PUBLIC COMMENT

Title V Maternal and Child Health Services Block Grant FFY 2021

The Missouri Department of Health and Senior Services (DHSS) is soliciting public comment on the proposed use of Title V Maternal and Child Health (MCH) Services Block Grant funds for Federal Fiscal Year 2021 that covers the period starting October 1, 2020 and ending September 30, 2021. See the following pages for the Proposed Use of Funds.

If a copy of the proposed use of funds is desired in an alternate form to accommodate disability, please call (573) 751-6435. Hearing impaired citizens may contact the Department by phone through Relay Missouri: 1-800-735-2966; Voice: 1-800-735-2466.

Comments on the Proposed Use of Funds document must be submitted to MCH@health.mo.gov.

If you have additional questions about specific areas on the proposed budget, please contact Martha Smith, Title V MCH Director at 573-751-6435 or martha.smith@health.mo.gov.

The comments must be submitted no later than August 7, 2020.

Thank you for your interest in maternal and child health services in Missouri.
TITLE V MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT

FFY 2021 PROPOSED USE OF FUNDS
(Released for Public Comment July 2020)

DEVELOPMENT OF APPLICATION
The Title V MCH Services Block Grant is administered by the Health Resources and Services Administration’s (HRSA) Maternal and Child Health Bureau (MCHB). In Missouri, DHSS is the designated state agency for the allocation and administration of Title V MCH Block Grant funds, and the Title V Program is located within the Division of Community and Public Health (DCPH). As part of the development of the annual application, public comment on the proposed use of funds is solicited from MCH stakeholders, the general public, and other interested parties. The proposed plan for the use of block grant funds to improve the health status of women and children, including children with special health care needs (CSHCN), for FFY 2021 is attached.

TITLE V PROGRAM PRIORITIES
HRSA/MCHB requires states to conduct a comprehensive statewide Needs Assessment every five years that identifies the need for preventive and primary care services for pregnant women, mothers, infants, children, and CSHCN. Findings from the Five-Year Needs Assessment then serve as the cornerstone for development of a five-year Title V MCH State Action Plan (SAP). States are required to select a minimum of five National Performance Measures (NPMs), with at least one NPM in each of the five population domains, and states may select as many NPMs and State Performance Measures (SPMs) as necessary to address each priority need. The current Needs Assessment process began in 2019, and the FFY2021-2025 priorities were established using both quantitative and qualitative methods.

MCH priority needs were selected based on the number of people impacted, the capacity of existing programs to address the priority need, and the perceived level of political and social support for addressing the priority need. Eight MCH priorities, 5 NPMs, 3 SPMs, and 2 overarching principles were identified from the combined quantitative data compiled by the MCH Epidemiology team, qualitative data from focus groups, themes from online stakeholder chat group discussions, and stakeholder prioritization ranking surveys. Two overarching principles were identified from reoccurring themes that repeatedly arose in stakeholder engagement processes and internal conversations, and the general consensus was to incorporate them throughout the SAP, across all the priorities, performance measures, and strategies. Beyond the selected priorities, there is flexibility to address MCH priorities and implement initiatives not specified in the SAP, allowing the ability to respond to other ongoing and emerging MCH needs.
Title V MCH Block Grant FFY 2021-2025 Priorities

National Priority Areas:
1. Improve pre-conception, prenatal and postpartum health care services for women of child bearing age – Well Woman Care (Women/Maternal Health)
2. Promote safe sleep practices among newborns to reduce sleep-related infant deaths - Safe Sleep (Perinatal/Infant Health)
3. Reduce intentional and unintentional injuries among children and adolescents – Injury Hospitalization (Adolescent Health)
4. Reduce obesity among children and adolescents - Physical Activity (Child Health)
5. Ensure coordinated, comprehensive and ongoing health care services for children with and without special health care needs – Medical Home (CSHCN)

State Priority Areas:
1. Enhance access to oral health care services for children – Preventive Dental Visit (Child Health)
2. Promote Protective Factors for Youth and Families – Youth Suicide & Self-Harm (Adolescent Health)
3. Address Social Determinants of Health Inequities – Training & Health Literacy (Cross-cutting)

Overarching Principles:
- Ensure Access to Care, including adequate insurance coverage, for MCH population
- Promote partnerships with individuals, families, and family-led organizations to ensure family engagement in decision-making, program planning, service delivery, and quality improvement activities

OVERVIEW OF PROPOSED FFY 2021 TITLE V BUDGET
DHSS bases the FFY 2021 budget projections on the approved award amount for the Title V MCH Block Grant in Federal Fiscal Year 2019, and with this proposed use of funds, every effort will be made to maintain Title V support for essential MCH programs, services, and partnerships. This year, programs requested $12,971,226, which is $777,968 above the amount of FFY 2019 funding received. This increase is largely due to a 3% increase in state employee salaries, effective January 1, 2020, and an increase in the estimated Fringe Benefit Rate from 56% to 62.5%, however, fewer FTEs were requested than the previous year. The goal is to ensure maintaining or increasing services for the MCH population in Missouri, and any additional budget needs not covered by the FFY 2021 Title V MCH Block Grant will be funded with lapses in FFY 2020 funding. Lapses in FFY 2020 funding are primarily due to vacancies and restrictions that resulted from the COVID-19 pandemic. If the FFY 2021 funding received and/or FFY 2020 lapsed funding is less than anticipated and/or needed, the Title V MCH Program will prioritize FFY 2021 activities, while maintaining the services provided for the Title V MCH population in prior years. Similarly, any additional funding received beyond the anticipated award will be appropriately allocated to programs and initiatives serving the MCH population.
## FFY 2021 TITLE V MCH SERVICES BLOCK GRANT PROPOSED USE OF FUNDS

<table>
<thead>
<tr>
<th>FUNDING</th>
<th>PROPOSED FFY 2021</th>
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<tbody>
<tr>
<td>TOTAL FUNDS APPLIED FOR</td>
<td>$12,971,226</td>
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### FUNDING BY SERVICE LEVELS

#### Direct Care Services
- Assistive Technology: $100,000
- Oral Health Services: $178,311
- Childhood Lead Poisoning Prevention: $5,084

**Total Direct Care Services**: $284,060

#### Enabling Services
- Child Care Initiatives: $537,865
- Local Public Health Agency (LPHA) MCH Services: $907,228
- CYSHCN Service Coordination: $1,335,237
- Family Partnership: $67,892
- Healthy Families: $1,249,736
- Lead Hazard Reduction/Abatement: $78,982
- Oral Health Services: $136,233

**Total Enabling Services**: $4,313,173

#### Public Health Services and Systems
- Adolescent Health: $89,000
- Child Care Health Consultation: $135,000
- Coordination and Systems Development: $3,132,795
- Epidemiological Services: $607,986
- Genetic Services: $67,403
- Healthy Families: $189,700
- Injury Prevention: $105,000
- LPHA MCH Services: $2,721,685
- Nutrition Projects: $33,724
- Obesity Prevention: $43,000
- Oral Health Services: $45,000
- Outreach and Education (TEL-LINK): $13,925
- School Health: $12,000
- Women’s Health Initiatives: $120,185

**Total Public Health Services and Systems**: $7,316,403

#### Administration
- $1,057,589

**Grand Total**: $12,971,226
Missouri Core Public Health Services Delivered With MCHBG Assistance and Other State and Local Partnerships by Levels of Service

Public Health Services for MCH Populations: The Title V MCH Services Block Grant

**MCH Essential Services**

1. Provide Access to Care
2. Investigate Health Problems
3. Inform and Educate the Public
4. Engage Community Partners
5. Promote/Implement Evidence-Based Practices
6. Assess and Monitor MCH Health Status
7. Maintain the Public Health Work Force
8. Develop Public Health Policies and Plans
9. Enforce Public Health Laws
10. Ensure Quality Improvement

**Public Health Services and Systems**

**Enabling Services**

**Direct Services**
Missouri Public Health Services for MCH Populations
FFY 2021 Title V MCH Services Block Grant

To develop the FFY 2021 Title V MCH Services Block Grant application, Missouri followed instruction from the HRSA/Maternal and Child Health Bureau guidance document for states entitled, *Title V Maternal and Child Health Services Block Grant to States Program*, OMB No. 0915-0172, which expires on December 31, 2020. The levels of services included in this guidance to address the needs of the MCH population in Missouri are Direct Services, Enabling Services, and Public Health Services and Systems. The description of each of the levels are as follows:

**Direct Services:**
Direct services are preventive, primary, or specialty clinical services to pregnant women and children, including CHSCN, where Title V MCH Services Block Grant funds are used to reimburse or fund providers for these services through a formal process similar to paying a medical billing claim or managed care contracts. State reporting on direct services should not include the costs of clinical services which are delivered with Title V dollars but reimbursed by Medicaid, CHIP or other public or private payers. Examples include, but are not limited to, the Kids Assistive Technology (KAT) project and Preventive Services Program (PSP). KAT projects include communication and mobility devices, hearing and visual devices, seating and mobility enhancements, and home and vehicle modifications for CSHCN. PSP is an evidence-based fluoride varnish and oral health education program that serves over 90,000 children each school year.

**Enabling Services:**
Enabling services are non-clinical services that enable individuals to access health care and improve health outcomes where MCH Services Block Grant funds are used to finance these services. Enabling services include, but are not limited to: case management, care coordination, referrals, translation/interpretation, health education for individuals or families, environmental health risk reduction, health literacy, and outreach. Examples include contracts for Home Visiting, CYSHCN Service Coordination, Child Care Health Consultation, services provided by the LPHAs through the MCH Services contract, and Child Care Inclusion Specialists.

**Public Health Services and Systems:**
Public health services and systems are activities and infrastructure to carry out the core public health functions of assessment, assurance, and policy development, and the 10 essential public health services. Examples include the development of standards and guidelines, needs assessment, program planning, implementation, and evaluation, policy development, quality assurance and improvement, workforce development, and population-based disease prevention and health promotion campaigns for services. Examples include injury prevention, adolescent health, school health, safe sleep, obesity prevention, breastfeeding, and prenatal substance use prevention. Also included are MCH Epidemiological Services and program evaluation, MCH workforce capacity and technical assistance for program coordination and systems development, and LPHA community-based system-building through the MCH Services contract.