

# HRSA's Maternal and Child Health Bureau

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Maternal and Child Health Bureau

**SACIM**  
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# Objectives:

- Brief Overview of DHHS, HRSA and HRSA's Maternal and Child Health Bureau
- MCH and the Affordable Care Act

# U.S. Department of Health and Human Services

**The work of HHS is conducted by the  
Office of the Secretary and 11 agencies.**



**Kathleen Sibelius  
Secretary of HHS**

- ACF - Administration for Children & Families
- AoA - Administration on Aging
- AHRQ - Agency for Healthcare Research & Quality
- ATSDR - Agency for Toxic Substances & Disease Registry
- CDC - Centers for Disease Control & Prevention
- CMS - Centers for Medicare & Medicaid Services
- FDA - Food & Drug Administration
- HRSA - **Health Resources & Services Administration**
- IHS - Indian Health Service
- NIH - National Institutes of Health
- SAMHSA - Substance Abuse & Mental Health Services Administration

# Health Resources and Services Administration



**Mary Wakefield, PhD, RN  
HRSA Administrator**

**HIV/AIDS**

**Primary Health  
Care**

**Healthcare  
Systems**

**Health  
Professions**

**Maternal & Child  
Health (MCHB)**

**Clinician Recruit-  
ment & Service**

**Rural Health**

**Regional Operations**

**HRSA is the nation's access agency – improving health and saving lives by making sure the right services are available in the right places at the right time.**

# HRSA's Maternal and Child Health Bureau (MCHB)



**Dr. Peter van Dyck**  
Associate Administrator for MCH

**State & Community Health**

**Services for Children with Special Health Care Needs**

**Healthy Start & Perinatal Services**

**Research, Training & Education**

**Child, Adolescent & Family Health**

**Home Visiting and Early Childhood Systems**

**HRSA Office of Women's Health**

**Office of Epidemiology, Policy & Evaluation**

# MCHB's Mission

*The mission of the Maternal and Child Health Bureau (MCHB) is to provide national leadership, in partnership with key stakeholders, to improve the physical and mental health, safety and well-being of the maternal and child health (MCH) population which includes all of the nation's women, infants, children, adolescents, and their families, including fathers and children with special health care needs.*

# MCHB Values Statement

- **Comprehensive, coordinated care in medical homes that includes direct and enabling services**
- **Consumer-oriented, family-centered and culturally-competent care linked to community services**
- **Continually improving health care based on research, evaluation, training and education, technical assistance, and the dissemination of up-to-date information**

President Franklin Roosevelt signed the Social Security Act into law in 1935



The Federal Government, pledged its support of State efforts to extend health (**Title V**) and welfare services for mothers and children.



# MCHB Programs & Funding Streams

**Maternal & Child Health Block Grant**  
*(Title V, Social Security Act)*

**Formula Grants to each State for Maternal and Child Health & Services for Children with Special Health Care Needs**

**59 States and Territories**

**(Competitive grants) Special Projects of Regional & National Significance—SPRANS and Community Integrated Service Systems (CISS)**

State/local gov't agencies  
National/State orgs (eg., AAP, Family Voices)  
Community-based orgs  
Institutions of Higher Education (e.g., **Training** and **Research**)

**Other Legislated (Categorical) Programs**  
*(Most various sections of the Public Health Service Act)*

**Healthy Start**

**Emergency Medical Services for Children**

**Universal Newborn Hearing Screening**

**Traumatic Brain Injury**

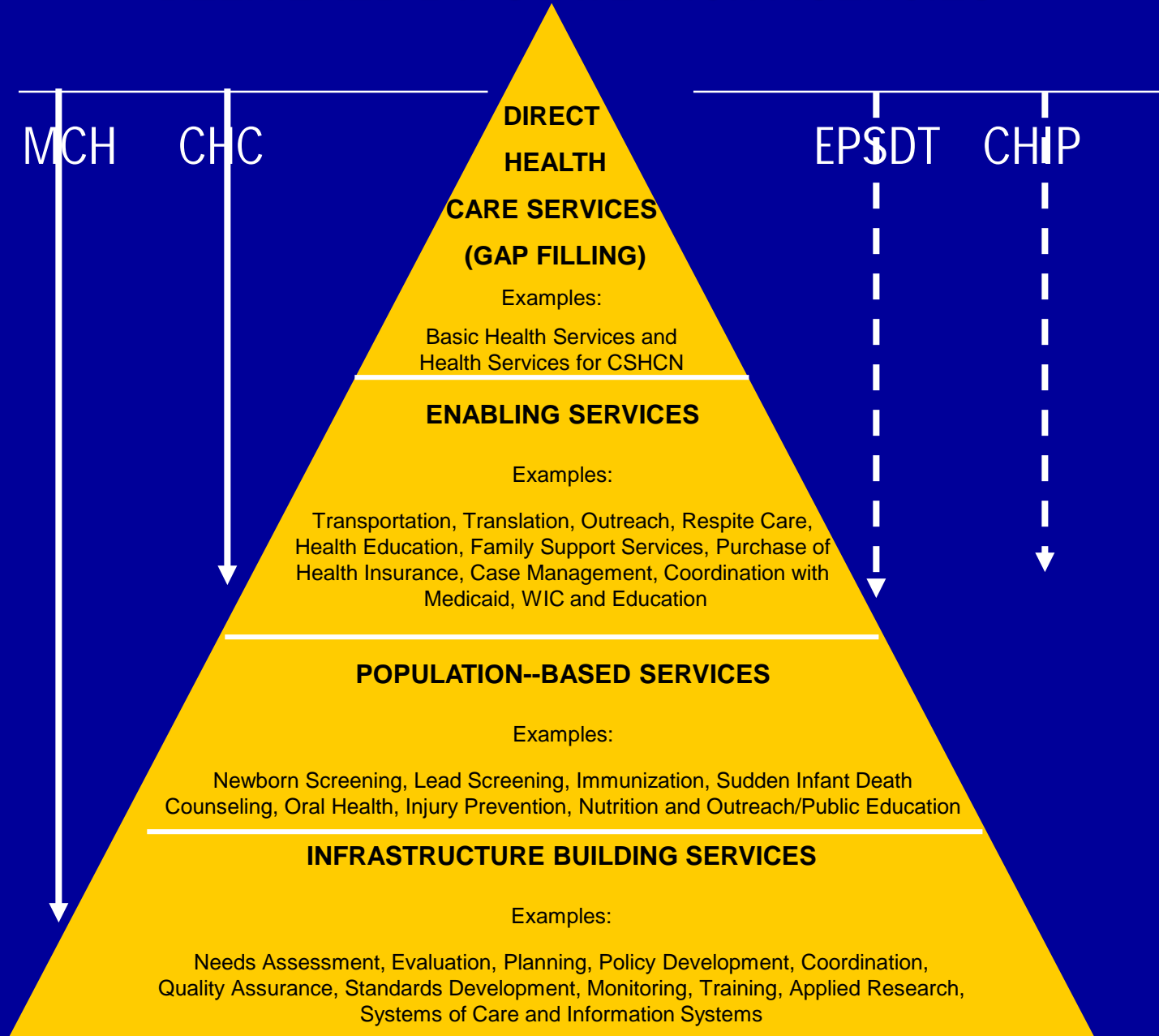
**Family to Family Health Information Centers**  
*(Social Security Act)*

**Combating Autism Act Initiative**

**Sickle Cell Service Demonstration Program**  
*( American Jobs Creation Act of 2004)*

**Maternal, Infant & Early Childhood Home Visiting**  
*(Affordable Care Act)*

# CORE PUBLIC HEALTH SERVICES DELIVERED BY STATE MCH AGENCIES



# DEFINITION: Children with Special Health Care Needs

- Children with special health care needs are those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.

Ref.: PEDIATRICS Vol. 102 No. 1 July 1998, pp. 137-139

Endorsed by HRSA/MCHB, American Academy of Pediatrics, others

# Family Centered Care

- A community-based system of services that is family-centered, culturally competent, and provides comprehensive services that are available and accessible to all infants, children, adolescents, including CYSHCN

# Medical Home

- A medical home is defined as a model of primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective.
- Demonstration grants were foundation for implementation of medical home at community level
- Work closely with partners (e.g., Patient Care Primary Care Collaborative) to advance medical home for CYSHCN
- Support the development of resources and tools
- Center for Medical Home Improvement at AAP ([www.medicalhomeinfo.org](http://www.medicalhomeinfo.org))
- Other HRSA programs (e.g., Community Health Centers, Rural Health) now engaged in advancing medical home

# Improving MCH data

for policy, planning, and accountability

- Title V Information System (TVIS)
- Discretionary Grant Information System (DGIS)
- National Surveys
- Intramural epidemiology research
- Maternal and Child Health Epidemiology Program (in partnership with CDC)
- Graduate Student Internship Program in state or local health departments.

# TVIS: Title V Information System

The Title V Information System (TVIS) electronically captures data from annual Title V Block Grant applications and reports submitted by all 59 U.S. States, Territories, and Jurisdictions and provides information on key measures and indicators of maternal and child health (MCH) in the United States.

- Title V State grantees submit applications/annual reports online using the **Title V Information System (TVIS)** .
- States report on **18 National Performance Measures, State Performance Measures, Outcome Measures, Health Status Indicators and Health System Capacity Indicators**.
- State, Regional, and National comparisons are accessible by the general public.

<https://perfddata.hrsa.gov/MCHB/TVISReports/>

## National Performance Measure #17:


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

State	Numerator Number of Infants with a birth weight less than 1,500 grams born at Level III facility.	Denominator Total Number of infants born with a birth weight of less than 1,500 grams	Indicator (Actual Result)	Year Reported	Objective (For the year reported)	FY 2012 Objective (Goal)
Alabama <a href="#">See Notes..</a> :	1,133	1,348	84.1*	2007	82.3	85.6
Alaska <a href="#">See Notes..</a> :	96	123	78	2006	80	90



# National Survey of Child Health and National Survey on Children with Special Health Care Needs


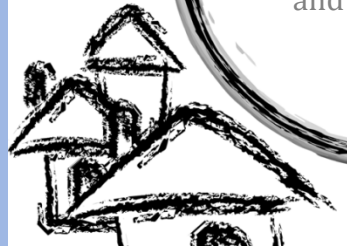

- MCHB Partnership with National Center for Health Statistics (NCHS) using sampling frame for the National Immunization Survey
- National & State Level Data
- [www.childhealthdata.org](http://www.childhealthdata.org)



**The Health and Well-Being of Children:**  
A Portrait of States and the Nation  
2005






**The Oral Health of Children:**  
A Portrait of States and the Nation  
2005

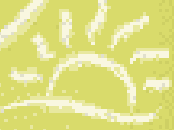




**The Mental and Emotional Well-Being of Children:**  
A Portrait of States and the Nation  
2007

**Chartbooks based on data from the  
National Survey of Children's Health  
and the  
National Survey of Children with  
Special Health Care Needs**



**Overweight and Physical Activity Among Children:**  
A Portrait of States and the Nation  
2005

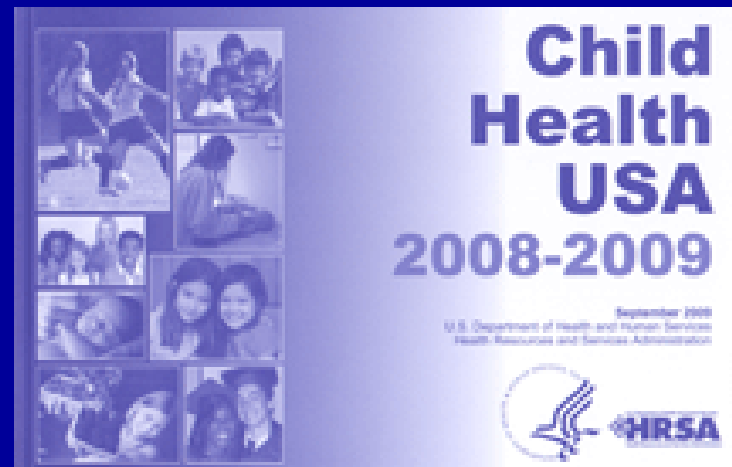
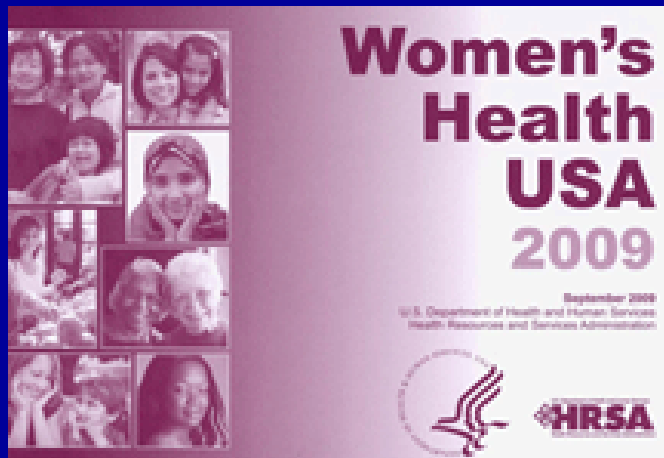


**The Health and Well-Being of Children in Rural Areas:**  
A Portrait of the Nation  
2005



**The National Survey of Children with Special Health Care Needs  
Chartbook 2005-2006**

# New Publications



# MCH Training Program

The MCH Training Program seeks to train the next generation of leaders who will provide or assure the provision of quality services for the MCH population.

## 10 categories of Graduate Training

- Adolescent Health
- Communication Disorders
- Developmental-Behavioral Pediatrics
- LEND
- Nursing
- Nutrition
- Pediatric Dentistry
- Peds Pulmonary Centers
- Schools of Public Health
- Social Work

## 6 categories of Continuing Education

- Distance Learning
- Certificate in MCH Public Health
- Collaborative Office Rounds
- Knowledge to Practice
- MCH Institute
- MCH Pipeline

FY 09: 126 active projects at 73 universities in 39 states and DC

# MCH Research Program

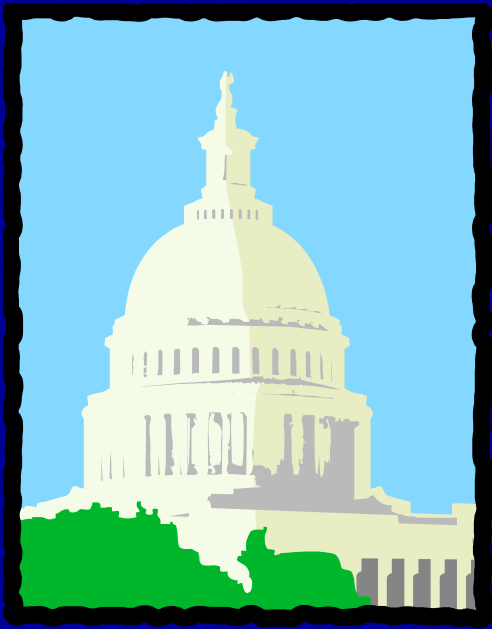
## R-40 Program

- Applied, Extramural, Investigator-initiated
- Multi-disciplinary in orientation
- MCHR- \$300,000 up to 3 years
- Secondary Data Analysis Studies - \$100,000 for 1 year

## Research Networks

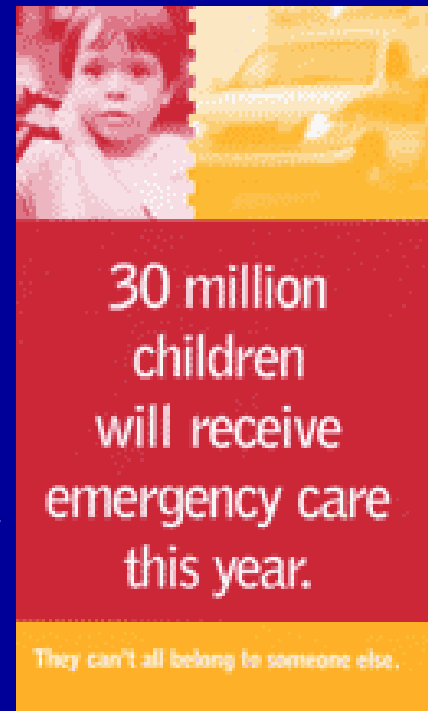
- Pediatric Emergency Care Applied Research Network
- Pediatric Research in Office Settings Network (**PROS**)
- MCH Research Network On Pregnancy-Related Care
- Autism Intervention Research Networks – Behavioral & Physical Health
- Developmental-Behavioral Pediatrics Research Network (NEW)
- MCH Lifecourse Research Network

# MCHB and the Affordable Care Act



# Emergency Medical Services for Children (EMSC)

- The EMSC Program, established in 1984, is the only federal program specifically focused on improving pediatric emergency care to reduce childhood morbidity and mortality due to severe illness and/or injury.
- The Affordable Care Act reauthorizes the Program through FY2014; includes the option to lengthen grant cycles; and authorizes \$25 million in FY2010, increasing to \$30.4 million in FY2014.
- This will ensure continued improvements in the Emergency Medical Services for Children and “the right care when it counts” for millions of the Nation’s children.



# Maternal, Infant, and Early Childhood Home Visiting Program

- The Affordable Care Act creates a Maternal, Infant, and Early Childhood Home Visiting Program to fund States to provide evidence-based home visitation services to improve outcomes for children and families who reside in at-risk communities.
- \$1.5 billion has been appropriated over the next 5 years.
  - Funding in FY2010 is \$100 million; \$250 million in FY 2011.
- Home visiting is a strategy that has been used by public health and human services programs to foster child development and address problems such as infant mortality.
- HRSA and the Administration for Children and Families are working collaboratively on this program.



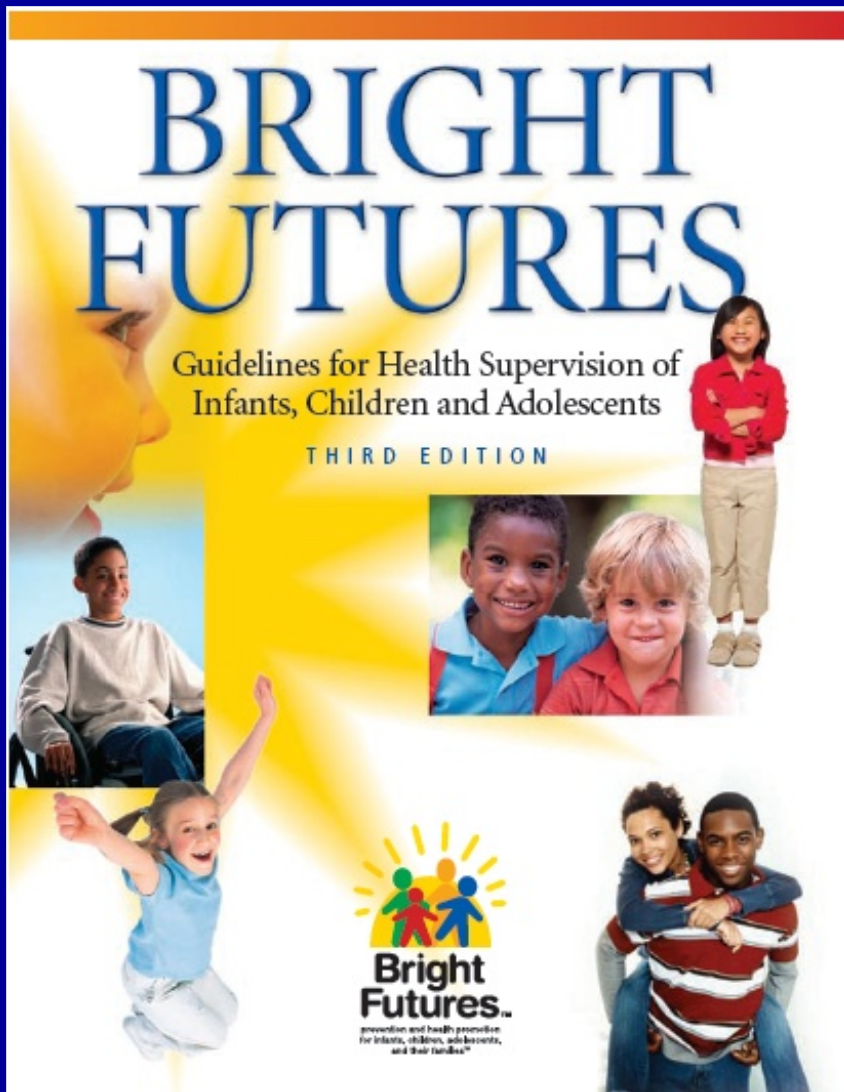


# Coverage of Preventive Services

Section 2713 of Public Health Service Act

Giving patients access, without cost-sharing, to preventive services recommended by:

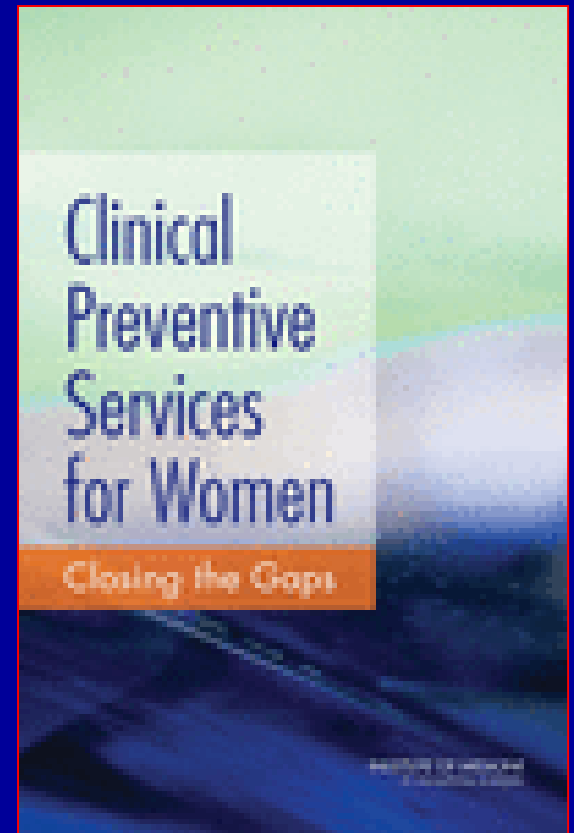
- ✓ U.S. Preventive Services Task Force (AHRQ)
- ✓ Advisory Committee on Immunization Practices (CDC)
- ✓ For infants, children and adolescents, comprehensive guidelines supported by HRSA
- ✓ For women, additional preventive care and screenings in comprehensive guidelines supported by HRSA



- Guidelines for Health Promotion and Preventive Services for ALL infants, children and adolescents, **INCLUDING** children and youth with special health care needs.
- Adopted as the national standard for well child care by the American Academy of Pediatrics and the Affordable Care Act

# Women's Preventive Services: Required Health Plan Coverage Guidelines

Announced by the Secretary of Health and Human Services, August 1, 2011



# Transitions

- HRSA Associate Administrator for Maternal and Child Health
- Director, Division of Healthy Start and Perinatal Services
  - Branch Chief, Women's Health and Special Populations
  - Branch Chief, Healthy Start

# Contact

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<http://www.mchb.hrsa.gov>

