

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

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

1. FEDERAL ALLOCATION

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

\$ 40,033,023

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

A. Preventive and primary care for children:

\$ 12,120,308 (30.28 %)

B. Children with special health care needs:

\$ 15,047,785 (37.59 %)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C. Title V administrative costs:

\$ 1,886,623 (4.71 %)

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

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

\$ 0

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

\$ 62,208,171

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

\$ 271,491,225

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

\$ 0

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

\$ 314,762,086

7. TOTAL STATE MATCH (Lines 3 through 6)

\$ 648,461,482

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

\$ 58,268,732

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

\$ 688,494,505

(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>85,000</u>
c. CISS:	\$ <u>0</u>
d. Abstinence Education:	\$ <u>2,841,809</u>
e. Healthy Start:	\$ <u>0</u>
f. EMSC:	\$ <u>0</u>
g. WIC:	\$ <u>0</u>
h. AIDS:	\$ <u>0</u>
i. CDC:	\$ <u>806,338</u>
j. Education:	\$ <u>23,867,174</u>
k. Home Visiting:	\$ <u>5,604,010</u>
l. Other:	

<u>DHHS ACF</u>	\$ <u>3,102,520</u>
<u>DHHS HRSA</u>	\$ <u>844,588</u>
<u>DHHS PHS Title X</u>	\$ <u>10,290,042</u>
<u>DHHS SAMSA</u>	\$ <u>850,000</u>
<u>Medicaid Match</u>	\$ <u>9,081,530</u>

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

\$ 57,643,011

11. STATE MCH BUDGET TOTAL

\$ 746,137,516

(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: NY

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form2)</i>	\$ 41,629,217	\$ 40,842,301	\$ 41,629,217	\$ 41,036,806	\$ 41,043,769	\$ 40,947,507
2. Unobligated Balance <i>(Line2, Form2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form2)</i>	\$ 351,565,000	\$ 337,067,557	\$ 390,311,698	\$ 360,267,459	\$ 363,695,631	\$ 373,396,439
4. Local MCH Funds <i>(Line4, Form2)</i>	\$ 361,356,566	\$ 357,876,779	\$ 309,987,228	\$ 315,619,141	\$ 299,499,317	\$ 327,468,560
5. Other Funds <i>(Line5, Form2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form2)</i>	\$ 189,548,660	\$ 179,051,322	\$ 174,723,376	\$ 187,342,102	\$ 176,715,455	\$ 240,879,389
7. Subtotal	\$ 944,098,433	\$ 914,837,959	\$ 916,651,519	\$ 904,265,508	\$ 880,954,172	\$ 982,691,895
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form2)</i>	\$ 40,337,744	\$ 40,337,744	\$ 46,143,937	\$ 43,118,307	\$ 45,901,844	\$ 44,374,026
9. Total <i>(Line11, Form2)</i>	\$ 984,436,177	\$ 955,175,703	\$ 962,795,456	\$ 947,383,815	\$ 926,856,016	\$ 1,027,065,921
(STATE MCH BUDGET TOTAL)						

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

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form2)</i>	\$ 41,036,806	\$ 40,508,072	\$ 41,036,806	\$ _____	\$ 40,033,023	\$ _____
2. Unobligated Balance <i>(Line2, Form2)</i>	\$ 0	\$ 0	\$ 0	\$ _____	\$ 0	\$ _____
3. State Funds <i>(Line3, Form2)</i>	\$ 336,529,505	\$ 337,120,805	\$ 144,502,236	\$ _____	\$ 62,208,171	\$ _____
4. Local MCH Funds <i>(Line4, Form2)</i>	\$ 313,430,367	\$ 323,234,192	\$ 301,048,616	\$ _____	\$ 271,491,225	\$ _____
5. Other Funds <i>(Line5, Form2)</i>	\$ 0	\$ 0	\$ 0	\$ _____	\$ 0	\$ _____
6. Program Income <i>(Line6, Form2)</i>	\$ 173,450,785	\$ 253,341,008	\$ 404,365,207	\$ _____	\$ 314,762,086	\$ _____
7. Subtotal	\$ 864,447,463	\$ 954,204,077	\$ 890,952,925	\$ 0	\$ 688,494,505	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form2)</i>	\$ 75,196,798	\$ 73,646,798	\$ 63,258,202	\$ _____	\$ 57,643,011	\$ _____
9. Total <i>(Line11, Form2)</i>	\$ 939,644,261	\$ 1,027,850,875	\$ 954,212,127	\$ 0	\$ 746,137,516	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Form3_Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2011
Field Note:
FFY11 award was \$528,734 less than originally budgeted
2. **Section Number:** Form3_Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2010
Field Note:
Expenditures reflect award amount.
3. **Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2011
Field Note:
Program Income expenditures exceed budget by more than 10% due to a lag in claiming and reporting for one of the Early Intervention Program County's that had billing issues as they transitioned to a new fiscal system.
4. **Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2010
Field Note:
Program income budget was based on estimate of reported data; One large county had a reporting lag due to transition to new data systems management.

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

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 64,999,538	\$ 61,029,725	\$ 76,287,545	\$ 70,922,081	\$ 77,507,975	\$ 72,021,720
b. Infants < 1 year old	\$ 129,744,213	\$ 128,292,591	\$ 46,193,308	\$ 44,833,643	\$ 67,645,390	\$ 71,848,320
c. Children 1 to 22 years old	\$ 116,647,102	\$ 107,617,387	\$ 125,026,052	\$ 108,881,991	\$ 121,371,304	\$ 108,027,577
d. Children with Special Healthcare Needs	\$ 496,870,196	\$ 486,426,590	\$ 540,975,612	\$ 580,974,370	\$ 506,821,678	\$ 621,643,203
e. Others	\$ 97,300,581	\$ 93,049,666	\$ 112,109,458	\$ 89,425,117	\$ 94,488,959	\$ 96,538,075
f. Administration	\$ 38,536,803	\$ 38,422,000	\$ 16,059,544	\$ 9,228,306	\$ 13,118,876	\$ 12,613,000
g. SUBTOTAL	\$ 944,098,433	\$ 914,837,959	\$ 916,651,519	\$ 904,265,508	\$ 880,954,172	\$ 982,691,895
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 150,000		\$ 150,000		\$ 150,000	
b. SSDI	\$ 100,000		\$ 100,000		\$ 588,638	
c. CISS	\$ 0		\$ 140,000		\$ 0	
d. Abstinence Education	\$ 3,614,500		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 1,837,125		\$ 1,939,252		\$ 1,334,619	
j. Education	\$ 25,550,992		\$ 23,636,568		\$ 23,831,850	
k. Home Visiting	\$ 0		\$ 0		\$ 0	
l. Other						
Medicaid Match	\$ 0		\$ 9,758,117		\$ 9,503,861	
Title X-Fam Planning	\$ 0		\$ 10,420,000		\$ 10,512,876	
Title X (Family Plan)	\$ 9,085,127		\$ 0		\$ 0	
III. SUBTOTAL	\$ 40,337,744		\$ 46,143,937		\$ 45,901,844	

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

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 70,606,837	\$ 67,384,532	\$ 47,653,244	\$	\$ 37,033,896	\$
b. Infants < 1 year old	\$ 38,939,501	\$ 45,243,057	\$ 35,366,730	\$	\$ 17,701,104	\$
c. Children 1 to 22 years old	\$ 109,314,803	\$ 110,836,789	\$ 127,701,617	\$	\$ 93,767,071	\$
d. Children with Special Healthcare Needs	\$ 566,769,437	\$ 652,809,843	\$ 612,613,715	\$	\$ 503,301,337	\$
e. Others	\$ 70,749,273	\$ 70,444,023	\$ 64,329,713	\$	\$ 34,804,474	\$
f. Administration	\$ 8,067,612	\$ 7,485,833	\$ 3,287,906	\$	\$ 1,886,623	\$
g. SUBTOTAL	\$ 864,447,463	\$ 954,204,077	\$ 890,952,925	\$ 0	\$ 688,494,505	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 270,000	
b. SSDI	\$ 93,713		\$ 101,303		\$ 85,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 2,991,440		\$ 2,841,809	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 1,724,830		\$ 900,000		\$ 806,338	
j. Education	\$ 50,238,349		\$ 23,765,113		\$ 23,867,174	
k. Home Visiting	\$ 0		\$ 0		\$ 5,604,010	
l. Other						
DHHS ACF	\$ 0		\$ 0		\$ 3,102,520	
DHHS HRSA	\$ 0		\$ 6,624,047		\$ 844,588	
DHHS PHS Title X	\$ 0		\$ 11,644,517		\$ 10,290,042	
DHHS SAMSA	\$ 0		\$ 850,000		\$ 850,000	
Medicaid Match	\$ 8,546,452		\$ 8,646,452		\$ 9,081,530	
DHHS ACF TANF	\$ 0		\$ 4,500,000		\$ 0	
DHHS ACF	\$ 0		\$ 3,236,330		\$ 0	
HRSA	\$ 1,131,973		\$ 0		\$ 0	
TANF	\$ 2,500,000		\$ 0		\$ 0	
Title X	\$ 10,961,481		\$ 0		\$ 0	
III. SUBTOTAL	\$ 75,196,798		\$ 63,259,202		\$ 57,643,011	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenBudgeted
Row Name: Pregnant Women
Column Name: Budgeted
Year: 2012
Field Note:
This year's budgeted amount reflects adjustments to the local share's state aid to localities "preventive health care" services being directed for children birth through age twenty. County reporting will not capture expenditures for pregnant women.
2. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2011
Field Note:
Universal Home Visiting implementation phase was delayed resulting in expenditures 66% less than budgeted.
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: 2011
Field Note:
Expenditures for Regional Perinatal Centers/Statewide Perinatal Data System greatly exceeded the budgeted amount.
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:
Budget estimate was a projection based on available data at that time. One of the state's largest county was experiencing difficulties with the transition of their data system to a new fiscal administrator.
5. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2011
Field Note:
Increased expenditures in CSHCN are attributable to Program Income, Early Intervention. One of New York State's larger counties is recovering from delays in claiming and payment that resulted from their transition to a different fiscal management system.
6. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2010
Field Note:
This is also a result of one of the state's large county experiencing difficulties with the transition of their data system to a new administrator. The budget projection was based on available data at that point in time.

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: NY

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 479,686,457	\$ 468,968,888	\$ 542,289,899	\$ 567,918,281	\$ 549,101,044	\$ 681,730,785
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 111,547,731	\$ 103,589,315	\$ 72,957,273	\$ 69,242,156	\$ 73,676,681	\$ 68,342,121
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 118,240,385	\$ 113,204,948	\$ 110,605,239	\$ 91,433,990	\$ 114,544,747	\$ 109,677,635
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 234,623,860	\$ 229,074,808	\$ 190,799,108	\$ 175,671,081	\$ 143,631,700	\$ 122,941,354
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 944,098,433	\$ 914,837,959	\$ 916,651,519	\$ 904,265,508	\$ 880,954,172	\$ 982,691,895

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: NY

TYPE OF SERVICE	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 581,216,529	\$ 668,679,951	\$ 633,765,886	\$	\$ 491,943,772	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 59,929,280	\$ 61,322,226	\$ 49,755,348	\$	\$ 36,683,291	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 88,451,645	\$ 87,046,529	\$ 85,056,641	\$	\$ 72,912,918	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 134,850,009	\$ 137,155,371	\$ 122,375,050	\$	\$ 86,954,524	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 864,447,463	\$ 954,204,077	\$ 890,952,925	\$ 0	\$ 688,494,505	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1. **Section Number:** Form5_Main
Field Name: DirectHCBudgeted
Row Name: Direct Health Care Services
Column Name: Budgeted
Year: 2012
Field Note:
Increase in direct health care services attributable to increased program income reporting for Early Intervention and the reassessment of American Indian Health services as direct health care.
2. **Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2011
Field Note:
Program income expenditures exceed budget by more than 10% due to a lag in claiming and reporting for one of the Early Intervention Program County's that had billing issues as they transitioned to a new fiscal system.
3. **Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2010
Field Note:
Budget estimate was a projection based on available data at the time of grant application completion. One of the state's largest county's difficulties with their transition to a new data systems administrator delayed reporting. This also had an impact on program income.
4. **Section Number:** Form5_Main
Field Name: EnablingBudgeted
Row Name: Enabling Services
Column Name: Budgeted
Year: 2011
Field Note:
The enabling services budget for FY11 is 18.6% less than the FY10 budget and 13% less than FY09 expenditures. Variances can be attributed to increased levels of review and assessment of the populations being served and the type of service being provided by initiative. Also, the Department has increased efforts to identify and match state dollars for appropriate initiatives; a result of this has been a decrease or elimination of those dollars in the MCHSBG application. Although these dollars are no longer reflected in this form, the maternal and child health related services continue to be provided by New York State at the same level as previous years.
5. **Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2010
Field Note:
Local government expenditures were less than anticipated. The methodology used to calculate the budget has been revised to more closely reflect anticipated expenditures. Also, the implementation of the new Comprehensive Adolescent Pregnancy prevention program was delayed which resulted in underexpenditures.

FORM 6

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

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

STATE: NY

Total Births by Occurrence: 242,208

Reporting Year: 2011

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	242,208	100	21	20	20	100
Congenital Hypothyroidism	242,208	100	693	328	328	100
Galactosemia	242,208	100	15	9	6	66.7
Sickle Cell Disease	242,208	100	83	68	68	100
Other Screening (Specify)						
Biotinidase Deficiency	242,208	100	12	6	6	100
Congenital Adrenal Hyperplasia	242,208	100	230	13	13	100
Cystic Fibrosis	242,208	100	889	41	41	100
Homocystinuria	242,208	100	11	0	0	
Maple Syrup Urine Disease	242,208	100	9	4	4	100
beta-ketothiolase deficiency	242,208	100	0	0	0	
Tyrosinemia Type I	242,208	100	6	2	2	100
Very Long-Chain Acyl-CoA Dehydrogenase Deficiency	242,208	100	20	5	5	100
Argininemia	242,208	100	0	0	0	
Isovaleric Acidemia	242,208	100	11	3	3	100
Propionic Acidemia	242,208	100	46	10	10	100
Carnitine Uptake Defect	242,208	100	4	0	0	
Glutaric Acidemia Type I	242,208	100	1	0	0	
Isobutyryl-CoA Dehydrogenase Deficiency	242,208	100	14	13	13	100
Sickle Cell Anemia (SS-Disease)	242,208	100	161	139	139	100
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	242,208	100	26	15	15	100
Long-Chain L-3-Hydroxy Acyl-CoA Dehydrogenase Deficiency	242,208	100	1	0	0	
Other Hemoglobin Disorders	242,208	100	48	43	43	100
Argininosuccinic Acidemia/Citrullinemia	242,208	100	6	3	3	100
Short-Chain Acyl-CoA Dehydrogenase Deficiency	242,208	100	14	13	13	100
Hemoglobin C Disease	242,208	100	28	21	21	100
Malonic acidemia	242,208	100	0	0	0	
Krabbe Disease	242,101	100	45	3	3	100
Severe Combined Immunodeficiency	242,208	100	201	16	16	100
Hyperammonemia/Hyperomithinemia/Homocitrullinemia	242,208	100	1	0	0	
Carantine Palmitoyltransferase I Deficiency	242,208	100	1	0	0	
Carantine Palmitoyltransferase II/Acylcarnitine translocase Deficiency	242,208	100	9	0	0	
Medium/Short Chain Hydroxyacyl-CoA dehydrogenase Deficiency	242,208	100	2	0	0	
Hydroxy-3-Methylglutaryl-CoA Lyase Deficiency	242,208	100	58	26	26	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: **NY**

Number of Individuals Served - Historical Data by Annual Report Year					
Types of Individuals Served	2006	2007	2008	2009	2010
Pregnant Women	381,744	388,110	391,034	385,884	378,814
Infants < 1 year old	251,865	244,832	246,824	250,282	247,880
Children 1 to 22 years old	5,461,706	5,644,950	5,683,705	5,466,881	5,560,739
Children with Special Healthcare Needs	459,476	554,740	542,758	486,192	570,508
Others	473,315	485,170	511,395	434,102	690,441
Total	7,028,106	7,317,802	7,275,716	7,013,341	7,448,382

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	372,588	45.8	0.0	51.4	1.7	1.1
Infants < 1 year old	231,872	44.8	1.0	51.4	1.7	1.1
Children 1 to 22 years old	5,602,979	30.8	6.9	54.4	7.9	0.0
Children with Special Healthcare Needs	660,565	37.2	6.9	52.8	3.1	0.0
Others	748,361	21.4	0.0	61.9	16.7	0.0
TOTAL	7,616,365					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Form7_Main
Field Name: PregWbmen_XIX
Row Name: Pregnant Women
Column Name: Title XIX %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with Medicaid as their primary financial coverage.
Source: 2010 NYS Vital Records
2. **Section Number:** Form7_Main
Field Name: PregWbmen_Private
Row Name: Pregnant Women
Column Name: Private/Other %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with private and other government as their primary financial coverage
Source: 2010 NYS Vital Records
3. **Section Number:** Form7_Main
Field Name: PregWbmen_None
Row Name: Pregnant Women
Column Name: None %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with self-pay as their primary financial coverage.
Source: 2010 NYS Vital Records
4. **Section Number:** Form7_Main
Field Name: PregWbmen_Unknown
Row Name: Pregnant Women
Column Name: Unknown %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with unknown as their primary financial coverage.
Source: 2010 NYS Vital Records
5. **Section Number:** Form7_Main
Field Name: Children_0_1_XIX
Row Name: Infants <1 year of age
Column Name: Title XIX %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with Medicaid as their primary financial coverage minus the percentage of infants < 1 covered by Child Health Plus (1%)
Sources: 2010 NYS Vital Records, 2010 Child Health Plus enrollment data, New York State Health Insurance Program.
6. **Section Number:** Form7_Main
Field Name: Children_0_1_XXI
Row Name: Infants <1 year of age
Column Name: Title XXI %
Year: 2013
Field Note:
This estimate is based on the percentage of children <1 covered by Child Health Plus
Source: Child Health Plus 2010 enrollment data, New York State Health Insurance Program.
7. **Section Number:** Form7_Main
Field Name: Children_0_1_Private
Row Name: Infants <1 year of age
Column Name: Private/Other %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with private and other government as their primary financial coverage
Source: 2010 NYS Vital Records
8. **Section Number:** Form7_Main
Field Name: Children_0_1_None
Row Name: Infants <1 year of age
Column Name: None %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with self-pay as their primary financial coverage
Source: 2010 NYS Vital Records
9. **Section Number:** Form7_Main
Field Name: Children_0_1_Unknown
Row Name: Infants <1 year of age
Column Name: Unknown %
Year: 2013
Field Note:
This estimate is based on the percentage of live births to women with unknown as their primary financial coverage.
Source: 2010 NYS Vital Records
10. **Section Number:** Form7_Main
Field Name: Children_1_22_XIX
Row Name: Children 1 to 22 years of age
Column Name: Title XIX %
Year: 2013

Field Note:

This estimate is based on the percentage of children less than 19 who are covered by Medicaid (minus the percentage of children ages 1-19 covered by Child Health Plus). 6.1% of children covered by Medicaid are also covered by private insurance.

Source: Current Population Survey, 2011 Annual Social and Economic Supplement - Table H105 and 2010 Child Health Plus enrollment data, New York State Health Insurance Programs.

11. **Section Number:** Form7_Main
Field Name: Children_1_22_XXI
Row Name: Children 1 to 22 years of age
Column Name: Title XXI %
Year: 2013
Field Note:
This estimate is based on the number of children ages 1-19 enrolled in Child Health Plus.
Source: 2010 Child Health Plus enrollment data, New York State Health Insurance Program..
12. **Section Number:** Form7_Main
Field Name: Children_1_22_Private
Row Name: Children 1 to 22 years of age
Column Name: Private/Other %
Year: 2013
Field Note:
The estimate is based on the percentage of children less than 19 who are covered by Private or Other insurance only. 6.1% of children covered by private or other insurance are also covered by Medicaid.

Source: Current Population Survey, 2011 Annual Social and Economic Supplement - Table H105
13. **Section Number:** Form7_Main
Field Name: Children_1_22_None
Row Name: Children 1 to 22 years of age
Column Name: None %
Year: 2013
Field Note:
The estimate is based on the percentage of children less than 19 who were uninsured.
Source: Current Population Survey, 2011 Annual Social and Economic Supplement - Table H105.
14. **Section Number:** Form7_Main
Field Name: CSHCN_TS
Row Name: Children with Special Health Care Needs
Column Name: Title V Total Served
Year: 2013
Field Note:
Source: National Survey of Children With Special Health Care Needs, NS-CSHCN 2009/2010.
15. **Section Number:** Form7_Main
Field Name: CSHCN_XIX
Row Name: Children with Special Health Care Needs
Column Name: Title XIX %
Year: 2013
Field Note:
This estimate is based on the percentage of children with special health care needs on Medicaid minus the percentage of children ages 0-19 enrolled in Child Health Plus. 9.4% of these children also have private insurance.
Sources: National Survey of Children With Special Health Care Needs, NS-CSHCN 2009/2010 and 2010 Child Health Plus enrollment data, New York State Health Insurance Program.
16. **Section Number:** Form7_Main
Field Name: CSHCN_XXI
Row Name: Children with Special Health Care Needs
Column Name: Title XXI %
Year: 2013
Field Note:
This estimate is based on the number of children ages 1-19 enrolled in Child Health Plus.
Source: 2010 Child Health Plus enrollment data, New York State Health Insurance Program.
17. **Section Number:** Form7_Main
Field Name: CSHCN_Private
Row Name: Children with Special Health Care Needs
Column Name: Private/Other %
Year: 2013
Field Note:
This estimate is based on the percentage of children with special health care needs who are covered by private insurance only (9.4% of these children who are privately insured are also covered by Medicaid).
Source: National Survey of Children With Special Health Care Needs, NS-CSHCN 2009/2010.
18. **Section Number:** Form7_Main
Field Name: CSHCN_None
Row Name: Children with Special Health Care Needs
Column Name: None %
Year: 2013
Field Note:
Source: National Survey of Children With Special Health Care Needs, NS-CSHCN 2009/2010.
19. **Section Number:** Form7_Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2013
Field Note:
The numbers included in the "other" category are men and non-pregnant women over the age of 22 served in the following programs: CHWP, FAMILY PLANNING, GENETIC SERVICES, IMMUNIZATION, INFERTILITY, MIGRANT HEALTH, OSTEOPOROSIS, NFP TANF, STD and RAPE CRISIS.
20. **Section Number:** Form7_Main
Field Name: AllOthers_XIX
Row Name: Others

Column Name: Title XIX %

Year: 2013

Field Note:

This estimate is based on the percentage of persons under age 65 who are covered by Medicaid. 4% of persons on Medicaid are also covered by Private insurance.

Source: Current Population Survey, 2011 Annual Social and Economic Supplement - Table H105

21. Section Number: Form7_Main

Field Name: AllOthers_Private

Row Name: Others

Column Name: Private/Other %

Year: 2013

Field Note:

This estimate is based on the percentage of persons under age 65 who are covered by private or other insurance only. 4% of persons covered by private or other insurance are also covered by Medicaid.

Source: Current Population Survey, 2011 Annual Social and Economic Supplement - Table H105

22. Section Number: Form7_Main

Field Name: AllOthers_None

Row Name: Others

Column Name: None %

Year: 2013

Field Note:

This estimate is based on the percentage of persons under age 65 who are uninsured.

Source: Current Population Survey, 2011 Annual Social and Economic Supplement - Table H105

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: NY

Reporting Year: 2010

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	236,615	113,399	37,397	0	16,414	0		69,405
Title V Served	236,615	113,399	37,397	0	16,414	0		69,405
Eligible for Title XIX	109,613	30,329	23,806	0	9,015	0		46,463
INFANTS								
Total Infants in State	241,364	116,077	38,148	0	16,644	0		70,495
Title V Served	241,364	116,077	38,148	0	16,644	0		70,495
Eligible for Title XIX	111,144	30,766	24,246	0	9,098	0		47,034

II. UNDUPLICATED COUNT BY ETHNICITY

	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	HISPANIC OR LATINO (Sub-categories by country or area of origin)				
				(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	178,950	57,665	0	0	0	0	0	57,665
Title V Served	178,950	57,665	0	0	0	0	0	57,665
Eligible for Title XIX	105,425	4,188	0	0	0	0	0	4,188
INFANTS								
Total Infants in State	182,862	58,502	0	0	0	0	0	58,502
Title V Served	182,862	58,502	0	0	0	0	0	58,502
Eligible for Title XIX	69,461	41,683	0	0	0	0	0	41,683

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

None

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

	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: NY

	FY 2013	FY 2012	FY 2011	FY 2010	FY 2009
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 522-5006	(800) 522-5006	(800)522-5006	(800) 522-5006	(800) 522-5006
2. State MCH Toll-Free "Hotline" Name	The Growing Up Healthy Hotline				
3. Name of Contact Person for State MCH "Hotline"	Michael Acosta				
4. Contact Person's Telephone Number	(518) 474-1911	(518) 474-1911	(518)474-3664	(518) 474-1911	(518) 474-1911
5. Contact Person's Email	maa04@health.state.ny.us	maa04@health.state.ny.us	maa04@health.state.ny.us	maa04@health.state.ny.us	
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	43130	53978	61518

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Form9_Main

Field Name: calls_2

Row Name: Number of calls received On the State MCH Hbtline This reporting period

Column Name: FY

Year: 2011

Field Note:

The decline in the number of calls per year is due to the fact that more and more people are gaining internet access which is a preferred method of obtaining information. Due to budget cuts, NYS DOH has not been utilizing media campaigns which list the GUHH hotline as an information source.

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

1. State MCH Administration:
(max 2500 characters)

The New York State Department of Health's Division of Family Health administers the Title V program in New York State. The Title V program supports activities designed to improve the health status of women, particularly those of reproductive health age, infants, children and adolescents, including those with special health care needs. Funds support public health/infrastructure, population-based, enabling and gap-filling personal health care services for those with limited access to high quality, continuous health care. The Division of Family Health encompasses three Bureaus (Maternal and Child Health, Dental Health, and Early Intervention), and is supported by the Office of the Medical Director. The Division also provides leadership for the State Systems Development Initiative (SSDI), the American Indian Health Program, MCH Graduate Student Assistantship Program, and the Migrant and Seasonal Farmworker Health Program. All programs work closely with the Department's Office of Health Insurance Programs (OHIP), which oversees the state's Medicaid program, and the Office of Health Systems Management, which licenses and monitors hospitals and and clinics throughout the state.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>40,033,023</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>62,208,171</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>271,491,225</u>
6. Other Funds (Line 5, Form 2)	\$ <u>0</u>
7. Program Income (Line 6, Form 2)	\$ <u>314,762,086</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>688,494,505</u>

9. Most significant providers receiving MCH funds:

_____	<u>Family Planning and Reproductive Health</u>
_____	<u>Lead Poisoning Prevention</u>
_____	<u>Schd based Health Clinics</u>
_____	<u>Genetic Services</u>

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

a. Pregnant Women	_____ <u>372,588</u>
b. Infants < 1 year old	_____ <u>231,872</u>
c. Children 1 to 22 years old	_____ <u>5,602,979</u>
d. CSHCN	_____ <u>660,565</u>
e. Others	_____ <u>748,361</u>

11. Statewide Initiatives and Partnerships:

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

School-based health centers, family planning and reproductive health, regional perinatal centers, community health workers, nurse/family partnership, primary health and dental care for migrant and season farmworkers and their families, genetic services, care coordination, children with special health care needs program, services to native american women and children, physically handicapped children diagnosis and evaluation, dental rehabilitation program and patient education, translation and transportation.

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

Childhood lead poisoning prevention, newborn genetics and hearing screening, population-based health education campaigns, including prenatal outreach and education, breastfeeding promotion, the Growing Up Healthy Hotline, injury prevention, immunization, health information media, overweight prevention, nutrition and physical activities programs for children and adolescents, comprehensive adolescent pregnancy prevention, Personal Responsibility Education Program, abstinence, youth development, minority health community coalitions, and migrant health outreach & education.

c. Infrastructure Building Services:
(max 2500 characters)

Statewide Perinatal Data System, maternal mortality review, NYS Perinatal Collaborative, hospital discharge data system (SPARCS) and quality assurance reporting, statewide immunization registry (NYSIIS), surveillance and public health information, state systems development initiative, child health information integration, community health assessments, public health workforce development, evaluation and monitoring, contract management, emergency preparedness, standards and guidelines development. Education-related activities include the Preventive Medicine and Dental Public Health residency programs, public health nurse continuing education, the MCH Graduate Assistantship program, monthly satellite broadcasts, the Statwide Oral health Technical Assistance Center, participation in regional training centers, national meetings and organizations.

12. The primary Title V Program contact person:

Name _____ Rachel M de Long, M.D.
Title _____ Director, Division of Family Health
Address _____ Empire State Plaza Tower Rm 890
City _____ Albany
State _____ New York
Zip _____ 12237
Phone _____ 518-473-7922
Fax _____ 518-473-2015
Email _____ rmd07@health.state.ny.us
Web _____ www.health.state.ny.us

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

Name _____ Susan Slade
Title _____ CSHCN Director
Address _____ Empire State Plaza Tower Rm 890
City _____ Albany
State _____ New York
Zip _____ 12237
Phone _____ 518-473-9883
Fax _____ 518-474-1420
Email _____ sjs11@health.state.ny.us
Web _____ www.health.state.ny.us



FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

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

Form Level Notes for Form 11

None

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	100	100	100	100	100
Annual Indicator	77.2	76.0	88.1	86.8	86.8
Numerator	3,542	3,238	15,853	3,300	3,300
Denominator	4,586	4,263	17,985	3,800	3,800
Data Source		Newborn Screening Program data set	Newborn Screening	Newborn Screening	Newborn Screening
<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	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	88.5	89.4	90.3	91.1	92
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2011

Field Note:

As shown in the above table, the numerator is the number of closed cases with documentation of an evaluation, diagnostic testing and a diagnosis as appropriate. The denominator is the number of screen positive newborns for the year. The program follows all screen positive newborns to ensure they receive appropriate follow-up.

The annual indicator is lower for 2010 than 2009 because in some cases, a definitive diagnosis is pending, but confirmation of an ongoing evaluation has been obtained by the Program. Lost-to-follow-up cases, where documentation of an evaluation, diagnostic testing and a diagnosis could not be obtained, remained consistent between 2009 (317 cases) and 2010 (365 cases). Therefore, it is anticipated that the annual indicator for 2010 will increase once the pending cases are resolved.

2011 data is pending because the standard diagnostic evaluation for some of the disorders takes up to 6 months; therefore, the annual indicator would not be a reliable if reported at this time. 2010 data are used as a proxy for 2011. 2011 data will be available in late 2012.

2. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2010

Field Note:

Data in the cells for 2007 and 2008 numerators and denominators represent only screen positives or referrals. In previous years, these numbers represented all newborns screened. For 2007-2008, as shown in the above table, the numerator is the number of cases closed and the denominator is the number of screen positive newborns for the year. The annual indicator is the number of closed cases divided by number of screen positive cases reported as a percent. A case is considered closed when all predetermined closure criteria are met, including the newborn having an evaluation, any diagnostic testing, and a diagnosis has been made regarding the condition for which the newborn was referred. The program follows all screen positive newborns to ensure they receive appropriate follow-up, including an evaluation, diagnostic testing and a diagnosis as appropriate.

For 2009, the numerator is the number of referrals (previously called screen positives) plus the number of babies with a presumptive positive screen. Presumptive positive screens are those infants with slightly out of range results; a repeat specimen is required, and follow-up staff ensures a repeat sample is received, tested, and reported appropriately. Data for 2009 are cases opened and closed that calendar year. There are still instances where the annual indicator will increase as some infants have cases remaining open until a firm diagnosis is made by the clinician. The diagnosis may not be made by the clinician until the following year; therefore the 2009 data is provisional. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised but are still considered provisional due to open cases where a firm diagnosis by the clinician has not been made.

Unlike in 2006, the numerator and denominator numbers in 2007 - 2009 represent only the infants screened positive, rather than all infants screened.

|

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PERFORMANCE MEASURE # 02

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	66	66	60	62	59.6
Annual Indicator	59	59	59	59	64.4
Numerator					
Denominator					
Data Source		CSHCN Survey	CSHCN Survey	CSHCN Survey	CSHCN 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.)

Is the Data Provisional or Final?

Final Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	65.7	66.3	67	67.6	68.3
Annual Indicator					
Numerator					
Denominator					

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:

Data reported for 2007, 2008 and 2009 are from the National Survey of Children with Special Health Care Needs (CSHCN) conducted by HRSA and CDC in 2005-2006. 2009 data are used as a proxy for 2010 data. 2010 data will be available in the fall of 2011. Nationally, 57.4% of families with CSHCN report satisfaction with the services they need.

3. **Section Number:** Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2009

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

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	58	58	46	48	45.7
Annual Indicator	45.2	45.2	45.2	45.2	38.4
Numerator					
Denominator					
Data Source		CSHCN survey	CSHCN survey	CSHCN survey	CSHCN 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.)

Is the Data Provisional or Final?

Final Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	39.2	39.6	39.9	40.3	40.7
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:

Data reported for 2007, 2008 and 2009 are from the National Survey of Children with Special Health Care Needs (CSHCN) conducted by HRSA and CDC in 2005-2006. 2009 data are used as a proxy for 2010 data. 2010 data will be available in the fall of 2011. NYS is below the national average of 47.1%, as well as the target for the HP 2020 goal of 54.8% of CSHCN (under age 18) who have access to a medical home. However, NYS exceeds the HP 2020 target for CSHCN who receive their care in family-centered, comprehensive, coordinated systems. For children 0 – 11 years, the HP 2020 target is 22.4%, and for children 12-17 years of age the target is 15.2%

3. **Section Number:** Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2009

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.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	70	72	64	64	62.7
Annual Indicator	62.1	62.1	62.1	62.1	56.8
Numerator					
Denominator					
Data Source		CSHCN survey	CSHCN survey	CSHCN survey	CSHCN 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.)

Is the Data Provisional or Final?

Final Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	57.9	58.5	59.1	59.6	60.2
Annual Indicator					
Numerator					
Denominator					

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:

Data reported for 2007, 2008 and 2009 are from the National Survey of Children with Special Health Care Needs (CSHCN) conducted by HRSA and CDC in 2005-2006. 2009 data are used as a proxy for 2010 data. 2010 data will be available in the fall of 2011. Nationally, 62% of families have adequate insurance to pay for services they need.

3. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2009

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.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>82</u>	<u>91</u>	<u>92</u>	<u>92</u>	<u>91.5</u>
Annual Indicator	<u>90.6</u>	<u>90.6</u>	<u>90.6</u>	<u>90.6</u>	<u>65.6</u>
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source		CSHCN survey	CSHCN survey	CSHCN survey	CSHCN 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.)

Is the Data Provisional or Final?

Final Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>66.9</u>	<u>67.6</u>	<u>68.2</u>	<u>68.9</u>	<u>69.5</u>
Annual Indicator					
Numerator					
Denominator					

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:

Data reported for 2007, 2008 and 2009 comes from the National Survey of Children with Special Care Needs (CSHCN) conducted by HRSA and CDC in 2005-2006. 2009 data are used as a proxy for 2010. 2010 data will be available in the fall of 2011. Nationally, 89.1% of families report that community-based service systems are organized so they can easily use them.

3. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2009

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.

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	<u>9</u>	<u>40</u>	<u>40</u>	<u>40</u>	<u>38.8</u>
Annual Indicator	<u>38.4</u>	<u>38.4</u>	<u>38.4</u>	<u>38.4</u>	<u>39.7</u>
Numerator					
Denominator					
Data Source		CSHCN survey	CSHCN survey	CSHCN survey	CSHCN 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.)					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>40.5</u>	<u>40.9</u>	<u>41.3</u>	<u>41.7</u>	<u>42.1</u>
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:

Data for 2007, 2008 and 2009 comes from the National Survey of Children with Special Health Care Needs (CSHCN) conducted by HRSA and CDC in 2005-2006. 2009 data are used as a proxy for 2010 data. 2010 data will be available in the fall of 2011. Nationally, 41.2% of youth indicated they received this service.

3. Section Number: Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2009

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.

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>87</u>	<u>88</u>	<u>80</u>	<u>80</u>	<u>72.9</u>
Annual Indicator	<u>83</u>	<u>76.2</u>	<u>72.2</u>	<u>71.3</u>	<u>71.3</u>
Numerator					
Denominator					
Data Source		National Immunization Survey	National Immunization Survey	National Immunization Survey	National Immunization 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.)

Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>73.6</u>	<u>74.4</u>	<u>75.1</u>	<u>75.8</u>	<u>76.5</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2011

Field Note:

The National Immunization Survey rates have decreased, in part, due to changes in the survey methodology. Decreasing prevalence of families with land lines (the National Immunization Survey is a telephone survey) and a small sample size contribute to the variability of the results. 2010 data are used as a proxy for 2011 data. It is estimated that final 2011 immunization data will be available from CDC in late 2012 or early 2013. NYS exceeds the HP 2020 baseline of 68% for the proportion of children aged 19 to 35 months who receive the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella and PCV vaccines but is below the target of 80%.

2. Section Number: Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2009

Field Note:

2008 data are being used as a proxy for 2009.

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	11	11	12.5	12.3	12
Annual Indicator	13.2	12.9	12.1	11.2	11.2
Numerator	5,277	5,074	4,687	4,330	4,330
Denominator	398,693	392,716	386,720	386,890	386,890
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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	11	10.9	10.8	10.6	10.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission. The NYS birth rate for teenagers aged 15 to 17 was considerably lower than the national rate of 21.7 (2008).
- Section Number:** Form11_Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2009
Field Note:
 Data for 2009 have been revised with final data.

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
Annual Performance Objective	35	40	28	39	40.9
Annual Indicator	27.0	27.0	38.1	41.9	41.9
Numerator	10,534	10,534	3,414		
Denominator	39,014	39,014	8,960		
Data Source		NYS 3rd Grade Dental 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.)

Is the Data Provisional or Final?

Final Provisional

	2012	2013	2014	2015	2016
Annual Performance Objective	42.7	43.2	43.6	44	44.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2011

Field Note:

The NY 3rd Grade oral health surveillance project is currently underway in New York City (NYC) schools. The upstate NY component of the surveillance project was completed in 2011. *Weighted to reflect the population distribution

Data show that the prevalence of sealants in Upstate school children has increased. However, it falls short of the national performance measure.

2. Section Number: Form11_Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2010

Field Note:

The NYS 3rd Grade oral health surveillance project is currently in progress. 2006-2009 data is statewide data. Final 2009 and 2010 provisional data include upstate NY data only (excludes NYC.) It is anticipated that 2010 and 2011 data will be combined to increase the sample size and that this data will be released by the end of 2011.

2010 data have been updated and finalized since NYS's previous MCH block grant application submission. Numerator and denominator data are not available.

3. Section Number: Form11_Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data are for NYS (excluding NYC).

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	1	0.9	1.3	1.2	1
Annual Indicator	1.3	1.2	1.0	1.3	1.3
Numerator	48	43	37	47	47
Denominator	3,597,289	3,604,140	3,633,448	3,531,233	3,531,233
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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	1.3	1.3	1.2	1.2	1.2
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2011
Field Note:
 The number of motor vehicle deaths is based on the definition used by the DOH Bureau of Biometrics and Health Statistics and includes pedestrians and cyclists. The definition changed in 2004; prior to that time, pedestrians and cyclists were not included.

 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2010
Field Note:
 The number of motor vehicle deaths is based on the definition used by the DOH Bureau of Biometrics and Health Statistics and includes pedestrians and cyclists. The definition changed in 2004; prior to that time, pedestrians and cyclists were not included.

 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised with final 2009 data.
 The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics

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	43	51	44.5	45.5	47.9
Annual Indicator	50	49.4	47.4	47.7	47.7
Numerator					
Denominator					
Data Source		National Immunization Survey - breastfeeding suppl	National Immunization Survey	National Immunization Survey	National Immunization 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.)
 Is the Data Provisional or Final?

Final Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	48.3	48.8	49.3	49.8	50.2
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2010 data represents the 2008 birth cohort. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission. 2010 data represents the 2008 birth cohort.
- Section Number:** Form11_Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised with final 2009 data. Information was reported in 2009 for the 2006 birth cohort.

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	100	100	100	100	100
Annual Indicator	98.5	98.7	99.1	99.6	99.6
Numerator	247,960	244,630	244,545	239,116	239,116
Denominator	251,760	247,928	246,647	240,169	240,169
Data Source		Newborn Hearing Screening Program	Newborn Hearing Screening Program	Newborn Screening	Newborn Screening
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	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #12
Field Name: PM12
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #12
Field Name: PM12
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_Performance Measure #12
Field Name: PM12
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised using final 2009 data.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>8</u>	<u>8</u>	<u>8.5</u>	<u>8.4</u>	<u>7.4</u>
Annual Indicator	<u>8.9</u>	<u>7.1</u>	<u>7.5</u>	<u>7.9</u>	<u>7.9</u>
Numerator	<u>395,000</u>	<u>310,000</u>	<u>335,000</u>	<u>350,000</u>	<u>350,000</u>
Denominator	<u>4,437,000</u>	<u>4,373,000</u>	<u>4,465,000</u>	<u>4,418,000</u>	<u>4,418,000</u>
Data Source		Current Population Survey	Current Population Survey	Current Population Survey	Current Population 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.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>7.4</u>	<u>7.3</u>	<u>7.2</u>	<u>7.1</u>	<u>7</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available in early 2013.
- Section Number:** Form11_Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised using 2009 final data.

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.

	2007	2008	2009	2010	2011
Annual Performance Objective	31	30	29	29	31.5
Annual Indicator	32.0	32.0	31.8	31.5	31.5
Numerator	63,373	67,108	71,274	70,636	70,636
Denominator	198,041	209,713	224,130	224,243	224,243
Data Source		PedNSS	PedNSS	PedNSS	PedNSS

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

	2012	2013	2014	2015	2016
Annual Performance Objective	31.2	30.8	30.5	30.2	29.9
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #14
Field Name: PM14
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available in early 2013.

2. **Section Number:** Form11_Performance Measure #14
Field Name: PM14
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form11_Performance Measure #14
Field Name: PM14
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised using final 2009 data.

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	14	14	13	12	8.1
Annual Indicator	13.7	8.2	7.6	7.2	7.2
Numerator					
Denominator					
Data Source		PRAMS	PRAMS	PRAMS	PRAMS
<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	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	7.1	7	6.9	6.8	6.8
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2011
Field Note:
 Numerator and denominator data are not available (survey data). Previous data reported for 2006-2007 were for NYS (Excluding NYC). CDC has recently provided statewide statistics for this indicator. The comparable NYS percentages for 2006 and 2007 are 8.5% and 9.1%, respectively. 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2010
Field Note:
 Data source is the Pregnancy Risk Assessment and Monitoring Survey (PRAMS). Numerator and demonminator data are not available. Data reported for 2006 and 2007 were for NYS (excluding NYC). CDC recently provided statewide statistics for this indicator. Statewide 2006 and 2007 data are therefore now available. The comparable statewide percentages for 2006 and 2007 are 8.5% and 9.1% accordingly. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2009
Field Note:
 Numerator and denominator data are not available (survey data). Previous data reported for 2006-2007 were for NYS (Excluding NYC). CDC has recently provided statewide statistics for this indicator. The comparable NYS percentages for 2006 and 2007 are 8.5% and 9.1%, respectively. 2009 data have been updated and finalized since NYS's previous MCH block grant application submission.

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	4.1	4	3.8	3.8	4.2
Annual Indicator	3.9	3.3	4.2	4.6	4.6
Numerator	54	46	58	63	63
Denominator	1,396,874	1,403,050	1,366,144	1,366,278	1,366,278
Data Source		Vital Records	Vital Records	Vital Records	Vital Records
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	4.5	4.5	4.4	4.4	4.3
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_Performance Measure #16
Field Name: PM16
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised using final 2009 data.

PERFORMANCE MEASURE # 17

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>92</u>	<u>92</u>	<u>94</u>	<u>94</u>	<u>91</u>
Annual Indicator	<u>89.7</u>	<u>90.0</u>	<u>90.6</u>	<u>90.5</u>	<u>90.5</u>
Numerator	<u>3,252</u>	<u>3,281</u>	<u>3,356</u>	<u>3,270</u>	<u>3,270</u>
Denominator	<u>3,627</u>	<u>3,646</u>	<u>3,704</u>	<u>3,614</u>	<u>3,614</u>
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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>91.3</u>	<u>91.7</u>	<u>92</u>	<u>92.4</u>	<u>92.8</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised using final 2009 data.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>78</u>	<u>79</u>	<u>80</u>	<u>81</u>	<u>74</u>
Annual Indicator	<u>73.8</u>	<u>72.3</u>	<u>73.3</u>	<u>73.2</u>	<u>73.2</u>
Numerator	<u>174,949</u>	<u>165,813</u>	<u>167,503</u>	<u>169,190</u>	<u>169,190</u>
Denominator	<u>236,903</u>	<u>229,467</u>	<u>228,517</u>	<u>231,137</u>	<u>231,137</u>
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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>74.8</u>	<u>75.5</u>	<u>76.2</u>	<u>77</u>	<u>77.7</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- Section Number: Form11_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2011

Field Note:

The denominator is the total number of births for which prenatal care initiation is known and excludes births where trimester of entry into prenatal care is unknown. 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

- Section Number: Form11_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2010

Field Note:

The denominator is the total number of births for which prenatal care initiation is known and excludes births where trimester of entry into prenatal care is unknown. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

- Section Number: Form11_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised using final 2009 data.

Denominator excludes births where trimester when prenatal care began is unknown

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

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR

The percentage of infants born to Black and Hispanic women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	64.9
Annual Indicator	_____	62.4	64.3	64.6	64.6
Numerator	_____	58,091	58,055	59,319	59,319
Denominator	_____	93,114	90,226	91,838	91,838
Data Source		Vital Records	Vital Records	Vital Records	Vital Records
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	65.6	66.2	66.9	67.5	68.2
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 #1

Field Name: SM1

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. Section Number: Form11_State Performance Measure #1

Field Name: SM1

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR

The percentage of Medicaid enrolled children between the ages of 3 and 6 years who had a well-child and preventive health visit in the past year

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	79.5
Annual Indicator	_____	81	79	79	80
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source		NYS Quality Assurance Reporting Requirements			
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	79.9	80.4	80.9	81.4	83.7
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:

These data represent children in this age group who are enrolled in the Managed Care type of Medicaid coverage which includes 87% of all children. Information on children enrolled in Medicaid fee-for-service is not included.

Numerator and denominator data are not available (survey data).

2. Section Number: Form11_State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2010

Field Note:

These data represent children in this age group who are enrolled in the Managed Care type of Medicaid coverage which includes 87% of all children. Information on children enrolled in Medicaid fee-for-service is not included. Comparison between 2007/2008 and 2009/2010 are not possible due to the fact that different methods of data collection were used in developing the measure rate.

2009 data are used as a proxy for 2010. This indicator is collected on a biannual basis. Numerator and denominator data are not available (survey data).

3. Section Number: Form11_State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2009

Field Note:

These data represent children in this age group who are enrolled in the Managed Care type of Medicaid coverage which includes 87% of all children. Numerator and denominator data are not available (survey data).

STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR

The ratio of the Black infant low birth weight rate to the White infant low birth weight rate

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	1.9
Annual Indicator	_____	1.9	1.9	1.9	1.9
Numerator	_____	13	13	12.9	12.9
Denominator	_____	6.8	6.9	6.8	6.8
Data Source		Vital Records	Vital Records	Vital Records	Vital Records
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	1.8	1.8	1.8	1.8

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

- Section Number:** Form11_State Performance Measure #3
Field Name: SM3
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013. Data are based on rates of low birthweight for White non-Hispanic and Black non-Hispanic births.
- Section Number:** Form11_State Performance Measure #3
Field Name: SM3
Row Name:
Column Name:
Year: 2010
Field Note:
 White and Black race groups do not include Hispanics.
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form11_State Performance Measure #3
Field Name: SM3
Row Name:
Column Name:
Year: 2009
Field Note:
 White and Black race groups do not include Hispanics.

STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR

The percentage of high school students who were overweight or obese

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	26.3
Annual Indicator	_____	27.2	26.6	26.6	25.7
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source		YRBS	YRBS	YRBS	YRBS
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	26.1	25.8	25.5	25.3	25
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:

Data are from the 2011 Youth Risk Behavior Survey. Numerator and denominator data are not available (survey data).

2. **Section Number:** Form11_State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2010

Field Note:

2009 data are being used as a proxy for 2010. The YRBS is conducted bi-annually. The next survey was in 2011 with results available in 2012. Numerator and denominator data are not available (survey data).

DOH also collects data on the percentage of students in Pre-Kindergarten, Kindergarten and grades 2, 4, 7 and 10 in NYC (exclusive of NYC) who are overweight or obese: (32.0% for 2008-2010). The source of this data is the DOH Student Weight Status Category Report.

STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR

The ratio of the Hispanic teen (ages 15-17) pregnancy rate to the non-Hispanic White teen (ages 15-17) pregnancy rate

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	_____ 5.2
Annual Indicator	_____	5.6	5.3	4.6	4.6
Numerator	_____	64.3	58.3	48.6	48.6
Denominator	_____	11.4	11	10.6	10.6
Data Source		Vital Statistics	Vital Statistics	Vital Statistics	Vital Statistics
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	_____ 4.5	_____ 4.5	_____ 4.4	_____ 4.4	_____ 4.3
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 #5

Field Name: SM5

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. **Section Number:** Form11_State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR

Percent of High School Students Who Smoked Cigarettes in the Last Month

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>5</u>	<u>5</u>	<u>5</u>	<u>5</u>	<u>12.5</u>
Annual Indicator	<u>13.8</u>	<u>13.8</u>	<u>14.9</u>	<u>12.6</u>	<u>12.5</u>
Numerator	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Denominator	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Data Source		YRBS	YRBS	NYS Youth Tobacco Survey	YRBS
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>12.3</u>	<u>12.2</u>	<u>12.1</u>	<u>12</u>	<u>11.8</u>
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 #6

Field Name: SM6

Row Name:

Column Name:

Year: 2011

Field Note:

Data are from the 2011 Youth Risk Behavior Survey. Numerator and denominator data are not available (survey data).

- Section Number:** Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data are from the NYS 2010 Youth Tobacco Survey. Numerator and denominator data are not available (survey data).

- Section Number:** Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data are from the 2009 (biannual)Youth Risk Behavior Survey. Numerator and denominator data are not available (survey data).

STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR

The percentage of Medicaid enrolled children and adolescents between the ages of 2-21 years who had at least one dental visit within the last year

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	41.4
Annual Indicator	_____	37.3	40.2	41.0	41.8
Numerator	_____	667,090	746,153	797,681	835,106
Denominator	_____	1,790,400	1,854,115	1,946,654	1,996,387
Data Source		Bureau of MA Statistics			
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	41.8	42.2	42.6	43.1	43.5
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

- Section Number:** Form11_State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2011
Field Note:
 This indicator is based on information from both Managed Care and Fee-for- Service Medicaid Programs.
- Section Number:** Form11_State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2010
Field Note:
 This indicator is based on information from both Managed Care and Fee-for- Service Medicaid Programs.

STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR

Percentage of children who were tested for lead two or more times before the age of three.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	51
Annual Indicator	_____	47.5	50.5	53.0	53.0
Numerator	_____	116,544	125,763	133,960	133,960
Denominator	_____	245,402	249,182	252,662	252,662
Data Source		NYS Lead Program	NYS Lead Program	NYS Lead Program	NYS Lead Program
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	51.5	52	52.5	53	53.5
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 #8

Field Name: SM8

Row Name:

Column Name:

Year: 2011

Field Note:

Data are reported for children turning three years of age in the year reported – i.e., data reported for 2010 are for children born in 2007. Data is statewide, including NYC. 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. Section Number: Form11_State Performance Measure #8

Field Name: SM8

Row Name:

Column Name:

Year: 2010

Field Note:

This is a new performance measure that replaces and updates a previous measure that captured the percentage of children tested for lead at least once by age two years. The measure was revised to align with the state universal lead testing requirements that all children be tested for lead at both ages one year and two years, and to align with current statewide surveillance reports. While there are several separate metrics currently tracked for lead testing in state surveillance reports, this measure is the best stand-alone composite measure of performance in this area.

Data are reported for children turning three years of age in the year reported – i.e., data reported for 2010 are for children born in 2007. Data is statewide, including NYC. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR

Hospitalization Rate for Asthma in Children Ages 0 to 17 years.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	31
Annual Indicator	_____	28.4	31.1	26.7	26.7
Numerator	_____	12,509	13,781	11,562	11,562
Denominator	_____	4,408,016	4,424,083	4,324,929	4,324,929
Data Source		SPARCS	SPARCS	SPARCS	SPARCS
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	26.5	26.4	26.3	26.2	26
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 #9

Field Name: SM9

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. **Section Number:** Form11_State Performance Measure #9

Field Name: SM9

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR

The percentage of infants who were exclusively fed breast milk between birth and hospital discharge

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	43.1
Annual Indicator	_____	42.0	42.7	43.5	43.5
Numerator	_____	95,496	96,080	95,511	95,511
Denominator	_____	227,604	224,903	219,503	219,503
Data Source		Statewide Perinatal Data System			
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	43.6	44	44.4	44.8	45.4
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

- Section Number:** Form11_State Performance Measure #10

Field Name: SM10

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

- Section Number:** Form11_State Performance Measure #10

Field Name: SM10

Row Name:

Column Name:

Year: 2010

Field Note:

The denominator includes all live born infants, excluding infants who were admitted to the NICU or transferred in or out of the hospital. Method infant is fed is recorded on the Certificate of Live Birth, and is defined as the period between birth and discharge from the hospital, up until 5 days of age (when NYS law requires report of live births). Infants are classified as being fed exclusively breast milk if they were fed only breast milk, and no other liquids or solids except for drops or syrups consisting of vitamins, minerals or medications. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

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	1.3	1.3	1.3	1.3	2.6
Annual Indicator	1.8	2.8	2.6	2.7	2.7
Numerator	8.7	11.8	10.9	10.2	10.2
Denominator	4.8	4.2	4.2	3.8	3.8
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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	2.5	2.5	2.5	2.5	2.4
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 2

Field Name: OM02

Row Name:

Column Name:

Year: 2011

Field Note:

Black and White race categories exclude Hispanics for data reported for 2008-2010. For 2006-2007, Black and White race categories included Hispanics whose race was White or Black. Infant deaths for a given year are used as numerator data, and births for the same year as denominator data. The resulting rate may differ somewhat from a rate based on matched birth-death files

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. Section Number: Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2010

Field Note:

Black and White race categories exclude Hispanics for data reported for 2008-2010. For 2006-2007, Black and White race categories included Hispanics whose race was White or Black.

Infant deaths for a given year are used as numerator data, and births for the same year as denominator data. The resulting rate may differ somewhat from a rate based on matched birth-death files

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data. Infant deaths for a given year are used as numerator data, and births for the same year as denominator data. The resulting rate may differ somewhat from a rate based on matched birth-death files

Black and White race categories exclude Hispanics for data reported for 2008-2010. For 2006-2007, Black and White race categories included Hispanics whose race was White or Black

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

	Annual Objective and Performance Data				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>3.8</u>	<u>3.8</u>	<u>3.7</u>	<u>3.7</u>	<u>3.6</u>
Annual Indicator	<u>3.6</u>	<u>3.7</u>	<u>3.6</u>	<u>5.1</u>	<u>5.1</u>
Numerator	<u>909</u>	<u>919</u>	<u>886</u>	<u>1,227</u>	<u>1,227</u>
Denominator	<u>252,662</u>	<u>249,655</u>	<u>246,592</u>	<u>242,913</u>	<u>242,913</u>
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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

	Annual Objective and Performance Data				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>3.5</u>	<u>3.5</u>	<u>3.5</u>	<u>3.4</u>	<u>3.4</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

1. **Section Number:** Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2011

Field Note:

Vital statistics data are used to determine the rate: infant s who died within 28 days of birth in the target year constitute the numerator, and births for that same year are used as the denominator. The rate may vary somewhat from a rate derived from matched birth-death files. 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. **Section Number:** Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2010

Field Note:

Vital statistics data are used to determine the rate: infant s who died within 28 days of birth in the target year constitute the numerator, and births for that same year are used as the denominator. The rate may vary somewhat from a rate derived from matched birth-death files.

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data.

Vital statistics data are used to determine the rate: infant s who died within 28 days of birth in the target year constitute the numerator, and births for that same year are used as the denominator. The rate may vary somewhat from a rate derived from matched birth-death files

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	1	1	1	1.7
Annual Indicator	1.9	1.8	1.7	1.5	1.5
Numerator	473	440	410	372	372
Denominator	252,662	249,655	246,592	242,913	242,913
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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	1.7	1.6	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:
 Postneonatal mortality rates are determined using infant deaths from 28d-1y in a given year, divided by infant births from the same year. This rate may vary marginally from a rate calculated using matched birth-death certificates. 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form12_Outcome Measure 4
Field Name: OM04
Row Name:
Column Name:
Year: 2010
Field Note:
 Postneonatal mortality rates are determined using infant deaths from 28d-1y in a given year, divided by infant births from the same year. This rate may vary marginally from a rate calculated using matched birth-death certificates. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form12_Outcome Measure 4
Field Name: OM04
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised with final 2009 data. Postneonatal mortality rates are determined using infant deaths from 28d-1y in a given year, divided by infant births from the same year. This rate may vary marginally from a rate calculated using matched birth-death certificates.

OUTCOME MEASURE # 05

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

	Annual Objective and Performance Data				
	2007	2008	2009	2010	2011
Annual Performance Objective	5.7	5.5	5.3	5.2	5.6
Annual Indicator	5.3	5.7	5.6	5.5	5.5
Numerator	1,343	1,415	1,397	1,348	1,348
Denominator	253,297	250,350	247,266	243,570	243,570
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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

	Annual Objective and Performance Data				
	2012	2013	2014	2015	2016
Annual Performance Objective	5.5	5.5	5.4	5.4	5.3
Annual Indicator					
Numerator					
Denominator					

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

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2011
Field Note:
 The numerator is derived from the number of infant deaths in the perinatal period plus fetal deaths, as reported on death and fetal death certificates for the year. The denominator is all births plus fetal deaths for the same year. This gives a rate that may vary somewhat from a rate calculated using matched birth-death files plus fetal deaths. 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
2. **Section Number:** Form12_Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2010
Field Note:
 The numerator is derived from the number of infant deaths in the perinatal period plus fetal deaths, as reported on death and fetal death certificates for the year. The denominator is all births plus fetal deaths for the same year. This gives a rate that may vary somewhat from a rate calculated using matched birth-death files plus fetal deaths. 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
3. **Section Number:** Form12_Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised with final 2009 data. The numerator is derived from the number of infant deaths in the perinatal period plus fetal deaths, as reported on death and fetal death certificates for the year. The denominator is all births plus fetal deaths for the same year. This gives a rate that may vary somewhat from a rate calculated using matched birth-death files plus fetal deaths.

OUTCOME MEASURE # 06

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

	Annual Objective and Performance Data				
	2007	2008	2009	2010	2011
Annual Performance Objective	9.5	9.5	9.5	9.4	13.8
Annual Indicator	15.1	15.4	13.9	13.0	13.0
Numerator	506	517	470	428	428
Denominator	3,350,465	3,353,858	3,385,568	3,299,361	3,299,361
Data Source		Vital Records	Vital Records	Vital Records	Vital Records

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

	Annual Objective and Performance Data				
	2012	2013	2014	2015	2016
Annual Performance Objective	13.6	13.5	13.3	13.2	13.1
Annual Indicator					
Numerator					
Denominator					

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

Field Level Notes

- Section Number:** Form12_Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2011
Field Note:
 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form12_Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2010
Field Note:
 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.
- Section Number:** Form12_Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2009
Field Note:
 2009 data have been revised with final 2009 data.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (a)(2)(B)(iii) AND 506 (a)(2)(A)(iii)]
STATE: NY

Form Level Notes for Form 12

None

STATE OUTCOME MEASURE # 1 - REPORTING YEAR

Maternal Mortality Rate per 100,000 Live Births

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	19.5	19	18.5	18	28.1
Annual Indicator	15.8	29.2	20.7	23.1	23.1
Numerator	40	73	51	56	56
Denominator	252,662	249,655	246,592	242,913	242,913
Data Source		Vital Records	Vital Records	Vital Records	Vital Records
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	20.3	20.1	19.9	19.7	19.5
Annual Indicator					
Numerator					
Denominator					

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

Field Level Notes

1. Section Number: Form12_State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2011

Field Note:

The maternal mortality definition has been revised to be consistent with the definition used by the World Health Organization ((ICD-10 codes O00-95, O98-O99, and A34) . The previous definition used by NYSDOH (ICD 10 codes: O00-O99) to report maternal mortality included deaths that occurred outside this time period (ICD 10 codes: O96 and O97). 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. Section Number: Form12_State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2010

Field Note:

The maternal mortality definition has been revised to be consistent with the definition used by the World Health Organization ((ICD-10 codes O00-95, O98-O99, and A34) . The previous definition used by NYSDOH (ICD 10 codes: O00-O99) to report maternal mortality included deaths that occurred outside this time period (ICD 10 codes: O96 and O97).

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form12_State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2009

Field Note:

The variability of this rate can be substantial on an annual basis, and depends on a number of factors, primary among which is the intensity with which case ascertainment is pursued. The Safe Motherhood/ Maternal Mortality initiative being implemented in NYS by the American College of Obstetricians and Gynecologists, in collaboration with DOH, has improvement in case ascertainment as one of its major foci. We should therefore expect the rate to increase somewhat in response to this effort, while the impact of educational initiatives designed to reduce maternal mortality is expected to lag behind ascertainment in terms of impact on the rate.

The maternal mortality definition has been revised to be consistent with the definition used by the World Health Organization ((ICD-10 codes O00-95, O98-O99, and A34) . The previous definition used by NYSDOH (ICD 10 codes: O00-O99) to report maternal mortality included deaths that occurred outside this time period (ICD 10 codes: O96 and O97).

STATE OUTCOME MEASURE # 2 - REPORTING YEAR

The percentage of elective deliveries, both cesarean sections and inductions, performed without appropriate indication between 36 and 38 6/7 weeks gestation

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	18.1
Annual Indicator	_____	18.1	18.2	17.5	17.5
Numerator	_____	13,439	12,886	11,803	11,803
Denominator	_____	74,408	70,639	67,530	67,530
Data Source			Vital Records	Vital Records	Vital Records
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	18.1	18	17.9	17.8	17.7
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_State Outcome Measure 2

Field Name: SO2

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. Section Number: Form12_State Outcome Measure 2

Field Name: SO2

Row Name:

Column Name:

Year: 2010

Field Note:

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

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

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

2

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

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).

0

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

3

Total Score: 10

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

1. **Section Number:** Form13_Main

Field Name: Question6

Row Name: #6. Family members of diverse cultures are involved in all of the above activities

Column Name:

Year: 2013

Field Note:

1.CSHCN Program grants to Local Health Departments allow funds to be used to provide family reimbursement for their participation in CSHCN Program activities

2.Family representatives of diverse cultures participate in the Maternal Child Health Block Grant Advisory Council, Lead Poisoning Prevention Advisory Council, and state Early Intervention Coordinating Council.

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE NY 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. To improve access to early, adequate and high quality prenatal care, with a specific focus on eliminating health disparities.
2. To improve access to comprehensive, high quality primary and preventive health care for children and adolescents, consistent with the medical home model, including children with special health care needs.
3. To eliminate disparities in health outcomes, especially with regard to low birth weight and infant mortality.
4. To prevent and reduce the incidence of overweight and obesity for infants, children and adolescents, with a focus upon reducing health disparities.
5. To reduce unintended pregnancies in adults and adolescents and improve adolescent sexual health and development, with a focus upon reducing health disparities.
6. To reduce or eliminate tobacco, alcohol and substance abuse among children and pregnant women.
7. To improve oral health, particularly for pregnant women, mothers and children, and among those with low income.
8. To eliminate childhood lead poisoning.
9. To improve diagnosis and treatment of asthma in the maternal and child health population.
10. To increase the percentage of infants who are breastfed for at least six months.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: NY

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.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Adapting and re-defining public health outcomes, services and programs as health care reform is implemented.	Public health over the years has provided health and supportive services to mothers, infants, children, CSHCN and families who were uninsured or underinsured. The landscape is now evolving and in NYS we want to ensure we maximize resources, fully understand all the provisions of health care reform impacting the people we serve, and ensure the NYSDOH and the providers serving the population evolve to best meet the needs of the MCH population.	HRSA can identify someone with expertise in ACA and Title V and other public health programs to develop an interactive webinar or a series of webinars followed by periodic conference calls with larger States (NY, Illinois, Calif, Texas, etc.) to discuss progress and ideas. Just having calls with Region 2 is not as productive due to the significant differences in size and resources.
2.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Maximizing funding stream (including Medicaid) and promoting private/public partnerships to enhance and improve public health services.	With decreasing federal dollars, it is important for State to be as resourceful as possible to continue to meet the needs of the MCH population.	HRSA can identify an expert(s) in this area, other States they may have innovative ideas, and perhaps develop a webinar or a series of webinars in this area. In addition, facilitating calls with larger State similar to NY would allow for an exchange of information and ideas.
3.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Promote State staff's ability to participate in a meaningful way in taskforces, trainings, meetings, etc.	With decreasing federal and state dollars, and significant travel restrictions, it is important for States to be as resourceful as possible to continue to meet the needs of the MCH population. The federal government has to develop more innovative ways to communicate and foster participation other than in-person meetings.	We are asking HRSA to promote, on the federal level, a different way of doing business. Meetings, trainings, expert panels, etc. should be conducted in a virtual format to increase the number and expertise of State staff who will benefit from these activities. Merely arranging a conference call when other staff attend in person is not effective. Programs need to be developed to be conducted in a virtual format.
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: NY

SP() # _____ 1

PERFORMANCE MEASURE:

The percentage of infants born to Black and Hispanic women receiving prenatal care beginning in the first trimester.

STATUS:

Active

GOAL:

Increase the percentage of Black and Hispanic women receiving early prenatal care.

DEFINITION:

Percentage of births to Black non-Hispanic and Hispanic women who started prenatal care during their first trimester.

Numerator:

Number of births to Black non-Hispanic and Hispanic women who started prenatal care during their first trimester.

Denominator:

Number of births to Black non-Hispanic and Hispanic women (excluding births with unknown prenatal care start dates).

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

NYS Vital Records

SIGNIFICANCE

It is essential that women, especially high risk women, receive early prenatal care where their needs can be assessed, and they can be provided with necessary health and psychosocial supports. While health disparities related to early entry prenatal care have improved somewhat in the last decade, they still remain significant, highlighting the specific importance of monitoring prenatal care for minority populations.

SP() # 2

PERFORMANCE MEASURE:

The percentage of Medicaid enrolled children between the ages of 3 and 6 years who had a well-child and preventive health visit in the past year

STATUS:

Active

GOAL

To increase the percent of children in the 3-6 age group who have an annual preventive health visit

DEFINITION

The percentage of Medicaid enrolled children ages 3-6 years with a well child and preventive health visit in the past year.

Numerator:

Number of medicaid enrolled children (ages 3-6) who have had a well child preventive health visit

Denominator:

Number of medicaid enrolled children (ages 3-6) years.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Source: The NYS Quality Assurance Reporting Requirements (QARR)- report of managed care plan performance. Data only include information for enrollees in managed care programs.

SIGNIFICANCE

Having health insurance alone does not assure access to or utilization of necessary health care services. Well child preventive visits are an essential component of high quality health care.

SP() # _____ 3

PERFORMANCE MEASURE:

The ratio of the Black infant low birth weight rate to the White infant low birth weight rate

STATUS:

Active

GOAL

To reduce the disparity between the White and Black low birth weight rates

DEFINITION

Ratio of Black to White low birth weight rates

Numerator:

The percent of Black infants born weighing less than 2500 grams

Denominator:

The percent of White infants born weighing less than 2500 grams

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

NYS Vital Records

SIGNIFICANCE

Elimination of health disparities is a high priority for the Department and the Governor and permeates the work of the department. The Black low birth weight rate in NYS is about double the rate of the White rate.

SP() # _____ 4

PERFORMANCE MEASURE:

The percentage of high school students who were overweight or obese

STATUS:

Active

GOAL

To reduce the percentage of adolescents who are overweight or obese

DEFINITION

The percentage of high school students who were overweight or obese (i.e., at or above the 85th percentile for body mass index, by age and sex)

Numerator:

The number of high school students with BMIs above the 85th percentile by age and sex.

Denominator:

The number of high school students

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The NYS Youth Risk Behavior Survey

SIGNIFICANCE

Research indicates that adult morbidity and mortality are increased by childhood obesity, even if the condition does not persist into adulthood. However, in general, overweight and obesity tend to track or persist from childhood into adolescence and adulthood. The older the child/adolescent and the greater the obesity, the more likely that child/adolescent obesity will persist.

SP() # 5

PERFORMANCE MEASURE:

The ratio of the Hispanic teen (ages 15-17) pregnancy rate to the non-Hispanic White teen (ages 15-17) pregnancy rate

STATUS:

Active

GOAL

To reduce the disparity in teen pregnancy rates between Hispanic and non-Hispanic White teen girls.

DEFINITION

The ratio of the Hispanic teen (ages 15-17) pregnancy rate to the non-Hispanic White teen (ages 15-17) pregnancy rate

Numerator:

The rate of pregnancies (including abortions, spontaneous fetal deaths, and births) to Hispanic females aged 15-17 years old.

Denominator:

The rate of pregnancies (including abortions, spontaneous fetal deaths, and births) to non-Hispanic White females aged 15-17 years old.

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Vital Records are the source for data on mothers' age and pregnancies. Population numbers are estimated by the Bureau of Biometrics, NYS Health Department.

SIGNIFICANCE

Adolescent sexual activity can have life-changing or life-threatening consequences, unintended pregnancy and infection with sexually transmitted diseases or HIV. Teen parenting is associated with non-completion of high school. While NYS has been successful in reducing teen pregnancies over the past decade, rates of pregnancy among Hispanic teens is more than double the rate for White teens.

SP() # _____ 6

PERFORMANCE MEASURE:

Percent of High School Students Who Smoked Cigarettes in the Last Month

STATUS:

Active

GOAL

To reduce smoking among adolescents.

DEFINITION

The rate of current smoking among high school students.

Numerator:

The number of high school students that reported smoking at least one cigarette during the last month.

Denominator:

The number of high school students

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The New York State Youth Risk Behavior Survey

SIGNIFICANCE

Tobacco is an addictive substance. Tobacco causes more disease and death in NYS than any other pathogen. Tobacco causes 30% of all cancer deaths, 82% of all deaths due to pulmonary disease, and 21% of deaths due to chronic cardiac disease. More than 1,500 fire deaths and 4,600 injuries in the US are attributable to cigarettes. Most (89%) of adult smokers initiated their habit while young, under the age of 18. 71% of adult smokers reported that they began smoking daily before age 18.

SP() # _____ 7

PERFORMANCE MEASURE:

The percentage of Medicaid enrolled children and adolescents between the ages of 2-21 years who had at least one dental visit within the last year

STATUS:

Active

GOAL

To increase dental visits among children and adolescents living in low income households

DEFINITION

The percentage of Medicaid enrolled children and adolescents between the ages of 2-21 years who had at least one dental visit within the last year

Numerator:

Medicaid enrolled children and adolescents(ages 2-21) who had at least one dental visit in the last year

Denominator:

Medicaid enrolled children and adolescents (ages 2-21)

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Source: The NYS Quality Assurance Reporting Requirements (QARR)- report of managed care plan performance. Data only include information for enrollees in managed care programs.

SIGNIFICANCE

Tooth decay, the most common chronic childhood disease impacts children's functioning, including eating, growth and speaking and learning. In the US, children are estimated to lose over 51 million school hours annually because of dental problems and dental visits.

SP() # _____ 8

PERFORMANCE MEASURE:

Percentage of children who were tested for lead two or more times before the age of three.

STATUS:

Active

GOAL

To identify all children who have been exposed to high levels of lead.

DEFINITION

Percentage of children who were tested for high lead levels two or more times before the age of three.

Numerator:

Number of children in the birth year cohort who have been screened two or more times for high blood lead levels before the age of three.

Denominator:

Number of children in the birth year cohort

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

NYS Heavy metals and Childhood Lead Registry, the data base for the NYS Childhood Lead Poisoning Prevention Program, is the source for these data. The NYSDOH Bureau of Biometrics provides population estimates.

SIGNIFICANCE

Childhood lead poisoning is a serious health problem that can have devastating permanent effects on children's physical, social, behavioral and cognitive development, with serious social and economic repercussions for society as a whole.

SP() # _____ 9

PERFORMANCE MEASURE:

Hospitalization Rate for Asthma in Children Ages 0 to 17 years.

STATUS:

Active

GOAL

To reduce asthma morbidity among children.

DEFINITION

Rate of asthma hospitalizations per 10,000 children ages 0 to 17.

Numerator:

Number of hospitalizations for asthma (ICD9 493) among children ages 0 to 17.

Denominator:

Number of children ages 0 to 17

Units: 10000 **Text:** Rate

HEALTHY PEOPLE 2020 OBJECTIVE

1-9. Hospitalization for ambulatory-care-sensitive conditions

1-9a. Reduce hospitalization rates for pediatric asthma (persons under age 18 years) to no more than 17.3 per 10,000 persons aged less than 18 years.

DATA SOURCES AND DATA ISSUES

The NYS SPARCS Data System is the source for the hospitalization data. The NYSDOH Bureau of Biometrics provides population estimates.

SIGNIFICANCE

Increased asthma prevalence among children and the associated morbidity due to exacerbations and persistent symptoms present a huge burden to affected individuals and their families. In the US, over 10 million school days are lost annually by children with asthma. Consequently lost productivity of their parents was almost \$1M. Patients with inadequately controlled severe asthma have high expenditures in health care costs, especially in terms of hospitalizations. The social and economic burdens of asthma can be alleviated through appropriate asthma prevention and management strategies.

SP() # 10

PERFORMANCE MEASURE:

The percentage of infants who were exclusively fed breast milk between birth and hospital discharge

STATUS:

Active

GOAL

To increase the rate of infants who are exclusively fed breast milk

DEFINITION

The percentage of infants who were exclusively fed breast milk between birth and hospital discharge

Numerator:

The number of in-born infants, excluding those transferred to the neonatal intensive care unit, who are exclusively fed breast milk between birth and discharge

Denominator:

The total number of in-born infants who are not transferred to neonatal intensive care unit.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Statewide Perinatal Data System

SIGNIFICANCE

The U.S. Surgeon General recommends that babies be fed only breast milk for the first six months of their lives. The public health benefits of breastfeeding have long been recognized. Human milk is uniquely adapted to the nutritional needs of infants and provides for optimal growth and development. Breast milk is easy to digest and contains antibodies that help reduce the infants risk of infection.

SO() # _____ 1

OUTCOME MEASURE:

Maternal Mortality Rate per 100,000 Live Births

STATUS:

Active

GOAL

To reduce the number of maternal deaths

DEFINITION

Deaths from causes related to pregnancy

Numerator:

Number of deaths occurring to women from causes related to pregnancy (ICD10:A34,O00-O95,O98-O99)

Denominator:

Number of Live Births

Units: 100000 **Text:** Rate

HEALTHY PEOPLE 2020 OBJECTIVE

Reduce the maternal mortality rate to no more than 3.3 per 100,000 live births

DATA SOURCES AND DATA ISSUES

Source: Vital Records Issues: Maternal death as cause of death are under reported. More aggressive case ascertainment results in what appear to be higher rates.

SIGNIFICANCE

Due to general improvement in social and economic conditions and medical practices, maternal deaths are rare occurrences. However, in recent years in both the U.S. and in New York State, the rate of maternal deaths has been increasing. New York State is revising its protocol for maternal mortality reviews with a focus upon prevention of future deaths. It is critical to continue to track the rate of maternal deaths to determine whether this effort will have a positive effect on reducing mortality.

SO() # 2

OUTCOME MEASURE:

The percentage of elective deliveries, both cesarean sections and inductions, performed without appropriate indication between 36 and 38 6/7 weeks gestation

STATUS:

Active

GOAL

To reduce the rate of elective deliveries performed without indication

DEFINITION

Rate of elective deliveries per 100 performed without appropriate indication among women between 36 and 38 6/7 weeks gestation.

Numerator:

Number of elective deliveries performed without appropriate indication among women between 36 and 38 6/7 weeks gestation.

Denominator:

Number of elective deliveries performed among women between 36 and 38 6/7 weeks gestation.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Statewide Perinatal Data System

SIGNIFICANCE

Cesarean section rates have risen nationally over the past decade. Between 1996 and 2005, the national c-section rate rose by 46% due, in part, to increases in the percent of women having first time c-section deliveries and a reduction in the percentage of vaginal births after c-section. The c-section rate in NYS reflects the national trend.

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: NY

Form Level Notes for Form 17

None

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.

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
Annual Indicator	46.5	58.1	61.3	55.5	55.5
Numerator	5,569	7,022	7,502	6,418	6,418
Denominator	1,196,688	1,208,495	1,223,080	1,155,822	1,155,822

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: 2011

Field Note:

Data Source: Statewide Planning and Research Cooperative System (SPARCS). 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2010

Field Note:

Data Source: Statewide Planning and Research Cooperative System (SPARCS). 2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data are have been revised using 2009 final data. Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

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	<u>Annual Indicator Data</u>		
			2009	2010	2011
Annual Indicator	<u>72.7</u>	<u>77.6</u>	<u>76.3</u>	<u>77.3</u>	<u>77.6</u>
Numerator	<u>108,995</u>	<u>117,580</u>	<u>116,490</u>	<u>113,092</u>	<u>114,770</u>
Denominator	<u>149,958</u>	<u>151,439</u>	<u>152,710</u>	<u>146,242</u>	<u>147,852</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

1. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2011

Field Note:

Data are for children enrolled in both MA Fee-For-Service and MA Managed Care.

Source: NYS DOH Center for Medicare/Medicaid Services (OMS-416).

2. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2010

Field Note:

Data are for children enrolled in both MA Fee-For-Service and MA Managed Care.

Source: NYS DOH Center for Medicare/Medicaid Services (OMS-416).

3. **Section Number:** Form17_Health Systems Capacity Indicator #02

Field Name: HSC02

Row Name:

Column Name:

Year: 2009

Field Note:

Data are for children enrolled in both Medicaid Fee-for-service and Medicaid Managed Care. Data for 2008 has been finalized.

Source: NYS DOH Center for Medicare/Medicaid Services (OMS-416).

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	99	99.2	99.3	99.4	99.4
Numerator	_____	1,136	1,580	1,900	1,900
Denominator	_____	1,145	1,591	1,911	1,911
<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.</p> <p><i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>					
				Final	Provisional

Field Level Notes

- Section Number:** Form17_Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2011
Field Note:
 Results are for children continuously enrolled in managed care plans who are 15 months of age in the calendar year. 2007 data excluded invalid data from one plan, resulting in a smaller denominator. Reliable data for Child Health Plus enrollees specifically under age one is not available. As a proxy, the percentage of children under age 15 months who received at least one well child or preventive health visit is used. Data reported for 2006 was the percentage of children who received five or more well child visits by age 15 months. Data Source is the Quality Assurance Reporting Requirements (QARR). 2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.
- Section Number:** Form17_Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2010
Field Note:
 Results are for children continuously enrolled in managed care plans who are 15 months of age in the calendar year. 2007 data excluded invalid data from one plan, resulting in a smaller denominator. Reliable data for Child Health Plus enrollees specifically under age one is not available. As a proxy, the percentage of children under age 15 months who received at least one well child or preventive health visit is used. Data reported for 2006 was the percentage of children who received five or more well child visits by age 15 months. This measure is collected on a rotating basis, so new data is not available for all years. 2009 data are used as a proxy for 2010. 2010 data will be reported in late 2011. Data Source is the Quality Assurance Reporting Requirements (QARR).
- Section Number:** Form17_Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2009
Field Note:
 Data are for the percent of children aged 15 months who received 1 well child or preventive visit is used. Since 1999 measures have been calculated using a data source in which the percentage is weighted by plan enrollment. Since the rate is a weighted rate the numerator and denominator are not available.

Source: NYS DOH, Center for Medicare/Medicaid Services

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	63.5	65.5	66.0	66.9	66.9
Numerator	126,795	124,528	148,291	152,108	152,108
Denominator	199,659	190,222	224,556	227,334	227,334

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: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYSDOH Vital Records

2. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2010

Field Note:

Source: NYSDOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data.

Source: NYS DOH Vital Records

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	94.4	90.0	90.7	87.4	87.0
Numerator	1,909,170	1,805,488	1,876,851	1,878,851	1,910,587
Denominator	2,021,928	2,006,098	2,068,245	2,150,748	2,196,077

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 #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2011

Field Note:

The number of potentially eligible children is based on the number of children enrolled in Medicaid.
Source: NYS DOH Center for Medicare/Medicaid Services (CMS-416).

2. **Section Number:** Form17_Health Systems Capacity Indicator #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2010

Field Note:

The number of potentially eligible children is based on the number of children enrolled in Medicaid.
Source: NYS DOH Center for Medicare/Medicaid Services (CMS-416).

3. **Section Number:** Form17_Health Systems Capacity Indicator #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2009

Field Note:

The number of potentially eligible children is based on the number of children enrolled in Medicaid

Source: NYS DOH Center for Medicare/Medicaid Services (CMS-416).

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
Annual Indicator	<u>46.4</u>	<u>46.4</u>	<u>50.1</u>	<u>51.1</u>	<u>52.5</u>
Numerator	<u>166,217</u>	<u>166,217</u>	<u>186,258</u>	<u>200,375</u>	<u>212,043</u>
Denominator	<u>358,116</u>	<u>358,116</u>	<u>371,495</u>	<u>391,812</u>	<u>403,816</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

1. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2011

Field Note:

Source: NYS DOH Center for Medicare/Medicaid Services.

2. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2010

Field Note:

Source: NYS DOH Center for Medicare/Medicaid Services.

3. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data.

Source: NYS DOH Center for Medicare/Medicaid Services.

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.

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
Annual Indicator	0	0	0	0	0
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
<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

Field Level Notes

- Section Number:** Form17_Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2011
Field Note:
 NYS has two Title V public health programs that assist families of children with special health care needs (CSHCN) access services and supports. The state CSHCN Program, through its local contractors, provides families of CSHCN with linkages and referrals to services and assistance programs, including SSI. The State Physically Handicapped Children's Program (PHCP), administered by Local Health Departments, provides reimbursement of medical services for children who are uninsured or underinsured. In NYS, all SSI beneficiaries are categorically eligible for Medicaid which provides a more comprehensive benefit package than PHCP and provides rehabilitative services. As a result, CSHCN on SSI in NYS access their rehabilitative services through Medicaid instead of the State's PHCP.
- Section Number:** Form17_Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2010
Field Note:
 NYS has two Title V public health programs that assist families of children with special health care needs (CSHCN) access services and supports. The state CSHCN Program, through its local contractors, provides families of CSHCN with linkages and referrals to services and assistance programs, including SSI. The State Physically Handicapped Children's Program (PHCP), administered by Local Health Departments, provides reimbursement of medical services for children who are uninsured or underinsured. In NYS, all SSI beneficiaries are categorically eligible for Medicaid which provides a more comprehensive benefit package than PHCP and provides rehabilitative services. As a result, CSHCN on SSI in NYS access their rehabilitative services through Medicaid instead of the State's PHCP.
- Section Number:** Form17_Health Systems Capacity Indicator #08
Field Name: HSC08
Row Name:
Column Name:
Year: 2009
Field Note:
 All SSI beneficiaries receive Medicaid which is a more generous package than that available under the Physically Handicapped Children's Program. In 2008, 2 percent of children enrolled in the CSHCN Program had SSI

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

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2010	Payment source from birth certificate	8.5	8	8.2
b) <i>Infant deaths per 1,000 live births</i>	2009	Matching data files	5.6	4.9	5.6
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2010	Payment source from birth certificate	63	81.9	73.2
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>	2010	Payment source from birth certificate	58.7	73.9	66.9

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

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	_____200_____
b) <i>Medicaid Children</i> (Age range _____1 to _____18) (Age range _____ to _____) (Age range _____ to _____)	2011	_____400_____
c) <i>Pregnant Women</i>	2011	_____200_____

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

INDICATOR #06 The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2011	_____200
b) <i>Medicaid Children</i> (Age range _____ 1 to _____ 18) (Age range _____ to _____) (Age range _____ to _____)	2011	_____400 _____ _____
c) <i>Pregnant Women</i>	2011	_____400

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

1. **Section Number:** Form18_Indicator 05
Field Name: InfantDeath
Row Name: Infant deaths per 1,000 live births
Column Name:
Year: 2013
Field Note:
Source: Vital Records 2009 matched birth death file.
Medicaid also includes Family Health Plus
Non-Medicaid = HMO, Private Insurance, Indian Health Service, CHAMPUS/TRICARE and Other Government. There were 13 infant deaths with an unknown payer.
2. **Section Number:** Form18_Indicator 05
Field Name: CareFirstTrimester
Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
Column Name:
Year: 2013
Field Note:
n
3. **Section Number:** Form18_Indicator 05
Field Name: AdequateCare
Row Name: Percent of pregnant women with adequate prenatal care
Column Name:
Year: 2013
Field Note:
n

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

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

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

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

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

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other: <u>New York State Youth Tobacco Survey</u>	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: NY

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	8.1	8.2	8.2	8.2	8.2
Numerator	<u>20,560</u>	<u>20,471</u>	<u>20,226</u>	<u>19,910</u>	<u>19,910</u>
Denominator	<u>252,662</u>	<u>249,665</u>	<u>246,360</u>	<u>242,693</u>	<u>242,693</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 #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. **Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2010

Field Note:

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data. Source: NYS DOH Vital Records

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	6.2	6.3	6.2	6.2	6.2
Numerator	14,994	15,081	14,587	14,489	14,489
Denominator	242,655	240,075	236,463	233,203	233,203

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 #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2011**Field Note:**

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2010**Field Note:**

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data have been revised with final 2009 data. Source: NYS DOH Vital Records

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	1.5	1.5	1.5	1.5	1.5
Numerator	3,716	3,733	3,763	3,683	3,683
Denominator	252,662	249,655	246,360	242,663	242,663

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 #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. Section Number: Form20_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2010

Field Note:

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data. Source: NYS DOH Vital Records

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	1.1	1.1	1.1	1.1	1.1
Numerator	2,720	2,706	2,611	2,670	2,670
Denominator	242,655	240,075	236,463	233,203	233,203

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 #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2011**Field Note:**

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2010**Field Note:**

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data have been revised with final 2009 data. Source: NYS DOH Vital Records

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	4.7	4.3	3.4	3.8	3.8
Numerator	168	155	123	135	135
Denominator	3,597,289	3,604,140	3,633,448	3,531,233	3,531,233

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 #03A**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2011**Field Note:**

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. Section Number: Form20_Health Status Indicator #03A**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2010**Field Note:**

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #03A**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data have been revised with final 2009 data. Source: NYS DOH Vital Records

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
Annual Indicator	1.3	1.2	1.0	1.3	1.3
Numerator	48	43	37	47	47
Denominator	3,597,289	3,604,140	3,633,448	3,531,233	3,531,233

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:** 2011**Field Note:**

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. Section Number: Form20_Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2010**Field Note:**

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data have been revised with final 2009 data. Source NYS DOH Vital Records

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
Annual Indicator	11.2	8.6	9.5	9.2	9.2
Numerator	313	240	258	255	255
Denominator	2,790,818	2,802,996	2,714,522	2,777,213	2,777,213

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:** 2011**Field Note:**

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: NYS DOH Vital Records

2. Section Number: Form20_Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2010**Field Note:**

Source: NYS DOH Vital Records

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data have been revised with final 2009 data. Source: NYS DOH Vital Records

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	270.3	253.0	244.7	246.1	246.1
Numerator	9,722	9,118	8,882	8,691	8,691
Denominator	3,597,289	3,604,140	3,633,448	3,531,233	3,531,233

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 #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

2. Section Number: Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2010

Field Note:

Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

2010 data have been updated and finalized since NYS's previous MCH blockgrant application submission.

3. Section Number: Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with 2009 final data. Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

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
Annual Indicator	29.0	25.8	23.0	22.7	22.7
Numerator	1,044	929	835	802	802
Denominator	3,597,289	3,604,140	3,633,448	3,531,233	3,531,233

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: 2011

Field Note:

Non-fatal MV related injuries include pedestrians and cyclists

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

2. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2010

Field Note:

Non-fatal MV related injuries include pedestrians and cyclists Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2009

Field Note:

2009 have been revised with final 2009 data.

Non-fatal MV related injuries include pedestrians and cyclists

Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

HEALTH STATUS INDICATOR #04C

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

Annual Indicator Data

	2007	2008	2009	2010	2011
Annual Indicator	122.1	103.4	103.0	96.1	96.1
Numerator	3,407	2,898	2,796	2,670	2,670
Denominator	2,790,818	2,802,996	2,714,522	2,777,213	2,777,213

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 #04C

Field Name: HSI04C**Row Name:****Column Name:****Year:** 2011**Field Note:**

Non-fatal MV related injuries include pedestrians and cyclists.

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

2. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C**Row Name:****Column Name:****Year:** 2010**Field Note:**

Non-fatal MV related injuries include pedestrians and cyclists. Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data have been revised with final 2009 data.

Non-fatal MV related injuries include pedestrians and cyclists

Source: Statewide Planning & Research Cooperative System (SPARCS - Hospital Discharge Data)

HEALTH STATUS INDICATOR #05A

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	29.8	33.7	36.1	38.0	38.0
Numerator	20,378	23,104	24,085	25,326	25,326
Denominator	683,829	686,495	667,979	666,730	666,730

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 #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2011

Field Note:

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

.Source: NYS Bureau of Sexually Transmitted Disease Prevention.

2. Section Number: Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2010

Field Note:

.Source: NYS Bureau of Sexually Transmitted Disease Prevention.

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with final 2009 data. Source: NYS Bureau of Sexually Transmitted Disease Prevention

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	10.0	10.6	11.1	11.9	11.9
Numerator	34,020	35,910	37,183	40,244	40,244
Denominator	3,395,372	3,389,687	3,354,554	3,381,217	3,381,217

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 #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2011

Field Note:

Source: NYS Bureau of Sexually Transmitted Disease Prevention.

2010 data are being used as a proxy for 2011 data. 2011 data will be available by May 2013.

2. Section Number: Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2010

Field Note:

Source: NYS Bureau of Sexually Transmitted Disease Prevention

2010 data have been updated and finalized since NYS's previous MCH block grant application submission.

3. Section Number: Form20_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data have been revised with 2009 final data. Source: NYS Bureau of Sexually Transmitted Disease Prevention

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NY

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? Provisional

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	231,872	160,214	49,610	3,570	18,478	0	0	0
Children 1 through 4	923,950	639,069	197,022	14,219	73,640	0	0	0
Children 5 through 9	1,163,955	810,056	244,931	17,151	91,817	0	0	0
Children 10 through 14	1,211,456	842,503	261,066	17,117	90,780	0	0	0
Children 15 through 19	1,366,278	938,242	304,757	19,361	103,918	0	0	0
Children 20 through 24	1,410,935	973,243	288,449	19,392	129,851	0	0	0
Children 0 through 24	6,308,446	4,363,327	1,345,825	90,810	508,484	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	173,811	58,061	0
Children 1 through 4	697,800	226,150	0
Children 5 through 9	901,493	262,462	0
Children 10 through 14	954,093	257,363	0
Children 15 through 19	1,075,034	291,244	0
Children 20 through 24	1,110,564	300,371	0
Children 0 through 24	4,912,795	1,395,651	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NY

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? Final

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	185	103	60	2	0	0	0	20
Women 15 through 17	4,330	2,425	1,359	16	55	0	0	475
Women 18 through 19	10,749	6,471	3,028	62	179	0	0	1,009
Women 20 through 34	179,213	118,039	31,222	4,998	12,370	0	0	12,584
Women 35 or older	48,427	32,958	7,273	1,124	4,361	0	0	2,711
Women of all ages	242,904	159,996	42,942	6,202	16,965	0	0	16,799

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	92	93	0
Women 15 through 17	2,422	1,908	0
Women 18 through 19	6,758	3,991	0
Women 20 through 34	135,081	44,132	0
Women 35 or older	39,796	8,631	0
Women of all ages	184,149	58,755	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NY

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	1,227	664	412	0	62	7	13	69
Children 1 through 4	174	111	46	2	8	0	3	4
Children 5 through 9	106	64	30	1	6	0	3	2
Children 10 through 14	148	100	40	1	4	1	0	2
Children 15 through 19	502	315	154	0	11	0	8	14
Children 20 through 24	939	612	262	5	29	4	4	23
Children 0 through 24	3,096	1,866	944	9	120	12	31	114

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	934	285	8
Children 1 through 4	143	31	0
Children 5 through 9	86	20	0
Children 10 through 14	123	25	0
Children 15 through 19	398	101	3
Children 20 through 24	779	160	0
Children 0 through 24	2,463	622	11

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NY

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? Provisional

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	4,897,511	3,390,084	1,057,376	71,418	378,633	0	0	0	2010
Percent in household headed by single parent	27.4	20.4	49.0	39.0	10.2	37.1	36.2	37.9	2010
Percent in TANF (Grant) families	4.2	0.0	0.0	0.0	0.0	0.0	0.0	4.2	2011
Number enrolled in Medicaid	2,195,999	0	0	0	0	0	0	2,195,999	2011
Number enrolled in SCHIP	390,556	0	0	0	0	0	0	390,556	2011
Number living in foster home care	23,182	0	0	0	0	0	0	23,182	2010
Number enrolled in food stamp program	1,146,977	0	0	0	0	0	0	1,146,977	2010
Number enrolled in WIC	502,099	140,514	114,655	5,448	40,198	0	10,032	191,252	2010
Rate (per 100,000) of juvenile crime arrests	2,665.5	0.0	0.0	0.0	0.0	0.0	0.0	2,665.5	2010
Percentage of high school drop-outs (grade 9 through 12)	2.7	0.0	0.0	0.0	0.0	0.0	0.0	2.7	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	3,802,231	1,095,280	0	2010
Percent in household headed by single parent	24.4	37.7	37.9	2010
Percent in TANF (Grant) families	0.0	0.0	4.2	2011
Number enrolled in Medicaid	0	0	2,195,999	2011
Number enrolled in SCHIP	0	0	390,556	2011
Number living in foster home care	0	0	23,182	2010
Number enrolled in food stamp program	0	0	1,146,977	2010
Number enrolled in WIC	0	0	191,252	2010
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	2,665.5	2010
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	2.7	2010

FORM 21
 HEALTH STATUS INDICATORS
 DEMOGRAPHIC DATA
 STATE: NY

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? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	4,505,710
Living in urban areas	4,505,710
Living in rural areas	391,801
Living in frontier areas	0
Total - all children 0 through 19	4,897,511

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

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NY

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? Final

POVERTY LEVELS	TOTAL
Total Population	19,378,102
Percent Below: 50% of poverty	7.7
100% of poverty	16
200% of poverty	32.8

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: NY

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? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	4,897,511
Percent Below: 50% of poverty	12.2
100% of poverty	24.2
200% of poverty	42.2

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2013
Field Note:
Source: NCHS Population Estimates - Bridged Race Vintage 2010
2. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau, 2010 Census, Tables P31A-H
3. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2013
Field Note:
Source: US HHS, Administration for Children and Families, 2011 CY TANF Report as of 4/03/2012. Based on 207,465 children in TANIF families.
4. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2013
Field Note:
Source: NYS Department of Health, Center for Medicare/Medicaid Services FFY 2011 (CMS-416)
5. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2013
Field Note:
Source: NYS Department of Health, Office of Insurance Programs, data as of May 2012.
6. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2013
Field Note:
Source: Office of Temporary and Disability Assistance, Welfare Management System, 2010.
7. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2013
Field Note:
Source: NYS Pediatric Nutrition Survey, 2010
8. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2013
Field Note:
Source: NYS Division of Criminal Justice Services, Computerized Criminal History Report. Data includes 44,233 arrests among youth ages 16-21. the rate is based on a population of 1,659,474 youth ages 16-21.
9. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2013
Field Note:
Source: nYS Department of Education, drop-out rate is for public schools for the 2010-2011 school year.
10. **Section Number:** Form21_Indicator 09B
Field Name: HSIethnicity_Children
Row Name: All children 0 through 19
Column Name:
Year: 2013
Field Note:
NCHS Population Estimates - Bridged Race Vintage 2010.
11. **Section Number:** Form21_Indicator 09B
Field Name: HSIethnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2013
Field Note:

Source: U.S. Census Bureau, 2010 Census - Tables P31 and P31H

12. **Section Number:** Form21_Indicator 09B
Field Name: HSIethnicity_WCNo
Row Name: Number enrolled in WC
Column Name:
Year: 2013
Field Note:
Source: NYS Pediatric Nutrition Surveillance System, 2010.
13. **Section Number:** Form21_Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2013
Field Note:
Population living in Rural (8%) and Urban areas based on 2011 State Fact Sheet, USDA, Economic Research Service. Child Population is from the U.S. Census Bureau, 2010 Census.
14. **Section Number:** Form21_Indicator 10
Field Name: Urban
Row Name: Living in urban areas
Column Name:
Year: 2013
Field Note:
Population living in Rural (8%) and Urban areas based on 2011 State Fact Sheet, USDA, Economic Research Service. Child Population is from the U.S. Census Bureau, 2010 Census.
15. **Section Number:** Form21_Indicator 10
Field Name: Rural
Row Name: Living in rural areas
Column Name:
Year: 2013
Field Note:
Population living in Rural (8%) and Urban areas based on 2011 State Fact Sheet, USDA, Economic Research Service. Child Population is from the U.S. Census Bureau, 2010 Census.
16. **Section Number:** Form21_Indicator 11
Field Name: S11_total
Row Name: Total Population
Column Name:
Year: 2013
Field Note:
U.S. Census Bureau, 2010 Census
17. **Section Number:** Form21_Indicator 11
Field Name: S11_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement (2010 data)
18. **Section Number:** Form21_Indicator 11
Field Name: S11_100percent
Row Name: 100% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement (2010 data)
19. **Section Number:** Form21_Indicator 11
Field Name: S11_200percent
Row Name: 200% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement (2010 data)
20. **Section Number:** Form21_Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2013
Field Note:
U.S. Census Bureau, 2010 Census
21. **Section Number:** Form21_Indicator 12
Field Name: S12_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement (2010 data)
22. **Section Number:** Form21_Indicator 12
Field Name: S12_100percent
Row Name: 100% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement (2010 data)
23. **Section Number:** Form21_Indicator 12
Field Name: S12_200percent
Row Name: 200% of poverty
Column Name:

Year: 2013

Field Note:

Source: U.S. Census Bureau, Current Population Survey, 2011 Annual Social and Economic Supplement (2010 data)

24. Section Number: Form21_Indicator 09A

Field Name: HSIRace_FosterCare

Row Name: Number living in foster home care

Column Name:

Year: 2013

Field Note:

Source: NYS Office of Children and Family Services; Child Care Review Services