Improving Maternal Health for Our Communities: Key Programming to Advance the Health and Well-being of Women, Children, and Families

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Maternal and Child Health Bureau (MCHB)
Health Resources and Services Administration (HRSA)
Objectives

• Provide an overview of HRSA’s MCHB

• Highlight key programs to improve maternal health
  • Title V MCH Services Block Grant to States
  • Maternal, Infant, and Early Childhood Home Visiting Program
  • Healthy Start Initiative: Eliminating Disparities in Perinatal Health
  • Maternal Mortality Portfolio

• Inspire future engagement with MCHB among medical and dental communities
Maternal and Child Health Bureau

Mission:
Improve the health of America’s mothers, children, and families.
Maternal and Child Health Bureau
FY 2019 Total Budget: $1.33 billion

<table>
<thead>
<tr>
<th>Maternal and Child Health Bureau Programs</th>
<th>FY2019 Enacted</th>
<th>+/- from FY18 Enacted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal and Child Health Block Grant</td>
<td>$677.7</td>
<td>+$26.0</td>
</tr>
<tr>
<td>Maternal, Infant, and Early Childhood Home Visiting</td>
<td>$400.0</td>
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</tr>
<tr>
<td>Healthy Start Initiative</td>
<td>$122.5</td>
<td>+$12.0</td>
</tr>
<tr>
<td>Autism and Other Developmental Disabilities</td>
<td>$50.6</td>
<td>+1.5</td>
</tr>
<tr>
<td>Emergency Medical Services for Children</td>
<td>$22.3</td>
<td>---</td>
</tr>
<tr>
<td>Universal Newborn Hearing Screening</td>
<td>$17.8</td>
<td>---</td>
</tr>
<tr>
<td>Heritable Disorders</td>
<td>$16.4</td>
<td>+$0.5</td>
</tr>
<tr>
<td>Pediatric Mental Health Care Access</td>
<td>$10.0</td>
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</tr>
<tr>
<td>Family-to-Family Health Information Centers</td>
<td>$6.0</td>
<td>---</td>
</tr>
<tr>
<td>Screening and Treatment for Maternal Depression</td>
<td>$5.0</td>
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</tr>
<tr>
<td>Sickle Cell service Demonstration Program</td>
<td>$4.5</td>
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Title V MCH Services Block Grant to States

Overview

Established in 1935 under the Social Security Act, Title V is the nation’s oldest federal-state partnership.

Purpose is to create federal/state partnerships that support service systems for addressing the needs of maternal and child health populations.

Formula grant under which funds are awarded to 59 states and jurisdictions.
Title V: Key Features

Guidelines for Funding

- At least 30% of funds for children with special health needs
- At least 30% for preventive and primary care services for children
- Max of 10% for administration

5-Year Needs Assessment

- Engage broad group of MCH stakeholders
- Identify state priorities, capacity, and emerging issues

Annual Application & Report

- Describe state activities related to priorities
- Report on performance measures
- Complete review with federal project officer

FLEXIBILITY

ACCOUNTABILITY
Title V: National Performance Measures (NPMs)

- 15 national performance measures across five domains
- Align with state needs and priorities

<table>
<thead>
<tr>
<th>National Performance Priority Areas</th>
<th>States Selecting NPM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well-woman visit</td>
<td>46</td>
</tr>
<tr>
<td>Low-risk cesarean delivery</td>
<td>7</td>
</tr>
<tr>
<td>Risk Appropriate Perinatal Care</td>
<td>15</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>49</td>
</tr>
<tr>
<td>Safe sleep</td>
<td>32</td>
</tr>
<tr>
<td>Developmental screening</td>
<td>40</td>
</tr>
<tr>
<td>Injury Hospitalization</td>
<td>21</td>
</tr>
<tr>
<td>Physical activity</td>
<td>24</td>
</tr>
<tr>
<td>Bullying</td>
<td>12</td>
</tr>
<tr>
<td>Adolescent well-visit</td>
<td>37</td>
</tr>
<tr>
<td>Medical home</td>
<td>44</td>
</tr>
<tr>
<td>Transition</td>
<td>36</td>
</tr>
<tr>
<td>Preventive Dental Visit (Pregnancy or Child/Adolescent)</td>
<td>22</td>
</tr>
<tr>
<td>Smoking (Pregnancy or Household)</td>
<td>26</td>
</tr>
<tr>
<td>Adequate insurance</td>
<td>8</td>
</tr>
</tbody>
</table>
Title V: Performance Measurement System

National Outcome Measure
- Maternal mortality or severe maternal morbidity

National Performance Measures
- Well-woman visit
- Smoking during pregnancy
- Low-risk cesarean delivery

State Action Plan
- Monitor social media messaging promoting women’s preventive health services
- Increase referrals of pregnant women to quit lines
- Promote hospital implementation of maternal safety bundles
Title V Information System (TVIS)
https://mchb.tvisdata.hrsa.gov

Explore the Title V Federal-State Partnership

As one of the largest Federal block grant programs, Title V is a key source of support for promoting and improving the health of the Nation's mothers and children. The purpose of the Title V Maternal and Child Health Services Block Grant Program is to create Federal/State partnerships that enable each state/jurisdiction (hereafter referred to as state) to address the health services needs of its mothers, infants and children, which includes children with special health care needs, and their families.

National Data
FY 2017 Expenditures: $6,217,764,762

FY 2017 Expenditures
National: $6,217,764,762
Title V SPRANS: Advancement of Maternal and Child Oral Health

Introducing COHSII...

Center for Oral Health Systems Integration and Improvement

**Consortium Partners**
- Association of State and Territorial Dental Directors
- Dental Quality Alliance
- National Maternal and Child Oral Health Resource Center, lead organization

**Goal 1**
Technical Assistance and Training
- Perinatal and Infant Oral Health Quality Improvement (PIOHQI) Learning Collaborative
- Title V / MCH Community

**Goal 2**
Maternal and Child Oral Health Quality Indicators

**Goal 3**
Resource Development and Dissemination
Maternal, Infant, Early Childhood Home Visiting (MIECHV) Program

• First authorized in 2010 as part of the Patient Protection and Affordable Care Act.

• Most recently re-authorized in 2018 with $400M appropriation annually for 2018-2022.

• Administered by HRSA (state/territory programs) in partnership with the Administration for Children and Families (tribal grants, research/evaluation, and technical assistance).
MIECHV: Reach and Scope

• Grantees are in all 50 states, D.C., and five territories, and 888 counties.

• In FY 2018, states reported:
  • Serving more than 150,000 parents and children
  • Providing over 930,000 home visits

• Grantees have provided 5.2 million home visits over the past seven years.
## MIECHV: Program Measurement

<table>
<thead>
<tr>
<th>Benchmark Areas</th>
<th>Corresponding Measures</th>
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<tbody>
<tr>
<td>Maternal and Newborn Health</td>
<td>Preterm Birth; Breastfeeding; Depression Screening; Well-Child Visit; Postpartum Care; Tobacco Cessation Referrals</td>
</tr>
<tr>
<td>Child Injuries, Maltreatment, and Reduction of ED Visits</td>
<td>Safe Sleep; Child Injury; Child Maltreatment</td>
</tr>
<tr>
<td>School Readiness and Achievement</td>
<td>Parent-Child Interaction; Early Language and Literacy Activities; Developmental Screening; Behavioral Concerns</td>
</tr>
<tr>
<td>Crime or Domestic Violence</td>
<td>IPV Screening</td>
</tr>
<tr>
<td>Family Economic Self-Sufficiency</td>
<td>Primary Caregiver Education; Continuity of Insurance Coverage</td>
</tr>
<tr>
<td>Coordination and Referrals</td>
<td>Completed Depression Referrals; Completed Developmental Referrals; IPV Referrals</td>
</tr>
</tbody>
</table>
Healthy Start Initiative: Eliminating Disparities in Perinatal Health

FY 2019 Budget = $123M

- Focus on communities with highest infant mortality rates
- Support community-driven efforts to decrease infant mortality
  - In 2017, the program’s 100 grantees served more than 83,000 women & children in 37 states and D.C.
Healthy Start: Geographic and Population Diversity

Healthy Start Grantees: 2019-2024

Legend
- Healthy Start Grantee

Puerto Rico
The grantees location is Arlington, VA, but services are provided in Puerto Rico.

Prepared by: HRSA Data Warehouse (HRD)
Health Resources and Services Administration
Data Source: HRSA; U.S. Census
Date of Production: March 27, 2019
A Present and Growing Problem: Maternal Mortality

- Rate of maternal mortality and severe maternal morbidity **higher** in U.S. than other high-resource countries.
- Most common conditions causing maternal death are hemorrhage, severe hypertension, and venous thromboembolism.
- Mental and behavioral health conditions, including opioid use disorder, are emerging causes of maternal death.
- High-risk populations:
  - Racial and ethnic minorities
    - Non-Hispanic Black women are **three to four times** more likely to die from pregnancy complications than non-Hispanic White women.
  - Women of advanced maternal age
  - Women living in medically-underserved areas
Alliance for Innovation on Maternal Health (AIM)
- 23 states and 1,030 birthing hospitals
- Structured bundle of established best practices
- Reaches nearly 2 million births annually
Combatting Maternal Mortality: Convening Global Experts

HRSA Maternal Mortality Summit (June 2018)

• Experts from U.S., 6 countries, and WHO
• Highlighted innovative strategies in reducing maternal mortality
Combatting Maternal Mortality: Expanding MCHB’s Reach

FY 2019 Budget = $38M

SPRANS ($26M)
• Expand AIM to all states ($3M)
• State Maternal Health Innovation Awards ($23M)

Healthy Start ($12M)
• Clinical providers at program sites
MCHB Training Programs: Promoting a Diverse Workforce

MCH Interdisciplinary Training Programs
• Medium-Term Trainees – 10.4% Hispanic/Latino
• Long-Term Trainees – 9.8% Hispanic/Latino

MCH Pipeline and MCH Catalyst Programs
• Pipeline Trainees – 29.9% Hispanic/Latino
• Catalyst Trainees – 16% Hispanic/Latino
Improving Maternal Health for Our Future...
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