
3. State Funds <i>(Line3, Form 2)</i>	\$ 10,108,571	\$ 10,067,186	\$ 10,858,571	\$ 11,438,030	\$ 10,952,301	\$ 10,070,479
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 35,000	\$ 526	\$ 35,000	\$ 6,190	\$ 35,000	\$ 26,432
6. Program Income <i>(Line6, Form 2)</i>	\$ 1,000,000	\$ 1,053,662	\$ 1,000,000	\$ 847,029	\$ 1,000,000	\$ 1,177,320
7. Subtotal <i>(Line8, Form 2)</i>	\$ 24,621,666	\$ 24,343,656	\$ 26,496,635	\$ 27,550,210	\$ 26,590,365	\$ 24,736,775
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 4,589,254	\$ 4,406,660	\$ 6,080,675	\$ 5,806,845	\$ 5,704,972	\$ 585,572
9. Total <i>(Line11, Form 2)</i>	\$ 29,210,920	\$ 28,750,316	\$ 32,577,310	\$ 33,357,055	\$ 32,295,337	\$ 25,322,347
(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 primary reasons for the under expenditure are:

- 1.) Funds allocated for family planning were not fully used as contractors did not invoice for all funds allocated.
- 2.) A portion of State funds budgeted for children with special health care needs was not used and placed in withholding.
- 3.) Financial support for the MOCARES data processing system was less than anticipated as efficiencies were addressed and a transition to the MOHSAIC system began.
- 4.) Personal service expenditures were less than anticipated as a result of hiring freezes, additional time needed to hire an epidemiologist, and attrition.
- 5.) Vaccines due to withholding of State funds.
- 6.) Contractors under spent in oral health services, childcare, school nurse training, and local health agency MCH contracts.

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

Missouri spent \$22,101,488 including \$10,825,300 in MCH Block Grant funds towards maternal and child health objectives in federal fiscal year 2003. MCHBG award and unobligated funds were budgeted at \$13,691,676. For the total partnership, Missouri spent \$2,893,944 less than budgeted.

State funds expended were \$9,987,230. State funded programs included direct health care and service coordination for children with special health care needs (CSHCN), comprehensive family planning services, alternatives to abortion services, adolescent health, School-Aged Children's Health Services, school nurse training for CSHCN, vaccines for children, Tel-Link phone referral line, genetic services, sickle cell counseling, healthy birth outcomes projects, home visiting, perinatal substance abuse and healthy babies initiatives, juvenile arthritis, newborn hearing, the SAFE CARE Network and core public health assessment and system building. In addition Medicaid income was earned to provide service coordination, quality assurance activities and outreach for children and pregnant women.

Form 3 reports an unobligated balance of \$1.7 million carried forward from FFY 2002 and spent in FFY 2003. Programs and activities that contributed to this under expenditure in FFY 2002 included:

- 1: Personal Service and associated fringe, expense and equipment, network and indirect costs due to vacancies, hiring freezes and other interruptions in program implementation - \$.7 million
- 2 : Home Visiting - \$.2 million
- 3: Local Public Health Agency Maternal and Child Health Contracts (funds were set aside for incentives to meet contract outcomes in the following year) - \$.2 million
- 4: Financial support for the MOCARES data processing system was less than anticipated as efficiencies were addressed and a transition to the MOHSAIC system began - \$.2 million
- 5: Various program lapses in oral health, healthy birth outcomes, domestic violence, fetal infant mortality review, injury, disabilities prevention, child care and adolescent health projects - \$.4 million

Missouri budgeted \$25 million of partnership funds for the FFY 2003 application but spent \$22.1 million. It should be noted that in SFY 03 the State found it necessary to take significant general revenue core cuts and withholdings. For those programs that could potentially be used for MCH Block Grant match, \$2.8 million was cut and \$1.8 million was withheld.

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

The primary reasons for the under expenditure are:

- 1.) Funds allocated for family planning were not fully used as contractors did not invoice for all funds allocated.
- 2.) A portion of State funds budgeted for children with special health care needs was not used and placed in withholding.
- 3.) Financial support for the MOCARES data processing system was less than anticipated as efficiencies were addressed and a transition to the MOHSAIC system began.
- 4.) Personal service expenditures were less than anticipated as a result of hiring freezes, additional time needed to hire an epidemiologist, and attrition.
- 5.) Vaccines due to withholding of State funds.
- 6.) Contractors under spent in oral health services, childcare, school nurse training, and local health agency MCH contracts

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

Form 3 reports an unobligated balance of \$1.7 million carried forward from FFY 2002 and spent in FFY 2003. Programs and activities that contributed to this under expenditure in FFY 2002 included:

- 1: Personal Service and associated fringe, expense and equipment, network and indirect costs due to vacancies, hiring freezes and other interruptions in program implementation - \$.7 million
- 2: Home Visiting - \$.2 million
- 3: Local Public Health Agency Maternal and Child Health Contracts (funds were set aside for incentives to meet contract outcomes in the following year) - \$.2 million
- 4: Financial support for the MOCARES data processing system was less than anticipated as efficiencies were addressed and a transition to the MOHSAIC system began - \$.2 million
- 5: Various program lapses in oral health, healthy birth outcomes, domestic violence, fetal infant mortality review, injury, disabilities prevention, child care and adolescent health projects - \$.4 million

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

State funds expended were \$9,987,230. State funded programs included direct health care and service coordination for children with special health care needs (CSHCN), comprehensive family planning services, alternatives to abortion services, adolescent health, School-Aged Children's Health Services, school nurse training for CSHCN, vaccines for children, Tel-Link phone referral line, genetic services, sickle cell counseling, healthy birth outcomes projects, home visiting, perinatal substance abuse and healthy babies initiatives, juvenile arthritis, newborn hearing, the SAFE CARE Network and core public health assessment and system building. In addition Medicaid income was earned to provide service coordination, quality assurance activities and outreach for children and pregnant women.

6. Section Number: Main

Field Name: LocalMCHFundsExpended

Row Name: Local MCH Funds

Column Name: Expended

Year: 2002

Field Note:

7. Section Number: Main

Field Name: OtherFundsExpended

Row Name: Other Funds

Column Name: Expended

Year: 2002

Field Note:

Other funds are the Smith Memorial Fund, which is used to pay direct care services for children with special health care needs. Appropriation was not fully used because other sources of funds were available to pay for these services.

8. Section Number: Main

Field Name: OtherFundsExpended

Row Name: Other Funds

Column Name: Expended

Year: 2003

Field Note:

Missouri budgeted \$25 million of partnership funds for the FFY 2003 application but spent \$22.1 million. It should be noted that in SFY 03 the State found it necessary to take significant general revenue core cuts and withholdings. For those programs that could potentially be used for MCH Block Grant match, \$2.8 million was cut and \$1.8 million was withheld. The primary reasons for the under expenditures are:

1: Funds allocated for family planning were not fully used (\$1.8 million). The Family Planning program was eliminated in SFY 04.

2: A portion of State funds budgeted for children with special health care needs were not used (\$.8 million) of which \$.5 million were put into withholding. The remaining was for enhancement of service coordination that did not occur.

3: Personal service, fringe and administrative costs due to vacancies and hiring freezes (\$.2 million).

4: Various programs under expended including injury prevention (\$.1 million)

5: The state funding support for Healthy Birth Outcome and vaccines was cut in SFY 03 resulting in an under expenditure of \$1 million which was offset in the partnership

9. Section Number: Main

Field Name: ProgramIncomeExpended

Row Name: Program Income

Column Name: Expended

Year: 2002

Field Note:

Program income represents the Medicaid activities performed by the Division of Community Health. The Division provided more service coordination than projected.

10. Section Number: Main

Field Name: ProgramIncomeExpended

Row Name: Program Income

Column Name: Expended

Year: 2003

Field Note:

Missouri budgeted \$25 million of partnership funds for the FFY 2003 application but spent \$22.1 million. It should be noted that in SFY 03 the State found it necessary to take significant general revenue core cuts and withholdings. For those programs that could potentially be used for MCH Block Grant match, \$2.8 million was cut and \$1.8 million was withheld. The primary reasons for the under expenditures are:

1: Funds allocated for family planning were not fully used (\$1.8 million). The Family Planning program was eliminated in SFY 04.

2: A portion of State funds budgeted for children with special health care needs were not used (\$.8 million) of which \$.5 million were put into withholding. The remaining was for enhancement of service coordination that did not occur.

3: Personal service, fringe and administrative costs due to vacancies and hiring freezes (\$.2 million).

4 : Various programs under expended including injury prevention (\$.1 million)

ü The state funding support for Healthy Birth Outcome and vaccines was cut in SFY 03 resulting in an under expenditure of \$1 million which was offset in the partnership

11. Section Number: Main

Field Name: OtherFedFundsExpended

Row Name: Other Federal Funds

Column Name: Expended

Year: 2002

Field Note:

During the FFY 02 the First Steps program outsourced its services to private providers. In response, DHSS phased out of the program. As a result, service coordination and payment of direct care services were reduced.

12. Section Number: Main

Field Name: OtherFedFundsExpended

Row Name: Other Federal Funds

Column Name: Expended

Year: 2003

Field Note:

See budget narrative

FORM 4

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

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

STATE: MO

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,655,792	\$ 1,680,079	\$ 1,281,470	\$ 0	\$ 1,714,004	\$ 0
b. Infants < 1 year old	\$ 2,338,678	\$ 1,704,845	\$ 2,927,152	\$ 0	\$ 3,857,992	\$ 0
c. Children 1 to 22 years old	\$ 5,976,531	\$ 5,855,380	\$ 9,006,534	\$ 0	\$ 10,894,027	\$ 0
d. Children with Special Healthcare Needs	\$ 7,913,690	\$ 7,141,873	\$ 7,969,403	\$ 0	\$ 8,879,170	\$ 0
e. Others	\$ 5,873,037	\$ 4,787,123	\$ 3,716,021	\$ 0	\$ 3,858,592	\$ 0
f. Administration	\$ 1,237,704	\$ 932,188	\$ 1,331,853	\$ 0	\$ 1,324,320	\$ 0
g. SUBTOTAL	\$ 24,995,432	\$ 22,101,488	\$ 26,232,433	\$ 0	\$ 30,528,105	\$ 0

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

a. SPRANS	\$ 0	\$ 0	\$ 0
b. SSDI	\$ 99,685	\$ 100,000	\$ 100,000
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 969,291	\$ 969,291	\$ 904,531
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 0	\$ 0	\$ 84,282,004
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 1,013,000	\$ 1,013,000	\$ 1,002,720
j. Education	\$ 3,603,450	\$ 0	\$ 0
k. Other			
HRSA Newborn Hearing	\$ 0	\$ 256,994	\$ 521,994
HRSA Women Health	\$ 0	\$ 0	\$ 93,560
HRSA Women Health	\$ 0	\$ 91,770	\$ 0
HRSA Genetic Service	\$ 0	\$ 300,000	\$ 0
HRSA Newborn Hearing Screening	\$ 256,994	\$ 0	\$ 0
HRSA TBI Grant	\$ 100,000	\$ 0	\$ 0
III. SUBTOTAL	\$ 6,042,420	\$ 2,731,055	\$ 86,904,809

FORM 4

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

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

STATE: MO

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 2,646,387	\$ 2,238,169	\$ 1,559,774	\$ 1,943,827	\$ 1,665,101	\$ 1,638,631
b. Infants < 1 year old	\$ 2,097,447	\$ 2,059,035	\$ 2,970,325	\$ 2,605,647	\$ 2,998,164	\$ 3,024,954
c. Children 1 to 22 years old	\$ 6,157,434	\$ 6,319,843	\$ 6,047,911	\$ 6,233,290	\$ 6,309,892	\$ 5,720,304
d. Children with Special Healthcare Needs	\$ 6,892,871	\$ 7,047,017	\$ 8,638,137	\$ 9,627,544	\$ 8,747,558	\$ 7,704,335
e. Others	\$ 5,959,013	\$ 5,797,378	\$ 6,363,454	\$ 5,938,111	\$ 5,816,940	\$ 5,088,930
f. Administration	\$ 868,514	\$ 882,214	\$ 917,034	\$ 1,201,791	\$ 1,052,710	\$ 1,559,621
g. SUBTOTAL	\$ 24,621,666	\$ 24,343,656	\$ 26,496,635	\$ 27,550,210	\$ 26,590,365	\$ 24,736,775

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

a. SPRANS	\$ 0	\$ 0	\$ 0
b. SSDI	\$ 100,000	\$ 100,000	\$ 100,000
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 969,291	\$ 969,291	\$ 969,291
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 0	\$ 0	\$ 0
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 120,000	\$ 111,400	\$ 0
j. Education	\$ 3,200,000	\$ 4,700,000	\$ 0
k. Other			
First Steps	\$ 0	\$ 0	\$ 3,603,450
Newborn Hearing Screening	\$ 0	\$ 0	\$ 199,993
Rape Prevention and Education	\$ 0	\$ 0	\$ 832,238
TBI	\$ 0	\$ 199,984	\$ 0
TBI Demo Grant	\$ 199,963	\$ 0	\$ 0
III. SUBTOTAL	\$ 4,589,254	\$ 6,080,675	\$ 5,704,972

FORM NOTES FOR FORM 4

The Division of Community Health (DCH) was created when DHSS was reorganized in 2003. At that time the WIC program was placed within DCH. Prior to this reorganization the "other federal fund" section did not include WIC funding since the program was not under the control of the Title V director. Since the reorganization the WIC program is now under the Title V director.

FIELD LEVEL NOTES

- 1. 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:
TBDForm 3 reports an unobligated balance of \$1.7 million carried forward from FFY 2002 and spent in FFY 2003. Programs and activities that contributed to this under expenditure in FFY 2002 included:
1: Personal Service and associated fringe, expense and equipment, network and indirect costs due to vacancies, hiring freezes and other interruptions in program implementation - \$.7 million
2: Home Visiting - \$.2 million
3: Local Public Health Agency Maternal and Child Health Contracts (funds were set aside for incentives to meet contract outcomes in the following year) - \$.2 million
4: Financial support for the MOCARES data processing system was less than anticipated as efficiencies were addressed and a transition to the MOHSAIC system began - \$.2 million
5: Various program lapses in oral health, healthy birth outcomes, domestic violence, fetal infant mortality review, injury, disabilities prevention, child care and adolescent health projects - \$.4 million
- 2. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2002
Field Note:
1.) A portion of State funds budgeted for children with special health care needs was not used and placed in withholding.
2.) Financial support for the MOCARES data processing system was less than anticipated as efficiencies were addressed and a transition to the MOHSAIC system began.
3.) Personal service expenditures were less than anticipated as a result of hiring freezes, additional time needed to hire an epidemiologist, and attrition.
4.) Contractors under spent in oral health services, childcare, school nurse training, and local health agency MCH contracts.
- 3. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2002
Field Note:
In the All Others category, family planning contractors did not fully use funds allocated. Also the women's health and the domestic violence programs did not fully use their funds allocated. Personal service expenditures were less than anticipated as a result of hiring freezes, additional time needed to hire an epidemiologist, and attrition.
- 4. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2003
Field Note:
See budget narrative
- 5. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2002
Field Note:
DHSS's methodology for charging indirect was changed. Also, state administrative costs are shown for matching purposes but not budgeted.
- 6. Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2003
Field Note:
See budget narrative

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: MO

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.)	\$ 6,248,391	\$ 4,321,112	\$ 904,284	\$ 0	\$ 1,120,982	\$ 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.)	\$ 5,653,269	\$ 4,815,874	\$ 5,551,324	\$ 0	\$ 6,162,498	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 7,949,693	\$ 7,894,434	\$ 10,856,620	\$ 0	\$ 13,829,028	\$ 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.)	\$ 5,144,079	\$ 5,070,068	\$ 8,920,205	\$ 0	\$ 9,415,597	\$ 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.)	\$ 24,995,432	\$ 22,101,488	\$ 26,232,433	\$ 0	\$ 30,528,105	\$ 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: MO

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.)	\$ 6,918,332	\$ 6,848,396	\$ 6,401,412	\$ 5,929,494	\$ 6,484,717	\$ 5,463,144
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.)	\$ 4,081,954	\$ 3,982,363	\$ 6,080,022	\$ 6,746,849	\$ 6,060,747	\$ 5,756,089
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 9,089,132	\$ 9,047,855	\$ 9,347,672	\$ 9,537,064	\$ 8,972,766	\$ 8,695,179
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.)	\$ 4,532,248	\$ 4,465,042	\$ 4,667,529	\$ 5,336,803	\$ 5,072,135	\$ 4,822,363
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.)	\$ 24,621,666	\$ 24,343,656	\$ 26,496,635	\$ 27,550,210	\$ 26,590,365	\$ 24,736,775

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:
Family planning contractors did not fully use funds allocated. Also, direct care services for children with special health care needs declined due to Medicaid expansion.
2. **Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2003
Field Note:
See budget narrative.
3. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2003
Field Note:
See budget narrative.
4. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2003
Field Note:
See budget narrative.
5. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2003
Field Note:
See budget narrative.

FORM 6

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

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

STATE: MO

Total Births by Occurrence: 76,760

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	76,760	100	23	9	9	100
Congenital Hypothyroidism	76,760	100	178	32	32	100
Galactosemia	76,760	100	77	0	0	
Sickle Cell Disease	76,760	100	42	38	38	100

Other Screening (Specify)

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

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

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

None

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

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

STATE: MO

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	1,004	100.0				
Infants < 1 year old	77,456	43.5		56.5		
Children 1 to 22 years old	185,076	17.9		77.4	4.7	
Children with Special Healthcare Needs	6,147	67.0		23.0	10.0	
Others	10,025	9.2		80.6		10.2
TOTAL	279,708					

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:
The number for total pregnant women served are provided by programs receiving Title V funds. Home Visiting 1,004. MCH contracts with LPHA does not require LPHAs to report number of clients served.
- 2. Section Number:** Main
Field Name: PregWomen_XIX
Row Name: Pregnant Women
Column Name: Title XIX %
Year: 2005
Field Note:
Medicaid eligibility is required for entry to the Home Visiting program
- 3. 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:
The number of infants served equals the total number of deliveries since Title V funds are used for metabolic and newborn hearing screening. Additional programs that receive Title V funding Homvisiting 898 infants and MCH contracts, however MCH contracts with LPHAs do not require LPHAs to report number served.
- 4. Section Number:** Main
Field Name: Children_0_1_XIX
Row Name: Infants <1 year of age
Column Name: Title XIX %
Year: 2005
Field Note:
The percent of Medicaid and private insurance coverage is based on insurance coverage reported on birth certificates. The birth certificates do not distinguish between Title XIX and XXI.
- 5. Section Number:** Main
Field Name: Children_1_22_TS
Row Name: Children 1 to 22 years of age
Column Name: Title V Total Served
Year: 2005
Field Note:
Number of children served are provided by programs receiving Title V funds. Abstinence Education 28,954, Think First 13,000 and Safe Kids 114,168. MCH contracts with LPHAs do not require reporting of number of clients served
- 6. Section Number:** Main
Field Name: Children_1_22_XIX
Row Name: Children 1 to 22 years of age
Column Name: Title XIX %
Year: 2005
Field Note:
The percent of primary sources of insurance coverage is based on health insurance information for children under 18 as reported in the Current Population Survey March 2002
- 7. 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:
Numbers for CSHCN are provided by programs receiving Title V funds. SCHN programs 2,906; Inclusion Program 1,417 and Elks Dental 1,824. MCH contracts with LPHAs do not require reporting of number of clients served.
- 8. Section Number:** Main
Field Name: CSHCN_XIX
Row Name: Children with Special Health Care Needs
Column Name: Title XIX %
Year: 2005
Field Note:
The percent of primary coverage for CSHCN is an estimate based on information collected by the Unit of Special Health Care Needs.
- 9. Section Number:** Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2005
Field Note:
Number for others are provided by programs receiving Title V funds and are not reported in other categories. Adolescent Health 7,000 health professionals and 360 School Nurses. Inclusion Program 1,233 child care providers and 1,173 parents. Abstinence Education 259 parents. MCH contracts with LPHAs do not require reporting of number of clients served
- 10. Section Number:** Main
Field Name: AllOthers_XIX
Row Name: Others
Column Name: Title XIX %
Year: 2005
Field Note:
The percent of primary coverage is an estimate based on information for individuals of all ages as reported in the Current Population Survey March 2002.

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: MO

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	77,456	63,706	11,170	351	1,476	208	69	476
Title V Served	77,456	63,706	11,170	351	1,476	208	69	476
Eligible for Title XIX	33,670	24,902	7,767	204	378	48	50	321
INFANTS								
Total Infants in State	76,960	63,374	11,019	350	1,468	207	69	473
Title V Served	76,960	63,374	11,019	350	1,468	207	69	473
Eligible for Title XIX	33,436	24,771	7,668	203	376	48	50	320

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	71,777	3,667	2,012					
Title V Served	71,777	3,667	2,012					
Eligible for Title XIX	31,469	2,189	12					
INFANTS								
Total Infants in State	71,315	3,639	2,006					
Title V Served	71,315	3,639	2,006					
Eligible for Title XIX	31,256	2,170	10					

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **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:
Hispanic or Latino data is not available by sub category.
2. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_Mexican
Row Name: Total Deliveries in State
Column Name: Mexican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
3. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_Cuban
Row Name: Total Deliveries in State
Column Name: Cuban
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
4. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_PuertoRican
Row Name: Total Deliveries in State
Column Name: Puerto Rican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
5. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_CentralAmerican
Row Name: Total Deliveries in State
Column Name: Central and South American
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
6. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_EthnicityOther
Row Name: Total Deliveries in State
Column Name: Other and Unknown
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
7. **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:
Hispanic or Latino data is not available by sub category.
8. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_Mexican
Row Name: Title V Served
Column Name: Mexican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
9. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_Cuban
Row Name: Title V Served
Column Name: Cuban
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
10. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_PuertoRican
Row Name: Title V Served
Column Name: Puerto Rican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
11. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_CentralAmerican
Row Name: Title V Served
Column Name: Central and South American
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
12. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_EthnicityOther
Row Name: Title V Served

- Column Name:** Other and Unknown
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
13. **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:
Hispanic or Latino data is not available by sub category.
14. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
15. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_Cuban
Row Name: Eligible for Title XIX
Column Name: Cuban
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
16. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_PuertoRican
Row Name: Eligible for Title XIX
Column Name: Puerto Rican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
17. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_CentralAmerican
Row Name: Eligible for Title XIX
Column Name: Central and South American
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
18. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_EthnicityOther
Row Name: Eligible for Title XIX
Column Name: Other and Unknown
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
19. **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:
Hispanic or Latino data is not available by sub category.
20. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_Mexican
Row Name: Total Infants in State
Column Name: Mexican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
21. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_Cuban
Row Name: Total Infants in State
Column Name: Cuban
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
22. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_PuertoRican
Row Name: Total Infants in State
Column Name: Puerto Rican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
23. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_CentralAmerican
Row Name: Total Infants in State
Column Name: Central and South American
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
24. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_EthnicityOther
Row Name: Total Infants in State

- Column Name:** Other and Unknown
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
25. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_TotalHispanic
Row Name: Title V Served
Column Name: Total Hispanic or Latino
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
26. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_Mexican
Row Name: Title V Served
Column Name: Mexican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
27. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_Cuban
Row Name: Title V Served
Column Name: Cuban
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
28. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_PuertoRican
Row Name: Title V Served
Column Name: Puerto Rican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
29. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_CentralAmerican
Row Name: Title V Served
Column Name: Central and South American
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
30. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleV_EthnicityOther
Row Name: Title V Served
Column Name: Other and Unknown
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
31. **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:
Hispanic or Latino data is not available by sub category.
32. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
33. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_Cuban
Row Name: Eligible for Title XIX
Column Name: Cuban
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
34. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_PuertoRican
Row Name: Eligible for Title XIX
Column Name: Puerto Rican
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
35. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_CentralAmerican
Row Name: Eligible for Title XIX
Column Name: Central and South American
Year: 2005
Field Note:
Hispanic or Latino data is not available by sub category.
36. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_EthnicityOther
Row Name: Eligible for Title XIX

Column Name: Other and Unknown

Year: 2005

Field Note:

Hispanic or Latino data is not available by sub category.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MO

	FY 2005	FY 2004	FY 2003	FY 2002	FY 2001
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 835-5465</u>				
2. State MCH Toll-Free "Hotline" Name	TEL-LINK	TEL-LINK	TEL-LINK	TEL-LINK	TEL-LINK
3. Name of Contact Person for State MCH "Hotline"	<u>Peggy Henderson</u>				
4. Contact Person's Telephone Number	<u>(573) 751-6218</u>	<u>(573) 751-6218</u>	<u>(573) 751-6218</u>	<u>(573) 751-6215</u>	<u>(573) 751-6215</u>
5. Number of calls received on the State MCH "Hotline" this reporting period			<u>4,052</u>	<u>4,618</u>	<u>6,573</u>

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MO

	FY 2005	FY 2004	FY 2003	FY 2002	FY 2001
1. State MCH Toll-Free "Hotline" Telephone Number	<u> </u>				
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	<u> </u>				
4. Contact Person's Telephone Number	<u> </u>				
5. Number of calls received on the State MCH "Hotline" this reporting period	<u> 0</u>				

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: MO

1. State MCH Administration:
(max 2500 characters)

The administration of the MCH Block Grant is under the direction of the Director of the Division of Community Health within the Missouri Department of Health and Senior Services. The Title V program supports needs assessment and activities designed to improve the health status of women, particularly mothers and women of reproductive age, and infants and children, including children with special health care needs. Funds are directed to supporting essential Maternal and Child Health services and prevention programs. Services under Title V administrative control include Missouri School-Age Children's Health Services Program, community water fluoridation, disabilities prevention and injury prevention activities, and the Adult Head Injury Services program. Numerous other programs and services funded through the MCH Block Grant, general revenue, and other funds are under the Title V Director's control and include Medicaid case management services, Elks Mobile Dental Unit, and others.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>16,873,203</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>12,619,902</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>35,000</u>
7. Program Income (Line 6, Form 2)	\$ <u>1,000,000</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>30,528,105</u>

9. Most significant providers receiving MCH funds:

<u>Local Public Health Agencies</u>
<u>Home Visiting Agencies</u>
<u>State Health Lab</u>
<u> </u>

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

a. Pregnant Women	<u>1,004</u>
b. Infants < 1 year old	<u>77,456</u>
c. Children 1 to 22 years old	<u>185,076</u>
d. CSHCN	<u>6,147</u>
e. Others	<u>10,025</u>

11. Statewide Initiatives and Partnerships:

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

1. Children with Special Health Care Needs Programs contract with physicians and other health care professionals who provide local services to participants. Services include specialty and sub-specialty care on an outpatient or inpatient basis, medication, lab, x-ray, therapies, and surgical care. The program is administered by the Bureau of Special Health Care Needs.

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

1. Home Visiting Programs are implemented by community based contractors who work collaboratively with other community resources to provide services to "at risk" perinatal and early childhood families to improve parent and child outcomes.2. Maternal and Child Health (MCH) Program: The MCH program provides funding through contracts for local public health agencies (LPHAs) to deliver maternal and child health-related programs and services to improve the health of families within their jurisdictional area. LPHAs across the state are working collaboratively with the local Division of Family Services offices, schools, child care providers, WIC, community organizations, private physicians, and others to identify and refer uninsured children to Medicaid and children with special health care needs to services they need.

c. Infrastructure Building Services:
(max 2500 characters)

1. Managed Care Plus Quality Assessment and Improvement (MC+ QA &I) is a committee composed of members from both public and private sectors formed to assure access to quality services within the Medicaid managed care plans in Missouri. Sub-groups of this committee (Behavioral Health, Dental, and Maternal/Child Health) evaluate health indicators and best practices for intervention strategies to be implemented in the Medicaid managed care plans.2. Adolescent Health is addressed by the Department of Health and Senior Services working with the Council for Adolescent and School Health (CASH). The Department supports the development of community based "parenting the adolescent" projects in 15 school and community based settings.3. Injury Prevention is promoted by the Department through staff support of the State Injury Prevention and Control Committee which consists of state agencies, regional groups, and local agencies who all support initiatives to prevent and reduce injuries in Missouri.

12. The primary Title V Program contact person:

Name Paula Nickelson
Title Division Director
Address Missouri Department of Health and Senior Services, Div
City Jefferson City

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

Name Diane Poole
Title Unit Chief
Address Missouri Department of Health and Services, Division o
City Jefferson City

State MO
Zip 65102-0570
Phone (573) 751-6252
Fax (573) 526-5348
Email nickep@dhss.mo.gov
Web www.dhss.mo.gov

State MO
Zip 65102-0570
Phone (573) 751-6246
Fax (573) 751-6237
Email sandem@dhss.mo.gov
Web www.dhss.mo.gov

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: MO

PERFORMANCE MEASURE # 01

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	59	73	72	70	79
Denominator	59	73	72	70	79
Is the Data Provisional or Final?				Final	Provisional

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

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

PERFORMANCE MEASURE # 02

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

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective					59.5
Annual Indicator				57.2	57.2
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	61.8	64.1	66.6	68.7	70.8
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 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	_____	_____	_____	_____	56.7
Annual Indicator	_____	_____	_____	55.7	55.7
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	58.6	59.6	60.6	61.6	62.6
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 # 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	_____	_____	_____	_____	66.6
Annual Indicator	_____	_____	_____	66	66
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	67.2	67.8	68.4	69	69.6
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 # 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					76.8
Annual Indicator				75.2	75.2
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	78.4	80	81.6	83.2	84.8
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 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					7.6
Annual Indicator				5.8	5.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	9.4	11.2	13	14.8	16.6
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 # 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>90</u>	<u>90</u>	<u>86.5</u>	<u>87.1</u>	<u>76</u>
Annual Indicator	<u>68.9</u>	<u>75.7</u>	<u>75.5</u>	<u>73.0</u>	<u>76.4</u>
Numerator	<u>50,945</u>	<u>56,958</u>	<u>56,901</u>	<u>55,720</u>	<u>57,522</u>
Denominator	<u>73,940</u>	<u>75,242</u>	<u>75,366</u>	<u>76,329</u>	<u>75,290</u>
Is the Data Provisional or Final?				Final	Provisional

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>77.1</u>	<u>78.2</u>	<u>79.4</u>	<u>80.5</u>	<u>81.6</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>29.5</u>	<u>29</u>	<u>26.9</u>	<u>24.3</u>	<u>20.6</u>
Annual Indicator	<u>26.9</u>	<u>26.7</u>	<u>23.5</u>	<u>22.2</u>	<u>21.5</u>
Numerator	<u>3,243</u>	<u>3,199</u>	<u>2,820</u>	<u>2,659</u>	<u>2,573</u>
Denominator	<u>120,474</u>	<u>119,869</u>	<u>120,012</u>	<u>119,928</u>	<u>119,928</u>
Is the Data Provisional or Final?				Final	Provisional

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>19.1</u>	<u>16.5</u>	<u>13.9</u>	<u>11.3</u>	<u>8.7</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	15	15	14	16.7	14
Annual Indicator	11.8	11.8	14.0	14.0	14.0
Numerator	16,010	16,010	10,055	10,055	10,055
Denominator	136,254	136,254	71,823	71,823	71,823
Is the Data Provisional or Final?				Provisional	Provisional

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

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

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	3.3	5	5.7	5.1	4.5
Annual Indicator	5.0	6.0	4.1	4.9	4.9
Numerator	59	71	47	56	56
Denominator	1,178,711	1,180,876	1,160,366	1,151,149	1,151,149
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	3.9	3.3	2.7	2.1	1.5
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	61	64	64	64.5	59.4
Annual Indicator	55.6	57.6	58.8	57.8	64.7
Numerator	40,600	34,970	44,271	43,452	49,823
Denominator	73,056	60,764	75,290	75,176	76,960
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	60.2	61	61.7	62.5	63.4
Annual Indicator					
Numerator					
Denominator					

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

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	10	20	21	35	96.5
Annual Indicator	8.2	22.4	26.2	96.1	98.7
Numerator	6,128	17,000	19,747	73,392	75,989
Denominator	74,500	75,963	75,290	76,366	76,960
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	97	97.5	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	12	11	7.83	6.96	4.7
Annual Indicator	11.5	9.3	6.9	4.7	5.9
Numerator	168,700	136,980	98,511	67,102	84,234
Denominator	1,464,688	1,472,903	1,427,692	1,427,692	1,427,692
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	4.7	4.7	4.7	4.7	4.7
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 # 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	90	92	92	92.1	81
Annual Indicator	78.7	74.6	81.1	81.0	80.3
Numerator	403,946	347,779	392,745	413,182	433,644
Denominator	513,000	466,406	484,417	510,237	540,113
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	81	81	81	81	81
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	1.09	1	1	1	1.4
Annual Indicator	1.5	1.4	1.4	1.6	1.6
Numerator	1,163	1,104	1,069	1,188	1,245
Denominator	75,366	76,329	75,290	75,167	76,960
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.4	1.4	1.4	1.4	1.4
Annual Indicator					
Numerator					
Denominator					

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

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	11	11	11	11	7.7
Annual Indicator	12.6	10.4	9.2	8.5	6.8
Numerator	52	43	38	35	28
Denominator	412,011	413,307	412,098	411,793	411,793
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	6.9	6	5.1	5.2	4.3
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 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	88	82	82.1	82.5	79.5
Annual Indicator	78.5	81.8	79.6	79.1	78.3
Numerator	874	869	828	910	944
Denominator	1,114	1,062	1,040	1,150	1,206
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	79.9	80.2	80.6	80.9	81.3
Annual Indicator					
Numerator					
Denominator					

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

PERFORMANCE MEASURE # 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	88	86	86	86.2	86.4
Annual Indicator	85.6	86.1	85.7	86.0	86.6
Numerator	64,496	65,714	64,552	64,673	66,641
Denominator	75,366	76,329	75,290	75,167	76,960
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	86.6	86.8	87	87.3	87.2
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 1

Percent of inadequate birth spacing (less than 18 months).

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	10.4	10.2	10.4	9.9	10.8
Annual Indicator	10.8	10.8	11.0	10.7	10.8
Numerator	4,558	4,657	4,725	4,566	4,632
Denominator	42,251	43,256	42,813	42,611	42,916
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	10.8	10.8	10.8	10.8	10.8
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 2

Percent of low income children ages 1-11 who consume nutritionally adequate diets.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	12.0	14.0	16	18	20
Annual Indicator	23.0	27.0	24.0	22.5	26.1
Numerator	9,720	15,605	13,413	13,113	15,204
Denominator	42,259	57,796	55,886	58,278	58,278
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	22	24	26	28	30
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 citizens who have access to fluoridated water.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	75.0	75.0	75.0	75.0	83.1
Annual Indicator	74.4	74.4	80.5	81.5	81.5
Numerator	3,200,000	3,200,000	4,504,144	4,589,211	4,648,211
Denominator	4,300,000	4,300,000	5,595,211	5,629,707	5,704,484
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	85.2	87.2	89.2	91.2	93.2
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 4

Percent of women who have reported smoking during pregnancy.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	18.0	17.5	17.9	16.8	17.9
Annual Indicator	18.3	18.3	18.3	18.1	18.1
Numerator	13,766	13,955	13,761	13,607	13,895
Denominator	75,366	76,329	75,290	75,167	76,960
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	17.7	17.5	17.3	17.1	16.9
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 5

Percent MC+ Managed Care Organizations (MCOs) utilizing MCH data.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	90.0	95.0	100.0	100.0	100.0
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	9	9	9	7	7
Denominator	9	9	9	7	7
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	100.0	100.0	100	100	100
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 6

Percent of child care facilities receiving health and safety consultation.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	20.0	22.0	40.0	45.0	40
Annual Indicator	37.5	38.0	43.1	40.4	27.6
Numerator	1,743	1,757	1,931	1,806	1,233
Denominator	4,649	4,623	4,478	4,467	4,467
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	40	40	40	40	40
Annual Indicator					
Numerator					
Denominator					

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

STATE PERFORMANCE MEASURE # 7

Percent of tobacco use among children 14-18 years of age.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	<u>32.8</u>	<u>32.5</u>	<u>32.0</u>	<u>31.5</u>	<u>31.0</u>
Annual Indicator	<u>32.8</u>		<u>30.3</u>		<u>24.8</u>
Numerator	<u>85,295</u>		<u>80,985</u>		<u>67,385</u>
Denominator	<u>260,047</u>		<u>267,278</u>		<u>271,712</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>30.5</u>	<u>30.0</u>	<u>29.5</u>	<u>29</u>	<u>28.5</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.

FORM NOTES FOR FORM 11

None

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
2. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
3. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
4. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
5. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2005
Field Note:
Data is for the 4:3:1:3:3 Series, US, National Immunization Survey, Q3/2002-Q2/2003*
7. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2005
Field Note:
Denominators for 2001 and 2002 changed due to new population estimates. The change in denominator changed the 2001 rate previously reported. The 2002 rate was not affected by the change in population estimates.
8. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2005
Field Note:
Estimates for 2001, 2002 and 2003 are based on a 2001 state survey.
9. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2005
Field Note:
Denominators changed for 2001 and 2002 as a result of new population estimates, as a result the rates for 2001 and 2002 have changed from those previously reported.
10. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
Breastfeeding data is reported by the state health lab.
11. **Section Number:** Performance Measure #12
Field Name: PM12
Row Name:
Column Name:
Year: 2005
Field Note:
Number of children screened is provided by the Newborn Hearing Screening Program as reported by hospitals and birthing clinics.
12. **Section Number:** Performance Measure #14
Field Name: PM14

Row Name:
Column Name:
Year: 2005

Field Note:
Both denominators and numerators are obtained from the Medicaid Management Report for December of the reporting calendar year.

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

Field Name: PM15

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

The denominator for 1999 has been changed from what was previously reported. The change, however did not affect the rate as previously reported.

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

Field Name: PM16

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

Denominators were changed for 2000, 2001, and 2002. 2000 reflects the census number and 2001 and 2002 reflect new population estimates.

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

Field Name: PM17

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

denominators for 1999 and 2000 have been changed. Rates have been adjusted accordingly and are higher for both years than had been previously reported. 1999 from 75.2 to 78.5 and 2000 from 78.7 to 81.8

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

Field Name: SM7

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

Data is an estimate based on the YRBS and the summary of Fall enrollment 2002-03 from the Department of Elementary and Secondary Education.

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

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>7.2</u>	<u>7</u>	<u>7</u>	<u>7</u>	<u>7.7</u>
Annual Indicator	<u>7.7</u>	<u>7.2</u>	<u>7.4</u>	<u>8.5</u>	<u>7.8</u>
Numerator	<u>581</u>	<u>547</u>	<u>555</u>	<u>638</u>	<u>599</u>
Denominator	<u>75,366</u>	<u>76,329</u>	<u>75,290</u>	<u>75,167</u>	<u>76,960</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>7.7</u>	<u>7.7</u>	<u>7.7</u>	<u>7.7</u>	<u>7.7</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.

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</u>	<u>2.6</u>	<u>2.5</u>	<u>2.3</u>	<u>2.5</u>
Annual Indicator	<u>3.3</u>	<u>2.5</u>	<u>2.9</u>	<u>2.4</u>	<u>2.3</u>
Numerator	<u>19</u>	<u>14.8</u>	<u>16.8</u>	<u>17.1</u>	<u>14.9</u>
Denominator	<u>5.8</u>	<u>5.9</u>	<u>5.8</u>	<u>7.1</u>	<u>6.6</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>2.4</u>	<u>2.3</u>	<u>2.2</u>	<u>2.1</u>	<u>2</u>
Annual Indicator					
Numerator					
Denominator					

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

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	4.5	4.4	4.4	4.4	5.1
Annual Indicator	5.1	4.8	4.9	5.6	5.6
Numerator	381	364	367	418	430
Denominator	75,366	76,329	75,290	75,167	76,960
Is the Data Provisional or Final?				Final	Provisional

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

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

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	2.4	2.3	2.3	2.3	2.6
Annual Indicator	2.7	2.4	2.5	2.9	2.2
Numerator	200	183	188	220	169
Denominator	75,365	76,329	75,290	75,167	76,960
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	2.6	2.6	2.6	2.6	2.6
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	10.4	10.3	10.3	10.3	10.9
Annual Indicator	11.0	10.4	10.3	11.7	12.0
Numerator	829	794	777	878	931
Denominator	75,366	76,329	75,290	75,167	77,461
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	10.9	10.9	10.9	10.9	10.9
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	26	25	24	23.5	23.8
Annual Indicator	22.7	26.7	24.0	24.7	23.3
Numerator	250	295	260	266	251
Denominator	1,103,345	1,104,547	1,085,076	1,075,982	1,075,982
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	23.4	23.1	22.8	22.5	22.2
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.

FORM NOTES FOR FORM 12

None

FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2005

Field Note:

The denominator for 1999 was changed, however the rate was not affected

2. **Section Number:** Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2005

Field Note:

The denomiators for 2001 and 200 were changed to reflect new population estimates, as a result rates were changed from those previously reported. 2001 from 23.7 to 24.0 and 2002 from 24.2 to 24.7.

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

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

2

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

0

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: 8

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: Question1
Row Name: #1. Family members participate on advisory committee or task forces...
Column Name:
Year: 2005
Field Note:
Family members participate on the partnerships within their regions. Family members participate in training and mentoring of other family members.
- 2. Section Number:** Main
Field Name: Question2
Row Name: #2. Financial support (...) is offered for parent activities or parent groups.
Column Name:
Year: 2005
Field Note:
Financial support has been restricted due to budget constraints.
- 3. Section Number:** Main
Field Name: Question3
Row Name: #3. Family members are involved in the Children with Special Health Care Needs...
Column Name:
Year: 2005
Field Note:
Family members participate in the development of the Title V Needs assessment through the partnerships and focus groups.
- 4. Section Number:** Main
Field Name: Question4
Row Name: #4. Family members are involved in service training of CSHCN staff and providers.
Column Name:
Year: 2005
Field Note:
Family members are available for and consult with staff, however; family members are not scheduled for inservice training at this time.
- 5. Section Number:** Main
Field Name: Question5
Row Name: #5. Family members hired as paid staff or consultants to the State CSHCN program...
Column Name:
Year: 2005
Field Note:
The SHCN unit has five family members as paid staff/consultants.
- 6. Section Number:** Main
Field Name: Question6
Row Name: #6. Family members of diverse cultures are involved in all of the above activities
Column Name:
Year: 2005
Field Note:
Family members of various cultural groups are represented in family partnership meetings.

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: MO 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. Increase Access to HealthCare: Specifically, Dental Health for Children; Medical Homes for CSHCN; Insurance Coverage for 50,000+ Children.
2. Reduce Smoking by Children and Adolescents through Prevention.
3. Reduce the Number of Unintended Pregnancies.
4. Reduce Child and Adolescent Injuries Both Intentional and Unintentional.
5. Reduce the Incidence of Child Abuse and Neglect.
6. Reduce Health Status Disparities among Minorities.
7. Expand MCH Information Systems.
- 8.
- 9.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

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

STATE: MO

APPLICATION YEAR: 2005

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested <i>(max 250 characters)</i>	Reason(s) Why Assistance Is Needed <i>(max 250 characters)</i>	What State, Organization or Individual Would You suggest Provide the TA (if known) <i>(max 250 characters)</i>
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Development of model for organizational change and integration.	Expert consultation and training for leadership of Division of Community Health to enable establishment of new Division vision and mission and adaptation to organizational changes brought about by reorganization within the Department.	Dr. Greg Alexander and Dr. Ann-Michelle Gundlach, University of Alabama at Birmingham
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

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

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

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

SP # 1

PERFORMANCE MEASURE:	Percent of inadequate birth spacing (less than 18 months).
STATUS:	Active
GOAL	Enable more families to adequately space the birth or adoption of new family members by providing a broad range of services.
DEFINITION	Live births which occurred within 18 months of a previous live birth and the percent this number is of second and higher order live births during the same period. All births where spacing was unknown were excluded. Numerator: Live births within 18 months of previous birth Denominator: Total live births in the State. Units: 100 Text:
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	State Birth Records, 1996 Publication 4.43 (8/97 Edition), Missouri Department of Health, CHIME
SIGNIFICANCE	Adequate birth spacing results in improved maternal health, reduction of infant mortality rates and overall health and increase in birth weight of subsequent infants. Preconceptual counseling and other birth spacing services are provided to non-medical, uninsured or under insured Missouri residents of child bearing age utilizing MCH Block Grant Funds and Missouri General Revenue funds.

SP # 2

PERFORMANCE MEASURE:

Percent of low income children ages 1-11 who consume nutritionally adequate diets.

STATUS:

Active

GOAL

To increase the proportion of children at risk who consume diets that meet the recommended dietary guidelines.

DEFINITION

Low income children: those whose families are at or below 185% of the federal poverty level. Children: ages 1 through 11. Nutritionally adequate diet: consumption of the recommended number of servings of all food groups in the Food Guide Pyramid.

Numerator:

The number of low income children completing food frequency questionnaires who consume nutritionally adequate diets.

Denominator:

All low income children completing food frequency questionnaires.

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Food frequency questionnaires completed by parents of children enrolled in WIC clinics and food frequency questionnaires completed by children in grade 4 in low income schools participating in the behaviorally-based nutrition education programs.

SIGNIFICANCE

Dietary practices that result in nutritional deficiencies or excesses contribute to: increased risk of hospitalization for infections; delays in cognitive and motor development and growth retardation among infants and children; lower scores on standardized achievement tests, especially tests of language ability; increased prevalence of obesity and/or eating disorders; and increased rates of chronic diseases such as heart disease, cancer, diabetes, hypertension, and osteoporosis.

SP # 3

PERFORMANCE MEASURE:

Percent of citizens who have access to fluoridated water.

STATUS:

Active

GOAL

To prevent dental caries.

DEFINITION

Percent of citizens who have access to fluoridated water

Numerator:

Number of people on fluoridated water supplies.

Denominator:

Number of people served by community water supplies.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

State dental programs, in conjunction with state drinking water programs, report fluoride levels and data on fluoridated communities to CDC's Division of Oral Health. State dental programs report data on fluoridated communities to the Association of State and Territorial Dental Directors.

SIGNIFICANCE

Dental caries is an almost universal disease. Community water fluoridation has been proven in over 50 years as the safest, most economical and most effective method to prevent dental decay. Published data show that reduction in decay rates of 40-60% can be accomplished through fluoridation. In addition, data indicate that each dollar spent on fluoridation results in an eighty dollar savings in dental treatment. Prevention of caries translates into less pain and suffering, improved nutrition, less time lost from school or work and an increase in positive self-image. Community water fluoridation can be accomplished in most water supplies serving 1,000 people or more. In addition, the process is relatively simple and inexpensive. Water fluoridation has long been recognized as one of the four foundations of public health's efforts at primary prevention, along with immunizations, pasteurization and water purification.

SP # 4

PERFORMANCE MEASURE:

Percent of women who have reported smoking during pregnancy.

STATUS:

Active

GOAL

To reduce the number of low birth weight babies.

DEFINITION

Percent of women who have reported smoking during pregnancy.

Numerator:

Number of women who report smoking during pregnancy at time of delivery.

Denominator:

Total number of women who delivered babies in CY 97.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Annual Missouri Birth Certificate data. Random sampling of cotinine levels in maternal urine at time of delivery every four years. Issues: 1) Report only sources have reduced reliability; 2) Reports compared to birth certificate data in 1993 were consistent; 3) Many women who smoke use multiple substances so unable to separate impact of individual substances.

SIGNIFICANCE

Infants born to mothers who do not smoke are more likely to be born full-term, at the appropriate weight, and healthier.

SP # 5

PERFORMANCE MEASURE:

Percent MC+ Managed Care Organizations (MCOs) utilizing MCH data.

STATUS:

Active

GOAL

To improve the intervention strategies or outreach activities with the MCH activities with the MCH population, that will ultimately improve their overall health status.

DEFINITION

Numerator:

Number of MC+ MCOs who utilize DOH/MCH data

Denominator:

Total number of MC+ MCOs in Missouri

Units: 100 **Text:**

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Measured by the number of specific requests for technical assistance and consultation to MCOs on the use and interpretation of family health related data, for health assessment determination of the population their plan is serving and prevention intervention strategy development, and evaluation, including dental health. In addition, periodic surveys will be conducted attempting to measure the extent of data usage.

SIGNIFICANCE

This measure will improve the overall health status of the MCH population by specifying targets of need and assisting the MC+ providers in developing strategies to address them. It should serve as a valuable quality assurance function, by monitoring the progress of these intervention strategies and outreach activities statewide.

SP # 6

PERFORMANCE MEASURE:

Percent of child care facilities receiving health and safety consultation.

STATUS:

Active

GOAL

To decrease preventable illness, injury, disability, and premature death of children in child care settings and to increase the quality of child care provided.

DEFINITION

Numerator:

Number of child care facilities receiving training and/or consultation.

Denominator:

Total number of licensed and license-exempt child care facilities in the state of Missouri.

Units: 100 **Text:**

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Services Summary Report submitted by Local Health Agencies who contract with MDOH Health and Safety Consultation program.

SIGNIFICANCE

The health of young children in child care settings, as well as adults who provide care, is a public health concern. Health problems in young children may include injuries, communicable diseases, illnesses, poor nutrition, and delayed growth and development. Prevention starts early. Over 50% of Missouri's children age birth to six years are in child care. Research has demonstrated that quality training and professional development of child care providers positively impacts the quality of child care.

SP # 7

PERFORMANCE MEASURE:

Percent of tobacco use among children 14-18 years of age.

STATUS:

Active

GOAL

To prevent and reduce tobacco use among adolescents in grades 9 through 12.

DEFINITION

Tobacco use is defined as smoking on one (1) or more of the thirty days preceding the Youth Behavioral Survey (YRBS).

Numerator:

Number of adolescents in grades 9 through 12 who reported smoking one or more of the thirty days preceding the survey.

Denominator:

The number of adolescents completing the YRBS.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The Youth Risk Behavioral survey conducted by the Department of Elementary and Secondary Education every two years. There are at least two limitations: 1. The data only apply to adolescents who attend high school and does not cover adolescents not enrolled in a high school program; and 2. the extent of under reporting or over reporting in YRBS cannot be determined, although the survey questions demonstrate good test-retest reliability.

SIGNIFICANCE

Missouri ranked 5th among states surveyed in 1995 and 6th in 1997 for adolescents reporting current use. For both survey years Missouri ranked higher than the national average. It is estimated that smoking contributed to 10,930 deaths in 1997 and cost Missourians approximately \$2.6 billion dollars through the loss of productivity and healthcare expense.

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: MO

HEALTH SYSTEMS CAPACITY MEASURE # 01

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>78.8</u>	<u>78.8</u>	<u>83.4</u>	<u>92.7</u>	<u></u>
Numerator	<u>2,912</u>	<u>2,916</u>	<u>3,051</u>	<u>3,404</u>	<u></u>
Denominator	<u>369,356</u>	<u>369,898</u>	<u>366,013</u>	<u>367,340</u>	<u></u>
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 02

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>71.6</u>	<u>83.3</u>	<u>87.9</u>	<u>87.9</u>	<u>90.3</u>
Numerator	<u>23,124</u>	<u>24,986</u>	<u>28,050</u>	<u>28,877</u>	<u>30,733</u>
Denominator	<u>32,318</u>	<u>30,001</u>	<u>31,897</u>	<u>32,857</u>	<u>34,047</u>
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 03

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>71.6</u>	<u>83.3</u>	<u>87.4</u>	<u>87.9</u>	<u>90.3</u>
Numerator	<u>2,011</u>	<u>5,118</u>	<u>4,537</u>	<u>4,701</u>	<u>5,003</u>
Denominator	<u>2,810</u>	<u>6,145</u>	<u>5,193</u>	<u>5,349</u>	<u>5,543</u>
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 04

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>78.6</u>	<u>79.0</u>	<u>78.0</u>	<u>78.1</u>	<u>77.7</u>
Numerator	<u>59,229</u>	<u>60,295</u>	<u>58,699</u>	<u>58,699</u>	<u>59,797</u>
Denominator	<u>75,366</u>	<u>76,329</u>	<u>75,290</u>	<u>75,167</u>	<u>76,960</u>
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 07

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

	Annual Indicator Data				
	1999	2000	2001	2002	2003
Annual Indicator	<u>33.0</u>	<u>35.0</u>	<u>28.6</u>	<u>30.2</u>	<u>31.3</u>
Numerator	<u>37,417</u>	<u>43,416</u>	<u>34,657</u>	<u>38,018</u>	<u>40,224</u>
Denominator	<u>113,345</u>	<u>124,057</u>	<u>121,138</u>	<u>125,749</u>	<u>128,715</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>16.0</u>	<u>13.0</u>	<u>8.6</u>	<u>6.6</u>	<u>0.6</u>
Numerator	<u>2,450</u>	<u>1,957</u>	<u>1,296</u>	<u>996</u>	<u>85</u>
Denominator	<u>15,303</u>	<u>15,076</u>	<u>15,045</u>	<u>14,980</u>	<u>14,980</u>
Is the Data Provisional or Final?				Final	Provisional

FORM NOTES FOR FORM 17

None

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2005
Field Note:
The data is from the Patient Abstract System. There is a year lag time in receiving data from the reporting hospitals. Denominators for 2001 and 2002 were changed to reflect new population estimates, as a result rates were changed from those reported previously.
2. **Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2005
Field Note:
Denominators were changed for years 1999 through 2002. Rates were subsequently changed as well.
3. **Section Number:** Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2005
Field Note:
The numerator is the number of children with SSI receiving services from a program within the SHCN unit. The numerator does not include children receiving services through Medicaid or other programs.

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

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>	2003	Payment source from birth certificate	<u>9.6</u>	<u>6.7</u>	<u>8</u>
b) <i>Infant deaths per 1,000 live births</i>	2003	Matching data files	<u>9.9</u>	<u>6.1</u>	<u>7.9</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2003	Payment source from birth certificate	<u>79.1</u>	<u>92.8</u>	<u>86.6</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>	2003	Payment source from birth certificate	<u>69</u>	<u>84.3</u>	<u>77.7</u>

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

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2003	<u>185</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u>) (Age range <u>6</u> to <u>18</u>) (Age range <u> </u> to <u> </u>)	2003	<u>133</u> <u>100</u> <u> </u>
c) <i>Pregnant Women</i>	2003	<u>185</u>

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

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>300</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>18</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2003	<u>300</u> <u> </u> <u> </u>
c) <i>Pregnant Women</i>		<u> </u>

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

None

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

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

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

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

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

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

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

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

1. **Section Number:** Indicator 09A

Field Name: RecentMother

Row Name: Survey of recent mothers at least every two years (like PRAMS)

Column Name:

Year: 2005

Field Note:

The Division of Community Health, Office of Surveillance, Evaluation, Planning and Health Information is currently developing a State PRAMS using SSDI funds.

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

HEALTH STATUS INDICATOR MEASURE # 01A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>7.8</u>	<u>7.6</u>	<u>7.6</u>	<u>8.1</u>	<u>8.0</u>
Numerator	<u>5,844</u>	<u>5,798</u>	<u>5,759</u>	<u>6,057</u>	<u>6,194</u>
Denominator	<u>75,366</u>	<u>76,329</u>	<u>75,290</u>	<u>75,167</u>	<u>76,960</u>
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	<u>6.1</u>	<u>6.0</u>	<u>6.0</u>	<u>6.1</u>	<u>6.3</u>
Numerator	<u>4,474</u>	<u>4,402</u>	<u>4,408</u>	<u>4,457</u>	<u>4,652</u>
Denominator	<u>73,071</u>	<u>73,945</u>	<u>72,921</u>	<u>72,549</u>	<u>74,341</u>
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	<u>1.5</u>	<u>1.4</u>	<u>1.4</u>	<u>1.6</u>	<u>1.6</u>
Numerator	<u>1,163</u>	<u>1,104</u>	<u>1,069</u>	<u>1,188</u>	<u>1,245</u>
Denominator	<u>75,366</u>	<u>76,329</u>	<u>75,290</u>	<u>75,167</u>	<u>76,960</u>
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	<u>1.2</u>	<u>1.1</u>	<u>1.1</u>	<u>1.2</u>	<u>1.3</u>
Numerator	<u>854</u>	<u>833</u>	<u>797</u>	<u>846</u>	<u>935</u>
Denominator	<u>73,071</u>	<u>73,945</u>	<u>72,921</u>	<u>72,549</u>	<u>74,341</u>
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>10.8</u>	<u>13.1</u>	<u>10.9</u>	<u>12.4</u>	<u>11.2</u>
Numerator	<u>127</u>	<u>155</u>	<u>126</u>	<u>143</u>	<u>129</u>
Denominator	<u>1,178,711</u>	<u>1,180,876</u>	<u>1,160,366</u>	<u>1,151,149</u>	<u>1,151,149</u>
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 03B

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>5.0</u>	<u>6.0</u>	<u>4.1</u>	<u>4.9</u>	<u>5.0</u>
Numerator	<u>59</u>	<u>71</u>	<u>47</u>	<u>56</u>	<u>57</u>
Denominator	<u>1,178,711</u>	<u>1,180,876</u>	<u>1,160,366</u>	<u>1,151,149</u>	<u>1,151,149</u>
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 03C

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>34.1</u>	<u>44.2</u>	<u>35.6</u>	<u>40.0</u>	<u>36.6</u>
Numerator	<u>264</u>	<u>324</u>	<u>285</u>	<u>326</u>	<u>298</u>
Denominator	<u>775,003</u>	<u>733,021</u>	<u>801,352</u>	<u>814,015</u>	<u>814,015</u>
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04A

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

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	<u>235.3</u>	<u>256.1</u>	<u>305.9</u>	<u>275.1</u>	<u></u>
Numerator	<u>2,774</u>	<u>3,024</u>	<u>3,550</u>	<u>3,167</u>	<u></u>
Denominator	<u>1,178,711</u>	<u>1,180,876</u>	<u>1,160,366</u>	<u>1,151,149</u>	<u></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	47.4	48.0	51.4	51.7	
Numerator	559	567	597	595	
Denominator	1,178,711	1,180,876	1,160,366	1,151,149	
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	244.4	259.6	254.4	267.7	
Numerator	1,894	1,903	2,039	2,179	
Denominator	775,003	733,021	801,352	814,015	
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	25.7	26.0	25.9	28.7	30.7
Numerator	5,180	5,260	5,200	5,757	6,161
Denominator	201,768	202,461	200,993	200,504	200,504
Is the Data Provisional or Final?				Provisional	Provisional

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	3.8	5.8	6.1	6.9	8.0
Numerator	3,795	5,776	6,163	7,023	8,120
Denominator	1,004,798	1,003,987	1,009,636	1,012,197	1,012,191
Is the Data Provisional or Final?				Provisional	Provisional

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #03A
Field Name: HSI03A
Row Name:
Column Name:
Year: 2005
Field Note:
Population estimates were changed for 2001 and 2002. Therefore rates are different from previous reports.
2. **Section Number:** Health Status Indicator #03B
Field Name: HSI03B
Row Name:
Column Name:
Year: 2005
Field Note:
Population estimates were changed for 2001 and 2002. Therefore rates are different from previous reports.
3. **Section Number:** Health Status Indicator #03C
Field Name: HSI03C
Row Name:
Column Name:
Year: 2005
Field Note:
Population estimates were changed for 2000, 2001 and 2002. Therefore rates are different from previous reports.
4. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2005
Field Note:
Data is obtained from the Patient Abstract System. There is a one year lag in data. Population estimates were changed for 2001 and 2002. Therefore rates are different from previous reports.
5. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2005
Field Note:
Data is obtained from the Patient Abstract System. There is a one year lag in data. Population estimates were changed for 2001 and 2002. Therefore rates are different from previous reports.
6. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2005
Field Note:
Data is obtained from the Patient Abstract System. There is a one year lag in data. Population estimates were changed for 2000, 2001 and 2002. Therefore rates are different from previous reports.
7. **Section Number:** Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2005
Field Note:
Population estimates were changed for 2001 and 2002. Therefore rates are different from previous reports.
8. **Section Number:** Health Status Indicator #05B
Field Name: HSI05B
Row Name:
Column Name:
Year: 2005
Field Note:
Population estimates were changed for 2001 and 2002. Therefore rates are different from previous reports.

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

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: 2003 Is this data from a State Projection? Yes

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	76,177	62,693	10,973	_____	_____	_____	_____	2,511
Children 1 through 4	295,270	243,112	46,363	_____	_____	_____	_____	5,795
Children 5 through 9	393,892	326,024	59,777	_____	_____	_____	_____	8,091
Children 10 through 14	416,023	343,026	64,951	_____	_____	_____	_____	8,046
Children 15 through 19	415,209	348,728	57,595	_____	_____	_____	_____	8,886
Children 20 through 24	374,204	311,833	52,859	_____	_____	_____	_____	9,512
Children 0 through 24	1,970,775	1,635,416	292,518	0	0	0	0	42,841

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	71,789	3,378	_____
Children 1 through 4	282,065	10,108	_____
Children 5 through 9	363,100	11,944	_____
Children 10 through 14	397,374	11,391	_____
Children 15 through 19	401,052	10,741	_____
Children 20 through 24	389,447	12,775	_____
Children 0 through 24	1,904,827	60,337	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MO

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: 2003 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	119	39	74	0	0	1	1	4
Women 15 through 17	2,573	1,725	783	12	11	5	10	27
Women 18 through 19	6,083	4,568	1,364	45	41	8	15	42
Women 20 through 34	59,921	49,911	7,996	274	1,201	140	41	358
Women 35 or older	8,248	7,118	801	19	215	53	2	40
Women of all ages	76,944	63,361	11,018	350	1,468	207	69	471

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	110	8	1
Women 15 through 17	2,381	168	24
Women 18 through 19	5,715	309	59
Women 20 through 34	55,416	2,878	1,627
Women 35 or older	7,680	275	293
Women of all ages	71,302	3,638	2,004

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

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: 2003 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	599	420	164	3	7	0	2	3
Children 1 through 4	105	73	29	0	3	0	0	0
Children 5 through 9	52	41	8	3	0	0	0	0
Children 10 through 14	94	77	14	1	0	0	1	1
Children 15 through 19	298	234	58	0	4	0	0	2
Children 20 through 24	412	313	93	1	2	0	1	2
Children 0 through 24	1,560	1,158	366	8	16	0	4	8

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	567	31	1
Children 1 through 4	98	6	1
Children 5 through 9	49	2	1
Children 10 through 14	90	4	0
Children 15 through 19	286	7	5
Children 20 through 24	392	17	3
Children 0 through 24	1,482	67	11

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

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

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	1,562,938	1,273,290.0	227,746.0	7,535.0	19,371.0	1,280.0	33,716.0		2002
Percent in household headed by single parent	24.3								2001
Percent in TANF (Grant) families	5.4	3.2	18.1	2.5	1.1	3.7	1.0		2003
Number enrolled in Medicaid	542,856	362,034.0	158,873.0	1,291.0	4,022.0	340.0	1,030.0	15,266.0	2003
Number enrolled in SCHIP	88,933	68,224.0	16,808.0	226.0	810.0	37.0	72.0	2,756.0	2003
Number living in foster home care	10,846	7,111.0	3,536.0	36.0	25.0	0	0	138.0	2003
Number enrolled in food stamp program	317,678	190,636.0	117,302.0	727.0	1,285.0	187.0	642.0	6,899.0	2003
Number enrolled in WIC	123,864	88,918.0	28,987.0	325.0	1,348.0			4,286.0	2002
Rate (per 100,000) of juvenile crime arrests		32,968.0	15,309.0	79.0	166.0				2003
Percentage of high school drop-outs (grade 9 through 12)	3.4								2003

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

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,515,376.0	47,562.0		2002
Percent in household headed by single parent				2003
Percent in TANF (Grant) families	5.3	5.3		2003
Number enrolled in Medicaid	513,608.0	21,916.0	7,332.0	2003
Number enrolled in SCHIP	84,120.0	3,379.0	1,443.0	2003
Number living in foster home care	10,644.0	202.0	0	2003
Number enrolled in food stamp program	305,040.0	8,860.0	3,778.0	2003
Number enrolled in WIC	123,864.0	9,586.0		2002
Rate (per 100,000) of juvenile crime arrests				
Percentage of high school drop-outs (grade 9 through 12)				

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

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

Reporting Year: 2000 Is this data from a State Projection? No

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	4,125,004
Living in urban areas	1,103,984
Living in rural areas	490,188
Living in frontier areas	0
Total - all children 0 through 19	1,594,172

Note:

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

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

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

Reporting Year: 2001 Is this data from a State Projection? Yes

POVERTY LEVELS	TOTAL
Total Population	5,505,662.0
Percent Below: 50% of poverty	4.8
100% of poverty	10.0
200% of poverty	25.1

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

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: 2001 Is this data from a State Projection? Yes

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,525,258.0
Percent Below: 50% of poverty	7.4
100% of poverty	14.7
200% of poverty	31.2

FORM NOTES FOR FORM 21

Population estimates for American Indian or Native American, Asian, Native Hawaiian or Other Pacific Islander, More than race reported are not available for Missouri.

FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2005
Field Note:
Whites are non-Hispanic Whites.
Blacks are non-Hispanic Blacks
Asians are Asian/Pacific Islander
Other and Unknown include more than one race reported
2. **Section Number:** Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2005
Field Note:
Graduates are not reported by race.
3. **Section Number:** Indicator 09B
Field Name: HSEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2005
Field Note:
Ethnicity is not reported
4. **Section Number:** Indicator 09B
Field Name: HSEthnicity_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2005
Field Note:
Ethnicity is not reported
5. **Section Number:** Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2005
Field Note:
Metropolitan population is based on 2002 population estimates and Metropolitan Statistical Areas (MSAs) as of June 2003 (under new Office of Budget & Management definitions)