

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (2-21)**  
**STATE: MN**  
**APPLICATION YEAR: 2013**

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**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2013**  
 [Secs. 504 (d) and 505(a)(3)(4)]  
**STATE: MN**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])

\$ 8,939,248

Of the Federal Allocation (1 above), the amount earmarked for:

A. Preventive and primary care for children:

\$ 2,733,378 ( 30.58 %)

B. Children with special health care needs:

\$ 2,812,602 ( 31.46 %)

(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:

\$ 700,000 ( 7.83 %)

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

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

\$ 116,431

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

\$ 6,791,759

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

\$ 3,659,554

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

\$ 10,329,763

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

\$ 97,462

**7. TOTAL STATE MATCH** (Lines 3 through 6)

\$ 20,878,538

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

\$ 6,184,197

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

\$ 29,934,217

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

**9. OTHER FEDERAL FUNDS**

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

a. SPRANS:	\$ <u>270,000</u>
b. SSDI:	\$ <u>65,357</u>
c. CISS:	\$ <u>150,000</u>
d. Abstinence Education:	\$ <u>261,650</u>
e. Healthy Start:	\$ <u>0</u>
f. EMSC:	\$ <u>0</u>
g. WIC:	\$ <u>130,266,604</u>
h. AIDS:	\$ <u>0</u>
i. CDC:	\$ <u>352,750</u>
j. Education:	\$ <u>280,000</u>
k. Home Visiting:	\$ <u>10,049,101</u>
l. Other:	\$ <u>          </u>

Medicaid	\$ <u>236,410</u>
Pregnant Parenting T	\$ <u>2,000,000</u>
PREP	\$ <u>874,780</u>
TANF	\$ <u>9,733,000</u>

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

\$ 154,518,652

**11. STATE MCH BUDGET TOTAL**

\$ 184,452,869

(Partnership subtotal + Other Federal MCH Funds subtotal)

**FORM NOTES FOR FORM 2**

None

**FIELD LEVEL NOTES**

None

**FORM 3**  
**STATE MCH FUNDING PROFILE**  
*[Secs. 505(a) and 506(a)(1-3)]*  
**STATE: MN**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form2)</i>	\$ 9,150,372	\$ 9,046,795	\$ 9,043,482	\$ 9,072,643	\$ 9,073,569	\$ 9,060,776
<b>2. Unobligated Balance</b> <i>(Line2, Form2)</i>	\$ 646,380	\$ 208,443	\$ 842,441	\$ 2,560	\$ 811,024	\$ 226,853
<b>3. State Funds</b> <i>(Line3, Form2)</i>	\$ 7,347,564	\$ 6,941,429	\$ 7,032,333	\$ 6,806,402	\$ 7,032,333	\$ 6,965,722
<b>4. Local MCH Funds</b> <i>(Line4, Form2)</i>	\$ 2,926,713	\$ 3,512,975	\$ 3,248,335	\$ 3,697,877	\$ 3,560,507	\$ 3,067,149
<b>5. Other Funds</b> <i>(Line5, Form2)</i>	\$ 5,110,988	\$ 5,884,658	\$ 5,420,487	\$ 6,217,417	\$ 6,269,070	\$ 5,950,988
<b>6. Program Income</b> <i>(Line6, Form2)</i>	\$ 24,779	\$ 68,246	\$ 50,782	\$ 78,571	\$ 68,247	\$ 97,461
<b>7. Subtotal</b>	\$ 25,206,796	\$ 25,662,546	\$ 25,637,880	\$ 25,875,470	\$ 26,814,750	\$ 25,368,949
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form2)</i>	\$ 107,739,686	\$ 124,950,676	\$ 131,916,672	\$ 141,927,894	\$ 155,303,472	\$ 150,706,894
<b>9. Total</b> <i>(Line11, Form2)</i>	\$ 132,946,482	\$ 150,613,222	\$ 157,554,532	\$ 167,803,364	\$ 182,118,222	\$ 176,075,843
(STATE MCH BUDGET TOTAL)						

FORM 3  
**STATE MCH FUNDING PROFILE**  
 [Secs. 505(a) and 506(a)(1-3)]  
 STATE: MN

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form2)</i>	\$ 9,072,643	\$ 9,002,379	\$ 9,060,776	\$ _____	\$ 8,939,248	\$ _____
<b>2. Unobligated Balance</b> <i>(Line2, Form2)</i>	\$ 394,363	\$ 2,955	\$ 78,627	\$ _____	\$ 116,431	\$ _____
<b>3. State Funds</b> <i>(Line3, Form2)</i>	\$ 7,032,333	\$ 6,754,000	\$ 6,854,552	\$ _____	\$ 6,791,759	\$ _____
<b>4. Local MCH Funds</b> <i>(Line4, Form2)</i>	\$ 3,704,946	\$ 3,521,734	\$ 3,498,112	\$ _____	\$ 3,659,554	\$ _____
<b>5. Other Funds</b> <i>(Line5, Form2)</i>	\$ 6,587,720	\$ 8,902,168	\$ 8,873,529	\$ _____	\$ 10,329,763	\$ _____
<b>6. Program Income</b> <i>(Line6, Form2)</i>	\$ 78,571	\$ 97,463	\$ 97,461	\$ _____	\$ 97,462	\$ _____
<b>7. Subtotal</b>	\$ 26,860,576	\$ 28,280,699	\$ 28,463,057	\$ 0	\$ 29,934,217	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form2)</i>	\$ 147,421,896	\$ 143,497,787	\$ 150,706,894	\$ _____	\$ 154,518,652	\$ _____
<b>9. Total</b> <i>(Line11, Form2)</i>	\$ 174,282,472	\$ 171,778,486	\$ 179,169,951	\$ 0	\$ 184,452,869	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM NOTES FOR FORM 3**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form3\_Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
State shutdown for 3 weeks impacted projected salary and S & E expenditures.
2. **Section Number:** Form3\_Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Delays in filling positions and less anticipated spending in S&E resulted in needing less than anticipate unobligated funds.
3. **Section Number:** Form3\_Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
While grantees reported less than anticipated in matching funds they fully met their obligations.
4. **Section Number:** Form3\_Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Additional state dollars were allocated for MCH activities.
5. **Section Number:** Form3\_Main  
**Field Name:** ProgramIncomeExpended  
**Row Name:** Program Income  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Overall minor changes in this area can result in a change over 10%. Program income makes up only 1.12% of the total funding.
6. **Section Number:** Form3\_Main  
**Field Name:** ProgramIncomeExpended  
**Row Name:** Program Income  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Program Income makes up only 1.05% of total funding available. Minimal changes in the amount received result in significant variation in percent changed.

**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**  
*[Secs 506(2)(2)(iv)]*  
**STATE: MN**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 5,436,921	\$ 5,457,523	\$ 6,643,864	\$ 5,604,170	\$ 5,651,951	\$ 5,238,914
b. Infants < 1 year old	\$ 2,067,237	\$ 2,934,090	\$ 2,320,999	\$ 3,465,098	\$ 3,038,619	\$ 3,511,366
c. Children 1 to 22 years old	\$ 8,283,994	\$ 7,282,244	\$ 6,225,679	\$ 6,815,488	\$ 7,290,870	\$ 6,513,761
d. Children with Special Healthcare Needs	\$ 8,012,925	\$ 8,122,418	\$ 8,802,367	\$ 8,452,430	\$ 8,782,537	\$ 8,281,703
e. Others	\$ 649,719	\$ 1,183,605	\$ 793,951	\$ 833,349	\$ 1,225,773	\$ 1,091,332
f. Administration	\$ 756,000	\$ 682,666	\$ 851,000	\$ 704,935	\$ 825,000	\$ 731,853
<b>g. SUBTOTAL</b>	\$ 25,206,796	\$ 25,662,546	\$ 25,637,860	\$ 25,875,470	\$ 26,814,750	\$ 25,368,949
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 150,000		\$ 87,500		\$ 150,000	
b. SSDI	\$ 94,644		\$ 94,644		\$ 94,644	
c. CISS	\$ 140,000		\$ 140,000		\$ 105,000	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 100,711,985		\$ 124,576,089		\$ 143,584,571	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 1,699,284		\$ 1,756,322		\$ 149,957	
j. Education	\$ 533,000		\$ 512,250		\$ 300,000	
k. Home Visiting	\$ 0		\$ 0		\$ 0	
l. Other						
HHS	\$ 0		\$ 0		\$ 500,000	
HRSA	\$ 4,259,722		\$ 4,598,815		\$ 10,419,300	
PRAMS	\$ 151,051		\$ 151,052		\$ 0	
<b>III. SUBTOTAL</b>	\$ 107,739,686		\$ 131,916,672		\$ 155,303,472	

**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**  
 [Secs 506(2)(2)(iv)]  
 STATE: MN

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 5,696,238	\$ 5,914,969	\$ 5,614,440	\$	\$ 6,350,378	\$
b. Infants < 1 year old	\$ 3,522,025	\$ 3,929,374	\$ 3,762,948	\$	\$ 4,218,627	\$
c. Children 1 to 22 years old	\$ 6,971,376	\$ 7,319,212	\$ 6,933,931	\$	\$ 7,827,120	\$
d. Children with Special Healthcare Needs	\$ 9,023,895	\$ 9,444,661	\$ 10,272,221	\$	\$ 9,704,454	\$
e. Others	\$ 847,042	\$ 1,055,909	\$ 1,169,517	\$	\$ 1,133,638	\$
f. Administration	\$ 800,000	\$ 616,584	\$ 710,000	\$	\$ 700,000	\$
<b>g. SUBTOTAL</b>	<b>\$ 26,860,576</b>	<b>\$ 28,280,699</b>	<b>\$ 28,463,057</b>	<b>\$ 0</b>	<b>\$ 29,934,217</b>	<b>\$ 0</b>
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 300,000		\$ 300,000		\$ 270,000	
b. SSDI	\$ 100,000		\$ 97,260		\$ 65,357	
c. CISS	\$ 132,000		\$ 143,438		\$ 150,000	
d. Abstinence Education	\$ 0		\$ 279,560		\$ 261,660	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 136,511,917		\$ 135,249,825		\$ 130,266,604	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 147,997		\$ 345,529		\$ 352,750	
j. Education	\$ 0		\$ 0		\$ 260,000	
k. Home Visiting	\$ 0		\$ 0		\$ 10,049,101	
l. Other						
Medicaid	\$ 0		\$ 0		\$ 235,410	
Pregnant Parenting T	\$ 0		\$ 0		\$ 2,000,000	
PREP	\$ 0		\$ 0		\$ 874,780	
TANF	\$ 0		\$ 0		\$ 9,733,000	
Children and Familie	\$ 0		\$ 300,000		\$ 0	
Department of Educat	\$ 0		\$ 280,000		\$ 0	
HHS	\$ 0		\$ 13,711,292		\$ 0	
ED	\$ 255,000		\$ 0		\$ 0	
HRSA	\$ 9,974,982		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	<b>\$ 147,421,896</b>		<b>\$ 150,706,894</b>		<b>\$ 154,518,652</b>	

**FORM NOTES FOR FORM 4**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
2. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
3. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Local public health agencies appear to be shifting funding from Children/Adolescents and Pregnant Women to support infant services. MN will need to explore if this is real, transient or reflective of more accurate data entry.
4. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Local public health agencies appear to be shifting funding from Children/Adolescents and Pregnant Women to support infant services. MN will need to explore if this is real, transient or reflective of more accurate data entry.
5. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
6. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
This category reflects family planning (FP) expenditures. Institutionalization of the 1115 Waiver for FP services has allowed funding to be redirected to other areas.
7. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
State shutdown for 3 weeks impacted projected salary and S & E expenditures.
8. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Delays in filling positions and less anticipated spending in supplies resulted in needing less than anticipated unobligated funds which resulted in less administrative costs.

**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: MN**

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 8,511,702	\$ 11,155,175	\$ 8,805,335	\$ 11,410,292	\$ 10,795,155	\$ 11,487,249
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 4,360,077	\$ 3,135,211	\$ 4,331,061	\$ 3,409,894	\$ 3,464,458	\$ 3,730,202
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 3,673,237	\$ 7,140,849	\$ 6,364,720	\$ 7,170,468	\$ 7,033,232	\$ 5,987,328
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 8,661,780	\$ 4,231,311	\$ 6,136,744	\$ 3,884,816	\$ 5,521,905	\$ 4,164,170
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 25,206,796	\$ 25,662,546	\$ 25,637,860	\$ 25,875,470	\$ 26,814,750	\$ 25,368,949

**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: MN**

TYPE OF SERVICE	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 11,351,551	\$ 11,614,566	\$ 12,392,722	\$	\$ 11,495,969	\$
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 4,131,189	\$ 4,928,028	\$ 4,225,718	\$	\$ 4,870,650	\$
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 6,032,603	\$ 7,038,547	\$ 6,536,890	\$	\$ 8,718,543	\$
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,345,233	\$ 4,699,558	\$ 5,307,727	\$	\$ 4,849,065	\$
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 26,860,576	\$ 28,280,699	\$ 28,463,057	\$ 0	\$ 29,934,217	\$ 0

**FORM NOTES FOR FORM 5**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form5\_Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
2. **Section Number:** Form5\_Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
3. **Section Number:** Form5\_Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
4. **Section Number:** Form5\_Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2011  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.
5. **Section Number:** Form5\_Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Local public health agencies are able to redirect MCH Block grant funds to where they are needed to maintain core maternal and child health services resulting in fluctuations of how funds are used.

**FORM 6**

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

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

**STATE: MN**

Total Births by Occurrence: 68,277

Reporting Year: 2010

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	67,788	99.3	16	10	10	100
Congenital Hypothyroidism	67,788	99.3	236	62	62	100
Galactosemia	67,788	99.3	45	11	11	100
Sickle Cell Disease	67,788	99.3	27	24	24	100
<b>Other Screening (Specify)</b>						
Biotinidase Deficiency	67,788	99.3	70	9	9	100
Congenital Adrenal Hyperplasia	67,788	99.3	119	6	6	100
Cystic Fibrosis	67,788	99.3	247	8	8	100
Hemoglobinopathies	67,788	99.3	39	25	25	100
Organic Acidemias	67,788	99.3	33	16	16	100
Fatty Acid Oxidation Disorders	67,788	99.3	42	12	12	100
Amino Acidemias	67,788	99.3	27	13	13	100

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

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

**FORM NOTES FOR FORM 6**

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: MN**

Number of Individuals Served - Historical Data by Annual Report Year					
Types of Individuals Served	2006	2007	2008	2009	2010
Pregnant Women	10,461	10,855	8,662	8,364	6,317
Infants < 1 year old	70,920	71,645	73,029	71,682	69,834
Children 1 to 22 years old	19,081	16,215	15,633	14,972	16,428
Children with Special Healthcare Needs	7,733	7,244	7,771	7,344	8,335
Others	3,223	3,497	3,582	3,720	3,402
<b>Total</b>	111,418	109,456	108,677	106,082	104,316

Reporting Year: 2011

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	5,911	77.5	0.0	17.7	1.9	2.8
Infants < 1 year old	68,407	42.0	0.0			58.0
Children 1 to 22 years old	10,776	48.8	0.0	30.6	11.0	9.6
Children with Special Healthcare Needs	8,720	38.8	0.0	31.4	3.2	26.5
Others	3,097	64.8	0.0	25.1	7.3	2.7
<b>TOTAL</b>	96,911					

**FORM NOTES FOR FORM 7**

None

**FIELD LEVEL NOTES**

None

**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: MN**

Reporting Year: 2011

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	68,407	51,186	6,590	1,395	4,952	0	0	4,284
Title V Served	3,979	2,821	439	151	185	6	52	325
Eligible for Title XIX	27,799	17,391	5,218	1,257	2,185	40	427	1,281
<b>INFANTS</b>								
Total Infants in State	69,009	55,535	7,444	1,709	4,321	0	0	0
Title V Served	5,491	3,337	858	149	451	4	310	382
Eligible for Title XIX	65,368	38,696	11,457	2,112	4,263	63	2,769	6,008

**II. UNDUPLICATED COUNT BY ETHNICITY**

	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	HISPANIC OR LATINO (Sub-categories by country or area of origin)				
				(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	62,629	5,107		0	0	0	0	5,107
Title V Served	3,009	691	279					691
Eligible for Title XIX	24,209	3,585	5	0	0	0	0	3,585
<b>INFANTS</b>								
Total Infants in State	62,269	6,740	0	0	0	0	0	6,740
Title V Served	4,352	937	202					937
Eligible for Title XIX	56,743	8,624	1	0	0	0	0	8,624

**FORM NOTES FOR FORM 8**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form8\_I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_All

**Row Name:** Total Infants in State

**Column Name:** Total All Races

**Year:** 2013

**Field Note:**

These numbers were taken from two different years. "Total infants in the State" was 69,009 in 2009, while "Total births by occurrence" was 68,277 in 2010.

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

	FY 2013	FY 2012	FY 2011	FY 2010	FY 2009
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

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

	<b>FY 2013</b>	<b>FY 2012</b>	<b>FY 2011</b>	<b>FY 2010</b>	<b>FY 2009</b>
1. State MCH Toll-Free "Hotline" Telephone Number	800-725-5420	800 725-5420	800 728-5420	800 728-5420	800 728-5420
2. State MCH Toll-Free "Hotline" Name	Information and Referral Line				
3. Name of Contact Person for State MCH "Hotline"	Barb Dalbec	Sarah Thorson	Sarah Thorson	Sarah Thorson	Sarah Thorson
4. Contact Person's Telephone Number	651-201-3758	651 201-3651	651 201-3651	651 201-3651	651 201-3651
5. Contact Person's Email	barb.dalbec@state.mn.us	sarah.thorson@state.mn.us	sarah.thorson@state.mn.us	sarah.thorson@state.mn.us	
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	408	418	503

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

None

FORM 10  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2013**  
*[Sec. 506(a)(1)]*  
**STATE: MN**

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

The Minnesota Department of Health is one of the major administrative agencies of state government. The Commissioner of Health is appointed by the Governor with confirmation by the state senate. The Department is organized into four Bureaus: Community and Family Health Promotion, Health Protection, Policy Quality and Compliance Monitoring and Administrative Services. The Community and Family Health Promotion Bureau is comprised of the Division of Community and Family Health and the Division of Health and Health Promotion and Chronic Disease and the Office of Minority and Multicultural Health and the Office of Statewide Health Improvement Initiatives. The Community and Family Health Division administers the Title V programs (Maternal and Child Health and Children and Youth with Special Health Needs). The other sections within the Division of Community and Family Health include WIC and Health Care Homes.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>8,939,248</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>116,431</u>
4. State Funds (Line 3, Form 2)	\$ <u>6,791,759</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>3,669,554</u>
6. Other Funds (Line 5, Form 2)	\$ <u>10,329,763</u>
7. Program Income (Line 6, Form 2)	\$ <u>97,462</u>
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ <u>29,934,217</u></b>

9. Most significant providers receiving MCH funds:

MN's Local Public Health Agencies  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

a. Pregnant Women	<u>5,911</u>
b. Infants < 1 year old	<u>68,407</u>
c. Children 1 to 22 years old	<u>10,776</u>
d. CSHCN	<u>8,720</u>
e. Others	<u>3,097</u>

11. Statewide Initiatives and Partnerships:

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

Through grants to local public health agencies, the MCH Block Grant supports direct medical care and such as immunization clinics, developmental screening and family planning clinics as well as supports home visiting programs. The CYSHN Program partners with the MDH Laboratory, Mayo Clinic and the University of Minnesota Hospitals to provide newborn screening, diagnosis and follow-up services. Contractual arrangement with Gillette Children's Hospital has provided habilitative services in underserved areas of the state. Enabling services include providing families with assistance in completing applications and linking to appropriate community resources.

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

The Maternal and Child Health Block Grant supports data collection and analysis that informs the maternal and child health community of issues or progress made. Through local public health agencies information dissemination and educational opportunities are provided related to reproductive sexual health, the need for early and continuous prenatal care, appropriate car seat installation and use, home safety, safe sleep environments for infants, alcohol and tobacco prevention, nutrition and physical activity Health Care Home and emergency preparedness to name a few. Close partnerships in this work occur with the Departments of Education and Human Services.

c. Infrastructure Building Services:  
*(max 2500 characters)*

The Maternal and Child Health Block Grant supports efforts to design and build child health information systems to enhance program evaluation and understand how Minnesota children are faring. The MCH Block grant also supports strengthening the MCH/CYSHN program capacity to analysis and report on maternal and child health data by supporting individuals with research scientist and epidemiology skills.

12. The primary Title V Program contact person:

Name Laurel Bristle  
 Title MCH Director  
 Address P.O. Box 64882  
 City St. Paul  
 State MN  
 Zip 55164-0882  
 Phone 651-201-3872  
 Fax 651-201-3590  
 Email laurel.bristle@state.mn.us  
 Web \_\_\_\_\_

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

Name Barb Dalbec  
 Title CYSHN Director  
 Address P.O. Box 64882  
 City St. Paul  
 State MN  
 Zip 55164-0882  
 Phone 651-201-3758  
 Fax 651-201-3590  
 Email barb.dalbec@state.mn.us  
 Web \_\_\_\_\_

14. State Family or Youth Leader Contact person:

Name Carol Grady  
 Title \_\_\_\_\_  
 Address 674 Lincoln Avenue  
 City St. Paul  
 State MN  
 Zip 55105  
 Phone 651-225-1258  
 Fax \_\_\_\_\_  
 Email \_\_\_\_\_  
 Web \_\_\_\_\_



**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None



**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)

	<b>Annual Objective and Performance Data</b>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	63	63	63	63	65
<b>Annual Indicator</b>	60.3	60.3	60.3	60.3	76.3
<b>Numerator</b>	103,284	103,284	103,284	103,284	135,144
<b>Denominator</b>	171,251	171,251	171,251	171,251	177,106
<b>Data Source</b>		National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 09/10
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Final

	<b>Annual Objective and Performance Data</b>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	76	79	79	82	82
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate this indicator for both the 2001 and the 2005-06 CSHCN survey. However, in 2009-2010 there were wording changes and additions to the questions used to generate this indicator. The data for 2009-2010 are NOT comparable to earlier versions of the survey.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes

**2. Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**3. Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data source is the National Survey of CSHCN 2005/ 06

**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>				
	2007	2008	2009	2010	2011
Annual Performance Objective	53.6	54	54	54	54
Annual Indicator	51.8	51.8	51.8	51.8	48.0
Numerator	88,280	88,280	88,280	88,280	82,855
Denominator	170,372	170,372	170,372	170,372	172,638
Data Source		National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 09/10
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	48	50	50	52	52
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. The data for the 2001 and 2005-2006 surveys are not comparable for NPM 3. However, the same questions were used to generate the NPM 3 indicator for both the 2005-2006 and 2009-2010, therefore these two surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes

**2. Section Number:** Form11\_Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

**3. Section Number:** Form11\_Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

data source: National Survey of CSHCN 2005/06

**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)

	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	70	66	66.3	66.3	70
<b>Annual Indicator</b>	66.3	66.3	66.3	66.3	62.5
<b>Numerator</b>	116,294	116,294	116,294	116,294	109,987
<b>Denominator</b>	175,428	175,428	175,428	175,428	176,054
<b>Data Source</b>		National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 09/10
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Final

	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	63	65	65	70	70
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate the NPM 4 indicator for the 2001, 2005-06, and 2009-2010 CSHCN surveys.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

**2. Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**3. Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data source: National Survey of CSHCN 2005 / 06

**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)

	<b>Annual Objective and Performance Data</b>				
	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>
<b>Annual Performance Objective</b>	<u>78.5</u>	<u>91</u>	<u>91</u>	<u>91</u>	<u>94</u>
<b>Annual Indicator</b>	<u>90.7</u>	<u>90.7</u>	<u>90.7</u>	<u>90.7</u>	<u>69.5</u>
<b>Numerator</b>	<u>160,677</u>	<u>160,677</u>	<u>160,677</u>	<u>160,677</u>	<u>123,013</u>
<b>Denominator</b>	<u>177,112</u>	<u>177,112</u>	<u>177,112</u>	<u>177,112</u>	<u>176,941</u>
<b>Data Source</b>		National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 09/10
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Final

	<b>Annual Objective and Performance Data</b>				
	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Annual Performance Objective</b>	<u>70</u>	<u>72</u>	<u>72</u>	<u>75</u>	<u>75</u>
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were revisions to the wording, order, and number of questions used to generate this indicator for the 2005-06 CSHCN survey. The questions were also revised extensively for the 2009-2010 CSHCN survey. Therefore, none of the three rounds of the surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

**2. Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

**3. Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data Source: National Survey of CSHCN 2005 / 06

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	6.4	55	55	57	57
Annual Indicator	52.9	52.9	52.9	52.9	47.1
Numerator	39,459	39,459	39,459	39,459	35,719
Denominator	74,600	74,600	74,600	74,600	75,796
Data Source		National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 05/06	National Survey of CSHCN 09/10
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)</p>					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	47	50	50	55	55
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the 2 surveys are not comparable for NPM 6, and findings from the 2005-06 survey may be considered baseline data. However, the same questions were used to generate the NPM 6 indicator for the 2009-2010 survey. Therefore, the 2005-2006 and 2009-2010 surveys can be compared.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

**2. Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

**3. Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data Source: National Survey of CSHCN 2005 / 06

**PERFORMANCE MEASURE # 07**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>90</u>	<u>85</u>	<u>85</u>	<u>92</u>	<u>95</u>
Annual Indicator	<u>93.1</u>	<u>91.1</u>	<u>94.7</u>	<u>95.0</u>	<u>95.0</u>
Numerator	<u>65,174</u>	<u>65,124</u>	<u>68,012</u>	<u>68,700</u>	<u>68,700</u>
Denominator	<u>70,004</u>	<u>71,486</u>	<u>71,790</u>	<u>72,316</u>	<u>72,316</u>

Data Source

National Immunization Survey    National Immunization Survey    National Immunization Survey    Estimates

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final    Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>96</u>	<u>96</u>	<u>97</u>	<u>97</u>	<u>97</u>
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- 1. Section Number: Form11\_Performance Measure #7
- Field Name: PM07
- Row Name:
- Column Name:
- Year: 2009
- Field Note:  
2009 data will not be available from MN Vital Statistics until 2011. These data are estimates.

**PERFORMANCE MEASURE # 08**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	12	13	12.5	12	10
Annual Indicator	13.9	12.9	11.5	10.0	9.6
Numerator	1,519	1,377	1,205	1,072	1,035
Denominator	109,548	106,591	104,596	107,400	108,200
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	Estimates

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	9	9	8.5	8.5	8
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. Section Number: Form11\_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data will not be available until later in 2011. We have provided a provisional estimate based on recent trends.

2. Section Number: Form11\_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data will not be available from MN Vital Statistics until 2011. These data are estimates.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	14.5	14	14.5	15	64
<b>Annual Indicator</b>	14.2	14.2	15.0	64.1	64.1
<b>Numerator</b>	17,235	18,388	26,018	1,132	1,132
<b>Denominator</b>	120,950	129,526	173,442	1,766	1,766
<b>Data Source</b>		MN Dept. of Human Services	MN Dept of Human Services	Basic Screening Survey (BSS)	Basic Screening Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Final

	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	64	64	64	70	70
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

We have changed our data source as of 2010 because we now have access to the Basic Screening Survey (BSS) which is more comparable to dental data from other states. We will no longer be using Medicaid data from the MN Dept. of Human Services as it deals with a very small subset of third graders, whereas BSS data is more representative of the entire population. Our 2010 data should not, and cannot, be compared with 2009 or previous years' data.

2. **Section Number:** Form11\_Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2009 DHS data will not be available until next calendar year (2011).

**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>				
	2007	2008	2009	2010	2011
Annual Performance Objective	2.3	2	1.9	2.3	2
Annual Indicator	1.9	2.4	1.8	1.9	2.0
Numerator	20	25	19	20	21
Denominator	1,035,183	1,035,562	1,045,645	1,063,382	1,065,000
Data Source		MDH Injury Unit	MDH Injury Unit	MDH Injury Unit	Estimates

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	1.9	1.9	1.8	1.8	1.7
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. Section Number: Form11\_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2010

Field Note:

2010 injury data are not yet available; therefore, these data are estimates.

2. Section Number: Form11\_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2009

Field Note:

The MDH Injury Unit will not have precise 2009 data until 2011. These data are general estimates.

**PERFORMANCE MEASURE # 11**

The percent of mothers who breastfeed their infants at 6 months of age.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	48	48	48	52	53
Annual Indicator		51.6	51.6	51.6	50.9
Numerator					113
Denominator					222
Data Source		National Immunization Survey data	NIS data	NIS	NIS

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)  
 Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	53	53	54	54	54
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 A numerator and denominator for 2010 are not available at this time.
- Section Number:** Form11\_Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 The most recent birth cohort available on the NIS website is 2006.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	90	85	90	97	98
Annual Indicator	88.9	96.7	97.2	97.8	98.3
Numerator	65,434	69,790	68,466	66,798	67,165
Denominator	73,608	72,169	70,432	68,277	68,300
Data Source		MDH newborn screening program	MDH Newborn Screening Program	MDH Newborn Screening	Estimates
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	98.5	98.5	98.5	99	99
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number: Form11\_Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2010

Field Note:

2010 hearing screening data are not available at this time; therefore, we have provided estimates. Our newborn screening procedures have improved over the past few years, resulting in de-duplication of cases and a smaller numerator. This is a positive step and should not be regarded as an actual decrease in the number of newborns screened in MN.

- Section Number: Form11\_Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2009

Field Note:

For various reasons, we are unable to accurately separate infants screened before discharge from those screened after discharge. Therefore, these numbers represent the total number and percent of infants who have received screening in 2009, regardless of when the screening occurred.



**PERFORMANCE MEASURE # 14**

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

<u>Annual Objective and Performance Data</u>					
	2007	2008	2009	2010	2011
Annual Performance Objective	28.5	28	28	27	26.5
Annual Indicator	29.9	30.4	29.9	29.1	29.1
Numerator	18,272	19,944	20,630	19,960	20,541
Denominator	61,109	65,607	68,997	68,594	70,589
Data Source		PedNSS	PedNSS	PedNSS	PedNSS
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  <i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>					
Is the Data Provisional or Final?				Final	Final
<u>Annual Objective and Performance Data</u>					
	2012	2013	2014	2015	2016
Annual Performance Objective	27	27	25	25	24
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

None

**PERFORMANCE MEASURE # 15**

Percentage of women who smoke in the last three months of pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	13	13	13	11	10
Annual Indicator	15.0	11.6	14.4	13.7	13.1
Numerator	10,303	7,865	9,534	8,868	8,513
Denominator	68,911	67,563	66,319	64,733	65,000
Data Source		MN PRAMS	MN PRAMS	MN PRAMS	Estimates

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	12	11	11	9	9
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. Section Number: Form11\_Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2010

Field Note:

2010 PRAMS data are not available from CDC at the present time. CDC is currently processing our 2009 data, which is also unavailable; thus, we are providing estimates for 2010.

2. Section Number: Form11\_Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2009

Field Note:

Most recent PRAMS data available from CDC is 2008. CDC is currently cleaning the Minnesota data; it will not be weighted and ready to use for several weeks. Thus, we are providing estimates for 2009.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	11	8.5	7.2	7.1	8
Annual Indicator	9.7	7.4	8.7	10.6	10.1
Numerator	36	27	32	39	37
Denominator	371,683	366,844	368,101	367,829	367,830
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	Estimates

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5  
 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	9	9	8	8	7.5
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 2011 data for this measure should be available by the end of June 2012, and will be submitted along with all other measures
- Section Number:** Form11\_Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 2010 Vital Statistics data will not be available until later in 2011. We are providing estimates.
- Section Number:** Form11\_Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Most recent Vital Statistics data available is 2008.

**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>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>87</u>	<u>84</u>	<u>87</u>	<u>87</u>	<u>88</u>
Annual Indicator	<u>85.6</u>	<u>85.5</u>	<u>85.6</u>	<u>83.0</u>	<u>83.5</u>
Numerator	<u>718</u>	<u>693</u>	<u>664</u>	<u>586</u>	<u>601</u>
Denominator	<u>839</u>	<u>811</u>	<u>776</u>	<u>706</u>	<u>720</u>
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	Estimates

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>88</u>	<u>89</u>	<u>89</u>	<u>89</u>	<u>89</u>
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- 1. Section Number: Form11\_Performance Measure #17
- Field Name: PM17
- Row Name:
- Column Name:
- Year: 2009
- Field Note:
- 2008 is the most recent data available from MN Vital Statistics.

**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>				
	2007	2008	2009	2010	2011
Annual Performance Objective	88	87	87	88	88
Annual Indicator	85.8	85.6	85.9	86.3	86.3
Numerator	60,085	60,180	59,342	59,678	57,975
Denominator	70,020	70,288	69,085	69,172	67,206
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	Estimates

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	89	89	90	90	90
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. Section Number: Form11\_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2010

Field Note:

2010 MN Vital Statistics data will not be available until Fall, 2011; therefore, we have provided estimates for 2010.

2. Section Number: Form11\_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2009

Field Note:

2008 is most recent specific data available from MN Vital Statistics. Data listed for 2009 are general estimates based on overall MN trends.

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

**Form Level Notes for Form 11**

Note that because of changes in the methodology for the CMS-416 over the past two years, data for FFY 2009 through FFY 2011 cannot be compared with each other. This means that this percentage is not directly comparable to the percentages reported in previous years.

**STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR**

Percentage of women who did not consume alcohol during the last three months of pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	_____	_____	_____	_____	92
<b>Annual Indicator</b>	_____	_____	92.1	94.2	92.0
<b>Numerator</b>	_____	_____	61,149	60,940	59,268
<b>Denominator</b>	_____	_____	66,429	64,719	64,450
<b>Data Source</b>			MN PRAMS Survey	MN PRAMS Survey	Estimates
<b>Is the Data Provisional or Final?</b>				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	93	94	95	96	96
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
<b>Numerator</b>	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
<b>Denominator</b>	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR**

Percentage of children enrolled in Medicaid who receive at least one recommended Child and Teen Checkup (C&TC) visit (EPSDT is known as C&TC in Minnesota).

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	72
Annual Indicator	_____	_____	_____	72.2	68.5
Numerator	_____	_____	_____	198,808	200,035
Denominator	_____	_____	_____	275,509	292,068
Data Source				DHS Medicaid data	2010 DHS data
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	72	74	74	75	75
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Data presented is 2010 data. There was a delay in MN Dept. of Human Services receipt of claims data from managed care organizations due to a HIPPA required upgrade in the format of data being transferred from MCOs to DHS.

2. **Section Number:** Form11\_State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Methodology for this measure has changed. Calculations only include children who have been enrolled in Medicaid for at least 90 continuous days. Therefore, the 2010 annual indicator is not directly comparable to percentages reported in previous years. Using the old methodology, the percentage for FFY 2010 would be 70.0% 205,176/293,777

**STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR**

Percentage of MN children birth to 5 enrolled in Medicaid who received a mental health screening using a standardized instrument as part of their C&TC visit (EPSDT is known as C&TC in Minnesota).

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	_____ 3
Annual Indicator	_____	_____	_____	_____ 2.7	_____ 1.6
Numerator	_____	_____	_____	_____ 3,733	_____ 2,193
Denominator	_____	_____	_____	_____ 137,487	_____ 133,029
Data Source				DHS Medicaid data	DHS Medicaid data
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	_____ 3.3	_____ 3.5	_____ 3.8	_____ 4	_____ 4
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
Numerator	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
Denominator	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

1. **Section Number:** Form11\_State Performance Measure #3

**Field Name:** SM3

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

2010 data will remain provisional until January 2012.

Source is MN Health Care Programs paid claims and encounter data from the DHS Data Warehouse.

Note: it is possible that the mental health screening took place outside of the C&TC visit for a given child.

**STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR**

Incidence rate of child maltreatment reports per 1,000 children ages birth through 17 years.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	_____ 12
Annual Indicator	_____	_____	_____ 12.1	_____ 12.1	_____ 10.8
Numerator	_____	_____	_____ 16,905	_____ 16,905	_____ 15,102
Denominator	_____	_____	_____ 1,402,406	_____ 1,402,406	_____ 1,402,406
Data Source			DHS Data Warehouse	DHS Data Warehouse	DHS Data Warehouse
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	_____ 11.5	_____ 11	_____ 10.5	_____ 10	_____ 10
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
Numerator	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
Denominator	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

- 1. **Section Number:** Form11\_State Performance Measure #4
- Field Name:** SM4
- Row Name:**
- Column Name:**
- Year:** 2011
- Field Note:**  
2011 data is not yet available for this measure. It should be available by the end of June 2012.

**STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR**

The number of children enrolled in the Follow-Along Program.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	_____	_____	_____	_____	33,000
<b>Annual Indicator</b>	_____	_____	_____	32,820	30,120
<b>Numerator</b>	_____	_____	_____	_____	_____
<b>Denominator</b>	_____	_____	_____	_____	_____
<b>Data Source</b>				Follow-Along Program	Follow-Along Program
<b>Is the Data Provisional or Final?</b>				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	33,000	33,250	33,250	33,500	33,550
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
<b>Numerator</b>	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
<b>Denominator</b>	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

1. **Section Number:** Form11\_State Performance Measure #5

**Field Name:** SM5

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

The number entered is the sole indicator for this measure. There is no numerator or denominator.

2. **Section Number:** Form11\_State Performance Measure #5

**Field Name:** SM5

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

There is no denominator for this performance measure

**STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR**

Percentage of children under the age of one year participating in early intervention through Part C of the Individuals with Disabilities Education Act.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	_____	_____	_____	_____	0.9
<b>Annual Indicator</b>	_____	_____	0.7	0.9	0.9
<b>Numerator</b>	_____	_____	543	629	597
<b>Denominator</b>	_____	_____	73,019	68,407	68,407
<b>Data Source</b>			IDEA data	IDEA data	IDEA data
<b>Is the Data Provisional or Final?</b>				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	1	1.1	1.2	1.2	1.2
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
<b>Numerator</b>	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
<b>Denominator</b>	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR**

Percentage of participants in Minnesota's family home visiting program referred to community resources that received a family home visitor follow-up on that referral.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	_____	_____	_____	_____	79
<b>Annual Indicator</b>	_____	_____	83.0	77.0	81.6
<b>Numerator</b>	_____	_____	16,104	9,763	10,498
<b>Denominator</b>	_____	_____	19,396	12,674	12,870
<b>Data Source</b>			MDH Home Visiting Program	MDH Home Visiting Program	MDH Home Visiting Program
<b>Is the Data Provisional or Final?</b>				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	80	82	84	85	85
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR**

Percentage of children and youth with special health care needs who have received all needed health care services.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	_____	_____	_____	_____	89
<b>Annual Indicator</b>	_____	_____	_____	87.1	79.7
<b>Numerator</b>	_____	_____	_____	154,701	138,259
<b>Denominator</b>	_____	_____	_____	177,668	173,551
<b>Data Source</b>				2005-06 CSHCN Survey	2009-10 CSHCN survey
<b>Is the Data Provisional or Final?</b>				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	79	82	82	85	85
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR**

Percentage of families of children age 0-17 that report costs not covered by insurance are usually or always reasonable.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	_____	_____	_____	_____	63
<b>Annual Indicator</b>	_____	_____	_____	62.9	62.9
<b>Numerator</b>	_____	_____	_____	533,727	533,727
<b>Denominator</b>	_____	_____	_____	848,067	848,067
<b>Data Source</b>				NSCH 2007-08 survey	NSCH 2007-08
<b>Is the Data Provisional or Final?</b>				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	65	68	70	72	72
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
<b>Numerator</b>	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
<b>Denominator</b>	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR**

By 2013, in collaboration with other state agencies, identify a state performance measure and benchmark to monitor positive youth development in Minnesota.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	_____ 3
Annual Indicator	_____	_____	_____	_____ 1	_____ 1
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source				Adolescent Health Workgroup	Adolescent Health Workgroup
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	_____ 5	_____ 6	_____ 0	_____ 0	_____ 0
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
Numerator	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
Denominator	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #10  
**Field Name:** SM10  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 We do not have an Adolescent Health Coordinator at this time; therefore, the Adolescent Work Group has been unable to achieve its goals as rapidly as had originally been expected.
- Section Number:** Form11\_State Performance Measure #10  
**Field Name:** SM10  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 There is no denominator for this performance measure

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

Form Level Notes for Form 12

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	5	4.9	4.9	6.1	4.1
Annual Indicator	5.5	6.0	4.5	4.7	4.7
Numerator	407	433	315	319	319
Denominator	73,675	72,382	70,617	68,001	68,001
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	MN Vital Statistics

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Provisional      Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	4	4	3.9	3.9	3.9
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.

Field Level Notes

1. **Section Number:** Form12\_Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Beginning in 2011, Minnesota implemented a new Vital Records Data Collection System. The move to a new environment (web-based), new software with new data fields on the birth certificate all contributed to significant delays in obtaining 2011 figures. If the data collection, issues are resolved by September we will update the information at that time. In the interim we will use 2010 numbers.

2. **Section Number:** Form12\_Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

2010 data not yet available.

3. **Section Number:** Form12\_Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2009 data is updated to reflect greater accuracy.

**OUTCOME MEASURE # 02**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>2.2</u>	<u>2</u>	<u>1.8</u>	<u>2.6</u>	<u>2</u>
Annual Indicator	<u>2.5</u>	<u>2.8</u>	<u>2.2</u>	<u>2.0</u>	<u>2.0</u>
Numerator	<u>12.2</u>	<u>13.8</u>	<u>8.3</u>	<u>9</u>	<u>9</u>
Denominator	<u>4.8</u>	<u>4.9</u>	<u>3.8</u>	<u>4.5</u>	<u>4.5</u>
Data Source		MN Vital Statistics	MN Vital Statistics	Estimates	MN Vital Statistics

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>2</u>	<u>1.9</u>	<u>1.9</u>	<u>1.8</u>	<u>1.8</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.

**Field Level Notes**

- Section Number:** Form12\_Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Beginning in 2011, Minnesota implemented a new Vital Records Data Collection System. The move to a new environment (web-based), new software with new data fields on the birth certificate all contributed to significant delays in obtaining 2011 figures. If the data collection, issues are resolved by September we will update the information at that time. In the interim we will use 2010 numbers.
- Section Number:** Form12\_Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 2010 data not yet available.
- Section Number:** Form12\_Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 2008 is most recent hard data available. 2009 data are estimates.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	2.9	2.8	2.7	3.7	2.5
Annual Indicator	3.8	3.8	2.7	2.6	2.6
Numerator	278	275	193	180	180
Denominator	73,675	72,382	70,617	68,000	68,000
Data Source		MN Vital Statistics	MN Vital Statistics	Estimates	

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	2.5	2.4	2.4	2.2	2.2
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.

**Field Level Notes**

- Section Number:** Form12\_Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Beginning in 2011, Minnesota implemented a new Vital Records Data Collection System. The move to a new environment (web-based), new software with new data fields on the birth certificate all contributed to significant delays in obtaining 2011 figures. If the data collection, issues are resolved by September we will update the information at that time. In the interim we will use 2010 numbers.
- Section Number:** Form12\_Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 2010 data not yet available.
- Section Number:** Form12\_Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 2008 is the most recent hard data available. 2009 data are estimates.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	1.2	1.1	1.1	1.9	1.8
Annual Indicator	1.8	2.2	1.7	1.9	1.9
Numerator	129	158	122	130	130
Denominator	73,675	72,382	70,617	68,000	68,000
Data Source		MN Vital Statistics	MN Vital Statistics	Estimates	MN Vital Statistics

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5  
 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	1.7	1.7	1.6	1.6	1.6
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.

**Field Level Notes**

- Section Number: Form12\_Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2011

Field Note:

Beginning in 2011, Minnesota implemented a new Vital Records Data Collection System. The move to a new environment (web-based), new software with new data fields on the birth certificate all contributed to significant delays in obtaining 2011 figures. If the data collection, issues are resolved by September we will update the information at that time. In the interim we will use 2010 numbers.

- Section Number: Form12\_Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2009

Field Note:

2008 are most recent hard data available. 2009 data are estimates.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	4.4	4.4	4.3	4.7	4.2
Annual Indicator	5.0	4.8	4.1	4.7	4.7
Numerator	370	349	289	322	322
Denominator	73,818	72,527	70,760	68,561	68,561
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	MN Vital Statistics

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	4.1	4.1	4	4	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.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Beginning in 2011, Minnesota implemented a new Vital Records Data Collection System. The move to a new environment (web-based), new software with new data fields on the birth certificate all contributed to significant delays in obtaining 2011 figures. If the data collection, issues are resolved by September we will update the information at that time. In the interim we will use 2010 numbers.
2. **Section Number:** Form12\_Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 2010 data not yet available.
3. **Section Number:** Form12\_Outcome Measure 5  
**Field Name:** OM05  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 2008 data are most recent data available. 2009 data are estimates.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	17.2	15	15	17.5	14.9
Annual Indicator	15.3	17.3	15.2	16.4	16.4
Numerator	147	166	148	163	163
Denominator	962,310	962,034	972,626	994,373	994,373
Data Source		MN Vital Statistics	MN Vital Statistics	MN Vital Statistics	MN Vital Statistics

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	14.8	14.8	14.7	14.7	14.7
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.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Beginning in 2011, Minnesota implemented a new Vital Records Data Collection System. The move to a new environment (web-based), new software with new data fields on the birth certificate all contributed to significant delays in obtaining 2011 figures. If the data collection, issues are resolved by September we will update the information at that time. In the interim we will use 2010 numbers.
2. **Section Number:** Form12\_Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 2010 data not yet available.

FORM 12  
TRACKING HEALTH OUTCOME MEASURES  
[SECS 505 (s)(2)(B)(ii) AND 506 (s)(2)(A)(ii)]  
STATE: MN

Form Level Notes for Form 12

None

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

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

3

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

2

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

1

4. Family members are involved in service training of CSHCN staff and providers.

2

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

2

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

2

**Total Score:** 12

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None

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

[Sec. 505(a)(5)]

**STATE MN FY: 2013**

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. Improve Birth Outcomes
2. Improve the Health of Children and Adolescents
3. Promote Optimal Mental Health
4. Reduce Child Injury and Death
5. Assure Quality Screening, Identification and Intervention
6. Improve Access to Quality Health Care and Needed Services
7. Assure Healthy Youth Development
- 8.
- 9.
- 10.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

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

STATE: MN

APPLICATION YEAR: 2013

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested <i>(max 250 characters)</i>	Reason(s) Why Assistance Is Needed <i>(max 250 characters)</i>	What State, Organization or Individual Would You suggest Provide the TA (if known) <i>(max 250 characters)</i>
1.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>18</u>	Training and support for development of a Regional Infant Mortality Collaborative	HRSA Region V may be developing an infant mortality collaborative in which MN is intereted in participating	TBD
2.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>5</u>	Assistance in implementing the Title V Index Tool developed by a NICHQ learning collaborative.	Organizational changes within MDH necessitate the development of a strategic plan and prioritization of activities around systems of care for CYSHN.	MCHB and NICHQ
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: _____			
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: MN

SP() # \_\_\_\_\_ 1

**PERFORMANCE MEASURE:**

Percentage of women who did not consume alcohol during the last three months of pregnancy.

**STATUS:**

Active

**GOAL:**

Increase the number of women who do not consume any alcohol during their pregnancy.

**DEFINITION:**

This measure addresses the state priority need to Improve Healthy Birth Outcomes. This measure was created to address both short and long-term goals. Eliminating alcohol consumption during the last three months of pregnancy is will promote the health and well-being of both the mother and her fetus. A healthy pregnancy contributes to greater likelihood of improved birth outcomes.

**Numerator:**

Number of women responding to Question #36a on the MN 2010 PRAMS Survey: "During the last 3 months of your pregnancy, how many alcoholic drinks did you have in average week?" with the last option ("I didn't drink then"), indicating they did not consume alcohol during the last three months of their pregnancy in any given year.

**Denominator:**

Total number of women participating in the ongoing MN PRAMS Survey during any given year who answered this question.

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

**HEALTHY PEOPLE 2020 OBJECTIVE**

16-17

Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women. (Goal for alcohol abstinence = 94%)

16-18

Reduce the occurrence of fetal alcohol syndrome.

**DATA SOURCES AND DATA ISSUES**

Data Sources: Annual MN PRAMS Survey (2010 through 2014) Data Issues: Alcohol is a key element for women to avoid throughout their pregnancy. However, the most useful dataset currently available (PRAMS) is restricted to the last three months of pregnancy. Thus, in analyzing these data, one must be careful not to over-generalize the results obtained from this measure.

**SIGNIFICANCE**

Many studies have documented the impact of alcohol use on the mother and her baby, including: miscarriage; premature birth; stillbirth; physical, mental and behavior problems and fetal alcohol syndrome in the child. It would of course be preferable for pregnant women to eliminate alcohol from the earliest days of pregnancy through the postpartum period. However, this PRAMS measure, even if limited in scope, is an important and concrete step towards positive outcomes for mother and child.

SP() # 2

**PERFORMANCE MEASURE:**

Percentage of children enrolled in Medicaid who receive at least one recommended Child and Teen Checkup (C&TC) visit (EPSDT is known as C&TC in Minnesota).

**STATUS:**

Active

**GOAL**

Increase the percentage of children birth to 21 who receive recommended comprehensive well child visits.

**DEFINITION**

This measure addresses the state priority need to Improve the Health of Children and Adolescents. This goal addresses both preventive and comprehensive health care for children and adolescents, specifically those receiving Medicaid.

**Numerator:**

Number of Medicaid children in Minnesota under age 21 who receive one or more Child and Teen Checkups (C&TC) in any given year.

**Denominator:**

Total number of children in MN under age 21 who are enrolled in Medicaid in any given year.

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

**HEALTHY PEOPLE 2020 OBJECTIVE**

Not applicable.

**DATA SOURCES AND DATA ISSUES**

Data Sources: State Medicaid database. Data Issues: These data are limited to children and adolescents enrolled in Medicaid. The percentage of Medicaid children/adolescents in Minnesota who receive Child and Teen Checkups (C&TC) each year has been rising steadily, from 62.4% in 2004 to 68.1% in 2008. We plan to continue expanding this percentage over the next five years.

**SIGNIFICANCE**

Improving the health of children and adolescents in Minnesota has been identified as a continuing Priority Need during the next five-year period. Within the Medicaid population, as well as the entire child/adolescent population in Minnesota, incidence of chronic disease is growing; particularly childhood obesity, diabetes, asthma, and mental health disorders. Prevention is the first step in overall health improvement. Well-child and adolescent health care are based on early identification of needs (C&TC), followed by intervention and treatment when indicated.

SP() # \_\_\_\_\_ 3

**PERFORMANCE MEASURE:**

Percentage of MN children birth to 5 enrolled in Medicaid who received a mental health screening using a standardized instrument as part of their C&TC visit (EPSDT is known as C&TC in Minnesota).

**STATUS:**

Active

**GOAL**

Increase the percentage of children birth to 21 whose social/emotional needs are identified early.

**DEFINITION**

This measure addresses the state priority need to Promote Optimal Mental Health. Increasing the proportion of children who receive a mental health screening will establish a baseline from which to build a positive mental health program for children in MN.

**Numerator:**

Number of MN children ages 0 to 5 years enrolled in Medicaid who receive a mental health screening using a standardized instrument as part of their C&TC in any given year.

**Denominator:**

Total number of MN children, ages 0 to 5 years, enrolled in Medicaid who receive a C&TC in any given year.

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

**HEALTHY PEOPLE 2020 OBJECTIVE**

18-6 (Related)

Increase the number of persons seen in primary health care who receive mental health screening and assessment. (Not specific to children.)

18-7 (Related)

Increase the proportion of children with mental health problems who receive treatment. (Not specific to screening.)

**DATA SOURCES AND DATA ISSUES**

**Data Sources:** State Medicaid data for children ages 0 to 5 years (CPT code 96110 with modifier UC at a C&TC visit.) **Data Issues:** Data for young children ages 0 to 5 years are readily available and should be accurate, valid, and reliable, although the number of children screened is very small (1.2%). Content of mental health screening instruments varies among providers. It also varies between different age groups. Due to lack of data and unknown screening rates among older children, we are currently restricting our data collection to this age range.

**SIGNIFICANCE**

This measure expands on our 2005 state performance measure which was more general in nature: "Degree to which Title V programs enhance statewide capacity for a public health approach to mental health promotion and suicide prevention for children and adolescents." Mental health is an important component in the overall health of all children and adolescents. In Minnesota, emotional/mental health screening is viewed primarily from a prevention perspective or as a means to avert more serious mental health issues. As of 2009, we now have the capacity to specifically measure the number of young children enrolled in Medicaid who receive mental health screening as part of their Child and Teen Checkup (C&TC) health care visits.

SP() # \_\_\_\_\_ 4

**PERFORMANCE MEASURE:**

Incidence rate of child maltreatment reports per 1,000 children ages birth through 17 years.

**STATUS:**

Active

**GOAL**

Promote healthy families and reduce the incidence of child maltreatment.

**DEFINITION**

This measure addresses the state priority need to Reduce Child Injury and Death. A child maltreatment report is a document containing written information alleging mistreatment of a minor child which has met the initial statutory screening criteria (conducted via telephone by the Minnesota Department of Human Services) and has been forwarded to the field for additional evaluation. Further assessment of the original report usually results in either "alleged" or "determined maltreatment cases. Less than one-third of assessed reports actually become determined child maltreatment cases. These cases are then processed through the judicial system, where a formal determination of child abuse and/or neglect is made. The remainder of the reports are assigned to skilled field professionals who work with the family and enable them to provide a healthier home environment for their children, addressing both the strengths and weaknesses.

**Numerator:**

Number of new statewide child maltreatment cases, birth through 17 years, for any given year.

**Denominator:**

Total number of Minnesota children, birth through 17 years, for any given year.

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2020 OBJECTIVE**

15-33

Reduce maltreatment and maltreatment fatalities of children.

**DATA SOURCES AND DATA ISSUES**

Numerator: MN Department of Human Services (DHS) Denominator: MN Center for Health Statistics (Vital Statistics birth records) Data Issues: Abuse and neglect are traditionally underreported; therefore, both incidence and prevalence are usually underestimated. Because some families and some children are reported more than once, it is difficult to obtain a unique number for each child and/or household. However, DHS has made substantial attempts to consolidate multiple reports for the same child/family, particularly when the report is sent to the field.

**SIGNIFICANCE**

Child maltreatment is among the most prevalent and far-reaching forms of violence in Minnesota. All four maltreatment types (neglect, physical abuse, sexual abuse, mental/emotional abuse) are represented here. Further, child and adolescent maltreatment often precedes adult violence and substance abuse/addiction as the abused child grows older. Alternative assessment and response to child maltreatment is an area of potentially great rewards because it includes both prevention and treatment. It is estimated that 70% of families reported to the Minnesota Child Protection System could derive greater benefit from alternative rather than traditional response. Tracking the incidence of all cases of child maltreatment (both alternative and traditional) should lead to greater insight in both prevention and treatment methods, as well as ultimate reduction in the incidence of child maltreatment.

SP() # \_\_\_\_\_ 5

**PERFORMANCE MEASURE:**

The number of children enrolled in the Follow-Along Program.

**STATUS:**

Active

**GOAL**

Increase the number of children enrolled in the Follow-Along Program.

**DEFINITION**

This performance measure addresses the state priority need to Assure Quality Screening, Identification and Intervention. The measure was developed to track children from the time of birth to age three or five for the purpose of identifying those who may have special health care needs.

**Numerator:**

Total number of children enrolled in Minnesota's Follow-Along Program.

**Denominator:**

Not applicable to this measure.

**Units:** Yes **Text:** Text

**HEALTHY PEOPLE 2020 OBJECTIVE**

16-14

Reduce the occurrence of developmental disabilities.

**DATA SOURCES AND DATA ISSUES**

Data Sources: Minnesota Follow-Along Program; local public health data (counties) Data Issues: The number will include the count of any child enrolled in the Follow-Along Program any time during the calendar year. Some local programs serve children from birth to age three, some from birth to age five. All children within either of these age ranges will be counted.

**SIGNIFICANCE**

Significance: Early identification, screening, and referral systems are intended to identify both the strengths and needs of young children. These systems can maximize healthy child development and minimize negative health and socio-emotional events. Universal screening of all children, birth to age three, promotes thorough identification of those with special health needs. It also serves as a bridge to intervention services for eligible children under Part C of Individuals with Disabilities Education Act.

SP() # \_\_\_\_\_ 6

**PERFORMANCE MEASURE:**

Percentage of children under the age of one year participating in early intervention through Part C of the Individuals with Disabilities Education Act.

**STATUS:**

Active

**GOAL**

Increase the percentage of children under the age of one year participating in early intervention through Part C of the Individuals with Disabilities Education Act (IDEA).

**DEFINITION**

This performance measure addresses the state priority need to Assure Quality Screening, Identification and Intervention. The Individual Family Service Plan (IFSP) is the instrument through which early intervention is implemented in accordance with the IDEA. Part C focuses on the specialized requirements of CSHCN and their families.

**Numerator:**

Number of Minnesota children birth to age one year with an Individual Family Service Plan (IFSP) in any given year.

**Denominator:**

Population of Minnesota infants, birth to age one year, in any given year.

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

**HEALTHY PEOPLE 2020 OBJECTIVE**

16-14

Reduce the occurrence of developmental disabilities.

**DATA SOURCES AND DATA ISSUES**

Data Source: Individuals with Disabilities Education Act (IDEA) data, available electronically on the Data Accountability Center web site. This will be a one-day count measured on December 1 annually. Data Issues: The Data Accountability Center (DAC) assesses state, regional and national needs related to data collection, analysis and reporting. It also develops data collection materials needed by specific states and provides customized TA for individual states. At the present time, the data which we need for this new state performance measure is included on their regular data menu. However, should we need specific measures or assistance, it appears that it may be available.

**SIGNIFICANCE**

Significance: This performance measure is primarily a family-centered identification and intervention strategy for very young children (0-1 yr.) with developmental disabilities. Through the Individual Family Service Plan (IFSP) process, family members and service providers work as a team to plan, implement, and evaluate services tailored to a family's specific concerns, priorities and resources.

SP() # \_\_\_\_\_ 7

**PERFORMANCE MEASURE:**

Percentage of participants in Minnesota's family home visiting program referred to community resources that received a family home visitor follow-up on that referral.

**STATUS:**

Active

**GOAL**

Increase the number of participants in Minnesota's family home visiting program that were linked to needed community resources and services.

**DEFINITION**

This measure addresses the state priority need to Improve Access to Quality Health Care and Needed Services. Linkage to community resources has been determined to be an important component of meeting the needs of pregnant women and care givers. Referral to community resources and follow up on those referrals are being used as an approximation of linking families to needed resources.

**Numerator:**

Number of prenatal clients or caregivers that had a family home visitor follow-up on that referral.

**Denominator:**

Number of prenatal clients or caregivers participating in the family home visiting program referred to community resources.

Units: 100 Text: Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

Not applicable to this measure.

**DATA SOURCES AND DATA ISSUES**

Data Sources: Minnesota Family Home Visiting Program data forms Data Issues: Much of our Family Home Visiting data is qualitative in nature, and as such it is a rich and valuable source of information. However, this measure relies largely on quantitative data gathered and reported on specific forms by nurses in the Family Home Visiting Program. Because a large percentage of these nurses are already engaged in performing follow-up visits to families receiving community resource referrals, the increase in this performance measure may be small.

**SIGNIFICANCE**

The Family Home Visiting Program (FHV) in Minnesota has expanded substantially in the last few years and now has an ambitious program providing outreach to counties and rural areas throughout the state. Home visiting is an important link between the MN Department of Public Health and local public health agencies, as well as between local public health (LPH) and residents of all 87 MN counties. Minnesota state statutes require that the FHV program collect information on referrals made in the program. This performance measure will be one of our first attempts to assess the effectiveness of the FHV program from the point of view of the referral process.

SP() # 8

**PERFORMANCE MEASURE:**

Percentage of children and youth with special health care needs who have received all needed health care services.

**STATUS:**

Active

**GOAL**

Increase the number of families who report that their children have received all needed health care services.

**DEFINITION**

This measure addresses the state priority need to Improve Access to Quality Health Care and Needed Services.

**Numerator:**

Weighted number of Minnesota families of children with special health care needs who report on the National Survey of CSHCN that their children have received all needed health care services.

**Denominator:**

Weighted total number of Minnesota families of children with special health care needs taking part in the National Survey of CSHCN.

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

**HEALTHY PEOPLE 2020 OBJECTIVE**

16-23 (Related)

Increase proportion of Territories and States that have service systems for children with special health care needs. These service systems should ensure access to a source of insurance for primary and specialty care and enabling services, an identified medical home, and care coordination.

1-6

Reduce the proportion of families that experience difficulties or delays in obtaining health care or do not receive needed care for one or more family members.

**DATA SOURCES AND DATA ISSUES**

Data Source: National Survey of Children with Special Health Care Needs (SLAITS) Data Issues: This national telephone survey is a sample of 700-800 households with CSHCN in each of the 50 states and is conducted every four years by CDC, using the sampling frame from the National Immunization Survey. Validity and reliability of the data rely on representativeness of the random sample drawn from each state and may be compromised by the ever-increasing use of cell phones as well as other factors, although sampling weights have been applied to adjust for non-telephone households and non-response bias. New data are only available every four years for comparison purposes.

**SIGNIFICANCE**

Children with special health care needs frequently need a wide array of services, including routine screening (e.g., vision, hearing, speech, mental health), ongoing health care (preventive, therapeutic and rehabilitative), educational/vocational, and transitional services. Coordination and access are key elements in obtaining these and other needed services.

SP() # \_\_\_\_\_ 9

**PERFORMANCE MEASURE:**

Percentage of families of children age 0-17 that report costs not covered by insurance are usually or always reasonable.

**STATUS:**

Active

**GOAL**

Increase the number of currently insured children who have insurance related out-of-pocket expenses that are usually or always reasonable.

**DEFINITION**

This measure addresses the state priority need to Improve Access to Quality Health Care and Needed Services.

**Numerator:**

The weighted estimate of Minnesota respondents who answered that out-of-pocket expenses are "usually" or "always" reasonable.

**Denominator:**

The weighted Minnesota children 0-17 surveyed by the National Survey of Children's Health who are currently insured and have out of pocket expenses not covered by health insurance or health insurance premiums.

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

**HEALTHY PEOPLE 2020 OBJECTIVE**

Not applicable.

**DATA SOURCES AND DATA ISSUES**

National Survey of Children's Health (SLAITS), 2007, question K3Q21B. **Data Issues:** This survey is not conducted every year; thus the data may not always be as current as desirable. Also when establishing an accurate denominator, it may be difficult to determine the number of survey respondents who responded to this specific question. In general, however, SLAITS data are known to be valid and reliable.

**SIGNIFICANCE**

Although Minnesota has a high percentage of residents with "adequate" health insurance coverage—particularly when compared with other states—data from previous SLAITS surveys shows that Minnesotans are concerned about excessive out-of-pocket expenses. Therefore, this new state performance measure does have significance for this state.

SP() # 10

**PERFORMANCE MEASURE:**

By 2013, in collaboration with other state agencies, identify a state performance measure and benchmark to monitor positive youth development in Minnesota.

**STATUS:**

Active

**GOAL**

Develop a state performance measure to monitor positive youth development in Minnesota.

**DEFINITION**

Positive youth development is an intentional strategy to promote youths being, belonging and becoming within the context of connectedness. Positive youth development occurs in various settings and contexts. It uses an asset-based approach, requires active youth participation, acknowledges evolving capacities, and responds to the physical, social, emotional and cognitive needs of youth. Healthy youth development is the priority need area for this measure.

**Numerator:**

1 = Collaborating state agencies develop a shared definition for positive youth development (PYD). 2 = Collaborating state agencies identify and agree upon options to measure PYD. This could include identification of new measures, modification of existing measures, or identification of existing measures that can be combined into a composite measure. 3 = Collaborating state agencies finalize additions or modification of existing survey instruments (e.g. Minnesota Student Survey). 4 = Survey instrument modified and tested. 5 = Measure/composite measures included in survey instrument and administered. 6 = Baseline data from measure/composites measure available.

**Denominator:**

Not applicable to this measure

**Units:** Yes **Text:** Text

**HEALTHY PEOPLE 2020 OBJECTIVE**

Because we have adopted a positive stance rather than a negative approach toward healthy youth development, we did not find a relevant HP 2010 Objective. (See last paragraph: "Significance")

**DATA SOURCES AND DATA ISSUES**

Data Source: To be determined. Data Issues: The MDH was recently funded through the National 4-H Council to support the work of a team professionals from several agencies (Departments of Health, Public Safety, Education, Human Services, the University of Minnesota Extension office, and a youth participant from Youth Community Connections) interested in youth issues. The grant will support the team's work on the development of a shared Minnesota definition and measurement of positive youth development. Constructing a composite measure often has built-in data issues, particularly in terms of its validity and reliability. However, this type of measure has been developed successfully in other state. Construction of a measure which is acceptable and useful to all of the involved agencies may present an additional challenge.

**SIGNIFICANCE**

Most goals which involve teens and adolescents involve reduction of negative behaviors, such as high school dropout, criminal behavior, alcohol use, smoking, sexually transmitted infections, and teen pregnancy. This goal adopts an affirmative approach, focusing instead on positive elements of healthy youth development.

**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: MN

**Form Level Notes for Form 17**

Percentate of SCHIP enrollees less than one year who received at least one initial or periodic screening in 2011. This data is not available. There are approximately 2 dozen infants enrolled in MN Medicaid who are funded under CHIP. 07a Denominator is the sum of two components: 458,278 children aged 1 through 20 who were enrolled in federally-funded Medicaid programs during SFY 2011 and 95,000 children aged 1 through 20 who were uninsured in 2011 according to the 2011 MN Health Access Survey.

**HEALTH SYSTEMS CAPACITY #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.

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	31.2	21.4	18.4	17.6	17.1
Numerator	1,046	746	668	626	598
Denominator	335,694	347,835	363,975	355,153	350,100

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2008 is the most recent data available. We will not have 2009 hospital-based data for rates of children with asthma until early 2011.

**HEALTH SYSTEMS CAPACITY #02**

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

	2007	2008	Annual Indicator Data		2011
Annual Indicator	87.0	86.9	2009	2010	91.4
Numerator	27,667	28,006	28,267	24,007	23,464
Denominator	31,790	32,232	32,450	26,025	25,685

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Data presented is 2010 data. There was a delay in MN Dept. of Human Services receipt of claims data from managed care organizations due to a HIPPA required upgrade in the format of data being transferred from MCOs to DHS.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Methodology for this measure changed in 2010, which resulted in a higher percentage; therefore, 2009 and 2010 annual indicators are not directly comparable. (Under the previous method, the percentage would have been 88.2 rather than 92.2.) Calculations produced by the MN Dept. of Human Services for this measure now include only children who have been enrolled in Medicaid for at least 90 continuous days.

**HEALTH SYSTEMS CAPACITY #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>				
	2007	2008	2009	2010	2011
Annual Indicator	0	0	0	0	0
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Minnesota does not currently participate in the SCHIP program.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

There are no data available for this measure because there are less than two dozen infants in the Minnesota who are on S-CHIP.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

There is no SCHIP program in MN at the present time.

**HEALTH SYSTEMS CAPACITY #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.

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	80.3	82.5	82.3	82.1	82.3
Numerator	59,001	59,566	57,960	56,000	56,770
Denominator	73,477	72,166	70,447	68,244	69,000

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. Section Number: Form17\_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2010

Field Note:

There are no 2010 data available at this time.

2. Section Number: Form17\_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2009

Field Note:

2008 is the most recent data which we have for this measure. The 2009 data will not be available until earlyh 2011.

**HEALTH SYSTEMS CAPACITY #07A**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	<u>77.6</u>	<u>89.0</u>	<u>66.2</u>	<u>69.5</u>	<u>72.9</u>
Numerator	<u>364,189</u>	<u>367,309</u>	<u>345,850</u>	<u>379,588</u>	<u>403,324</u>
Denominator	<u>469,436</u>	<u>412,709</u>	<u>522,435</u>	<u>546,215</u>	<u>553,278</u>
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5					
and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

**Field Level Notes**

- Section Number:** Form17\_Health Systems Capacity Indicator #07A  
**Field Name:** HSC07A  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 There was a significant delay in DHS' receipt of claims data from the managed care organizations. This was due to a HIPAA required upgrade in the format that managed care organizations use to transmit data. DHS stopped receiving data from the MCOs at the end of December and they were not able to receive or process data until June of 2012. This delay did not make it possible to clean the data and report it in the MCH Block Grant. We should be able to update the data when the Block Grant is reopened in September for changes. Until that time we will use 2010 data for HSCI 07A

**HEALTH SYSTEMS CAPACITY #07B**

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

**Annual Indicator Data**

	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	48.8	51.1	52.4	56.4	54.9
<b>Numerator</b>	36,814	39,448	43,468	47,869	49,533
<b>Denominator</b>	75,490	77,167	82,920	84,860	90,151

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

- Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Data presented is 2010 data. There was a delay in MN Dept. of Human Services receipt of claims data from managed care organizations due to a HIPPA required upgrade in the format of data being transferred from MCOs to DHS.

- Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Note that in December 2010, CMS changed the methodology for the CMS-416 such that the calculations only include children who have been enrolled in Medicaid for at least 90 continuous days.

This means that this percentage is NOT directly comparable to the percentages reported in previous years. Using the old methodology, the percentage for FFY 2010 would be 54.0% (48,145/89,225).

**HEALTH SYSTEMS CAPACITY #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**

	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	0.0	0.0	0.0	0.0	0.0
<b>Numerator</b>	0	0	0	0	0
<b>Denominator</b>	10,264	11,337	10,925	12,984	11,420

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Minnesota no longer provides direct service to state Children with Special Health Care Needs, and it is not anticipated that this service will be reinstated in the near future.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

Minnesota Medicaid program provides broad rehabilitative coverage for children enrolled on SSI. The state Title V program for children and youth with special health care needs is available to assist families in accessing Medicaid services but does not provide direct financial services to these families.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Minnesota Medicaid provides a broad array of rehabilitative services. Minnesota's Title V program is available to assist families in accessing Medicaid services.

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

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2009	Matching data files	5.9	3.4	4.5
b) <i>Infant deaths per 1,000 live births</i>	2009	Matching data files	5.9	3.4	4.5
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2009	Matching data files	5.9	3.4	85.9
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>	2009	Matching data files	5.9	3.4	82.3

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

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>	2011	<u>275</u>
b) <i>Medicaid Children</i> (Age range <u>  1  </u> to <u>  2  </u> ) (Age range <u>  2  </u> to <u> 18 </u> ) (Age range <u> 19 </u> to <u> 20 </u> )	2011	<u>275</u> <u>150</u> <u>100</u>
c) <i>Pregnant Women</i>	2011	<u>275</u>

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

<b>INDICATOR #06</b> <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>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL SCHIP</b>
a) <i>Infants (0 to 1)</i>	2011	_____280
b) <i>Medicaid Children</i> (Age range ____1 to ____2 ) (Age range ____ to ____ ) (Age range ____ to ____ )	2011	_____280 _____ _____
c) <i>Pregnant Women</i>	2011	_____208

**FORM NOTES FOR FORM 18**

Income eligibility levels are for MN Medicaid program. The income guideline for all groups for MinnesotaCare is 275% FPG. Children under 2 years of age in families with incomes between 275% and 280% of FPG, and pregnant women ineligible for federally-funded Medicaid with income up to 275% FPG, are enrolled in MA using CHIP funds.

**FIELD LEVEL NOTES**

None

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

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

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

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

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

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)	1	No
Other: MN Student Survey	3	Yes

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

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

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

None

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

Form Level Notes for Form 20

None

**HEALTH STATUS INDICATOR #01A**

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

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
Annual Indicator	6.8	6.4	6.6	6.5	6.3
Numerator	4,982	4,655	4,645	4,429	4,209
Denominator	73,651	72,356	70,588	68,336	67,234

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5  
 and therefore a 3-year moving average cannot be applied.  
*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Final 2011 data are not yet available. Provisional estimates are provided here.

2. **Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

2010 provisional data has been updated to provide greater accuracy. These data are now final.

3. **Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are typically 1 to 1-1/2 years behind any given calendar year. Thus, 2009 data will be available early in 2011.

**HEALTH STATUS INDICATOR #01B**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	5.0	4.7	4.8	4.8	4.7
Numerator	3,543	3,272	3,295	3,165	3,100
Denominator	71,102	69,793	67,986	65,913	65,620

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. Section Number: Fom20\_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are estimates based on current data availability. Update will be provided as soon as final numbers for this measure are available.

2. Section Number: Fom20\_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2010

Field Note:

Provisional data has been updated to reflect final 2010 numbers.

3. Section Number: Fom20\_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. Thus, 2009 data will be available early in 2011.

**HEALTH STATUS INDICATOR #02A**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	1.2	1.2	1.2	1.1	1.0
Numerator	898	871	815	750	669
Denominator	73,651	72,356	70,588	68,336	67,331

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. Section Number: Fom20\_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2011

Field Note:

2011 data are estimates. Final data will be provided as soon as they are available.

2. Section Number: Fom20\_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are typically 1 to 1/12 years behind the current year. We expect that 2009 data will be available early in 2011.

**HEALTH STATUS INDICATOR #02B**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	0.8	0.8	0.8	0.8	0.8
Numerator	599	587	530	560	525
Denominator	71,002	69,793	67,986	65,913	64,925

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Fom20\_Health Status Indicator #02B

**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2011**Field Note:**

Provisional data is provided for 2011 because final numbers are not yet available. 2011 data will be updated as soon as final numbers are available.

2. **Section Number:** Fom20\_Health Status Indicator #02B

**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2010**Field Note:**

2010 data have been updated to reflect final numbers.

3. **Section Number:** Fom20\_Health Status Indicator #02B

**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are typically 1 to 1-1/2 years behind the current year. We expect that 2009 data will be available early in 2011.

**HEALTH STATUS INDICATOR #03A**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	7.1	7.1	5.4	4.8	4.8
Numerator	73	74	56	51	50
Denominator	1,035,153	1,035,562	1,045,645	1,063,382	1,050,000

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Fom20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Final death numbers for 2011 are not yet available due to issues with hospital data which must be resolved. Data listed on this form are estimates. They will be properly updated as soon as accurate numbers are available.

2. **Section Number:** Fom20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. We expect the 2009 data to be available early in 2011.

**HEALTH STATUS INDICATOR #03B**

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

**Annual Indicator Data**

	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	1.9	2.4	1.8	1.7	1.8
<b>Numerator</b>	20	25	19	18	19
<b>Denominator</b>	1,035,153	1,035,562	1,045,645	1,063,382	1,065,000

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
  2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. We expect 2009 data to be available early in 2011.

**HEALTH STATUS INDICATOR #03C**

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

**Annual Indicator Data**

	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	19.4	12.0	11.2	12.4	12.3
<b>Numerator</b>	142	87	83	90	89
<b>Denominator</b>	732,526	726,371	741,243	723,480	725,800

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. We expect 2009 data to be available early in 2011.

**HEALTH STATUS INDICATOR #04A**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	193.0	194.0	159.6	116.0	117.0
Numerator	1,998	2,009	1,669	1,233	1,246
Denominator	1,035,153	1,035,562	1,045,645	1,063,382	1,065,000

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. Section Number: Fom20\_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current date. We expect 2009 data to be available early in 2011.

**HEALTH STATUS INDICATOR #04B**

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

**Annual Indicator Data**

	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	<u>22.8</u>	<u>12.6</u>	<u>10.4</u>	<u>9.2</u>	<u>9.1</u>
<b>Numerator</b>	<u>236</u>	<u>130</u>	<u>109</u>	<u>98</u>	<u>97</u>
<b>Denominator</b>	<u>1,035,153</u>	<u>1,035,562</u>	<u>1,045,645</u>	<u>1,063,382</u>	<u>1,065,000</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
  2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current date. We expect 2009 data to be available early in 2011.

**HEALTH STATUS INDICATOR #04C**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	108.9	81.4	56.7	58.9	59.3
Numerator	798	591	420	426	430
Denominator	732,526	726,371	741,243	723,480	725,000

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  
 (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

- Section Number: Form20\_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current date. We expect 2009 data to be available early in 2011.

**HEALTH STATUS INDICATOR #05A**

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

**Annual Indicator Data**

	2007	2008	2009	2010	2011
Annual Indicator	18.3	19.6	19.8	21.3	22.8
Numerator	3,347	3,578	3,628	3,899	4,094
Denominator	182,828	182,828	182,828	182,828	179,235

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

None

**HEALTH STATUS INDICATOR #05B**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	6.8	7.2	7.0	7.6	8.7
Numerator	6,118	6,462	6,324	6,852	7,495
Denominator	899,814	899,814	899,814	899,814	866,446

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
  - 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
- (Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

None

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

**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: 2010 Is this data from a State Projection? No Is this data final or provisional? Final

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	69,009	55,535	7,444	1,709	4,321	0	0	0
Children 1 through 4	286,495	230,671	30,701	6,912	18,211	0	0	0
Children 5 through 9	355,536	292,419	33,766	7,736	21,615	0	0	0
Children 10 through 14	352,342	296,004	29,689	7,116	19,533	0	0	0
Children 15 through 19	367,829	309,263	29,720	7,448	21,398	0	0	0
Children 20 through 24	355,651	298,876	27,093	6,804	22,878	0	0	0
Children 0 through 24	1,786,862	1,482,768	158,413	37,725	107,956	0	0	0

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

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	62,269	6,740	0
Children 1 through 4	259,543	26,952	0
Children 5 through 9	325,801	29,735	0
Children 10 through 14	327,864	24,478	0
Children 15 through 19	345,366	22,463	0
Children 20 through 24	334,088	21,563	0
Children 0 through 24	1,654,931	131,931	0

FORM 21  
HEALTH STATUS INDICATORS  
DEMOGRAPHIC DATA  
STATE: MN

**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: 2010 Is this data from a State Projection? No Is this data final or provisional? Provisional

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	47	15	11	5	3	0	0	13
Women 15 through 17	1,072	629	207	64	93	0	0	179
Women 18 through 19	2,951	1,722	485	180	236	0	0	328
Women 20 through 34	54,406	41,377	4,944	1,050	3,847	0	0	3,188
Women 35 or older	9,928	7,541	942	96	773	0	0	576
Women of all ages	68,404	51,184	6,589	1,395	4,952	0	0	4,284

**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	29	17	1
Women 15 through 17	826	232	14
Women 18 through 19	2,483	442	26
Women 20 through 34	50,127	3,775	504
Women 35 or older	9,164	641	123
Women of all ages	62,629	5,107	668

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

**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: 2010 Is this data from a State Projection? No Is this data final or provisional? Provisional

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	309	207	44	13	21	0	0	24
Children 1 through 4	67	47	10	0	7	0	0	3
Children 5 through 9	46	36	4	1	2	0	0	3
Children 10 through 14	50	36	10	0	2	0	0	2
Children 15 through 19	174	127	22	13	7	0	0	5
Children 20 through 24	224	184	19	10	7	0	0	4
Children 0 through 24	870	637	109	37	46	0	0	41

**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	279	30	0
Children 1 through 4	62	5	0
Children 5 through 9	42	4	0
Children 10 through 14	48	2	0
Children 15 through 19	164	7	3
Children 20 through 24	211	13	0
Children 0 through 24	806	61	3

FORM 21  
HEALTH STATUS INDICATORS  
DEMOGRAPHIC DATA  
STATE: MN

**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)**

Is this data final or provisional? Final

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	1,428,334	1,144,365	109,297	25,225	78,864	0	70,583		2011
Percent in household headed by single parent	28.0	21.0	59.0	0.0	23.0	0.0	0.0	0.0	2010
Percent in TANF (Grant) families	5.4	2.7	23.5	26.8	7.0	0.0	7.2		2011
Number enrolled in Medicaid	478,094	277,550	95,786	18,887	34,602	0	21,072	30,197	2011
Number enrolled in SCHIP	0	0	0	0	0	0	0	0	2011
Number living in foster home care	11,233	5,756	2,415	1,579	249	0	1,188	46	2010
Number enrolled in food stamp program	296,194	153,581	78,059	15,257	22,575	0	16,149	10,573	2011
Number enrolled in WIC	139,405	80,011	28,825	5,602	11,952	220	12,782	3	2010
Rate (per 100,000) of juvenile crime arrests	2,945.0	1,891.0	16,034.0	7,690.0	2,186.0	0.0	0.0	0.0	2010
Percentage of high school drop-outs (grade 9 through 12)	4.8	3.3	8.7	18.8	4.3	0.0	0.0	0.0	2010

**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	1,314,442	113,892	0	2011
Percent in household headed by single parent	54.0	46.0	0.0	2010
Percent in TANF (Grant) families	4.9	11.6	0.0	2011
Number enrolled in Medicaid	416,786	61,308	0	2011
Number enrolled in SCHIP	0	0	0	2011
Number living in foster home care	10,185	1,048	0	2010
Number enrolled in food stamp program	260,615	35,580	0	2011
Number enrolled in WIC	106,160	33,245	0	2010
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	2010
Percentage of high school drop-outs (grade 9 through 12)	3.3	13.5	0.0	2010

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

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*  
 Reporting Year: 2010    Is this data from a State Projection? No    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	872,313
Living in urban areas	1,084,120
Living in rural areas	343,489
Living in frontier areas	3,602
<b>Total - all children 0 through 19</b>	<b>1,431,211</b>

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

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

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

Reporting Year: 2010    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	5,303,925
Percent Below: 50% of poverty	5
100% of poverty	12
200% of poverty	27

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

**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: 2010    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,431,211
Percent Below: 50% of poverty	6
100% of poverty	15
200% of poverty	34

**FORM NOTES FOR FORM 21**

None

**FIELD LEVEL NOTES**

None