Connecticut
Maternal and Child Health Block Grant 2019

The Maternal and Child Health Services Block Grant, Title V of the Social Security Act, is the only federal program devoted to improving the health of all women, children and families. In FY2017, 86% of all pregnant women, 99% of infants, and 55% of children nationwide benefited from a Title V-supported service. To learn more about Title V, visit www.amchp.org.

MCH Block Grant Funds to Connecticut

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<th>FY 2016</th>
<th>FY 2017</th>
<th>FY 2018</th>
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<td>$4,623,557</td>
<td>$4,620,209</td>
<td>$4,671,480</td>
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Title V Administrative Agency:
Family Health Section

*States must provide a three dollar match for every four Federal dollars allocated.

Protecting and Improving the Health of Connecticut’s Families

Children and Youth with Special Needs —
Title V funds support community-based care coordination through the Connecticut Medical Home Initiative for Children and Youth with Special Health Care Needs. The initiative enables children and youth with special health care needs (CYSHCN) to receive coordinated, comprehensive community-based care through access to care coordinators co-located in pediatric primary care settings. The network care coordinators improve the quality of care children receive, particularly children with high severity needs, by assisting with specialist coordination and promoting medical homes with primary care providers. The networks work in coordination with a statewide respite and extended services provider and family outreach and education contractor to further promote and support medical homes.

Dental Health Care — The Office of Oral Health promotes the oral health of Connecticut residents and the reduction of disease and health disparities to ensure the public’s overall health and well-being. The Office provides leadership and expertise in dental public health and maintain a strong and sustainable infrastructure to support essential public health activities related to oral health. The goals of the office are to collect, analyze and report oral health data and to implement an oral health surveillance system to identify and detect disease, inform policy, plans and evaluate programs; provide leadership in developing plans and policies through a collaborative process and mobilize community partnerships to identify and implement solutions to address oral health needs and to inform and to empower the public regarding oral health problems and solutions, support access to quality oral health services and promote laws and regulations that protect the public’s well-being.

Newborn Screening — The Laboratory Newborn Screening program is a population-based program to provide testing, tracking and treatment to all newborns for metabolic, endocrine and disorders of hemoglobin. Infants with abnormal screenings are referred to State Regional Treatment Centers for confirmation testing, counseling, education, treatment and follow-up services. The Early Hearing Detection and Intervention program ensures that infants are screened for hearing prior to hospital discharge and works with diagnostic audiology centers to provide follow-up testing from the hearing screens conducted at birth. The Birth Defects Registry (BDR) includes tracking and surveillance; and provides technical assistance to CT’s 28 birthing facilities on issues related to birth defects screening, reporting protocol, and electronic reporting requirements. BDR collects, compiles and analyzes BDR data for planning, monitoring, and evaluation purposes. This includes: database maintenance, management and database design, providing data for national reporting to the CDC National Birth Defects Prevention Network’s (NBDPN) Annual Report.

School Based Health Centers — Connecticut has 82 school-based health centers in 25 communities that provide students with access to physical and mental health care services, including access for students without health insurance. The centers screen and detect health problems early, preventing more expensive interventions in the future. Being able to treat students while at school also reduces school absenteeism, as well as the time parents might have to miss from their jobs to take a child to an appointment.
Percentage Served by the Connecticut MCH Program*

- 47.0% Pregnant women
- 100.0% Infants under one
- 82.0% Children and adolescents
- 20.0% Children with special health care needs
- 13.0% Others

*2017 State Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

Health Needs in Connecticut

- Well women care/health of women of reproductive age
- Preterm births and low birth weight births
- Breastfeeding
- Developmental screening, well-child visits and immunizations
- Transition to Adult Health Care
- Medical Home
- Bullying
- Adolescent Wellness
- Oral Health

State Selected National Performance Measures

- Well woman visit
- Breastfeeding
- Developmental screening
- Transition
- Medical Home
- Adolescent Wellness
- Oral Health

For more information, contact:

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Current Special Projects of Regional and National Significance (SPRANS)

State Systems Development Initiative (SSDI)
CONNECTICUT DEPARTMENT OF PUBLIC HEALTH
Hartford, CT

MCH Collaborative Office Rounds
YALE UNIVERSITY
New Haven, CT

Connecticut State Profile 2019