Tennessee

Maternal and Child Health Block Grant 2013

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 44 million women and children in the U.S. To learn more about Title V, visit www.amchp.org.

MCH Block Grant Funds to Tennessee

<table>
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<tr>
<th>FY 2012</th>
<th>FY 2013 (Estimate)</th>
<th>Difference in Federal Funds</th>
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<td>$11,426,365</td>
<td>$11,769,146</td>
<td>$342,781</td>
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Title V Administrative Agency:
Maternal and Child Health, Division of Family Health and Wellness
Tennessee Department of Health
Estimated State Funds, FY 2013: $13,250,000

*States must provide a three dollar match for every four Federal dollars allocated. Funds as reported by States in 2008 and 2009 Title V Block Grant Application Forms.

Protecting and Improving the Health of Tennessee’s Families

Child Health Care — Well child exams are available in all 95 county health departments for children and adolescents, birth to 21; referrals are made for any suspected physical or developmental problem. Intensive home visiting services, provided through several programs, emphasize parent support, infant stimulation and periodic assessment to assure eligible children are healthy, free from child abuse and ready for school.

Help Us Grow Successfully (HUGS) — This program provides targeted case management services to pregnant and postpartum women and children, birth to 5, in order to decrease infant mortality and maximize child development. The program served more than 5,028 families in FY11-12 in all 95 counties.

Children with Special Health Care Needs — Services for children with special health care needs are provided through two components of the Children’s Special Services Program. The first component is for medical services and provides reimbursement for medical care, supplies, pharmaceuticals and therapies for children up to age 21 years who meet medical and financial criteria. The second component, care coordination, provides case management services to the client and their families.

Newborn Screening Follow-Up Services — State law requires that every newborn be screened for a comprehensive panel of genetic, metabolic, and other congenital conditions. Newborn Screening Follow-Up staff review approximately 80,000 screens per year and provide time-sensitive case management to infants with presumed positive screens. A network of tertiary specialty care centers provides urgent consultative and management services for these infants, their families, and their community primary care providers.

Adolescent Pregnancy Prevention — Health education staff across the state work with community partners to provide tailored information on healthy relationships, adolescent health, and youth development.

Childhood Lead Poisoning Prevention — Primary care providers and health departments report all blood lead levels to the State Health Department. Nurse case managers follow up in cases of elevated blood lead levels to ensure appropriate follow-up testing and management. Regional and local health department staff also provide education on reducing the risk of lead exposure in the environment.

Child Fatality Review — Local teams have been established in the 31 judicial districts of Tennessee to review all deaths of children 17 years of age or younger. The state child fatality team reviews reports from the local teams, analyzes statistics of the incidences and causes of child deaths, and makes recommendations to the governor and General Assembly to promote the safety and well-being of children.
People Served by the Tennessee MCH Program*  
10,416 pregnant women  
84,533 infants under one  
267,264 children and adolescents  
6,059 children with special health care needs  
151,550 others  
519,550 total served  

*2011 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

Health Needs in Tennessee

- Decrease asthma hospitalizations for children 0-5 years.
- Reduce smoking in Tennesseans age 13 years and older.
- Reduce unintentional injury deaths in children and young people ages 0-24 years.
- Increase the percentage of CYSHCN age 14 and older who have formal plans for transition to adulthood.
- Reduce the infant mortality rate.
- Improve MCH workforce capacity and competency by designing and implementing a workforce development program.
- Reduce the percentage of obesity and overweight (BMI for age/gender >85%).

For more information, contact:

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**Children with Special Health Care Needs**  
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Grants to Tennessee*

**Healthy Tomorrows Partnership for Children Program**  
SAINT THOMAS HEALTH SERVICES FUND  
Nashville, TN  
$49,420  
(Healthy Tomorrows Partnership for Children Program)

**STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI)**  
TENNESSEE DEPT OF HEALTH  
Nashville, TN  
$93,763  
(State Systems Development Initiative)

**Family Professional Partnership/CSHCN**  
TENNESSEE DISABILITY COALITION  
Nashville, TN  
$95,700  
(Family Professional Partnership/CSHCN)

**MCH Continuing Education**  
UNIVERSITY OF TENNESSEE  
Chattanooga, TN  
$29,998  
(MCH Continuing Education)

**Leadership Education in Neurodevelopmental and Related Disorders Training Program**  
UNIVERSITY OF TENNESSEE  
Knoxville, TN  
$807,500  
(Leadership Education in Neurodevelopmental and Related Disorders Training Program)

**Leadership Training in Pediatric Nutrition**  
UNIVERSITY OF TENNESSEE  
Knoxville, TN  
$211,741  
(Leadership Training in Pediatric Nutrition)

**Training Program for Pediatric Communication Disorders**  
THE VANDERBILT UNIVERSITY  
Nashville, TN  
$139,519  
(Training Program for Pediatric Communication Disorders)
Sickle Cell Treatment Demonstration Program
ST. JUDE CHILDREN'S RESEARCH HOSPITAL
Memphis, TN
$385,502
(Sickle Cell Treatment Demonstration Program)

Sickle Cell
THE VANDERBILT UNIVERSITY
Nashville, TN
$328,000
(Sickle Cell)

*These grants were awarded in FY 2011. For a complete list of Title V Grantees: