Mississippi

Maternal and Child Health Block Grant 2016

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. Title V provides funding to state maternal and child health (MCH) programs, which serve 42 million women and children in the U.S. To learn more about Title V, visit www.amchp.org.

MCH Block Grant Funds to Mississippi

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<th>FY 2013</th>
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<td>$8,898,243</td>
<td>$8,908,656</td>
<td>$9,110,217</td>
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Title V Administrative Agency: Health Services, Mississippi State Department of Health

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

Protecting and Improving the Health of Mississippi’s Families

Infant Mortality - MS has joined other states and national maternal and infant health leaders in a nationwide effort to reduce infant mortality and improve birth outcomes. The MSDH is undertaking a diverse approach, working with healthcare providers and community leaders across the state to improve MS maternal and infant health. MSDH focuses on six evidence-based strategies to reduce infant mortality.

Teen Pregnancy Prevention As a partner in the Healthy Teens for a Better Mississippi initiative, MSDH promotes positive youth development, health education, coalition building, and youth engagement to decrease teen births.

Adolescent Health - Through the Adolescent and Young Adult (AYAH) Program, education and support are provided to health care providers, clinic staff, and community partners. Program goals include increasing the quality of and access to preventive health care offerings, improving health education offerings, and improving health and coverage literacy among adolescents and young adults.

MS Perinatal Quality Collaborative - Ensuring that each mother and infant receives the safest, risk-appropriate and evidence-based care is fundamental to improving birth outcomes in MS. The development of the state-based MSPQC will provide the infrastructure for clinicians and hospitals to implement proven practices to enhance care safety and quality.

Mortality Surveillance - The Fetal-Infant Mortality Review (FIMR), Child Death Review Panel (CDRP), and Pregnancy-Associated Mortality Review (PAMR) processes involve case reviews of infant, child, adolescent, and maternal deaths. Professional Case Review teams make recommendations to Community-Level Action Teams to promote and implement changes at the systems level.

39 Weeks Initiative - The MS Hospital Association, MS Section of the American College of Obstetricians and Gynecologists, and MS delivery hospitals support the 39 weeks initiative. Thirty-seven MS delivery hospitals (80%) have joined the March of Dimes Banner Program, committing to reduce unnecessary early elective deliveries (before 39 weeks) to 5% or less of all births.

Children’s Medical Program (CMP) — The Children’s Medical Program (CMP) is Mississippi's Title V program for Children and Youth with Special Health Care Needs (CYSHCN). The program provides care coordination, respite services, transition services, pharmaceutical assistance, resources and information to children and youth with special health care needs (CYSHCN) and their families. Children receive transition services through all developmental stages based on needs and available resources, and staff attempt to transition patients from pediatric/adolescent providers to adult specialists and other adult-centered resources. The program coordinates with families to help them navigate complex systems of care and obtain medical and dental homes in their local community.

Lead Poisoning Prevention and Healthy Homes Program - The program takes a comprehensive approach to address housing related issues linked to lead exposure and other environmental home hazards. Efforts are made to educate families on home safety, fires, falls, carbon monoxide, asthma education and SIDS/SUID risk reduction strategies. Home visits and environmental investigations are conducted for children with venous blood lead levels ≥15µg/dL.
Newborn Screening Program—The program provides screening, diagnosis, counseling, and follow-up for a range of genetic disorders. The goal of these services is to use preventive measures to minimize the effects of disorders through early detection, provide timely medical diagnosis, and treatment. Staff provides patient education to ensure that information is readily available to parents, hospitals, physicians and other healthcare providers. Staff in the bureau collects data from medical providers for the statewide Birth Defects Surveillance Registry (BDSR) which is used to monitor the births of children with defects for changes in incidence or other unusual patterns suggesting preventable causes.

Immunizations — MCH supported staff in county health departments provide approximately 40% of the immunizations in the state. The percent of children 19-35 months who were immunized during the 2008-2009 year was 81.1 according to the National Immunization Survey which exceeded the national average and resulted in Mississippi achieving the rank of number one in the country. The Mississippi State Department of Health gives about 40 percent of all childhood vaccinations in the state.

Toll-Free Telephone Line — (1-800-721-7222) The MCH program maintains a toll-free telephone line in cooperation with WIC. The line provides assistance to clients seeking information about MCH services, family planning, Medicaid, WIC, and other services. This valuable tool encourages early entry into prenatal care and links clients to resources in the public and private sectors.

People Served by the Mississippi MCH Program*

Title V population-based preventive and systems building services benefit all women and children in the state. In addition, the MCH Block Grant provided services to the following individuals:

- 17,371 pregnant women
- 38,611 infants under one
- 16,698 children and adolescents
- 3,009 children with special health care needs
- 94,567 others
- 170,256 total served

*2014 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

Grants to Mississippi*

STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI)

HEALTH, MISSISSIPPI STATE DEPARTMENT OF
Jackson, MS
$125,000

*These grants were awarded in FY 2013.

Health Needs in Mississippi

- Decrease infant mortality.
- Increase access to health care/medical homes for children and youth with special health care needs (CYSHCN).
- Increase access to comprehensive health care for children.
- Reduce teen pregnancy and teen birth rate.
- Increase health insurance coverage.
- Reduce low birth weight and premature birth.
- Increase access to prenatal care.

State Selected National Performance Measures

- Well Woman Visit
- Perinatal Regionalization
- Breastfeeding
- Safe Sleep
- Developmental Screening
- Adolescent Well-Visit
- Medical Home
- Adequate Insurance Coverage

For more information, contact:

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Mississippi State Profile 2016