

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: AL
APPLICATION YEAR: 2009

- [FORM 2 - MCH BUDGET DETAILS](#)
- [FORM 3 - STATE MCH FUNDING PROFILE](#)
- [FORM 4 - BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED AND SOURCES OF FEDERAL FUNDS](#)
- [FORM 5 - STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES](#)
- [FORM 6 - NUMBER AND PERCENTAGE OF NEWBORN AND OTHERS SCREENED, CASE CONFIRMED, AND TREATED](#)
- [FORM 7 - NUMBER OF INDIVIDUALS SERVED \(UNDUPLICATED\) UNDER TITLE V](#)
- [FORM 8 - DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX](#)
- [FORM 9 - STATE MCH TOLL-FREE TELEPHONE LINE DATA](#)
- [FORM 10 - TITLE V MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT STATE PROFILE FOR FY 2004](#)
- [FORM 11 - NATIONAL AND STATE PERFORMANCE MEASURES](#)
- [FORM 12 - NATIONAL AND STATE OUTCOME MEASURES](#)
- [FORM 13 - CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CHILDREN WITH SPECIAL HEALTH CARE NEEDS](#)
- [FORM 14 - LIST OF MCH PRIORITY NEEDS](#)
- [FORM 15 - TECHNICAL ASSISTANCE \(TA\) REQUEST AND TRACKING](#)
- [FORM 16 - STATE PERFORMANCE/OUTCOME MEASURE DETAIL SHEETS](#)
- [FORM 17 - HEALTH SYSTEM CAPACITY INDICATORS \(01 THROUGH 04,07,08\) - MULTI-YEAR DATA](#)
- **FORM 18**
 - [MEDICAID AND NON-MEDICAID COMPARISON](#)
 - [MEDICAID ELIGIBILITY LEVEL \(HSCI 06\)](#)
 - [SCHIP ELIGIBILITY LEVEL \(HSCI 06\)](#)
- **FORM 19**
 - [GENERAL MCH DATA CAPACITY \(HSCI 09A\)](#)
 - [ADOLESCENT TOBACCO USE DATA CAPACITY \(HSCI 09B\)](#)
- [FORM 20 - HEALTH STATUS INDICATORS 01-05 - MULTI-YEAR DATA](#)
- **FORM 21**
 - [POPULATION DEMOGRAPHICS DATA \(HSI 06\)](#)
 - [LIVE BIRTH DEMOGRAPHICS DATA \(HSI 07\)](#)
 - [INFANT AND CHILDREN MORTALITY DATA \(HSI 08\)](#)
 - [MISCELLANEOUS DEMOGRAPHICS DATA \(HSI 09\)](#)
 - [GEOGRAPHIC LIVING AREA DEMOGRAPHIC DATA \(HSI 10\)](#)
 - [POVERTY LEVEL DEMOGRAPHIC DATA \(HSI 11\)](#)
 - [POVERTY LEVEL FOR CHILDREN DEMOGRAPHICS DATA \(HSI 12\)](#)

FORM 2
MCH BUDGET DETAILS FOR FY 2009

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: AL

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
 Of the Federal Allocation (1 above), the amount earmarked for:

\$ 11,683,733

A.Preventive and primary care for children:

\$ 4,516,670 (38.66%)

B.Children with special health care needs:

\$ 3,738,795 (32%)

(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:

\$ 1,168,372 (10%)

(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)

\$ 31,201,723

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

\$ 0

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

\$ 4,860,537

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

\$ 41,643,312

7. TOTAL STATE MATCH (Lines 3 through 6)

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

\$ 15,408,615

\$ 77,705,572

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

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 89,389,305

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 118,896

c. CISS: \$ 0

d. Abstinence Education: \$ 1,064,661

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 130,602,103

h. AIDS: \$ 3,115,232

i. CDC: \$ 0

j. Education: \$ 0

k. Other: \$ 0

Hemophilia of GA. \$ 28,700

Immunizations \$ 48,453,549

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

\$ 183,383,141

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 272,772,446

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: AL

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,956,792	\$ 12,609,492	\$ 12,415,310	\$ 11,774,490	\$ 12,348,338	\$ 11,764,724
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 43,037,317	\$ 22,184,638	\$ 25,410,662	\$ 27,307,112	\$ 22,604,116	\$ 21,127,522
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 3,475,487	\$ 3,126,210	\$ 3,301,009	\$ 3,286,258	\$ 4,217,138	\$ 3,749,856
6. Program Income <i>(Line6, Form 2)</i>	\$ 16,241,761	\$ 36,024,113	\$ 32,428,814	\$ 31,096,592	\$ 33,592,222	\$ 33,578,277
7. Subtotal <i>(Line8, Form 2)</i>	\$ 75,711,357	\$ 73,944,453	\$ 73,555,795	\$ 73,464,452	\$ 72,761,814	\$ 70,220,379
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 117,282,825	\$ 137,725,020	\$ 115,989,200	\$ 138,834,648	\$ 137,730,249	\$ 169,023,409
9. Total <i>(Line11, Form 2)</i>	\$ 192,994,182	\$ 211,669,473	\$ 189,544,995	\$ 212,299,100	\$ 210,492,063	\$ 239,243,788
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: AL

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 11,940,000	\$ 11,395,148	\$ 11,875,207	\$ 0	\$ 11,683,733	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 33,146,271	\$ 27,644,713	\$ 27,626,462	\$ 0	\$ 31,201,723	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 4,313,726	\$ 3,794,909	\$ 3,894,284	\$ 0	\$ 4,860,537	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 30,486,301	\$ 33,851,693	\$ 35,037,072	\$ 0	\$ 41,643,312	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 79,886,298	\$ 76,686,463	\$ 78,433,025	\$ 0	\$ 89,389,305	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 138,820,269	\$ 183,383,141	\$ 169,023,409	\$ 0	\$ 183,383,141	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 218,706,567	\$ 260,069,604	\$ 247,456,434	\$ 0	\$ 272,772,446	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

- 1. **Section Number:** Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2007
Field Note:
/2009/Form 3: State MCH Funding Profile

Line 3. (State Funds)--FY 2007 State Funds expenditures decreased from budgeted amount by (16.6%) or a net of \$5,501,588. This net decrease in State Funds is the product of changes in Total Program costs and the Other/Federal support from base year 2005 compared to FY 2007 Budget. Since 2005 Total Program Costs has shown a small increase of 1.5% or \$925,000 and Other/Federal support (most of this growth has been in ADPH earned income) has increased \$5.8 million, the difference between these two factors result in a net decrease in State Funds of \$4.9 million. CRS reported a decrease in State Funds of \$578,000 during this period making the total difference of \$5,501,588.

- 2. **Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Other Funds expenditures decreased from budgeted amount by (12.0%) or \$518,817.

This decrease is the difference in CRS requested versus received dollars. The actual expenditures are a more accurate reflection of funds received than the estimate represented in the budgeted amount.

- 3. **Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2006
Field Note:
Line 5 (Other Funds) -- The Budget for FY 2006 was set in the FY 2004 application. This was based on expenditures for FY 2003 and the CRS budget request at that time. The difference in other funds represents the difference in requested versus received dollars. The actual expenditure is a more accurate reflection of funds received than the estimate represented in the budgeted amount. Setting the FY 2006 budget in FY 2004 does not allow the agency to adjust for trends noted in third party reimbursements.

- 4. **Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Program Income expenditures increased from budgeted amount by 11.0% or \$3,365,392.

This net increase resulted from an FY 2007 Budget that was based on actuals for the year 2005 which did not reflect the growth in ADPH's care coordination efforts. Net earned income in FY 2007 increased by \$5.525 million with EPSDT, Family Planning and Patient First Care Coordination accounting for the majority of the change. CRS reported a \$2.160 million decrease in program income which was reflected in the net change. A better comparison would be to use FY 2006 expenditures figure of \$33.6 million to FY 2007 expenditures of \$33.85 million, the difference is minimal.

- 5. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Other Federal Funds expenditures increased from budgeted amount by 32.1% or a net of \$44,562,872.

Line 8. (Other Federal Funds)--FY 2007 Other Federal Funds expenditures increased from budgeted amount by 32.1% or a net of \$44,562,872. The majority of this increase is attributed to WIC and Immunizations Programs. The FY 2007 Budget was developed using 2005 activity which did not reflect these recent increases over the two year period: WIC caseload has increased 6.3% from a monthly average of 118,751 to 126,239 which resulted in an \$18.9 million increase in food costs. Immunizations experienced tremendous growth in the VFC Federal entitlement program and vaccines provided by CHD's increasing from \$23.2 million in FY 2005 to \$48.2 million in FY 2007, a \$25 million increase. Ryan White Care Act Title II grant for Women, Infants Children and Youth increased from \$2.2 million in FY 2005 to \$3.1 million in FY 2007, a 1.9% increase or \$842,000.

- 6. **Section Number:** Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2006
Field Note:

Line 8. (Other Federal Funds)--Expenditures increased by 22.7%.
The majority of \$31.3 million increase in FY 2006 is attributed to WIC and Immunizations. The FY 06 budget for both programs was based on 2004 activity. During this time period the WIC Program grew from \$112.8 to \$121.0 million which is an increase of \$8.2 million. Immunization Program costs increased from \$20.5 to \$43.3 million, an increase of \$22.8 million or 111.5%. The Immunizations VFC Federal entitlement program attributed approximately \$10.0 million to this increase jumping from \$18.8 to \$28.9 million. CHD's made up the balance with increased vaccine costs for non-eligible from \$4.4 to \$14.4 million, an increase of \$10 million.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: AL

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 10,236,175	\$ 8,206,655	\$ 10,236,175	\$ 6,401,818	\$ 8,065,538	\$ 2,265,122
b. Infants < 1 year old	\$ 8,213,524	\$ 8,638,410	\$ 7,182,732	\$ 7,892,274	\$ 7,963,034	\$ 8,175,811
c. Children 1 to 22 years old	\$ 26,203,635	\$ 27,217,706	\$ 23,238,228	\$ 33,689,230	\$ 25,089,746	\$ 36,104,693
d. Children with Special Healthcare Needs	\$ 26,784,022	\$ 26,403,483	\$ 28,624,659	\$ 23,334,309	\$ 28,225,106	\$ 22,626,534
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 4,274,001	\$ 3,478,199	\$ 4,274,001	\$ 2,146,821	\$ 3,418,390	\$ 1,048,219
g. SUBTOTAL	\$ 75,711,357	\$ 73,944,453	\$ 73,555,795	\$ 73,464,452	\$ 72,761,814	\$ 70,220,379

II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).

a. SPRANS	\$ 661,902	\$ 510,900	\$ 636,335
b. SSDI	\$ 90,000	\$ 142,075	\$ 89,363
c. CISS	\$ 80,128	\$ 98,797	\$ 43,113
d. Abstinence Education	\$ 975,583	\$ 984,200	\$ 998,400
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 90,000,000	\$ 90,000,000	\$ 112,802,512
h. AIDS	\$ 1,826,788	\$ 2,110,669	\$ 2,081,922
i. CDC	\$ 724,703	\$ 704,200	\$ 553,783
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
Hemophilia of GA.	\$ 0	\$ 0	\$ 28,700
Immunizations	\$ 22,895,021	\$ 21,409,659	\$ 20,496,121
Hemophilia of GA	\$ 0	\$ 28,700	\$ 0
AIDS (CRS)	\$ 28,700	\$ 0	\$ 0
III. SUBTOTAL	\$ 117,282,825	\$ 115,989,200	\$ 137,730,249

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: AL

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 6,961,429	\$ 2,034,994	\$ 2,530,040	\$ 0	\$ 2,089,939	\$ 0
b. Infants < 1 year old	\$ 7,810,031	\$ 8,256,011	\$ 8,121,086	\$ 0	\$ 8,215,228	\$ 0
c. Children 1 to 22 years old	\$ 33,338,163	\$ 38,125,132	\$ 35,863,023	\$ 0	\$ 37,936,803	\$ 0
d. Children with Special Healthcare Needs	\$ 29,459,973	\$ 26,028,718	\$ 30,728,694	\$ 0	\$ 38,534,412	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 2,316,702	\$ 2,241,608	\$ 1,190,182	\$ 0	\$ 2,612,923	\$ 0
g. SUBTOTAL	\$ 79,886,298	\$ 76,686,463	\$ 78,433,025	\$ 0	\$ 89,389,305	\$ 0

II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).

a. SPRANS	\$ 0	\$ 0	\$ 0
b. SSDI	\$ 94,156	\$ 100,720	\$ 118,896
c. CISS	\$ 23,553	\$ 7,314	\$ 0
d. Abstinence Education	\$ 985,926	\$ 734,577	\$ 1,064,661
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 111,717,644	\$ 121,044,616	\$ 130,602,103
h. AIDS	\$ 2,272,310	\$ 3,763,146	\$ 3,115,232
i. CDC	\$ 484,191	\$ 0	\$ 0
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
Hemophilla of GA.	\$ 0	\$ 0	\$ 28,700
Immunizations	\$ 23,213,789	\$ 43,344,336	\$ 48,453,549
Hemophilla of GA	\$ 28,700	\$ 28,700	\$ 0
III. SUBTOTAL	\$ 138,820,269	\$ 169,023,409	\$ 183,383,141

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES**1. Section Number:** I. Federal-State MCH Block Grant Partnership**Field Name:** PregWomenExpended**Row Name:** Pregnant Women**Column Name:** Expended**Year:** 2007**Field Note:**

FY 2007 Pregnant Women expenditures decreased from budgeted amount by more than (70.8%) or \$4,926,435.

The budgeted amount for FY 2007 was based on the current FY 2005 activity of \$6.9 million. This did not properly reflect ADPH's declining commitment to withdraw from providing prenatal services which is evident in the FY 2007 expended amount of \$2.034 million. Programs still exist in Mobile and Houston Counties, including postpartum home visits; CHD's provide postpartum exam visits.

2. Section Number: I. Federal-State MCH Block Grant Partnership**Field Name:** PregWomenExpended**Row Name:** Pregnant Women**Column Name:** Expended**Year:** 2006**Field Note:**

Line I. a. (Pregnant Women)--Expenditures for FY 2006 was 71.9% below the budgeted amount. As mentioned in our last submission, this decline is a reflection of ADPH's decision to withdraw from providing prenatal services. However, programs still exist in Mobile and Houston Counties. Also, CHD's are providing postpartum exams through Home Health visits.

3. Section Number: I. Federal-State MCH Block Grant Partnership**Field Name:** Children_1_22Expended**Row Name:** Children 1 to 22 years old**Column Name:** Expended**Year:** 2007**Field Note:**

FY 2007 Children 1 to 22 years old expenditures increased from budgeted amount by more than 14.4% or \$4,786,969.

This increase resulted from an FY 2007 Budget that was based on actuals for the year 2005 which did not reflect the continued growth in ADPH's care coordination efforts. As previously mentioned in our note for FY 2006, Patient 1st and EPSDT Care Coordination programs for children, birth to age 21 have continued to grow, accounting for the majority of this increase. Patient 1st care coordination has added a new electronic referral system that has increased case management caseloads and staff to handle these cases. Referrals for case management have increased for Newborn Screening, Hearing, and Lead Program. From FY 2006 to FY 2007, Plan 1st and Patient 1st FTE's have increased 28% from a total of 124 to 159. Visits for Children 1 to 22 in FY 2007 have increased 10% to 72,796 from 66,139 in FY 2006. Redirection of resources from prenatal services to growth programs has resulted in increased costs.

4. Section Number: I. Federal-State MCH Block Grant Partnership**Field Name:** Children_1_22Expended**Row Name:** Children 1 to 22 years old**Column Name:** Expended**Year:** 2006**Field Note:**

Line I. c. (Children 1 to 22 years)--Expenditures increased from budget by 43.9%. The primary reasons for the increased expenditures derives from Patient 1st and EPSDT Care Coordination programs for children, birth to age 21. This rapid growth has occurred since the FY 2006 budget was developed in 2004. In FY 2004 children visits made up 75% of all Child Health visits compared to 82% in FY 2006. Care Coordination accounts for approximately \$6.5 million of the increase. Resources previously directed to prenatal services have been redirected toward these growth programs and as a result costs have increased since 2004.

5. Section Number: I. Federal-State MCH Block Grant Partnership**Field Name:** CSHCNExpended**Row Name:** CSHCN**Column Name:** Expended**Year:** 2007**Field Note:**

FY 2007 CSHCN expenditures decreased from budgeted amount by more than (11.6%) or \$3,431,255.

For FY 2007, CRS reported that the decrease in budget and expenditures reflected the difference in requested versus received funds and the decrease in program income.

6. Section Number: I. Federal-State MCH Block Grant Partnership**Field Name:** CSHCNExpended**Row Name:** CSHCN**Column Name:** Expended**Year:** 2006**Field Note:**

Line I. d. (CSHCN) -- Expended differs from budgeted amount by (19.8%). CRS reported that the difference between FY 2006 budget and expenditures reflects the difference in requested versus received funds and the decrease in program income.

7. Section Number: I. Federal-State MCH Block Grant Partnership**Field Name:** AdminExpended**Row Name:** Administration**Column Name:** Expended**Year:** 2006**Field Note:**

Line I. f. (Administration) --Expenditures decreased from budget by 69.3%. In FY 2004, a coding error incorrectly charged a county allocation of \$1.645 million to MCH Administration. Also, in FY 2004 Maternity was still a major program and in FY 2006 there is an accumulative effect of a reduction in administrative expenditures which is the result of ADPH's decision to discontinue providing prenatal services. The FY 2006 budget was based on these inflated expenditures from 2004.

Expenditures decreased from budget by 69.3%. In FY 2004, a coding error incorrectly charged a county allocation of \$1.645 million to MCH Administration. Also, in FY 2004 Maternity was still a major program and in FY 2006 we see the accumulative effect of a reduction in administrative expenditures which is the result of ADPH's decision to

discontinue providing prenatal services. The FY 2006 budget was based on these inflated expenditures from 2004.

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: AL

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 46,657,955	\$ 48,889,412	\$ 44,833,945	\$ 49,165,621	\$ 48,481,482	\$ 48,015,524
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.)	\$ 8,262,922	\$ 8,995,308	\$ 11,854,962	\$ 7,791,728	\$ 8,905,176	\$ 6,187,867
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 5,758,008	\$ 8,453,259	\$ 7,000,615	\$ 9,631,976	\$ 8,008,892	\$ 10,844,831
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.)	\$ 15,032,472	\$ 7,606,474	\$ 9,866,273	\$ 6,875,127	\$ 7,366,264	\$ 5,172,157
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.)	\$ 75,711,357	\$ 73,944,453	\$ 73,555,795	\$ 73,464,452	\$ 72,761,814	\$ 70,220,379

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: AL

TYPE OF SERVICE	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 52,672,381	\$ 46,595,793	\$ 52,956,775	\$ 0	\$ 52,607,223	\$ 0
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.)	\$ 9,139,458	\$ 7,097,680	\$ 7,812,149	\$ 0	\$ 9,730,205	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 10,171,878	\$ 12,880,643	\$ 11,272,498	\$ 0	\$ 13,551,012	\$ 0
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.)	\$ 7,902,581	\$ 10,112,347	\$ 6,391,603	\$ 0	\$ 13,500,865	\$ 0
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.)	\$ 79,886,298	\$ 76,686,463	\$ 78,433,025	\$ 0	\$ 89,389,305	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

- 1. Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Direct Health Care Services expenditures decreased from budgeted amount by more than (11.5%) or \$6,076,588.

This decrease resulted from an FY 2007 Budget that was based on actuals for the year 2005 which did not properly reflect the impact of changes in the provision of direct health care that would be evident in subsequent years. As mentioned in previous applications, changes in the healthcare environment, especially in Medicaid's managed care have caused a shift in the provision of direct medical services from CHD's to private providers. This redirection of resources can be seen in the increases in population-based and infrastructure building services.
- 2. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Enabling Services expenditures decreased from budgeted amount by more than (22.3%) or \$2,041,778.

The budgeted amount for FY 2007 was based on the current FY 2005 activity. This decrease was primarily in Maternity Services which was approximately a \$2.0 million program in FY 2005 declining in FY 2007 to \$825,000 or a \$1.1 million decrease. Also, CRS reported a \$1.054 million decrease for the same time period. For 2007 a redirection of resources by ADPH and CRS is evident in the decrease in enabling services and a corresponding increase in population/infrastructure services.
- 3. Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2006
Field Note:
Line II. (Enabling Services) -- Expenditures decreased from budget by 30.5%. The FY 06 budget was developed based on Programs that were at peak growth in FY 2004. As mentioned in previous submissions, ADPH's decision to withdraw from prenatal care affects programs connected to this service and continues to decline in FY 2006. As a result, the FY 2006 budget was inflated based on 2004 information. Programs that were affected: Maternity Case Management, Contract Maternity Care Coordination, and Teen Family Planning Care Coordination which account for the majority of the \$2.7 million reduction in expenditures.
- 4. Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Population Based Services expenditures increased from the budgeted amount by more than 26.6% or \$2,708,765.

This increase resulted from an FY 2007 Budget that was based on actuals for the year 2005 which did not reflect the continued growth in ADPH's care coordination efforts. In FY 2005 expenditures for EPSDT Care Coordination totaled approximately \$6.6 million and in 2007 increased 33% (\$2.2 million) to \$8.8 million.
- 5. Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2006
Field Note:
Line III. (Population-Based Services) --Expenditures increased from budget by 35.4%. The primary reason for the increase in expenditures can be attributed to a redirection of resources to the EPSDT Care Coordination Program. This Program has grown rapidly from 2004 and makes up the majority of the \$2.8 million difference in the budget.
- 6. Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2007
Field Note:
FY 2007 Infrastructure Building Services expenditures increased from budgeted amount by more 28.0% or \$2,209,766.

As mentioned previously FY 2007 Budget was based on actual activity in 2005 which did not reflect the current environment and the redirection of resources from direct health care/enabling services to population based/infrastructure building services. CRS was the majority of this increase from FY 2005 to FY 2007 and was attributed to a revise in methodology as mentioned in the CRS Budget Narrative for Expenditures Form 5.
- 7. Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2006
Field Note:
Line IV. (Infrastructure Building Services) – Expenditures decreased from budget by 29.8%. The budget for FY 2006 was based on FY 2004 activities of several programs that were at peak growth but later phased out or experienced funding cuts by 2006. Programs no longer active included: Abstinence Community Based and AUPPP which accounts for \$1.6 million. Reductions in Abstinence Education and FHS Administration totaling \$600,000 make up the \$2.0 million difference in budget and expenditures.//2008//

FORM 6

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

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

STATE: AL

Total Births by Occurrence: 63,986

Reporting Year: **2007**

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	63,281	98.9	8	8	8	100
Congenital Hypothyroidism	63,281	98.9	18	18	18	100
Galactosemia	63,281	98.9	2	2	2	100
Sickle Cell Disease	63,325	99	51	51	51	100
Other Screening (Specify)						
Biotinidase Deficiency	63,281	98.9	1	1	1	100
Homocystinuria	63,281	98.9	1	1	1	100
Congenital Adrenal Hyperplasia (CAH)	63,281	98.9	1	1	1	100
Medium Chain AcylCo-A Dehydrogenase (MCAD)	63,281	98.9	3	3	3	100
Glutaric acidemia	63,281	98.9	1	1	1	100
Carnitine transporter defect	63,281	98.9	1	1	1	100
Very Long-chain Acyl-Coenzyme A Dehydrogenase (VLCAD)	30,957	48.4	1	1	1	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

- 1. Section Number:** Main
Field Name: Phenylketonuria_Presumptive
Row Name: Phenylketonuria
Column Name: Presumptive positive screens
Year: 2009
Field Note:
The Alabama Department of Public Health's Bureau of Clinical Laboratories defines the criteria for "presumed positive."

The 8 positive screens include 2 infants with hyperphenylalaninemia, rather than classic PKU. Depending on how high their phenylalanine levels are, some infants with hyperphenylalaninemia require dietary management.
- 2. Section Number:** Main
Field Name: Congenital_Presumptive
Row Name: Congenital
Column Name: Presumptive positive screens
Year: 2009
Field Note:
The Alabama Department of Public Health's Bureau of Clinical Laboratories defines the criteria for "presumed positive."
- 3. Section Number:** Main
Field Name: Galactosemia_Presumptive
Row Name: Galactosemia
Column Name: Presumptive positive screens
Year: 2009
Field Note:
The Alabama Department of Public Health's Bureau of Clinical Laboratories defines the criteria for "presumed positive."
- 4. Section Number:** Main
Field Name: SickleCellDisease_Presumptive
Row Name: SickleCellDisease
Column Name: Presumptive positive screens
Year: 2009
Field Note:
The Alabama Department of Public Health's Bureau of Clinical Laboratories defines the criteria for "presumed positive."
- 5. Section Number:** Main
Field Name: Phenylketonuria_Confirmed
Row Name: Phenylketonuria
Column Name: Confirmed Cases
Year: 2009
Field Note:
All of the infants whose screens were defined by the Alabama Department of Public Health's Bureau of Clinical Laboratories as being "presumed positive" were confirmed as having the disorder.

The 8 confirmed cases include 2 infants with hyperphenylalaninemia, rather than classic PKU. Depending on how high their phenylalanine levels are, some infants with hyperphenylalaninemia require dietary management.
- 6. Section Number:** Main
Field Name: Congenital_Confirmed
Row Name: Congenital
Column Name: Confirmed Cases
Year: 2009
Field Note:
All of the infants whose screens were defined by the Alabama Department of Public Health's Bureau of Clinical Laboratories as being "presumed positive" were confirmed as having the disorder.
- 7. Section Number:** Main
Field Name: Galactosemia_Confirmed
Row Name: Galactosemia
Column Name: Confirmed Cases
Year: 2009
Field Note:
All of the infants whose screens were defined by the Alabama Department of Public Health's Bureau of Clinical Laboratories as being "presumed positive" were confirmed as having the disorder.
- 8. Section Number:** Main
Field Name: SickleCellDisease_Confirmed
Row Name: SickleCellDisease
Column Name: Confirmed Cases
Year: 2009
Field Note:
All of the infants whose screens were defined by the Alabama Department of Public Health's Bureau of Clinical Laboratories as being "presumed positive" were confirmed as having the disorder.
- 9. Section Number:** Main
Field Name: Phenylketonuria_TreatmentNo
Row Name: Phenylketonuria
Column Name: Needing treatment that received treatment
Year: 2009
Field Note:
The 8 infants include 2 infants with hyperphenylalaninemia, rather than classic PKU. Depending on how high their phenylalanine levels are, some infants with hyperphenylalaninemia require dietary management.
- 10. Section Number:** Other Screening Types
Field Name: Other
Row Name: All Rows
Column Name: All Columns
Year: 2009
Field Note:
As of May 2007, the Alabama Department of Public Health's Newborn Screening Program is screening for 28 of the 29 disorders recommended by the March of Dimes and

by the American Association of Gynecologists and Obstetricians. One of these disorders is hearing impairment, which is not reported on this form.

Only the conditions for which 1 or more infants had presumptive positive blood screens are listed here.

VLCAD was added in April 2007, which is why fewer infants were screened for this disorder than for the other disorders listed.

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: AL

Reporting Year: 2007

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	1,389	54.8	0.0	3.0	42.1	0.0
Infants < 1 year old	60,117	47.9	0.0	45.3	3.9	2.9
Children 1 to 22 years old	34,235	43.2	0.0	3.4	24.5	29.0
Children with Special Healthcare Needs	16,346	47.8	2.6	32.1	17.0	0.0
Others	102,692	81.5	0.0	8.5	9.2	0.8
TOTAL	214,779					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES**1. Section Number:** Main**Field Name:** PregWomen_TS**Row Name:** Pregnant Women**Column Name:** Title V Total Served**Year:** 2009**Field Note:**

Two reports were used to estimate the number of pregnant women served under Title V. The first report is entitled "State of Alabama Department of Public Health Bureau of Family Health Services Maternity Table II," and covers health departments in 65 of the State's 67 counties. The second report is entitled "PHA XI, Maternity Table II, Reporting Period: 10/01/2006-09/30/2007," and covers the Mobile County Health Department (CHD). Jefferson County Department of Health did not provide maternity care in FY 2007.

The percentages shown total 99.9%, rather than 100.0%, because the Title V Information System shows percentage estimates carried to only 1 decimal.

The percentages showing distribution according to primary source of coverage are rough estimates, because Mobile CHD did not provide unduplicated counts according to source of coverage. For Mobile CHD, we estimated the unduplicated count of patients according to source of coverage by applying a ratio to the duplicated count in each coverage category. The ratio was: the total unduplicated count for Mobile CHD maternity patients (1,368) divided by the sum of the source of coverage-specific duplicate counts for Mobile CHD (1,779), or 0.7690. For example, multiplying 0.7690 by the duplicated count of Mobile CHD Medicaid-enrolled maternity patients (964) yielded 741.2884--which, when rounded down, is our estimated unduplicated count of Medicaid-enrolled pregnant women served in Mobile CHD. Using a corresponding method, we classified 42.2934 Mobile CHD patients into that county's "Insurance" category and 584.4182 Mobile CHD patients into that county's "Private Pay" category. Summing the unrounded coverage-specific unduplicated estimates yields 1,368--which matches the total unduplicated maternity patient count shown on the source document for Mobile CHD.

2. Section Number: Main**Field Name:** PregWomen_XIX**Row Name:** Pregnant Women**Column Name:** Title XIX %**Year:** 2009**Field Note:**

The numerator for this percentage is comprised of 761 maternity patients classified as "Medicaid."

The Column A note for this row explains how unduplicated maternity patient counts according to source of coverage were estimated for patients seen by the Mobile County Health Department.

3. Section Number: Main**Field Name:** PregWomen_Private**Row Name:** Pregnant Women**Column Name:** Private/Other %**Year:** 2009**Field Note:**

Mobile County Health Department (CHD) reported 3 categories of "Financial": "Medicaid," "Insurance," and "Private Pay." In this row, The numerator for Column D ("Private/Other") is the estimated 42 maternity patients whom Mobile CHD classified as "Insurance." None of the maternity patients seen in the remaining counties were classified into this category.

The Column A note for this row explains how unduplicated maternity patient counts according to source of coverage were estimated for patients seen by the Mobile CHD.

4. Section Number: Main**Field Name:** PregWomen_None**Row Name:** Pregnant Women**Column Name:** None %**Year:** 2009**Field Note:**

Mobile County Health Department (CHD) reported 3 categories of "Financial": "Medicaid," "Insurance," and "Private Pay." The numerator for Column E ("None") includes the estimated 584 Mobile CHD maternity patients who were classified as "Private Pay." It also includes the 1 patient classified as "Free" in the report for the remaining counties.

The Column A note for this row explains how unduplicated maternity patient counts according to source of coverage were made for patients seen by the Mobile CHD.

5. Section Number: Main**Field Name:** Children_0_1_TS**Row Name:** Infants <1 year of age**Column Name:** Title V Total Served**Year:** 2009**Field Note:**

To account for the fact that an unknown number of second and repeat tests are counted as being initial screens (see note to Form 06), we applied a factor of 0.95 to the 63,281 newborns reported as being screened for PKU in 2007, yielding an estimate of 60,117 infants served. We believe that this is a conservative estimate and that the true number of newborns screened for metabolic disorders (and therefore served by Title V) may be higher than the estimated number.

The percentages for "primary sources of coverage," shown in Columns B-F, assume that the insurance coverage for infants served under Title V was distributed identically to the insurance coverage for delivery of Alabama residential live births in calendar year 2006. That is, source of payment for delivery of live births to Alabama residents in 2006 was used as a surrogate for insurance coverage of infants served under Title V. The year 2006, rather than the year 2007, was used because the final statistical live birth file for 2007 may not become available until October 2008--due to the time required to receive late-arriving certificates and to edit the the live birth file.

6. Section Number: Main**Field Name:** Children_0_1_XIX**Row Name:** Infants <1 year of age**Column Name:** Title XIX %**Year:** 2009**Field Note:**

The note to Column A of this row explains how this percentage was estimated.

7. Section Number: Main**Field Name:** Children_0_1_Private**Row Name:** Infants <1 year of age**Column Name:** Private/Other %**Year:** 2009**Field Note:**

The note to Column A of this row explains how this percentage was estimated.

8. Section Number: Main**Field Name:** Children_0_1_None

Row Name: Infants <1 year of age

Column Name: None %

Year: 2009

Field Note:

The note to Column A of this row explains how this percentage was estimated.

For infants born alive to Alabama residents in 2006, 3.9% of the deliveries were classified on the birth record as being "self pay" with respect to "main source of payment for this birth." Presumably, many of the self-pay group had no health insurance and their parents were unable to pay for the cost of delivery. Therefore, our best estimate is that 3.9% of infants served under Title V had no health insurance.

9. Section Number: Main

Field Name: Children_0_1_Unknown

Row Name: Infants <1 year of age

Column Name: Unknown %

Year: 2009

Field Note:

The note to Column A of this row explains how this percentage was estimated.

10. Section Number: Main

Field Name: Children_1_22_TS

Row Name: Children 1 to 22 years of age

Column Name: Title V Total Served

Year: 2009

Field Note:

Three source documents were used to estimate the number of children served under Title V. Estimates for this population are for children aged 1 through 21 years. The first of these 3 documents is entitled, "State of Alabama Department of Public Health Bureau of Family Health Services Child Health Table II Reporting Period: Oct 2006 - Sep 2007." This report is for county health departments (CHDs) in 65 of the State's 67 counties. The second source document is entitled, "Jefferson County Dept. Health Child Health Table I Report Total Reporting Period: 10/01/2006 To 09/30/2007. The 3rd document is entitled, "Mobile County Health Department Child Health Table I."

The percentages shown total 100.1%, rather than 100.0%, because the Title V Information System shows percentage estimates carried to only 1 decimal.

The percentages showing distribution according to primary source of coverage are very rough estimates, because Mobile CHD did not provide any counts according to source of coverage for these patients, and Jefferson County Department of Health (JCDH) did not provide unduplicated counts according to source of coverage. For JCDH, we estimated the unduplicated count of patients according to source of coverage by applying a ratio to the duplicated count in each coverage category. The ratio was: the total unduplicated count for JCDH patients aged 1-21 years (21,394) divided by the sum of the source of coverage-specific duplicate counts of these children for JCDH (21,426), or 0.9985. For example, multiplying 0.9985 by the duplicated count of JCDH "Medicaid/Public" 1-21 year-old patients (11,607) yielded 11,589.66--which is our estimated unduplicated count of Medicaid-enrolled 0-21 year-old patients served in JCDH. Using a corresponding method for each of JCDH's coverage categories, we estimated unduplicated counts for JCDH patients in this age group as follows: 1,165.26 classified as "Private Insurance"; 977.54 classified as "Patient," 6,748.91 classified as "Free"; and 912.63 classified as "None/Unknown." Summing the coverage-specific unduplicated estimates yields 21,394--which matches the total unduplicated count for 1-21 year-old patients shown on the source document for JCDH.

All of the 8,999 Mobile CHD patients in this age group were classified as "unknown" with respect to source of coverage.

11. Section Number: Main

Field Name: Children_1_22_XIX

Row Name: Children 1 to 22 years of age

Column Name: Title XIX %

Year: 2009

Field Note:

The numerator for this percentage is comprised of 14,781 1-21 year-old patients classified as "Medicaid."

The Column A note for this row explains how unduplicated patient counts according to source of coverage were estimated for 1-21 year-old patients seen by the Jefferson County Department of Health.

12. Section Number: Main

Field Name: Children_1_22_Private

Row Name: Children 1 to 22 years of age

Column Name: Private/Other %

Year: 2009

Field Note:

The numerator for this percentage is comprised of the 1,165 1-21 year-old patients classified by the Jefferson County Department of Health (JCDH) as "Private Insurance."

The Column A note for this row explains how unduplicated patient counts according to source of coverage were estimated for 1-21 year-old patients seen by the JCDH.

13. Section Number: Main

Field Name: Children_1_22_None

Row Name: Children 1 to 22 years of age

Column Name: None %

Year: 2009

Field Note:

The numerator for this percentage is comprised of the 8,377 1-21 year-old patients classified as "Free" or "Patient,"

The Column A note for this row explains how unduplicated patient counts according to source of coverage were estimated for 1-21 year-old patients seen by the Jefferson County Department of Health.

14. Section Number: Main

Field Name: Children_1_22_Unknown

Row Name: Children 1 to 22 years of age

Column Name: Unknown %

Year: 2009

Field Note:

The numerator for this percentage is comprised of the 913 Jefferson County Department of Health (JCDH) 1-21 year-old patients classified as "None/Unknow," plus all of the 8,999 Mobile County Health Department (CHD) patients in this age group. (Mobile CHD did not report source of coverage.)

The Column A note for this row explains how unduplicated counts for 1-21 year-old patients according to source of coverage were estimated for patients seen by the JCDH.

15. Section Number: Main

Field Name: CSHCN_TS

Row Name: Children with Special Health Care Needs

Column Name: Title V Total Served

Year: 2009

Field Note:

Complete insurance information was not collected on every child to whom a service was provided. Insurance data reported are on the 11,988 children enrolled in Children's Rehabilitation Service during FY 2007.

16. **Section Number:** Main
Field Name: CSHCN_None
Row Name: Children with Special Health Care Needs
Column Name: None %
Year: 2009
Field Note:

This figure is not considered a valid estimate of the number of uninsured children enrolled in the CRS program. It is artificially inflated by the inclusion of children who participated in community-based screenings for scoliosis and/or hearing loss at schools, day care centers and Head Start programs in underserved areas. Insurance information was not gathered on these participants, however they were enrolled in the program for screening purposes. In the current data management system (CHARMS), there is no way to account for enrolled participants for whom no insurance information was collected. They are counted as uninsured, thereby artificially inflating the number of children who were reported as uninsured in FY 2007. This data management issue will be addressed over the next year.

17. **Section Number:** Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2009
Field Note:

Individuals served by the Alabama Department of Public Health's Family Planning Program in FY 2007 are reported in this row. The main reference is entitled "Table 5: Unduplicated Number of FP Users by Principal Health Insurance Coverage Status." Table 5 reports numbers for 4 categories: 1) "Public health insurance covering primary medical care," 2) Private health insurance covering primary medical care," 3) Uninsured (no public or private health insurance) & Medicaid waivers," and 4) "Unknown/not reported." Certain assumptions were required in order to translate categories shown on Table 5 to categories shown on Form 7. These assumptions are detailed in notes to the affected columns.

18. **Section Number:** Main
Field Name: AllOthers_XIX
Row Name: Others
Column Name: Title XIX %
Year: 2009
Field Note:

The percentage shown is a very rough estimate, made as follows.

The 2 pertinent categories shown on Table 5 are: 1) "Public health insurance covering primary medical care" (38,463 patients), and 2) "Uninsured (no public or private health insurance) & Medicaid waivers" (54,706 patients). The State's family planning Medicaid waiver, implemented in October 2000 and called "PLAN First," expanded Medicaid eligibility for family planning services for women aged 19-44 years to 133% of the federal poverty level (FPL). The previous cut-off had been about 16% of FPL.

A very few of the patients included in the 1st category may have been covered by Medicare, rather than Medicaid. However, the number of these patients was presumably too small to notably affect the estimate for the percentage shown in Column B.

However, the 2nd category combines patients covered by Medicaid under PLAN First with patients who had no health insurance and could not be covered. Because a count of the number of uninsured family planning patients was not available (as of May 13, 2008), the number of uninsured patients was estimated as described in this row's note to Column E. The numerator for the estimated percentage of family planning patients who were covered by Medicaid is 83,689: which is the sum of patients in the above-named pertinent categories (38,463 + 54,706), minus the estimated number of uninsured Latino family planning patients (9,480).

19. **Section Number:** Main
Field Name: AllOthers_None
Row Name: Others
Column Name: None %
Year: 2009
Field Note:

The source document, described in the note to Column A of this row, combines patients having no health insurance with patients in another category. Thus, we cannot directly determine how many Alabama Department of Public Health (ADPH) family planning patients had no insurance coverage from documents available on May 13, 2008.

A very rough, indirect estimate of this number was made as follows. Per information received from the Bureau of Family Health Services' Division of Women's Health, ADPH served 10,533 Latino family planning clients in FY 2007. Based on perception, rather than an actual count, staff from that division very roughly estimate that about 90% of the 10,533 Latino clients--or 9,480 clients--had no insurance and could not be covered by Medicaid under PLAN First. Thus, we roughly estimate that 9,480/102,692, or 9.2%, of family planning clients served by ADPH were uninsured.

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: AL

Reporting Year: 2007

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	63,486	42,599	19,533	190	823	12		329
Title V Served	1,389	346	934	9	25	32	34	9
Eligible for Title XIX	30,393	16,541	13,298	100	253	4		197
INFANTS								
Total Infants in State	62,346	42,047	18,970	185	812	12		320
Title V Served	60,117	40,448	18,389	180	780	11		309
Eligible for Title XIX	57,803	31,826	23,362	173	484	0		1,958

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	58,686	4,739	61	3,487	30	105	986	131
Title V Served	1,236	153						
Eligible for Title XIX	27,556	2,800	37	2,123	9	40	561	67
INFANTS								
Total Infants in State	57,613	4,675	58	3,435	29	104	976	131
Title V Served	55,560	4,500	57	3,309	29	99	937	125
Eligible for Title XIX	50,074	6,301	1,428					

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTotal_All
Row Name: Total Deliveries in State
Column Name: Total All Races
Year: 2009
Field Note:
 For all completed fields in this row, the numbers were obtained by adding the number of residential fetal deaths of 20 or more weeks gestation to the number of residential live births. Because final numbers for 2007 are not available, the numbers shown are for calendar year 2006.
2. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTotal_More
Row Name: Total Deliveries in State
Column Name: More Than One Race Reported
Year: 2009
Field Note:
 The number for the multiracial category is not available to the Bureau of Family Health Services.
3. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_All
Row Name: Title V Served
Column Name: Total All Races
Year: 2009
Field Note:
 For all fields in this row, numbers were estimated by summing numbers from 2 reports: 1) The State of Alabama's Maternity Table II, which reports numbers for 65 of the State's 67 counties, and Mobile County's Maternity Table II. Each report is for fiscal year 2007. The Jefferson County Department of Health does not provide prenatal care. Of the 1,389 Title V-served deliveries reported here, 1,368 were served by the Mobile County Health Department.
4. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_More
Row Name: Title V Served
Column Name: More Than One Race Reported
Year: 2009
Field Note:
 Only 1 of the sources used to estimate this number reports deliveries for the multiracial category. The 2 sources are specified in the note to the Column A field of this row.
5. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2009
Field Note:
 For all completed columns in this row, the numbers were obtained by adding the number of residential fetal deaths of 20 or more weeks gestation to the number of residential live births. In both cases, the numbers pertain to infants whose delivery was paid for by Medicaid. Because final numbers for 2007 are not available, the numbers shown are for calendar year 2006.
6. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_More
Row Name: Eligible for Title XIX
Column Name: More Than One Race Reported
Year: 2009
Field Note:
 The number for the multiracial category is not available to the Bureau of Family Health Services.
7. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTotal_All
Row Name: Total Infants in State
Column Name: Total All Races
Year: 2009
Field Note:
 For all completed fields in this row, the numbers were obtained by subtracting the number of residential infant deaths from the number of residential live births. Because final numbers for 2007 are not available, the numbers shown are for calendar year 2006. Residence is defined according to the infant's residence for deaths and the mother's residence for live births.
8. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTotal_More
Row Name: Total Infants in State
Column Name: More Than One Race Reported
Year: 2009
Field Note:
 The number for the multiracial category is not available to the Bureau of Family Health Services.
9. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleV_All
Row Name: Title V Served
Column Name: Total All Races
Year: 2009
Field Note:
 To account for the fact that an unknown number of second and repeat tests are counted as being initial screens (see note to Form 06), we applied a factor of 0.95 to the 63,281 newborns reported as being screened for PKU in 2007, yielding an estimate of 60,117 infants served. We believe that this is a conservative estimate and that the true number of newborns screened for metabolic disorders (and therefore served by Title V) may be higher than the estimated number.

 Racial distribution for Columns B through H of this row was estimated by assuming the racial distribution of residential live births in calendar year 2006.
10. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleV_More
Row Name: Title V Served
Column Name: More Than One Race Reported
Year: 2009
Field Note:
 The number for the multiracial category is not available to the Bureau of Family Health Services.

11. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2009
Field Note:
The source for all fields in this row is a report provided upon request by the Alabama Medicaid Agency, entitled: "Alabama Medicaid Agency FY 2007 Eligibles Less than One Year of Age by Race."
12. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_White
Row Name: Eligible for Title XIX
Column Name: White
Year: 2009
Field Note:
The report used (described in the note to the Column A field of this row) includes a "Hispanic" category, but does not report the race of Hispanic individuals. Therefore, the number shown here is the sum of the 25,525 White individuals and the 6,301 Hispanic individuals.
13. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_More
Row Name: Eligible for Title XIX
Column Name: More Than One Race Reported
Year: 2009
Field Note:
The number for the multiracial category is not available to the Bureau of Family Health Services.
14. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_TotalNotHispanic
Row Name: Total Deliveries in State
Column Name: Total Not Hispanic or Latino
Year: 2009
Field Note:
For all completed fields in this row, the numbers were obtained by adding the number of residential fetal deaths of 20 or more weeks gestation to the number of residential live births. Because final numbers for 2007 are not available, the numbers shown are for calendar year 2006.
15. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalNotHispanic
Row Name: Title V Served
Column Name: Total Not Hispanic or Latino
Year: 2009
Field Note:
The following 2 reports were used to estimate this number: 1) The State of Alabama's Maternity Table II, which reports numbers for 65 of the State's 67 counties, and Mobile County's Maternity Table II. Each report is for fiscal year 2007. The Jefferson County Department of Health does not provide prenatal care. Of the 1,389 Title V-served deliveries in FY 2007, 1,368 were served by the Mobile County Health Department.

None of the 21 pregnant women reported on the State's Maternity Table II were reported to be Hispanic. Mobile County's Maternity Table II reported that 153 of the pregnant women served were Hispanic. The number shown in this field was estimated by subtracting 153 from the 1,389 Title V-served deliveries. However, since neither maternity table includes a category for individuals whose ethnicity was not reported, the 1,236 reported non-Hispanic Title V-served deliveries may include some Hispanic individuals.
16. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalHispanic
Row Name: Title V Served
Column Name: Total Hispanic or Latino
Year: 2009
Field Note:
Sources used do not report ethnicity according to country of origin. Also, the sources do not state a frequency for "ethnicity not reported." Accordingly, Columns C through B.5 are left blank.
17. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_NotReported
Row Name: Title V Served
Column Name: Ethnicity Not Reported
Year: 2009
Field Note:
The reports used for Title V-served deliveries do not include a category for individuals whose ethnicity was not reported.
18. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_Mexican
Row Name: Title V Served
Column Name: Mexican
Year: 2009
Field Note:
No information on country of origin of Hispanic Title V-served deliveries is available to the Bureau of Family Health Services.
19. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_Cuban
Row Name: Title V Served
Column Name: Cuban
Year: 2009
Field Note:
No information on country of origin of Hispanic Title V-served deliveries is available to the Bureau of Family Health Services.
20. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_PuertoRican
Row Name: Title V Served
Column Name: Puerto Rican
Year: 2009
Field Note:
No information on country of origin of Hispanic Title V-served deliveries is available to the Bureau of Family Health Services.
21. **Section Number:** II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_CentralAmerican
Row Name: Title V Served
Column Name: Central and South American

Year: 2009

Field Note:

No information on country of origin of Hispanic Title V-served deliveries is available to the Bureau of Family Health Services.

22. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_EthnicityOther

Row Name: Title V Served

Column Name: Other and Unknown

Year: 2009

Field Note:

No information on country of origin of Hispanic Title V-served deliveries is available to the Bureau of Family Health Services.

23. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2009

Field Note:

For all fields in this row, the numbers were obtained by adding the number of residential fetal deaths of 20 or more weeks gestation to the number of residential live births. In both cases, the numbers pertain to infants whose delivery was paid for by Medicaid. Because final numbers for 2007 are not available, the numbers shown are for calendar year 2006.

24. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_TotalNotHispanic

Row Name: Total Infants in State

Column Name: Total Not Hispanic or Latino

Year: 2009

Field Note:

For all completed fields in this row, the numbers were obtained by subtracting the number of residential infant deaths from the number of residential live births. Because final numbers for 2007 are not available, the numbers shown are for calendar year 2006. Residence is defined according to the infant's residence for deaths and the mother's residence for live births.

25. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_TotalNotHispanic

Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2009

Field Note:

To account for the fact that an unknown number of second and repeat tests are counted as being initial screens (see note to Form 06), we applied a factor of 0.95 to the 63,281 newborns reported as being screened for PKU in 2007, yielding an estimate of 60,117 infants served. We believe that this is a conservative estimate and that the true number of newborns screened for metabolic disorders (and therefore served by Title V) may be higher than the estimated number.

Ethnic distribution of Title V-served infants was estimated by assuming the ethnic distribution of residential live births in calendar year 2006.

26. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2009

Field Note:

The sources used do not specify ethnicity according to country of origin. Therefore, the country-of-origin numbers were estimated by applying corresponding proportions for Alabama residential live births in calendar year 2006. Applying these proportions resulted in fractions of individuals, which were rounded to the nearest whole number because the Title V Information System does not allow fractions to be entered into the number fields. Therefore, the sum of Columns B.1-B.5 is 4,499 rather than 4,500 due to rounding error.

27. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2009

Field Note:

The source for all fields in this row is a report provided upon request by the Alabama Medicaid Agency, entitled: "Alabama Medicaid Agency FY 2007 Eligibles Less than One Year of Age by Race." However, as detailed in the note to the Column C field of this row, the report provides 7 mutually exclusive categories: 1 of which is "Hispanic" and 1 of which is "Unknown." The 1,428 infants in the "Unknown" category are shown in Column C of this row. Since many of these 1,428 infants may be non-Hispanic, the 50,074 Title XIX-eligible infants reported in the Column A field of this row may notably underestimate the number of non-Hispanic Title XIX-eligible infants.

28. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_TotalHispanic

Row Name: Eligible for Title XIX

Column Name: Total Hispanic or Latino

Year: 2009

Field Note:

The source used does not report ethnicity according to country of origin. Accordingly, Columns B.1-B.5 are left blank.

29. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_NotReported

Row Name: Eligible for Title XIX

Column Name: Ethnicity Not Reported

Year: 2009

Field Note:

The report used is described in the Column A field note for this row, and reports 7 mutually exclusive categories: White, Black, American Indian, Other, Unknown, Asian, and Hispanic. This field shows the 1,428 individuals who were classified as "Unknown."

30. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_Mexican

Row Name: Eligible for Title XIX

Column Name: Mexican

Year: 2009

Field Note:

No information on country of origin of Hispanic Title 19-eligible infants is available to the Bureau of Family Health Services.

31. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_Cuban

Row Name: Eligible for Title XIX

Column Name: Cuban

Year: 2009

Field Note:

No information on country of origin of Hispanic Title V-served infants is available to the Bureau of Family Health Services.

32. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_PuertoRican

Row Name: Eligible for Title XIX

Column Name: Puerto Rican

Year: 2009

Field Note:

No information on country of origin of Hispanic Title V-served infants is available to the Bureau of Family Health Services.

33. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_CentralAmerican

Row Name: Eligible for Title XIX

Column Name: Central and South American

Year: 2009

Field Note:

No information on country of origin of Hispanic Title V-served infants is available to the Bureau of Family Health Services.

34. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_EthnicityOther

Row Name: Eligible for Title XIX

Column Name: Other and Unknown

Year: 2009

Field Note:

No information on country of origin of Hispanic Title V-served infants is available to the Bureau of Family Health Services.

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

	FY 2009	FY 2008	FY 2007	FY 2006	FY 2005
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 654-1385</u>				
2. State MCH Toll-Free "Hotline" Name	Heaslthy Beginnings	Healthy Beginnings	Healthy Beginnings	Healthy Beginnings	Healthy Beginnings
3. Name of Contact Person for State MCH "Hotline"	<u>Charlena Freeman</u>				
4. Contact Person's Telephone Number	<u>(334) 206-2973</u>				
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>2,040</u>	<u>2,362</u>	<u>2,454</u>

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

	FY 2009	FY 2008	FY 2007	FY 2006	FY 2005
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 846-3697</u>				
2. State MCH Toll-Free "Hotline" Name	None	None	None	None	None
3. Name of Contact Person for State MCH "Hotline"	<u>Melinda Davis</u>	<u>Melinda Davis</u>	<u>Dawn Ellis</u>	<u>Dawn Ellis</u>	<u>Dawn Ellis</u>
4. Contact Person's Telephone Number	<u>(334) 613-2360</u>	<u>(334) 613-2360</u>	<u>(334) 613-2294</u>	<u>(334) 613-2294</u>	<u>(334) 613-2294</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>25,983</u>	<u>27,428</u>	<u>34,945</u>

FORM NOTES FOR FORM 9

Children's Rehabilitation Service operates a toll-free number in the State Office and 15 district offices. This number is the sum of calls received on all 16 lines for FY 2007.

FIELD LEVEL NOTES

None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2009
[Sec. 506(A)(1)]
STATE: AL

1. State MCH Administration:
(max 2500 characters)

The Title V Program is administratively located within the Bureau of Family Health Services (FHS), a major unit within the Alabama Department of Public Health (ADPH). Through FHS, ADPH administers all aspects of the Title V Program except services for children and youth with special health care needs (CYSHCN). Children's Rehabilitation Service (CRS), administered by the Alabama Department of Rehabilitation Services (ADRS), is the lead agency for services to CYSHCN. This arrangement requires close collaboration between ADPH and CRS. In addition to the Title V Program, FHS administers the Title X Family Planning Grant; the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC); and the State Dental Program. In addition to administering CRS, ADRS administers the Alabama Hemophilia Program.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>11,683,733</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>31,201,723</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>4,860,537</u>
7. Program Income (Line 6, Form 2)	\$ <u>41,643,312</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>89,389,305</u>

9. Most significant providers receiving MCH funds:

<u>County Health Departments</u>
<u>Children's Rehabilitation Service</u>
<u>Sparks Clinic at Civitan Int'l Research Center</u>
<u>The Center for Child and Adolescent Development</u>

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

a. Pregnant Women	<u>1,389</u>
b. Infants < 1 year old	<u>60,117</u>
c. Children 1 to 22 years old	<u>34,235</u>
d. CSHCN	<u>16,346</u>
e. Others	<u>102,692</u>

11. Statewide Initiatives and Partnerships:

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

Financial support for direct services in county health departments (CHDs): By helping to pay for salaries, supplies, and equipment in CHDs statewide, Title V funds help provide physical assessment, immunizations, vision and hearing screening, nutritional assessment, developmental appraisal, and dental care for children. Care coordination in CHDs: Care coordination helps patients to access and obtain maximum benefit from needed health-related services. The Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Care Coordination Program, implemented under Patient 1st, the Alabama Medicaid Agency's primary care case management program, is the primary channel through which ADPH provides care coordination for children. ADPH care coordinators serve adults enrolled in Patient 1st as well. FHS staff provide quarterly training events for area- or county-level ADPH care coordinators. Children and youth with special health care needs (CYSHCN): Through 15 community-based offices, CRS provides information, referral, medical, rehabilitative, and care coordination services to CYSHCN. Enabling services include transportation assistance, interpretation, and family/youth support.

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

Newborn Screening: ADPH administers 2 statewide newborn screening programs through FHS's Division of Newborn Screening. One of these programs, the Newborn Screening Program (NSP), provides population-based screening of newborns for phenylketonuria (PKU), hypothyroidism, galactosemia, hemoglobinopathies, and adrenal hyperplasia. Further, through the use of Tandem Mass Spectrometry, NSP is incrementally adding tests for other disorders to the screening panel, which currently screens for 28 disorders. The second of these screening programs is the Newborn Hearing Screening Program (NHSP), which partners with CRS and other public and private service providers to implement universal newborn hearing screening. All of Alabama's 59 birthing hospitals have voluntary universal newborn hearing screening programs in place. NHSP staff track infants who did not pass or did not have a hearing screening to ensure that they receive appropriate follow-up services. Along with NHSP staff, CRS ensures access to appropriate diagnostic, treatment, and intervention services for hearing impairment. Adolescent pregnancy prevention: Family planning services for adolescents are provided in ADPH clinics, and the State Children's Health Insurance Program (SCHIP) continues offering family planning coverage for eligible teens up to 200% of poverty.

c. Infrastructure Building Services:
(max 2500 characters)

State Perinatal Program: This program operates under the State Board of Health and the State Perinatal Advisory Council (SPAC). SPAC represents the Regional Perinatal Advisory Councils, and advises the State Health Officer in the planning, organization, and implementation of the Perinatal Program. The Director of the State Perinatal Program and 5 Regional Nurse Perinatal Coordinators are administratively located in FHS, and engage in activities, including infant mortality review, to address concerns of SPAC and the Regional Perinatal Advisory Councils. Healthy Child Care Alabama Project: This program is administratively located in FHS, and is a collaborative effort between ADPH and the Alabama Department of Human Resources. Through the program 10 registered nurse consultants work in a variety of community settings, in 61 of the State's 67 counties. Their services include providing developmental, health, and safety classes, coordinating community services for some children with special health care needs, and identifying community resources to promote child health and safety. CRS Parent Connection Program: This program includes a parent support network, activities of the State and Local Parent Advisory Committees, employment of Parent Consultants, publication of a newsletter, and sibling support activities. Healthy People 2010: CRS continues its lead role in planning and implementing activities related to the Healthy People 2010 objectives for CYSHCN. CRS continues enhancing its management information system and increasing its use of communication technology for educating the public, clients, and families.

12. The primary Title V Program contact person:

Name Chris R. Haag, MPH
Title Deputy Director, Bureau of Family Health Services
Address Alabama Department of Public Health, PO Box 303017
City Montgomery
State Alabama
Zip 36130-3017
Phone (334) 206-5331
Fax (334) 206-2950
Email chaag@adph.state.al.us
Web www.adph.org

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

Name Melinda Davis, MS, CCC-A
Title Assistant Commissioner
Address Children's Rehabilitation Service 2129 E. South Blvd.
City Montgomery
State AL
Zip 36116
Phone (334) 281-8780
Fax (334) 613-3553
Email melinda.davis@rehab.alabama.gov
Web www.rehab.alabama.gov

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: AL

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.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	78	59	64	86	88
Denominator	78	59	64	86	88

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

	2008	2009	2010	2011	2012
Annual Performance Objective	100	100	100	100	100
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:** Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2007

Field Note:

The 88 infants include 2 infants with hyperphenylalaninemia, rather than classic PKU. Depending on how high their phenylalanine levels are, some infants with hyperphenylalaninemia require dietary management.

2. **Section Number:** Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2006

Field Note:

All results are for calendar years. Objectives have remained at 100% for several years, and will remain there unless the status of this indicator changes.

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)

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	66	66	66.1	66.1	70
Annual Indicator	66.1	66.1	66.1	66.1	59.9
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.</p> <p><i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	59.9	59.9	59.9	59.9	59.9
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:** Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2007

Field Note:

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 (HRSA) and the U.S. Centers for Disease Control and Prevention (CDC) in 2005-06. 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.

- Section Number:** Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2006

Field Note:

Through 2006, each year shown for this indicator is pre-populated with the estimate for Alabama from the National Survey of CSHCN that was conducted in 2001. Additional information about this survey is provided below. Continued use of the estimate from the 2001 survey for annual performance objectives reflects that the survey is conducted only periodically, and a more recent estimate is not yet available. New data are expected to be released in FY 2007.

The National Survey of CSHCN utilized State and Local Area Integrated Telephone Survey (SLAITS) procedures. The survey is the result of analyses conducted by the staff of the Special Populations Surveys Branch, Division of Health Interview Statistics, National Center for Health Statistics, CDC, and provided to HRSA's Maternal and Child Health Bureau.

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.

- Section Number:** Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's field note to year 2006 about data-related issues.

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)

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	53	53	53.9	53.9	60
Annual Indicator	53.9	53.9	53.9	53.9	50
Numerator					
Denominator					

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	50	50	50	50	50
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:** Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2007

Field Note:

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 (HRSA) and the U.S. Centers for Disease Control and Prevention (CDC) in 2005-06. 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 2 surveys are not comparable for this indicator.

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

Field Name: PM03

Row Name:

Column Name:

Year: 2006

Field Note:

Through 2006, each year shown for this indicator is pre-populated with the estimate for Alabama from the National Survey of CSHCN that was conducted in 2001. Additional information about this survey is provided below. Continued use of the estimate from the 2001 survey for annual performance objectives reflects that the survey is conducted only periodically, and a more recent estimate is not yet available. New data are expected to be released in FY 2007.

The National Survey of CSHCN utilized State and Local Area Integrated Telephone Survey (SLAITS) procedures. The survey is the result of analyses conducted by the staff of the Special Populations Surveys Branch, Division of Health Interview Statistics, National Center for Health Statistics, CDC, and provided to HRSA's Maternal and Child Health Bureau.

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.

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

Field Name: PM03

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's field note to year 2006 about data-related issues.

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)

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	59	59	59.7	59.7	62
Annual Indicator	59.7	59.7	59.7	59.7	65
Numerator					
Denominator					

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	65	65	65	65	65
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:** Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2007

Field Note:

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 (HRSA) and the U.S. Centers for Disease Control and Prevention (CDC) in 2005-06. 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.

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

Field Name: PM04

Row Name:

Column Name:

Year: 2006

Field Note:

Through 2006, each year shown for this indicator is pre-populated with the estimate for Alabama from the National Survey of CSHCN that was conducted in 2001. Additional information about this survey is provided below. Continued use of the estimate from the 2001 survey for annual performance objectives reflects that the survey is conducted only periodically, and a more recent estimate is not yet available. New data are expected to be released in FY 2007.

The National Survey of CSHCN utilized State and Local Area Integrated Telephone Survey (SLAITS) procedures. The survey is the result of analyses conducted by the staff of the Special Populations Surveys Branch, Division of Health Interview Statistics, National Center for Health Statistics, CDC, and provided to HRSA's Maternal and Child Health Bureau.

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.

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

Field Name: PM04

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's field note to year 2006 about data-related issues.

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)

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	73	73	73.7	73.7	78
Annual Indicator	73.7	73.7	73.7	73.7	91.7
Numerator					
Denominator					

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	91.7	91.7	91.7	91.7	91.7
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:** Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2007

Field Note:

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 (HRSA) and the U.S. Centers for Disease Control and Prevention (CDC) in 2005-06. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate this indicator for the 2005-06 CSHCN survey. The data for the 2 surveys are not comparable for this indicator.

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

Field Name: PM05

Row Name:

Column Name:

Year: 2006

Field Note:

Through 2006, each year shown for this indicator is pre-populated with the estimate for Alabama from the National Survey of CSHCN that was conducted in 2001. Additional information about this survey is provided below. Continued use of the estimate from the 2001 survey for annual performance objectives reflects that the survey is conducted only periodically, and a more recent estimate is not yet available. New data are expected to be released in FY 2007.

The National Survey of CSHCN utilized State and Local Area Integrated Telephone Survey (SLAITS) procedures. The survey is the result of analyses conducted by the staff of the Special Populations Surveys Branch, Division of Health Interview Statistics, National Center for Health Statistics, CDC, and provided to HRSA's Maternal and Child Health Bureau.

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.

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

Field Name: PM05

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's field note to year 2006 about data-related issues.

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.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	6	6	6	6	10
Annual Indicator	5.8	5.8	5.8	5.8	38.3
Numerator					
Denominator					

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	38.3	38.3	38.3	38.3	38.3
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:** Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2007

Field Note:

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 (HRSA) and the U.S. Centers for Disease Control and Prevention (CDC) in 2005-06. 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 this indicator, and findings from the 2005-06 survey may be considered baseline data.

2. **Section Number:** Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2006

Field Note:

Through 2006, each year shown for this indicator is pre-populated with the estimate for Alabama from the National Survey of CSHCN that was conducted in 2001. Additional information about this survey is provided below. Continued use of the estimate from the 2001 survey for annual performance objectives reflects that the survey is conducted only periodically, and a more recent estimate is not yet available. New data are expected to be released in FY 2007.

The National Survey of CSHCN utilized State and Local Area Integrated Telephone Survey (SLAITS) procedures. The survey is the result of analyses conducted by the staff of the Special Populations Surveys Branch, Division of Health Interview Statistics, National Center for Health Statistics, CDC, and provided to HRSA's Maternal and Child Health Bureau.

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.

3. **Section Number:** Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's field note to year 2006 about data-related issues.

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.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	83.8	86.9	83.8	85.1	86.4
Annual Indicator	78.9	82.6	82.3	85.3	81.9
Numerator					
Denominator					

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	87.7	89	89	89	89
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: Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2007

Field Note:

Values for all years are from the National Immunization Survey conducted by the U.S. Centers for Disease Control and Prevention (CDC). Tables published by CDC do not provide numerators and denominators, which is why these items are left blank, but show a 95% confidence interval of + or - 5.8 for Alabama in FY 2007.

As indicated by the confidence interval, this indicator can fluctuate notably from year to year, and the decline in 2007 relative to 2006 was not statistically significant. However, because this indicator can fluctuate and was notably below the objective for FY 2007, we set the objective for 2012 at 89.0%: the same as the objective for 2009-2011. The specific CDC table used was "tab03_antigen_state.xls," "Q3/2006-Q2/2007." Children in this survey were born between July 2003 and December 2005.

2. Section Number: Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2006

Field Note:

Values for all years are from the National Immunization Survey conducted by CDC. Tables published by CDC do not provide numerators and denominators, which is why these items are left blank, but show a 95% confidence interval of + or - 5.1 for Alabama in FY 2006. As indicated by the confidence interval, this indicator can fluctuate notably from year to year. For this reason, we set the objective for 2011 at 89.0%: the same as the objective for 2009 and 2010. The specific CDC table used was "tab03_antigen_state.xls," "Q3/2005-Q2/2006." Children in this survey were born between July 2002 and January 2005.

3. Section Number: Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2005

Field Note:

Tables published by CDC show a 95% confidence interval of + or - 6.2 for Alabama in FY 2005. Since this indicator did not improve in 2005, we set the objective for 2010 at 89.0%, the same as the objective for 2009.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	35.2	33.8	26.8	25.1	24.8
Annual Indicator	27.3	27.4	25.3	27.2	28.3
Numerator	2,660	2,672	2,486	2,683	2,789
Denominator	97,295	97,694	98,093	98,695	98,695

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

	2008	2009	2010	2011	2012
Annual Performance Objective	24.6	24.3	24.1	23.9	23.9
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: Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2007

Field Note:

This estimate was added on September 19, 2008, and is not discussed in the narrative. Because a year 2007 population projection for this age group is not readily available to the Bureau of Family Health Services, the year 2006 population projection is shown as our best estimate for this population in year 2007 as well. By fiscal year (FY) 2009, the bureau will seek to develop population estimates for this age group in recent years. Toward the end of a decade, population projections, which are based on the most recent U.S. Census, tend to become inaccurate.

The objective for 2012 has been set to match that for 2011. We are aware that objectives for 2006 and 2007 have not been met and that objectives for 2008 forward are unlikely to be met, given the increase in this indicator 2 years in a row. By late fiscal year 2009 we will revise objectives from 2010 onward, based on the most recent 3-year baseline available for this rate at that time.

2. Section Number: Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2006

Field Note:

All estimates are for calendar years (CYs). All denominators shown represent 60% of the population projection for females aged 15-19 years in the specified CY. These projections are made by Alabama's Center for Business and Economic Research.

Like other objectives from 2006 onward, the objective for 2011 requires a continuing annual decline of 1.0% from the 2005 baseline.

3. Section Number: Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2005

Field Note:

See field note to year 2006 for data sources and methods.

Comparing 2-year rates, this rate declined (improved) from 30.35 live births per 1,000 females aged 15-17 years in 2001-02 to 26.3 live births per 1,000 such females in 2004-05. This decline represents an average annual decline of 4.6% (per a multiplicative model), or an overall decline of 13.4%. Objectives from 2006 onward require a modest annual decline of 1.0% from the 2005 baseline. These objectives are somewhat challenging, nevertheless, since the 2005 baseline rate is notably lower than any other rate during the 5-year period shown, and continuation of the previous rapid decline should not be assumed.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective	67	23.2	23.7	24.2	26.7
Annual Indicator	22.7	22.9	23.2	26.4	26.4
Numerator	384			629	629
Denominator	1,692			2,380	2,380

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				
	2008	2009	2010	2011	2012
Annual Performance Objective	27	27.2	27.5	27.7	27.7
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: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2007

Field Note:

Another observation-based survey on the prevalence of dental sealants is expected to be conducted in FY 2009. Until then, we are using the observation-based numbers for FY 2006 as our best estimates for years in which a survey of dental sealants is not conducted.

Since we do not have current observation-based data, we have set the year 2012 objective to match the year 2011 objective.

2. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2006

Field Note:

The provisional estimate for 2006 is from an observation-based, representative statewide survey of dental sealants among third-grade children in the State, conducted from January through May 2006. Objectives from 2007-2010 have been revised, and the one for 2011 set, to require an annual increase (improvement) of 1.0% from the (unrounded) provisional 2006 baseline.

Targets for FYs 2002 and 2003 were set prior to those years, using the only then-available estimates for 1999 and 2000 as baseline years. The then-available estimates were based on parental report and were spuriously high, leading to unrealistically high targets for FYs 2002 and 2003.

3. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2005

Field Note:

For estimates from FY 2001 through FY 2005, only that for FY 2003 was based on a direct-observation survey of a statewide representative sample of third graders. Such a survey has not been conducted since FY 2003. We therefore estimated the percentage for FY 2004 by multiplying 1.01 times the observation-based percentage for FY 2003, and that for FY 2005 by multiplying 1.01 times the aforesaid interpolated estimate for FY 2004. The factor of 1.01 was chosen because, based on 2 observation-based point estimates, the annual rate of improvement between FYs 1991 and 2003 had been 1.061%. Numerators and denominators are not provided for interpolated estimates, shown for 2004 and 2005.)

Interpolated estimates will be provided until findings from another representative, direct-observation survey of dental sealants in Alabama third graders become available. Family Health Services' Oral Health Unit staff and University of Alabama School of Dentistry in Birmingham pediatric residents began such a survey in January 2006 and plan to complete it in FY 2007. Data from these screenings are to be included in the U.S. Centers for Disease Control and Prevention's National Oral Health Surveillance System database.

From the 2003 baseline, targets require an annual improvement of 2.1% per year--a modest improvement, but twice that of the estimated historical rate of improvement of 1.061% per year.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	7.7	7.5	6.4	5.8	6.2
Annual Indicator	5.4	6.6	6.5	6.3	
Numerator	50	62	61	59	
Denominator	934,255	935,145	936,034	935,525	

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?

Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	6.1	6	5.9	5.7	5.7
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: Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

Though the final year 2006 file is available, staffing limitations have delayed analysis of the file. We expect to have a final estimate for 2006 by September 2008.

Due to the lack of a final estimate for 2006 or 2007, the objective for 2012 has been set to match that for 2011.

2. Section Number: Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 rate is provisional. Per Center for Health Statistics staff, the 2006 death file includes all the deaths, though they are waiting for the cause of death for about 100 records.

All denominators represent the population projection for children 14 years of age and younger in the specified calendar year. These projections were made by Alabama's Center for Business and Economic Research.

Objectives for 2003-2005 are retained from the Maternal and Child Health Services Block Grant 2003 Report/2005 Application. The objective for 2006, developed in FY 2005, required an annual decline of 2.0% from the 3-year baseline of 6.6 deaths per 100,000 in 1999-01 and was not achieved. Objectives from 2007 forward require a decline of 2.0% per year from the unrounded provisional 3-year rate for 2004-06 (6.5 per 100,000), considering that rate as the 2005 baseline.

3. Section Number: Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2005

Field Note:

This indicator increased from 6.2 deaths per 100,000 in 2001-02 to 6.6 deaths per 100,000 in 2004-05. However, the indicator has not shown a consistent trend in recent years (2001-2005).

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective				26.1	27.1
Annual Indicator		25.6	23.2	28.3	
Numerator		13,714	12,835	16,533	
Denominator		53,569	55,363	58,353	

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?

Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	28.2	29.4	30.5	30.5	30.5
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: Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2007

Field Note:

Estimates for this indicator are for calendar year (CY) and are from Pregnancy Risk Assessment Monitoring System (PRAMS) data, managed by the U.S. Centers for Disease Control and Prevention (CDC). Alabama PRAMS is a population-based mail/telephone survey of Alabama residents who recently gave birth in the State. A stratified complex sampling design is used, and numbers reported here are weighted to represent all live births occurring in Alabama to Alabama residents. Because data are based on a sample, some statistical imprecision is expected. Observations for which breastfeeding status is unknown or unreported are excluded from the denominator.

Due to time required for data management, data for a given year do not generally become available to the states until at least 16 months after the end of the data collection year. For example, PRAMS data for 2004 were not available by June 2006. The Alabama Department of Public Health's Center for Health Statistics will provide numbers from the PRAMS 2007 dataset soon after CDC provides the dataset, but numbers for 2007 are not expected to be available before April 2009.

When available, confidence intervals for the following estimates are shown parenthetically. For the surveillance period 2000-2004, the weighted percentage of PRAMS mothers who were breastfeeding at the time increased slightly each year: from 20.3% (17.7-22.9) in 2000 to 25.5% (22.5-28.8) in 2004. Though the estimate then declined to 23.5% (20.6-26.6) in 2005, it increased to 28.3% in 2006. (Estimates shown on Form 11 for 2004 and 2005 are preliminary estimates that were provided before the State's PRAMS reports for those years were published. At this time, the Title V Information System does not allow us to directly correct estimates for those years.)

Objectives through 2010, set in FY 2006, require an average annual increase (improvement) of 4.0% per year, from the unrounded 2003 baseline of 23.2%. We are aware that the estimated prevalence for CY 2006 exceeds (is better than) objectives for 2007 and 2008. However, since the estimate for this measure may fluctuate from year to year, the objectives through 2010 are sufficiently challenging, and later objectives have been set to match the 2010 objective. If this indicator improves 3 years in a row, objectives may be revised upward.

2. Section Number: Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2006

Field Note:

Estimates for this indicator are for CYs and are from PRAMS data, managed by CDC. See note to year 2007 for more information about PRAMS.

3. Section Number: Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2005

Field Note:

Estimates are from PRAMS data. See the year 2006 field note for information about survey design and methods. The percentage of mothers who were breastfeeding at the time of the survey is used as a surrogate for the percentage breastfeeding at 6 months following delivery, since the survey questionnaire is sent to mothers about 2-4 months after delivery.

Per weighted PRAMS data for 2005, 23.2% of surveyed women were breastfeeding at the time of the survey. The numerator was therefore estimated by multiplying .232 times the weighted denominator.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	85	87.5	90	95.2	95.3
Annual Indicator	95.6	88.2	95.1	94.3	95.9
Numerator	55,846	51,459	56,371	58,531	61,342
Denominator	58,397	58,369	59,300	62,100	63,986

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?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	95.4	95.5	95.6	95.7	95.7
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: Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2007

Field Note:

All estimates pertain to calendar years (CYs). The denominator for each year is the number of occurrent live births during the year. Denominators for 2006 and 2007 are provisional.

The numerator for 2003 is based on hospitals performing screenings in CY 2003. This numerator was estimated by multiplying the estimated number of live births in 2003 (56,986) in hospitals participating in the Newborn Hearing Screening Program by .98. The factor of .98 was applied to allow for failure to screen a few infants in participating hospitals due to equipment failure or other issues. (Based on contacts with and reports submitted by participating hospitals, the Newborn Hearing Screening Coordinator estimated that at least 98% of live-born infants in these hospitals had undergone hearing screening prior to discharge).

Objectives for 2006 onward were set to gradually reach 95.6%, the highest value on record for this indicator, by 2010, increase slightly in 2011, and then remain stable. We are aware that the observed value of 95.9% in 2007 slightly surpasses (is slightly better than) objectives through 2012. However, given historical values for this indicator (60.2% in 1999, 84.0% in 2001, and 88.2% in 2004) and the potential for yearly fluctuations, remaining at or slightly above 95% would represent a notable achievement. Further, the estimate for 2005-07 combined is 95.1%, which is less than objectives from 2006 onward.

2. Section Number: Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2006

Field Note:

All estimates pertain to CYs. The denominator for each year is the number of occurrent live births during the year.

3. Section Number: Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2005

Field Note:

See year 2006 note.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	11.1	8.6	8.5	7.3	6.9
Annual Indicator	8.6	7.4	4.5	7.4	
Numerator	95,000	81,000	49,000	82,000	
Denominator	1,101,000	1,095,000	1,083,000	1,114,000	

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

	2008	2009	2010	2011	2012
Annual Performance Objective	6.8	6.8	6.7	6.6	6.6
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

1. Section Number: Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2007

Field Note:

Reference for estimates is Historical Health Insurance Table 5 (HIA-5), obtained from a U.S. Census Web site. Table HIA-5 does not yet include estimates for 2007. When estimates for 2007 are provided on the U.S. Census Web site, this report/application will be updated accordingly at the first opportunity.

As stated in the note for 2006, the objectives for 2007 may be challenging--but will be retained unless trends over a 3-year period indicate that the objectives shown are clearly too low or too high.

2. Section Number: Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2006

Field Note:

Reference for estimates is the revised Historical Health Insurance Table 5 (HIA-5), which pertains to persons under 18 years of age, obtained from the U.S. Census Web site on April 17, 2008. As of April 2008, the Title V Information System does not allow us to directly enter revised numbers for 2003 or 2004. Therefore, estimates shown for these years are from the original Historical Health Insurance Table 5 (HI-5). According to HIA-5 (which is preferable to HI-5), the percentage of Alabama residents under 18 years of age who were uninsured was 7.9% (87,000/1,101,000) in 2003 and 6.3% (69,000/1,096,000) in 2004.

Because the references round numbers of individuals to thousands, percentages calculated by the Title V Information System's Web-based reporting package sometimes differ slightly from estimates shown in Census Bureau tables.

Objectives through 2006 were retained from previous years. Objectives for 2007 onward require an average annual decline (multiplicative model) of 1.0% per year, from the 3-year baseline for 2003-05, using Table HI-5. (Table HIA-5 was not available to the writer when objectives for 2006-2011 were set.) For the purpose of computing objectives for 2007 onward, to minimize random fluctuation from year to year, this 3-year percentage (7.10582%) was considered to be the 2004 baseline. Objectives from 2007 onward therefore require a 1.0% annual reduction from a baseline of 7.10582% for 2004. Because the objectives are carried to only 1 decimal, they sometimes remain the same 2 years in a row.

We recognize that the observed value for 2005 is notably below (better than) the objectives for subsequent years. However, estimates for this indicator can fluctuate from year to year, especially since they are based on a sample. Further, the estimate of 4.5% for 2005 is the lowest on record and surprisingly low: whether compared to Alabama's estimate of 7.4% in 2006 or the U.S. estimate of 10.9% in 2005. Additionally, the estimated percentage of uninsured Alabama residents under 18 years of age rose to 7.4% in 2006--which was very slightly above (worse) than the objective for that year. Therefore, the objectives for 2007 onward may be challenging. However, they will be retained unless trends over a 3-period indicate that the objectives shown are clearly too low or too high.

3. Section Number: Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2005

Field Note:

Reference for estimates is the revised version of the Historical Health Insurance Table 5 (HIA-5), obtained from a U.S. Census Web site. See note to 2006 for methodological information.

According to their policy, the U.S. Census Bureau does not provide standard errors when the numerator is fewer than 75,000. Therefore, Table HIA-5 does not provide the standard error for the estimate shown for 2005 (4.5%). For this reason, we cannot assess whether the unusually low estimated percentage for 2005 is significantly lower (in the statistical sense) than the corresponding estimated percentages for 2004 and 2006.

Objectives through 2005 were retained from previous years. The objective for 2006 requires an average annual decline of 0.5% (multiplicative model) from the 2004 baseline of 7.4% (81,000/1,095,000) that was reported in the original version of Historical Health Insurance Table 5 (HI-5).

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.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective				30.1	29.9
Annual Indicator		30.4	30.9	28.7	
Numerator		9,187	9,313	14,300	
Denominator		30,221	30,140	49,806	

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?

Provisional

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	29.8	29.6	29.5	29.4	29.4
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: Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2007

Field Note:

The U.S. Centers for Disease Control and Prevention's (CDC's) Pediatric Nutrition Surveillance System (PedNSS) data for measuring the number and percentage of Alabama children, age 2 to 5 years, who are overweight (body mass index [BMI] at or above the 95th percentile) or at risk of becoming overweight (BMI at or above the 85th percentile to the 95th percentile) are used to calculate this indicator.

Because the FY 2005 PedNSS data in Table 6C became available in January 2007, we anticipate that FY 2007 data will be available by around January 2009. Once 2007 PedNSS findings become available to the Bureau of Family Health Services (FHS), we will update Form 11 at the first opportunity.

The objective for 2012 has been set to match that for 2011.

We are aware that the observed value of 28.7 % in FY 2006 is slightly below (better than) the objectives for 2007-2008. However, 3 data points, especially ones without a consistent direction (up slightly in 2005, then down in 2006), do not provide a compelling reason for changing objectives at this time. Objectives will be reconsidered by FY 2010.

2. Section Number: Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2006

Field Note:

The reference is "Table 6C, 2006 Pediatric Nutrition Surveillance, Alabama--Comparison of Growth and Anemia Indicators by Contributor, Children Aged <5 years." Per this reference, 15.0% of the children had a BMI that had reached the 85th percentile but was less than the 95th percentile; and 13.7% of the children had a BMI at or above the 95th percentile. Adding these 2 percentages together, 28.7% of the children had a BMI at or above the 85th percentile. The numerator was estimated by multiplying the denominator by .287.

FHS has insufficient data for describing historical trends in this indicator, which would be useful for setting objectives. Further, expecting dramatic reductions in the prevalence of overweight or being at risk for overweight may not be realistic. Accordingly, the objectives are based on a slow decline, from the 2004 baseline, of 0.5% per year.

3. Section Number: Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2005

Field Note:

See year 2006 field note to this indicator for data source.

The denominator and numerator are determined from data for Alabama in Table 6C, 2005, CDC Pediatric Nutrition Surveillance, "Comparison of Growth and Anemia Indicators by Contributor, Children Aged < 5 Years." The denominator is the total number of WIC-enrolled Alabama children provided in Table 6C (30,140). The numerator is determined by multiplying the number of WIC-enrolled Alabama children (30,140) by the proportion of these children with a BMI at or above the 85th percentile to the 95th percentile (.156), then multiplying the number of WIC-enrolled Alabama children (30,140) by the proportion of these children with a BMI at or above the 95th percentile (.153), and adding the 2 products together.

In April 2006 we learned that, due to data management problems that cannot be resolved at this time, the Alabama PedNSS data for 2004 and 2005 included information from only 45 of 67 counties in Alabama. The included counties, determined alphabetically, were Autauga County through Madison County. Two major population areas were missed: Mobile (in southern Alabama) and Montgomery (in south-central Alabama) Counties. The 45 counties included in the PedNSS data represent about 62% of WIC-enrolled children in the State, based on the number of WIC-enrolled children on the January 2007 WIC enrollment-participation report. The Alabama Department of Public Health's Computer Systems Center staff will seek to resolve the aforesaid data management problem by FY 2008.

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective				12.5	16.6
Annual Indicator		17.5	18.6	15.4	
Numerator		9,589	10,377	9,142	
Denominator		54,797	55,912	59,372	

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	15.7	14.9	14.1	13.3	13.3
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

- Section Number:** Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2007
Field Note:
 See year 2006 note for data source.

Due to time required for data management, data for a given year do not generally become available to the states until at least 16 months after the end of the data collection year. For example, Pregnancy Risk Assessment Monitoring System (PRAMS) data for 2004 were not available by June 2006. The Alabama Department of Public Health's Center for Health Statistics will provide numbers from the PRAMS 2007 dataset soon after the U.S. Centers for Disease Control and Prevention (CDC) provides the dataset, but numbers for 2007 are not expected to be available before April 2009.

We are aware that the objective for 2007 is higher (worse than) the observed status in 2006. However, this sample-based estimate can fluctuate markedly from year to year, and the objective for 2007 is lower (better than) the year 2005 estimate of 18.6%. Accordingly, we are retaining previously set objectives and are setting the objective for 2012 to match that for 2011. Objectives will be reconsidered by FY 2010.

- Section Number:** Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2006
Field Note:

Estimates for this indicator are for calendar year and are from PRAMS data, managed by CDC. Alabama PRAMS is a population-based mail/telephone survey of Alabama residents who recently gave birth in the State. A stratified complex sampling design is used, and numbers reported here are weighted to represent all live births occurring in Alabama to Alabama residents. Because data are based on a sample, some statistical imprecision is expected. Observations for which smoking status is unknown or unreported are excluded from the denominator.

For the surveillance period 1994-2003, per Alabama PRAMS, the weighted percentage of mothers who had smoked in the last 3 months of the referent pregnancy was 15.2% in 1994, increased to 16.2% in 1995, declined slightly each year through 2000, increased to 15.6% in 2001, then declined slightly 2 years in a row, bringing it to 13.3% in 2003. Very roughly speaking, this is an average annual decline (improvement) of 1.5%, per a multiplicative model. The objective for 2006 was set to require a steeper annual decline, of 2.0%, from the 2003 baseline, the only baseline available when the objective was set (circa May 2006). However, given the status of this indicator in recent years (17.5% in 2004 and 18.6% in 2005), expecting a 2.0% decline from the 2003 baseline of 13.3% does not seem reasonable. Accordingly, objectives from 2007 through 2011 require a steady decline (of 5.4% annually) from the unrounded 2005 baseline (18.6%), to return to 13.3% (the lowest estimate on record for this indicator) by 2011.

- Section Number:** Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2005
Field Note:

Estimates are from PRAMS data. See this indicator's year 2006 field note for information about survey design and methods.

Per weighted PRAMS data for 2005, 18.6% of Alabama residents giving birth in Alabama had smoked during the last trimester of the referent pregnancy. The numerator was therefore estimated by multiplying .186 times the denominator.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	8.1	8.1	8.5	7.1	8.3
Annual Indicator	5.4	9.0	7.2	9.8	
Numerator	18	30	24	33	
Denominator	330,739	332,792	334,845	336,848	

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?

Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	8.2	8	7.8	7.7	7.7
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: Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

Though the final year 2006 file is available, staffing limitations have delayed analysis of the file. We expect to have a final estimate for 2006 by September 2008.

The rationale for setting objectives for 2006 through 2011 is described in the note to year 2006. Due to the lack of a final estimate for 2006 or 2007, the objective for 2012 has been set to match that for 2011. We are aware that the objectives from 2007 onward are very aggressive, given the recent fluctuations in this indicator and the trend described in the note to year 2006. Objectives will be reconsidered in FY 2009, when final estimates for the years 2006 and 2007 should be available.

2. Section Number: Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 rate is provisional. Per the Alabama Department of Public Health's Center for Health Statistics staff, the 2006 death file includes all the deaths--though they are waiting for the cause of death for about 100 records.

All denominators represent the population projection for children 15-19 years of age in the specified calendar year. These projections are made by Alabama's Center for Business and Economic Research.

Comparing 2004-05 to 2001-02, this indicator increased (worsened) by an average of 2.7% per year, for an overall increase of 8.2% (from 7.5 deaths per 100,000 in 2001-02 to 8.1 deaths per 100,000 in 2004-05). The indicator has fluctuated over the years shown, however. The objective for 2006 requires a decline of 0.5% from the 2005 baseline. Given the marked fluctuation in this indicator from year to year, however, a single-year baseline is not appropriate for setting objectives. Therefore, objectives for 2007-1010 were revised, and the objective for 2011 set, to require a 2.0% annual decline from the provisional 3-year rate for 2004-06. When setting objectives, this rate (8.66115 deaths per 100,000) was considered to represent the year 2005 baseline.

3. Section Number: Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2005

Field Note:

See year 2006 note about denominators, which applies to the denominator for 2005 as well.

PERFORMANCE MEASURE # 17

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

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective	86.4	88.2	79.8	81.4	82.3
Annual Indicator	79.4	80.9	80.6	79.8	84.1
Numerator	965	953	1,041	1,016	1,133
Denominator	1,216	1,178	1,291	1,273	1,348

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				
	2008	2009	2010	2011	2012
Annual Performance Objective	83.1	83.9	84.7	85.6	85.6
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

1. Section Number: Performance Measure #17

Field Name: PM17

Row Name:

Column Name:

Year: 2007

Field Note:

The estimate for this indicator was added on September 19, 2008, and is not discussed in the narrative.

Before the year 2007 estimate was available, the objective for 2012 was set to match that for 2011. We are aware that the provisional year 2007 estimate for this indicator surpasses (is better than) the objectives shown for 2008 and 2009. However, previous trends do not support an assumption that the future status of this indicator will match or exceed the provisional year 2007 estimate. Objectives will be reconsidered by fiscal year 2010, based on the most recent 3-year baseline that is available when the objectives are reconsidered.

2. Section Number: Performance Measure #17

Field Name: PM17

Row Name:

Column Name:

Year: 2006

Field Note:

Comparing 2004-05 to 2001-02, this indicator worsened slightly, beginning at 82.0% in 2001-02 and ending at 80.8% in 2004-05. Overall, the indicator showed no consistent trend during 2001-2005. (Numbers for 2001 are not shown on Form 11.)

Objectives from 2006 forward require a slow increase (improvement), by 1.0% per year (per a multiplicative model), from the 2005 baseline. Objectives are challenging, however, since the highest value for this indicator from 1999 through 2006 was 83.4% (in 2002).

PERFORMANCE MEASURE # 18

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

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	87.6	86.7	87.8	83	83.4
Annual Indicator	83.6	83.7	82.5	81.2	79.2
Numerator	49,635	49,499	49,743	51,115	50,818
Denominator	59,356	59,170	60,262	62,915	64,180

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

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	83.8	84.2	84.6	85.1	85.1
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

1. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2007

Field Note:

The year 2007 estimate for this indicator was added on September 19, 2008, and is not discussed in the narrative. As shown, this indicator was lower (worse) in 2007 than in any of the 4 preceding years. The Alabama Department of Public Health is concerned about this decline and will seek to further assess the decline and to increase access to quality prenatal care throughout the State.

Before the year 2007 estimate was available, the objective for 2012 was set to match that for 2011. Objectives will be reconsidered by fiscal year 2010, based on the most recent 3-year baseline that is available when objectives are reconsidered.

2. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2006

Field Note:

For all years shown, the numerator is the number reporting prenatal care as beginning during the 1st, 2nd, or 3rd month, based on the birth certificate item: "Month of Pregnancy Prenatal Care Began—First, Second, etc."

Comparing 2004-05 to 2001-02, the indicator barely changed (from 82.6% in 2001-02, to 83.1% in 2004-05. (Numbers for years prior to 2003 are not shown on Form 11.) Given the barely perceptible improvement in this indicator in recent years, the objectives for 2006-2010 are challenging: though they require that the status increase by only 0.5% per year (per a multiplicative model), from the 2005 baseline.

3. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's Form 11 field note for year 2006 for a description of the numerator.

STATE PERFORMANCE MEASURE # 1

Of 0-9 year-old children enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received care coordination in the reporting year.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective				4.5	4.7
Annual Indicator	3.2	4.7	4.3	5.2	6.1
Numerator	9,127	13,824	12,781	15,853	18,144
Denominator	287,446	293,882	296,576	302,638	297,163
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	6.1	6.1	6.2	6.2	6.2
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:** State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2007
Field Note:
 All years shown pertain to fiscal years (FYs).

The numerator is from an Alabama Department of Public Health EPSDT care coordination report, and the denominator was provided by the Alabama Medicaid Agency. The numerator and denominator are unduplicated counts.

As stated in the note to FY 2006, well documented historical trends over time are not available as a basis for projecting future trends. Nevertheless, because observed values surpassed (were better than) the targets for 2006 and 2007, we have revised the objectives for 2008-2009 upward to 6.1%, and those for 2010-2012 upward to 6.2%. On the surface, objectives for 2008-2012 appear modest, compared to the 2007 baseline of 6.1%. However, the observed value may fluctuate and--especially without well documented historical trends--we are not confident that it will remain as high as 6.1%. Therefore, remaining at 6.1% for 3 years and achieving a status of 6.2% by 2012--as shown in the objectives--would be a notable accomplishment. If the observed value for this indicator notably increases in FY 2008, objectives will again be revised upward.

- Section Number:** State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2006
Field Note:

For FY 2006, the numerator represents the number of 0-9 year-old children who received care coordination from ADPH care coordinators in that FY (unduplicated count), and was provided by the Bureau of Family Health Services' Social Work Branch. The denominator represents the number of Alabama Medicaid-enrolled 0-9 year-old children who were eligible for EPSDT services in FY 2006, and was provided by an Alabama Medicaid Agency staff member. The denominator is also an unduplicated count, meaning that each child was counted 1 time regardless of length of duration of eligibility.

Due to methodological issues described in this indicator's field note to year 2005, well documented historical trends over time are not available as a basis for projecting future trends. Objectives from 2006 onward require an annual increase (improvement) of 4.0%, from the unrounded FY 2005 baseline. Though the targets would result in a status of just 5.2% in FY 2010 (versus a status of 4.3% in FY 2005), they are aggressive in terms of the number of children who would be served. That is, assuming that the number of 0-9 year-old EPSDT enrollees in FY 2010 is the same as the number in FY 2005, targets require that about 15,422 0-9 year-old EPSDT enrollees receive care coordination in FY 2010. Compared to 12,781 such individuals in FY 2005, this is an increase of about 2,641 individuals. Under the same assumptions, the objective for year 2011 would require that, compared to FY 2005, an additional 3,234 children would be served in 2011.

- Section Number:** State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2005
Field Note:

During FY 2005, per ADPH's Care Coordination Report (FHA60099/PHFHA692), 12,781 patients 0-9 years of age received EPSDT Care Coordination.

The denominator comes from Alabama Medicaid Agency's Form HCFA-2082 (Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services; Section D [1], Eligibles for Medical Care by Age, Race, Ethnicity, and Sex; Alabama, FY 2005, page 18).

Methodological issues may account for the slight reported decline in FY 2005, versus FY 2004. That is, due to the availability of an FY 2005 report for the 0-9 year age group, the 95% assumption used for estimating this indicator for FYs 2003 and 2004 (see year 2004 field note) was not necessary.

STATE PERFORMANCE MEASURE # 2

Of children and youth enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received any dental service in the reporting year.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective				37	38.1
Annual Indicator	31.5	34.5	35.9	37.0	45.0
Numerator	151,911	169,766	180,089	188,475	226,476
Denominator	481,845	491,853	501,766	509,155	503,051
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	39.2	40.4	41.6	42.9	45
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: State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2007

Field Note:

This indicator improved remarkably in FY 2007, when 45% of Alabama Medicaid EPSDT enrollees received a dental service. We are aware that the observed value for 2007 surpasses the targets for the years 2007 through 2011. However, since the marked improvement in 2007 may be atypical and the percentage could decline in the future, we have retained previously set targets and set the target for 2012 to match the year 2007 observed status of 45%. If the percentage remains at around 45% or higher in FY 2008, in FY 2009 we will revise the targets upward.

2. Section Number: State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2006

Field Note:

The numerator and denominator for this measure come from the Alabama Medicaid Agency's Title XIX FY Annual EPSDT Participation Report; Alabama, FY 2006, page 1. Per this report, the age range is from birth through 20 years.

From the 2003 baseline, this indicator has improved each year. Comparing 2006 to 2003, the indicator improved by an average of 5.5% per year (multiplicative model). The target for 2006 was reached. Expecting a continued annual improvement of 5.5% may not be reasonable. Therefore, the target for 2011 requires the same rate of improvement (3.0% per year) as previously set targets for 2006 through 2010.

3. Section Number: State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2005

Field Note:

The numerator and denominator for this measure come from the Alabama Medicaid Agency's Annual EPSDT Participation Report; Alabama, FY 2005, page 1.

Comparing 2005 to 2003, this indicator improved by an average of 6.7% per year. Comparing 2005 to 2004, this indicator improved by 4.0%. However, these 3 data points (1 for each year) are insufficient for assessing long-term trends, so targets assuming either of these rates of improvement (6.7% or 4.0% per year) may be unrealistic. Therefore, objectives from 2006 through 2010 require an annual rate of improvement of 3.0%, from the unrounded 2005 baseline. If previous (or better than previous) trends continue through 2007, more aggressive objectives will be set.

STATE PERFORMANCE MEASURE # 3

The pregnancy rate (per 1,000) for adolescents aged 15-17 years.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective				38.3	36.8
Annual Indicator	40.1	39.8	37.4	40.6	
Numerator	3,906	3,893	3,671	3,882	
Denominator	97,295	97,694	98,093	95,688	
Is the Data Provisional or Final?				Final	

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	36.1	35.4	34.7	34	34
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: State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2007

Field Note:

The final vital statistics files needed for this estimate are not available for the year 2007. The year 2007 estimated pregnancy rate for this age group will be provided circa June 2009.

The objectives, which were set from earlier baselines, are very aggressive in light of the 2006 baseline. The year 2012 objective was set to match the year 2011 objective; and objectives will be revised by 2010 unless the rate declines markedly in 2007.

2. Section Number: State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2006

Field Note:

The numerator for this estimate is the number of reported pregnancies--including live births, fetal deaths, and abortions--among females aged 15 through 17 years in the calendar year (CY). The denominator is the estimated number of females aged 15 through 17 years in the CY.

Data sources for the numerator are Alabama vital statistics files for, respectively, live births, fetal deaths, and abortions.

The denominator is derived by applying the factor .6 to the estimated population of Alabama 15-19 year-old females. Estimated populations numbers often differ notably from projected population numbers--which probably accounts for the notable drop in the denominator in 2006 relative to earlier years. (Denominators shown for 2003-2005 are based on projected population numbers.) Thus, the lower denominator in 2006 is probably a reporting artifact. Using the 2005 projected population of 98,093 as the denominator for the 2006 rate yields an estimated pregnancy rate of 39.6 per 1,000. Thus, the rate may have increased by 2.2 pregnancies per 1,000 15-17 year-old females in 2006, rather than by 3.2 pregnancies per 1,000.

The secondary source from which we derived the year 2006 denominator shown on Form 11 is "County Health Profile Alabama 2000," which cites the primary source as the U.S. Census Bureau, at the following url address: <http://www.census.gov/popest/counties/asrh/CC-EST2006-alldata.html>. Because estimated populations are probably more accurate than projected populations, especially in the latter half of a decade, we plan to use the estimated population for this denominator until the year 2010 census has been implemented and reported.

3. Section Number: State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2005

Field Note:

See field note to 2006 for a description of the numerator and denominator and the databases and sources from which these are derived.

Comparing 2005 to 2000, the value for this indicator declined (improved) by an average of 6.3% per year (multiplicative model), and the target for year 2006 was surpassed in 2005. Expecting a continued rate of decline of this magnitude may not be realistic. On the other hand, targets set circa May 2006 (when the year 2005 estimate was not available) may not have been sufficiently challenging. Therefore, targets for years 2007-2010 have been reset, and the target for 2011 added (in June 2007), to proceed from the combined 3-year baseline for 2003-05 (39.1358 pregnancies per 1,000 15-17 year-old females). Considering this 3-year baseline as the baseline for 2004, the newly set targets require a decline (improvement) of 2.0% per year (multiplicative model). (The target for 2006, which is retained, requires a 2.0% annual decline from the unrounded, single-year 2004 rate.)

STATE PERFORMANCE MEASURE # 4

The percentage of white male high school students who chewed tobacco or snuff on 1 or more of the 30 days preceding their participation in the Youth Risk Behavior Survey (YRBS).

<u>Annual Objective and Performance Data</u>					
	2003	2004	2005	2006	2007
Annual Performance Objective				29	28.7
Annual Indicator	27.3	29	32	32	
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2008	2009	2010	2011	2012
Annual Performance Objective	28.4	28.1	27.9	27.9	27.9
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: State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2007

Field Note:

As of June 6, 2008, year 2007 Youth Risk Behavior Survey System (YRBSS) estimates for Alabama are not available on the U.S. Centers for Disease Control and Prevention's (CDC's) Web site. By September 2008 we will consult with the Alabama Department of Public Health's Bureau of Health Promotion and Chronic Disease, in which Alabama's YRBSS is administratively located, to learn when an estimate will be available.

Because no recent estimates are available, the year 2012 objective has been set to match the objectives for 2010-2011.

2. Section Number: State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2006

Field Note:

YRBS, which can be queried to obtain an estimate of smokeless tobacco use among White males, is conducted in odd years only. The currently available report from the Alabama Youth Tobacco Survey, which is for 2006, does not concurrently report this indicator by sex and race.

The YRBS-based rate for year 2005 is shown as our best estimate of the rate for 2006.

Due to the absence of a current survey-based estimate for 2006, as well as to the lack of consistent improvement in this indicator in recent years, the 2011 objective was set to match the 2010 objective. As stated in the year 2005 field note for this indicator, the objectives are more challenging than they appear.

3. Section Number: State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2005

Field Note:

This estimate was obtained by querying CDC's YRBS Web site (<http://apps.nccd.cdc.gov/YRBSS/>) on June 20, 2006. The Web site does not provide the numerator and denominator, but provides the 95% confidence interval, which is plus or minus 6.3 for this estimate.

Objectives for this measure were not set until FY 2006, so are left blank for 2005 and earlier years. Objectives require that the value for this indicator return to the 2004 level (29.0%) in 2006, then decline by 1.0% per year through 2010. These objectives are more aggressive than they appear, given the lack of consistent improvement in this indicator over the surveillance years (1995, 1997, 1999, 2001, 2003, 2004, and 2005). During these years, the status of this indicator ranged from 25.0% in 2001 to 32.0% in 2005, with a median of 29.3% in 1997. The target of 27.9% for 2010 is lower than all but 2 of the observed values over the surveillance period.

STATE PERFORMANCE MEASURE # 5

The degree to which the State CSHCN Program assures that all CYSHCN have adequate access to primary and specialty care and allied health and other related services.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective				2	3
Annual Indicator				1	13
Numerator				1	13
Denominator	15	15	15	15	15
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	14	15	15	15	15
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: State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2007

Field Note:

This state performance measure (SPM) was created in response to 2004-05 MCH needs assessment data from providers and families. It involves improving the knowledge base of health care providers in local communities related to the unique needs of CYSHCN and their families. The checklist measurement tool has been revised for use in assessing FY 2007 activities forward. The checklist originally created was very narrow in that each item was dependent on another and progress could only begin by developing a specific training module. This did not adequately capture Children's Rehabilitation Service's (CRS's) efforts related to this SPM and unnecessarily caused duplication of effort. The CRS State Office staff engaged in much discussion about activities that would promote the objective of this SPM and developed a revised checklist measurement tool. The new tool better represents groups of activities that support progress on this SPM. The performance measure itself has not changed. The checklist measurement tool has new items, but the scale is the same (0-15). Goals for future years have been revised. Scores for previous years are not comparable to the current measure. A scored checklist measuring progress on this performance measure is attached to Section IV.D SPM #5, "Last Year's Accomplishments." Please see the narrative sections for SPM #5 for more detailed information.

2. Section Number: State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2006

Field Note:

This performance measure involves improving the knowledge base of health care providers in local communities related to the unique needs of CYSHCN and their families.

During FY 2006 CRS experienced staff changes in critical leadership positions and a significant restructuring of duties in the State Office. This in addition to competing priorities limited CRS's ability to address this performance measure.

3. Section Number: State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2005

Field Note:

This is a new SPM. During FY 2005 CRS began internal discussions of topics for inclusion in training materials, possible methods of information dissemination, and potential task force members from family groups and other representatives from the statewide system of care for CYSHCN. No target objective was set for FY 2005.

CRS is currently in the process of developing a task force of partners and key stakeholders, including CYSHCN and their families, to address this new performance measure. Responsible personnel are identifying pre-existing materials and those to be developed. Training methods will be determined for information dissemination.

Refer to the note section of the detail sheet associated with this measure to view the checklist that will be used in scoring the measure in next year's Block Grant annual report/application.

STATE PERFORMANCE MEASURE # 6

The degree to which the State CSHCN Program collaborates with schools, advocacy groups, and families to enhance inclusive participation by CYSHCN in their schools and communities.

Annual Objective and Performance Data					
	2003	2004	2005	2006	2007
Annual Performance Objective				2	3
Annual Indicator				1	12
Numerator				1	12
Denominator	15	15	15	15	15
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2008	2009	2010	2011	2012
Annual Performance Objective	13	14	15	15	15
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:** State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2007

Field Note:

This state performance measure (SPM) was created in response to 2004-05 MCH needs assessment data from providers and families. It involves providing training and promoting advocacy both for families and for schools and communities. The checklist measurement tool has been revised for use in assessing FY 2007 activities forward. The checklist originally created was very narrow in that each item was dependent on another and progress could only begin by developing a specific training module. This did not adequately capture Children's Rehabilitation Service's (CRS's) efforts related to this SPM and unnecessarily caused duplication of effort. The CRS State Office staff engaged in much discussion about activities that would promote the objective of this SPM and developed a revised checklist measurement tool. The new tool better represents groups of activities that support progress on this SPM. The performance measure itself has not changed. The checklist measurement tool has new items, but the scale is the same (0-15). Goals for future years have been revised. Scores for previous years are not comparable to the current measure. A scored checklist measuring progress on this performance measure is attached to Section IV.D SPM #6, "Last Year's Accomplishments." Please see the narrative sections for SPM #6 for more detailed information.

- Section Number:** State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2006

Field Note:

This performance measure involves providing training and promoting advocacy both for families and for schools and communities.

During FY 2006 CRS experienced staff changes in critical leadership positions and a significant restructuring of duties in the State Office. This in addition to competing priorities limited CRS's ability to address this performance measure.

- Section Number:** State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2005

Field Note:

This is a new SPM. During FY 2005 CRS began internal discussions of topics for inclusion in training materials, possible methods of information dissemination, and potential task force members from family groups and other representatives from the statewide system of care for CYSHCN. No target objective was set for FY 2005.

CRS is currently in the process of developing a task force of partners and key stakeholders, including CYSHCN and their families, to address this new performance measure. Responsible personnel are identifying pre-existing materials and those to be developed. Training methods will be determined for information dissemination.

Refer to the note section of the detail sheet associated with this measure to view the checklist that will be used in scoring the measure in next year's Block Grant annual report/application.

STATE PERFORMANCE MEASURE # 7

The degree to which the Bureau of Family Health Services (Bureau) collects, analyzes, and disseminates findings from data pertinent to ongoing maternal and child health (MCH) needs assessment.

<u>Annual Objective and Performance Data</u>					
	2003	2004	2005	2006	2007
Annual Performance Objective	_____	_____	_____	6	9
Annual Indicator	5	5	5	8	14
Numerator	5	5	5	8	14
Denominator	18	18	18	18	18
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2008	2009	2010	2011	2012
Annual Performance Objective	14	14	14	18	18
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:** State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2007

Field Note:

The scored checklist for FY 2007 is attached to Section IV.D, State Performance Measure (SPM) #7, "Last Year's Accomplishments."

Objectives for 2008 and 2009 have been revised upward, to match the score achieved in 2007. Due to competing reporting responsibilities, further progress on the criteria for this measure is not expected until 2011, when the target is the maximum score for this indicator. Whether this maximum score will be achieved, however, depends on future staffing and budgetary resources and on emerging issues.

- Section Number:** State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2006

Field Note:

Items in the checklist have not changed since its development.

- Section Number:** State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2005

Field Note:

Each criterion and its score for FY 2005 are stated in the notes to the detail sheet for SPM #7.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	2	2	2	1.9	1.9
Annual Indicator	2.2	2.0	2.0	2.1	1.8
Numerator	14.1	13.3	14.4	14.3	14.6
Denominator	6.5	6.7	7.2	6.7	8

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?

Provisional Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	1.9	1.9	1.9	1.9	1.9
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: Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2007

Field Note:

The year 2007 estimate for this measure was added on September 19, 2008.

As shown, in Alabama the infant mortality rates for Black infants and for White infants were higher in 2007 than in any of the other years shown. The decline in the State's racial infant mortality gap in 2007 was due to notably higher mortality among White infants in that year compared to earlier years.

The objective for 2012 has been set to match that for 2011. We are aware that the rate ratio for 2007, which is 1.8, is lower than targets for 2009 onward. However, historical trends in the State suggest that rate ratios of 1.8 or lower may not consistently occur in the near future. Further, underlying rates should be considered when interpreting rate ratios. Therefore, future objectives for this rate ratio remain at 1.9. They will be reconsidered by fiscal year 2010.

2. Section Number: Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2006

Field Note:

The numbers of race-specific infant deaths included in the calculation of the rate ratio for 2006 is based on the master death file, as it existed in late August 2007, rather than the final statistical death file. However, the master death file was thought to include all deaths at this time.

See this indicator's year 2005 field note for a description of how objectives were set for 2006 and subsequent years. Objectives for 2010-2011 will be reconsidered by December 2009, when a final 3-year baseline for 2006-08 should be available.

3. Section Number: Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2005

Field Note:

Objectives through 2005 are retained from previous years.

The ratio of the Black infant mortality rate to the White infant mortality rate ranged from 2.0 to 2.2 from 2001 through 2005. Given this history, the objective of declining to 1.9 and remaining there is challenging. This ratio should be interpreted cautiously, since it is determined by the mortality rate among White infants, as well as that among Black infants. Therefore, a decline in this ratio does not necessarily signify a concurrent decline in the infant mortality rate among Black infants.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	6.1	6	6	5.5	5.4
Annual Indicator	5.3	5.2	5.7	5.8	6.3
Numerator	312	305	342	366	407
Denominator	59,356	59,170	60,262	62,915	64,180

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?

Provisional Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	5.4	5.3	5.3	5.2	5.2
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: Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2007

Field Note:

The estimate for this indicator was added on September 19, 2008. The Alabama Department of Public Health (ADPH) is very concerned about the increase in the State's infant mortality rate in 2007. Both the neonatal and postneonatal mortality rates increased in the State in that year, relative to 2006. Further, as shown on Form 12, the neonatal mortality rate increased notably in 2005, increased slightly in 2006, and then again increased notably in 2007. The State's 3-year neonatal mortality rate for the years 2005-2007 combined is 5.95121 neonatal deaths per 1,000 live births. ADPH is further assessing this increase and will seek to implement measures to reduce the risk of death among Alabama infants.

The objective for 2012 has been set to match that for 2011. We are aware that objectives for 2006 and 2007 have not been met and that objectives for 2008 forward are unlikely to be met. By early fiscal year 2009 we will revise objectives from 2010 onward, based on the 2005-2007 baseline.

2. Section Number: Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2006

Field Note:

The number of neonatal deaths shown for 2006 is based on the master death file, as it existed in late August 2007, rather than the final statistical death file. However, the master death file was thought to include all deaths at this time.

The objective for 2006 is retained from earlier years. For setting later objectives, the 3-year rate for 2004-06 (5.55534 neonatal deaths per 1,000 live births) was used as the baseline for 2005. The 3-year baseline, surrounding 2005, was chosen to minimize the effect of annual fluctuations in this indicator. From this baseline for 2005, objectives for 2007 onward require a decline of 1.0% per year. Though this rate of decline results in identical objectives for up to 2 years in a row (because of rounding to 1 decimal), it would bring the rate to 5.2 neonatal deaths per 1,000 live births in 2011, matching the lowest rate on record for the State.

3. Section Number: Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2005

Field Note:

Objectives through 2005 are retained from earlier years.

Comparing 2-year rates, this rate declined (improved) from 5.9 neonatal deaths per 1,000 live births in 2001-02 to 5.4 neonatal deaths per 1,000 live births in 2004-05 (using provisional numbers for 2005). This decline represents an average annual decline of 2.9% (per a multiplicative model), or an overall decline of 8.5%. However, the rate declined only slightly in 2004 and increased in 2005. The objective for 2006, set in FY 2006, calls for the rate to decline by 1.0% from the 2005 provisional baseline.

(Note added in May 2007: The provisional rate was 5.6 neonatal deaths per 1,000 live births [337/60,254]).

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	3.3	3.3	3.2	3.6	3.4
Annual Indicator	3.5	3.6	3.6	3.2	3.6
Numerator	207	211	219	203	234
Denominator	59,356	59,170	60,262	62,915	64,180

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?

Provisional Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	3.4	3.3	3.3	3.3	3.3
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: Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2007

Field Note:

The estimate for this indicator was added on September 19, 2008. The Alabama Department of Public Health (ADPH) is very concerned about the increase in the State's infant mortality rate in 2007. Both the neonatal and postneonatal mortality rates increased in the State in that year, relative to 2006. However, as shown on Form 12, the State's postneonatal mortality rate in 2006 was the lowest during the 5-year period shown; and, at 3.6 postneonatal deaths per 1,000 live births, the rate in 2007 was the same as corresponding rates in 2004 and 2005. The State's 3-year postneonatal mortality rate for the years 2005-2007 combined is 3.50134 postneonatal deaths per 1,000 live births.

The objective for 2012 has been set to match that for 2011. We are aware that postneonatal mortality objectives have not been met for 4 of the years shown. Further, objectives for 2008 forward are challenging, given the lack of consistent improvement in this indicator over the years shown. By early fiscal year 2009 we may revise objectives from 2010 onward, based on the 2005-2007 baseline.

2. Section Number: Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2006

Field Note:

The number of postneonatal deaths shown for 2006 is based on the number obtained in a conversation with a Division of Statistical Analysis staff member on September 13, 2007.

The objective for 2006 is retained from earlier years. For setting later objectives, the 3-year rate for 2004-06 (3.4714) postneonatal deaths per 1,000 live births) was used as the baseline for 2005. The 3-year baseline, surrounding 2005, was chosen to minimize the effect of annual fluctuations in this indicator. From this baseline for 2005, objectives for 2007 onward require a decline of 1.0% per year. Though this rate of decline results in identical objectives for up to 3 years in a row (because of rounding to 1 decimal), it would bring the rate to 3.3 postneonatal deaths per 1,000 live births in 2011.

We are aware that objectives for 2007-2011 are higher (worse) than the rate for 2006. However, because this rate tends to fluctuate, a single-year baseline may lead to inappropriate objectives, and all objectives for 2007 onward are lower (better) than the rates for 2003, 2004, and 2005.

3. Section Number: Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2005

Field Note:

Objectives through 2005 are retained from earlier years.

Comparing 2-year rates, this rate increased (worsened) slightly: from 3.4 postneonatal deaths per 1,000 live births in 2001-02 to 3.6 postneonatal deaths per 1,000 live births in 2004-05 (using provisional numbers for 2005). This increase represents an average annual increase of 1.9% (per a multiplicative model), or an overall increase of 5.7%. Thus, the objectives, which require an annual decline of 1.0% from the 2005 provisional baseline, are challenging. Because objectives are carried to only 1 decimal place, objectives sometimes remain the same for 2 years in a row.

(Note added in May 2007: The provisional rate for 2005 was 3.6 postneonatal deaths per 1,000 live births [218/60,254]).

OUTCOME MEASURE # 05

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

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective	13.5	13.4	8	8.8	8.2
Annual Indicator	7.9	8.5	8.8	8.6	8.6
Numerator	476	505	535	525	556
Denominator	59,890	59,719	60,805	60,805	64,430

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?

Provisional Final

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	8.1	8.5	8.5	8.5	8.4
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: Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2007

Field Note:

The year 2007 estimate for this indicator was added on September 19, 2008. See year 2006 note for method utilized.

Given the year 2007 rate for this indicator, the year 2008 objective is unlikely to be met. Objectives from 2009 forward have been revised to require a decline (improvement) of 0.5 percent per year from the unrounded 2007 baseline of 8.62952 perinatal deaths per 1,000 live births. Because the Title V Information System shows objectives to only one decimal, the objectives shown remain at 8.5 from 2009-2011.

2. Section Number: Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2006

Field Note:

The numerator for this measure is the sum of the number of fetal deaths 28 or more weeks in (calculated) gestation plus infant deaths under 7 days of age. The denominator for this measure is the sum of the number of live births plus the number of fetal deaths 28 or more weeks in (calculated) gestation.

The 2006 vital statistics files necessary for this indicator will not be finalized until mid- or late September of 2007. For this reason, the rate shown for 2006 is roughly projected as being the perinatal mortality rate for the years 2004 and 2005 combined: 8.6 perinatal deaths per 1,000 live births plus fetal deaths as defined above. The denominator for 2005 is shown as our best estimate of the denominator for 2006. The numerator for 2006 is determined by the rate and denominator shown for 2006.

The objective for 2006 is retained from earlier years. For setting later objectives, the 3-year rate for 2003-05 (8.4029 perinatal deaths per 1,000 live births plus fetal deaths 28 or more weeks in gestation) was used as the baseline for 2004. The 3-year baseline, surrounding 2004, was chosen to minimize the effect of annual fluctuations in this indicator and to set objectives based on actual experience, rather than the roughly projected rate for 2006. From this baseline for 2004, objectives for 2007 onward require a decline of 1.0% per year.

Addendum (September 19, 2008): Although final vital statistics files for 2006 have been available, the Bureau of Family Health Services' Maternal and Child Health Epidemiology Unit has been unable to analyze these files, due to a vacant staff position and competing priorities. The unit plans to produce a final year 2006 estimate for this indicator by fiscal year 2009.

3. Section Number: Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2005

Field Note:

See this indicator's year 2006 field note for a description of the numerator and denominator.

Objectives through 2005 are retained from earlier years.

Comparing 2-year rates, this rate declined (improved) very slightly, from 8.8 perinatal deaths per 1,000 live births plus fetal deaths in 2001-02 to 8.7 perinatal deaths per 1,000 live births plus fetal deaths in 2004-05 (using provisional numbers for 2005). This decline represents an average annual decline of 0.4% (per a multiplicative model), or an overall decline of 1.1%. Thus, the objectives, which require an annual decline of 1.0% from the 2005 provisional baseline, are somewhat challenging. (When rounded to 1 decimal, objectives sometimes remain the same 2 years in a row.) Though the 2010 objective is higher than the 2003 rate, it is lower than the 2001-02 and 2004-05 rates stated above.

(Note added in May 2007: The provisional rate for 2005 was 8.9 perinatal deaths per 1,000 live births plus fetal deaths [540/60,809]).

OUTCOME MEASURE # 06

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

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	32	31.2	30.5	24	23.8
Annual Indicator	26.1	26.8	24.3	25.4	
Numerator	228	234	213	222	
Denominator	873,841	874,325	874,809	874,125	

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?

Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	23.5	23.3	23	22.8	
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: Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2006

Field Note:

The number of deaths shown for 2006 is based on the master death file, as it existed in late August 2007, rather than the final statistical death file. However, the master death file was thought to include all deaths at this time.

See this indicator's year 2005 field note for a description of how objectives were set for 2006 and subsequent years. Objectives for 2010-2011 will be reconsidered by December 2009, when a final 3-year baseline for 2006-08 should be available.

The denominator is derived from the population projection for children 14 years of age and younger in the specified calendar year. These projections are made by Alabama's Center for Business and Economic Research. The denominator is derived by summing across the pertinent age groups (1-4, 5-9, and 10-14 years), with one caveat. The source reports numbers for children aged 0-4 years, so we multiply the number for this age group by 0.8 to estimate the number of children aged 1-4 years .

2. Section Number: Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2005

Field Note:

Objectives through 2005 are retained from earlier years.

Comparing 2-year rates, this rate declined (improved) from 29.0 deaths per 100,000 children in this age group in 2001-02 to 25.5 deaths per 100,000 children in this age group in 2004-05 (using provisional numbers for 2005). This decline represents an average annual decline of 4.2% (per a multiplicative model), or an overall decline of 12.2%. The objectives require a relatively small annual decline of 1.0% from the 2005 provisional baseline of 24.23386. These objectives are challenging, nevertheless, since the 2005 baseline rate is notably lower than any other rate during the 5-year period shown. (The rate for 2001, no longer shown in the Web-based Title V Information System, was 29.3 deaths per 100,000 children aged 1-14 years.)

See year 2006 field note for this indicator for how the denominator is derived.

STATE OUTCOME MEASURE # 1

The homicide/legal intervention death rate for 15-19 year-old African American males per 100,000 African American males aged 15-19 years

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	54.4	52.2	39	44.4	48
Annual Indicator	53.6	39.0	49.8	57.6	
Numerator	27	20	26	31	
Denominator	50,338	51,319	52,216	53,801	
Is the Data Provisional or Final?				Provisional	

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	47.5	47	46.5	46.1	
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

1. Section Number: State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 rate is provisional. Per Center for Health Statistics staff, the 2006 death file includes all the deaths -- though they are waiting for the cause of death for about 100 records.

The objective for 2006 is retained from earlier years. For setting later objectives, the provisional 3-year rate for 2004-06 (48.93985 deaths per 100,000) was used as the baseline for 2005. The 3-year baseline, surrounding 2005, was chosen to minimize the effect of annual fluctuations in this indicator. From this baseline for 2005, objectives for 2007 onward require a decline of 1.0% per year.

2. Section Number: State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2005

Field Note:

See previous year's note for additional comments pertaining to this item.

This indicator notably increased (worsened) in 2005. Due to small numbers in the statistical sense, some annual fluctuation in this indicator can be expected. Nevertheless, the increase in 2005 reinforces the need to carefully monitor this indicator.

Rates for 2 years combined increased very slightly: from 43.9 homicide deaths per 100,000 Black males aged 15-19 years in 2001-02, to 44.4 homicide deaths per 100,000 such males in 2004-05.

Newly set objectives call for the rate to notably decline in 2006, to match the 2004-05 rate of 44.4 deaths per 100,000--then to decline gradually to 43.6 deaths per 100,000 by 2010, which would be lower than either of the 2-year rates stated above.

STATE OUTCOME MEASURE # 2

The ratio of the infant mortality rate for Alabama to the infant mortality rate for the United States (U.S.).

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective					1.3
Annual Indicator		1.3	1.4		
Numerator					
Denominator					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	1.3	1.3	1.3	1.3	
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: State Outcome Measure 2

Field Name: SO2

Row Name:

Column Name:

Year: 2006

Field Note:

The data sources for Alabama's infant mortality rates are the final statistical death files and final statistical live birth files, which typically become available by around September of the year following the year of death. Therefore, the most recent available estimate that constitutes a suitable numerator for State Outcome Measure #2 is for the year 2005. The infant mortality rates are reported per 1,000 live births.

Sources for U.S. infant mortality rates, also reported per 1,000 live births, are from the National Center for Health Statistics' National Vital Statistics Reports. Published final infant mortality numbers for the U.S. typically become available later than the final statistical death files for Alabama do. For example, as of January 2007, final U.S. infant mortality rates were available for 2003 and 2004, but only the provisional U.S. infant death rate, which may notably differ from the final infant mortality rate, was published for the U.S. for 2005. For this reason, we use the U.S. infant mortality rate for 2004 as our best estimate of the denominator for 2005.

The rate ratios have some rounding error, since numerators and denominators are carried to 1 or 2 decimals.

A final infant mortality rate for 2006 will probably not become available for Alabama before August 2007, and will probably not be published for the U.S. before January 2008. Therefore, the indicator, numerator, and denominator are not provided for 2006. By July 2008, we expect to finalize the estimate for 2005 and provide a provisional estimate for 2006.

[Addendum, July 2008: Due to competing priorities and a vacancy in the Maternal and Child Health Epidemiology Unit's Public Health Research Analyst position, the estimate for 2005 has not been finalized and that 2006 has not been calculated. These tasks are expected to be performed by October 2008.]

Because State Outcome Measure #2 does not become effective until July 2007, no objectives are listed for earlier years. As shown on Form 12 for National Outcome Measure #1, Alabama's infant mortality rate notably worsened in 2005, which caused the Alabama versus U.S. rate ratio to worsen. The Title V Information System carries objectives for this indicator to only 1 decimal, which masks the slow, gradual improvement that FHS's actual objectives call for: rate ratios of 1.30 in 2007, 1.29 in 2008 and 2009, and 1.28 in 2010 and 2011. The objective for 2007 is just below the mean of the rate ratios for 2002, 2003, 2004, and 2005 (which is 1.31)—which would represent a marked improvement over the 2005 rate ratio of 1.37. Objectives may be revised in fiscal year 2009, contingent on the status of this rate ratio in 2006 and 2007.

2. Section Number: State Outcome Measure 2

Field Name: SO2

Row Name:

Column Name:

Year: 2005

Field Note:

The Title V Information System does not allow entry of numerators and denominators, since they are not whole numbers.

Carried to 2 decimals, the infant mortality rate ratio was 1.37 in 2005. The numerator was the number of infant deaths per 1,000 live births of Alabama infants (9.31) in 2005, and the denominator was the number of infant deaths per 1,000 live births of U.S. infants in 2004 (6.79). (The reason for using the U.S. rate for 2004 is explained in the year 2006 field note.) Previous rate ratios in the surveillance period were 1.31 in 2002 and 1.28 in 2003 and 2004. Thus, this rate ratio increased (worsened) during the surveillance period.

See this indicator's field note to year 2006 for data-related issues.

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

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

 3

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.

 3

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).

 3

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

 3

Total Score: 16

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

The State Parent Consultant and Local Parent Consultants provided input on the proposed 2009 CRS State Plan and current and future activities. They also rated the agency on Form 13 characteristics, using a checklist format modified from a tool developed by the State of Wisconsin in December 2001. The compiled findings are attached to the "Current Activities" section of NPM #02. Please see this checklist as well as the narrative for NPM #02 for more details about family/professional partnerships and family involvement in the State CSHCN Program.

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: AL FY: 2009

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. Improve health status of children and youth with special health care needs (CYSHCN) through increased access to comprehensive, quality primary and specialty care, and allied health and other related services.
2. Assure appropriate primary care, including prenatal care, for all Title V populations--including low income, immigrant, and minority groups.
3. Promote evidence-based health education and outreach regarding high priority topics.
4. Further reduce the adolescent pregnancy rate.
5. Reduce the prevalence of violent behavior, including homicide and suicide, committed by or against children, youth, and women.
6. Reduce the prevalence of high-risk behaviors, including those predisposing to obesity, in adolescents.
7. Reduce infant mortality, especially among African Americans.
8. Improve the capacity of CYSHCN to be fully integrated into their communities to live, learn, work, and play.
9. Strengthen systems of family and youth support to enable CYSHCN and their families to participate more fully in program and policy development, to identify resources, and to benefit from the services they receive.
10. Further develop the Title V Program's capacity to collect and analyze health-related data and translate findings into information for key stakeholders.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

**FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: AL

APPLICATION YEAR: 2009

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.	Data-related Issues - Needs Assessment 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>	A national, hands-on workshop on best practices for analyzing and reporting qualitative data	Qualitative data will be collected during the upcoming FY 2009-10 5-year MCH needs assessment.	No suggestion
2.	Other 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>	General training and assistance in assessing and improving cultural competence at levels of the CRS program	CRS would like to raise staff awareness of all aspects of cultural competence and would like assistance in assessing and improving in this area	National Center for Cultural Competence
3.	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> </u>			
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: <u> </u>			
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: <u> </u>			
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: <u> </u>			
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: <u> </u>			
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: <u> </u>			
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: <u> </u>			
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: AL

SP # 1

PERFORMANCE MEASURE: Of 0-9 year-old children enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received care coordination in the reporting year.

STATUS: Active

GOAL: To increase the proportion of EPSDT-enrolled children who receive care coordination services through the Alabama Department of Public Health.

DEFINITION: See respective descriptions of performance measure, numerator, and denominator.

Numerator:
Number of EPSDT-enrolled children aged 0-9 years who received care coordination services from the Alabama Department of Public Health during the fiscal year.

Denominator:
Total number of EPSDT-enrolled children aged 0-9 years in the fiscal year, per the pertinent Alabama Title XIX report.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE: No corresponding objective.

DATA SOURCES AND DATA ISSUES: Reports provided by the Alabama Department of Public Health and the Alabama Medicaid Agency.

SIGNIFICANCE: This performance measure pertains to the priority maternal and child health need to "assure appropriate primary care, including prenatal care, for all Title V populations--including low income, immigrant, and minority groups." EPSDT-enrolled children and their families may require assistance with accessing health and dental services. Public health social workers and nurses certified in care coordination are uniquely qualified to help children and families access services. These health professionals' provision of care coordination helps ensure that EPSDT-enrolled children are able to acquire and fully benefit from the health and dental services available to them under the Alabama Medicaid Agency's primary care case management program, Patient 1st.

SP # 2

PERFORMANCE MEASURE:

Of children and youth enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received any dental service in the reporting year.

STATUS:

Active

GOAL

To increase the proportion of Alabama EPSDT-eligible children and youth who receive any dental service in a 1-year period.

DEFINITION

See respective descriptions of performance measure, numerator, and denominator.

Numerator:

Number of EPSDT-enrolled individuals aged 0-20 years who received any dental service in the fiscal year, per the pertinent Alabama Title XIX report.

Denominator:

Total number of EPSDT-enrolled individuals aged 0-20 years in the fiscal year, per the pertinent Alabama Title XIX report.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

21-10: Increase the proportion of children and adults who use the oral health care system.

The 2010 baseline for U.S. children, adolescents, and young adults aged 2-19 years whose household income is under 200% of the federal poverty level is 20%. The national target is 56%.

DATA SOURCES AND DATA ISSUES

Data source is the "Alabama Title XIX Annual EPSDT Participation Report."

SIGNIFICANCE

This performance measure pertains to the priority maternal and child health need to "assure appropriate primary care, including prenatal care, for all Title V populations--including low income, immigrant, and minority groups." Oral health care is an important, but often neglected, component of total health care. Regular dental visits provide an opportunity for early diagnosis, prevention, and treatment of oral disease and conditions. Experts recommend that children as young as age 1 year be examined for evidence of early childhood caries. Further, parents should be advised to avoid feeding practices that may lead to early development of caries, and should be counseled about appropriate use of fluoride and other preventive measures. Necessary tooth restorative care must be provided to avoid pain, abscesses, and the need for tooth extractions. Sealants should be placed shortly after the permanent molars erupt. The percentage of Alabama Medicaid-enrolled children who received dental care in the reporting year increased from 25.6% in fiscal year 2000 to 34.9% in fiscal year 2003. Nevertheless, in light of the Healthy People 2010 objective of 56%, continued efforts are warranted to increase the number of dental providers who serve Medicaid-enrolled children and the proportion of Medicaid-enrolled children who receive dental care at least annually.

SP # 3

PERFORMANCE MEASURE:

The pregnancy rate (per 1,000) for adolescents aged 15-17 years.

STATUS:

Active

GOAL

To lower the pregnancy rate among adolescents, especially those 17 years of age and younger.

DEFINITION

See respective descriptions of performance measure, numerator, and denominator.

Numerator:

Number of reported pregnancies—including live births, fetal deaths, and abortions—among females aged 15 through 17 years in the calendar year.

Denominator:

Number of females aged 15 through 17 years in the calendar year.

Units: 1000 **Text:** Rate

HEALTHY PEOPLE 2010 OBJECTIVE

9-7: Reduce pregnancies among adolescent females. The target specified in Healthy People 2010 is "43 pregnancies per 1,000." Healthy People specifies several subgroup-specific targets, including targets for African American, white, Hispanic, and other groups.

DATA SOURCES AND DATA ISSUES

Data sources for the numerator are Alabama vital statistics files for, respectively, live births, fetal deaths, and abortions. Data sources for the denominator are U.S. census data and population estimates provided by the University of Alabama's Center for Business and Economic Research.

SIGNIFICANCE

This performance measure pertains to the priority maternal and child health need to "further reduce the adolescent pregnancy rate." Adolescent pregnancy is of great concern in Alabama, as well as in the nation. Various socioeconomic disadvantages and suboptimal health outcomes, including infant mortality, have been linked with adolescent pregnancy. Though these links are not necessarily causal, some factors that predispose an adolescent to become pregnant may also place her infant at higher risk of death. Prevention of adolescent pregnancy is generally desirable, therefore, to allow the adolescent additional time to mature and avail herself of social and economic opportunities before assuming the responsibilities of motherhood. Moreover, even though links between adolescent pregnancy and adverse pregnancy outcomes should not be assumed to be causal, having an adolescent mother is an important indicator of infants who may be at greater risk of morbidity and mortality. Pregnancy among adolescents aged 17 years and younger is of particular concern. Though pregnancies in persons under 15 years of age are of tremendous concern, pregnancy rates are not stable in this group due to small numbers in the statistical sense. Therefore, this performance measure focuses on teens from 15 through 17 years of age, as does the corresponding Healthy People 2010 objective.

SP # 4

PERFORMANCE MEASURE:

The percentage of white male high school students who chewed tobacco or snuff on 1 or more of the 30 days preceding their participation in the Youth Risk Behavior Survey (YRBS).

STATUS:

Active

GOAL

To reduce the prevalence of consumption of smokeless tobacco by white male adolescents.

DEFINITION

This measure will consist of the percentage reported from the Center for Disease Control and Prevention's (CDC's) annually conducted YRBS. The specific indicator, as reported on the YRBS website, is "Percentage of Students Who Used Chewing Tobacco or Snuff on One or More of the Past 30 Days." Though the website does not provide numerators and denominators, it does report 95% confidence intervals.

Numerator:

Not readily available.

Denominator:

Not readily available.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

27-2-c: Reduce the use of spit tobacco by adolescents (past month).
The 2010 target for white males is 18%.

DATA SOURCES AND DATA ISSUES

The data source is the YRBS database, which can be queried on CDC's YRBS website: <http://apps.nccd.cdc.gov/YRBSS/>. This website can be queried for individual YRBS indicators. As well, queries can request stratification by race, sex, or race and sex concurrently. (Other types of stratification can also be requested.)

SIGNIFICANCE

This measure pertains to the State's priority maternal and child health need to "reduce the prevalence of high risk behaviors, including those predisposing to obesity, in adolescents." Tobacco use causes many serious health problems, and chewing tobacco and snuff are NOT safe alternatives to cigarettes or other forms of tobacco. Use of spit tobacco (including chewing tobacco and snuff) causes serious oral health problems, including cancer of the mouth and gum, periodontitis, and tooth loss (Healthy People 2010, citing 2 primary sources). According to the 2003 YRBS, 27.3% of Alabama white male high school students had used chewing tobacco or snuff in the 30 days preceding the survey. In addition to being higher than for any other Alabama subgroup defined by race and sex, this prevalence of having used smokeless tobacco was significantly higher than the corresponding prevalence for U.S. white males, of 13.2%.

SP # 5

PERFORMANCE MEASURE:

The degree to which the State CSHCN Program assures that all CYSHCN have adequate access to primary and specialty care and allied health and other related services.

STATUS:

Active

GOAL

To assure access to comprehensive primary/specialty care and allied health and other related services for Alabama's children and youth with special health care needs (CYSHCN).

DEFINITION

A checklist measures five characteristics that document a system to assure that the State's CYSHCN have access to primary/specialty care and allied health and other related services that are quality, comprehensive, family-centered, and culturally competent. Boxes are checked to indicate the most accurate description of the degree to which the system has been developed and implemented. See Section IV. D. SPM #05, "Last Year's Accomplishments" to view the scored checklist used for this measure.

Numerator:

Not applicable.

Denominator:

Not applicable.

Units: 15 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

No corresponding objective.

DATA SOURCES AND DATA ISSUES

The State Children with Special Health Care Needs (CSHCN) Program.

SIGNIFICANCE

Providing CYSHCN with appropriate, high quality care that is comprehensive, family-centered, and culturally competent is crucial to the success of the child or youth across all aspects of life. One recurrent theme across family forums conducted for the Title V needs assessment related to family concerns of inadequate access to providers and a general feeling that providers did not understand the comprehensive medical, social, and developmental transition needs of their children. In addition, inadequate number and distribution of specialty and allied or other related health services ranked as one of the top five barriers to care statewide in analysis of a county-level survey of service providers. The State CSHCN program is uniquely qualified to increase awareness and provide education to providers related to the comprehensive needs of this population in training that includes the principles of family-centered care, cultural competence, and transition.

PERFORMANCE MEASURE:

The degree to which the State CSHCN Program collaborates with schools, advocacy groups, and families to enhance inclusive participation by CYSHCN in their schools and communities.

STATUS:

Active

GOAL

To increase collaboration with schools, advocacy groups, and families to promote participation of Alabama's children and youth with special health care needs (CYSHCN) in their schools and communities.

DEFINITION

A checklist measures five characteristics that document a system to assure that the State Children with Special Health Care Needs (CSHCN) Program collaborates with schools, advocacy groups, and families to promote participation of Alabama's CYSHCN in their schools and communities. Boxes are checked to indicate the most accurate description of the degree to which the system has been developed and implemented. See Section IV. D. SPM #06, "Last Year's Accomplishments" to view the scored checklist used for this measure.

Numerator:

Not applicable.

Denominator:

Not applicable.

Units: 15 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

No corresponding objective.

DATA SOURCES AND DATA ISSUES

The State CSHCN Program.

SIGNIFICANCE

A recurrent theme across family forums conducted for the current and previous Title V needs assessment related to family dissatisfaction with the educational system. Families of CYSHCN have experienced difficulty in advocating for the inclusion of appropriate adaptive and health-related services in the school environment to support the educational, vocational, recreational, and independent living goals for their children. In addition, families report a lack of understanding of educational rights and a general feeling that school staff and service providers did not understand the complex medical, social, developmental, and transition needs of their children. Title V CSHCN programs historically have experience working with a broad spectrum of public and private service providers and multiple funding streams to facilitate services for children, youth, and families and are, therefore, uniquely qualified to offer technical assistance, coordination, advocacy, and support to this population within the educational environment.

SP # 7

PERFORMANCE MEASURE:

The degree to which the Bureau of Family Health Services (Bureau) collects, analyzes, and disseminates findings from data pertinent to ongoing maternal and child health (MCH) needs assessment.

STATUS:

Active

GOAL

To conduct ongoing MCH needs assessment, and disseminate salient findings to stakeholders in a user-friendly manner.

DEFINITION

This measure is scored on a scale of 0-18, using a checklist attached to the discussion of "Last Year's Accomplishments" for this measure, located in Section IV.D. The checklist includes items pertaining to: 1) infant mortality review; 2) child death review; 3) analysis of the circa 2003 National Survey of Children's Health database; 4) biannual production of a strongly data-based report focusing on a particular MCH issue; 5) production of a reader-friendly statewide needs assessment report focusing on pregnancy and infancy; and 6) production of a reader-friendly statewide needs assessment report focusing on children and youth.

Numerator:

Not applicable.

Denominator:

Not applicable.

Units: 18 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

No precisely corresponding objective.

DATA SOURCES AND DATA ISSUES

Checklist developed by the Bureau, which includes each criterion mentioned in the definition. Each criterion is scored as to whether it was not met (0), was partly met (1), was mostly met (2), or was completely met (3) in the reporting year. The total score for the indicator is the sum of the scores for the 6 items.

SIGNIFICANCE

This performance measure pertains to the State's priority MCH need to "further develop the Title V Program's capacity to collect and analyze health-related data and translate findings into information for key stakeholders." The 3 core functions of public health are assessment, policy development, and assurance. These functions have been expanded into 10 essential public health services (reference: Healthy People 2010, which cites primary sources). Two of the essential public health services are especially pertinent to this performance measure: to 1) monitor health status to identify community health problems; and 2) inform, educate, and empower people about health issues. Accomplishment of the 2 preceding essential functions is necessary for the performance of 2 other essential functions: to 1) mobilize community partnerships to identify and solve health problems, and 2) develop policies and plans that support individual and community efforts. In the case of this performance measure, the targeted communities are the State and its 5 perinatal regions.

SO # 1

OUTCOME MEASURE:

The homicide/legal intervention death rate for 15-19 year-old African American males per 100,000 African American males aged 15-19 years

STATUS:

Active

GOAL

To reduce the homicide/legal intervention death rate for African American males 15 to 19 years of age.

DEFINITION

Numerator:

The number of 15 to 19 year old African American male deaths due to homicide or legal intervention

Denominator:

The number of African American males 15-19 years of age

Units: 100000 **Text:** Rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Data source for the numerator is the Alabama Center for Health Statistic's mortality database. Data source for the denominator is the Alabama State Data Center's (Center for Business and Economic Research , University of Alabama) annual population projections, as reported in ADPH's annual Vital Events publication.

SIGNIFICANCE

Homicide and legal intervention are collectively the leading cause of death among African American males aged 15 to 19 years. Consequently, a wide racial gap exists with respect to deaths due to homicide and legal intervention in this age group. Although the homicide/legal intervention death rate among African American males in this age group has been declining, further decline is needed.

SO # 2

OUTCOME MEASURE:

The ratio of the infant mortality rate for Alabama to the infant mortality rate for the United States (U.S.).

STATUS:

Active

GOAL

To reduce the disparity between the infant mortality rates for Alabama and the U.S. by reducing the infant mortality rate for Alabama residents of all races.

DEFINITION

The infant mortality rate for Alabama divided by the infant mortality rate for the U.S.

Numerator:

Numerator: The infant mortality rate for Alabama, per 1,000 live births.

Denominator:

Denominator: When available, the infant mortality rate for the U.S., per 1,000 live births. See "Data Sources and Data Issues" for fuller explanation.

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

16-1: Reduce fetal and infant deaths.

DATA SOURCES AND DATA ISSUES

The data sources for Alabama's infant mortality rates are the final statistical death files and final statistical live birth files, which typically become available around August of the year following the year of death. For Alabama's infant mortality rate for a given year, the numerator counts Alabama residents who died in that year before reaching their first birthday, and the denominator counts live births to Alabama residents in that same year. Sources for U.S. infant mortality rates are publications by the National Center for Health Statistics (NCHS). Published final infant mortality numbers for the U.S. typically become available later than the final statistical death files for Alabama do. Further, per the source for the U.S. 2005 provisional infant death rate, numbers are based on events occurring in the U.S., regardless of place of residence, implying that non-resident decedents could be counted. The NCHS National Vital Statistics Reports series is used for U.S. rates.

SIGNIFICANCE

Infant mortality is one indicator of a society's well-being. Since the 1940s, the earliest decade for which readily available publications track the disparity, Alabama's infant mortality rate has been notably higher than that for the U.S. In 2004, for example, the infant mortality rate for Alabama was 8.72 deaths per 1,000 live births, while that for the U.S. was 6.79 deaths per 1,000 live births. Geographic comparison (Alabama versus U.S.) of racial distribution of live births, socioeconomic factors, the prevalence of very low birth weight, and race-specific infant, neonatal, and postneonatal mortality rates contributes to better understanding of the infant mortality gap between Alabama and the U.S. These factors are discussed in a background paper for State Performance Measure #2, which is attached to Section II.C of this application/report.

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: AL

Form Level Notes for Form 17

None

HEALTH SYSTEMS CAPACITY MEASURE # 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.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	90.6	93.2	83.7	79.4	93.3
Numerator	2,736	2,833	2,562	2,437	2,865
Denominator	302,071	304,098	306,124	307,001	307,001

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?

Provisional

Provisional

Field Level Notes

1. Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2007

Field Note:

For reasons discussed in this indicator's year 2006 field note, the numerator is obtained by summing numbers provided by Blue Cross and Blue Shield of Alabama (BCBS) and by the Alabama Medicaid Agency (Medicaid). The numerator therefore represents the number of hospital discharges of 0-4 year-old children in calendar year 2007, where the child was enrolled in either BCBS or Medicaid.

For reasons discussed in the year 2005 field note, denominators for this indicator are projected populations for 0-4 year-old Alabama residents, as reported by the Center for Business and Economic Research (CBER), the University of Alabama. However, because CBER has not provided a year 2007 population projection for this age group, we are using the corresponding projection for year 2006 as the best estimate for the denominator. We considered using the year 2007 population projection for this age group that is available on the U.S. Census Bureau's Web site. However, the latter projection (299,605) is notably lower than the corresponding CBER projection for 2006 (307,001), and the methods for arriving at the CBER projection versus the Census Bureau's projection may not be comparable. (Using the denominator of 299,605 yields an estimated asthma hospitalization rate of 95.6 hospitalizations per 10,000 0-4 year-old children.)

Medicaid has continued consulting with providers of care for children with asthma about appropriate quality-of-care indicators for asthma, for incorporation into the electronic health information system referenced in the field note to year 2006.

2. Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2006

Field Note:

Alabama still does not have a representative, centralized hospital discharge database. However, the Bureau of Family Health Services (FHS) believes that most Alabama children and youth obtain health insurance through BCBS or Medicaid. Further, according to Medicaid, BCBS insures about 80% of the State's insured non-Medicare population and has 68% of all Medicaid third-party liability policies; except for a small percentage, Medicaid insures the remaining Alabama population (reference: "Together for Quality," a proposal submitted by Medicaid to the U.S. Department of Health and Human Services in October 2006). Accordingly, numbers obtained from Medicaid and BCBS provide the numerators for our respective estimates of this indicator. Details regarding the numerators and denominators for these estimates are in the year 2005 field note for this indicator.

With funds granted to implement the previously referenced "Together for Quality" proposal, in fiscal year 2007 Medicaid initiated a project to create a statewide electronic health information system that links Medicaid, State health agencies, providers, and private payers. FHS is seeking to determine if the system could be designed to allow generation of a database for surveillance of key indicators of morbidity, including asthma, in Title V populations. Medicaid's initial response to this idea, as a long-term goal, has been positive. Further, Medicaid is consulting with experts in asthma for input on appropriate quality-of-care indicators for asthma, for incorporation into the electronic health information system.

3. Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2005

Field Note:

Alabama still does not have a representative, centralized hospital discharge database. The lack of such a database is discussed in the narrative for Health Systems Capacity Indicator #9A.

Respective numerators for calendar years 2002-2006 estimates are the total numbers of discharges for inpatient hospitalizations due to asthma among 0-4 year-old enrollees in either BCBS or Medicaid. Denominators are the projected population of 0-4 year-old Alabama children for those respective years, reported by CBER.

The reason for using population-based denominators for 2002-06, rather than the total reported numbers of 0-4 year-old enrollees in BCBS and Medicaid, is that for 2002, 2003, and 2004 respectively, the total reported number of BCBS and Medicaid enrollees in this age group exceeded the projected population for this age group. The apparent over-estimate of total enrollees, along with failure to capture hospitalizations among children who are enrolled in other plans or have no insurance, would markedly underestimate the rate. Population projections provide a reasonably stable denominator, and most children in the State are presumably insured by BCBS or Medicaid. Taking the preceding issues into account, we consider the projected population to be the preferable denominator. Nevertheless, we recognize that the reported estimates are likely to be somewhat lower than the actual hospitalization rates, since hospitalizations of children who are uninsured or enrolled in other plans are not counted.

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	124.5	124.9	128.7	126.9	
Numerator	45,152	45,771	48,965	50,173	
Denominator	36,265	36,660	38,033	39,531	

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

Field Level Notes

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

Field Name: HSC02

Row Name:

Column Name:

Year: 2007

Field Note:

As shown and discussed for previous years, the Alabama Medicaid Agency report used for this indicator consistently provides a numerator that is larger than the denominator, resulting in a percentage that exceeds 100%. The report available for 2007, entitled "Alabama Title XIX Annual EPSDT Participation Report," states that 41,007 individuals under 1 year of age were eligible for EPSDT in fiscal year (FY) 2007, and that the "total eligibles receiving at least one initial or periodic screen," in this age group in FY 2007, was 63,004. Using these numbers, respectively, as the denominator and numerator yields an estimate of 153.6%.

The Title V Information System does not permit us to directly enter a percentage exceeding 100%, so this field is left blank. In FY 2009 we will consult with Medicaid in an effort to better estimate the numerator for this measure.

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

Field Name: HSC02

Row Name:

Column Name:

Year: 2006

Field Note:

The total number of eligibles receiving at least 1 periodic screen, 50,173, accounts for all the screens done in FY 2006--regardless of the child's possible change in eligibility. The average period of eligibility for infants (under 1 year) was only 76.3% of a year during this reporting period.

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

Field Name: HSC02

Row Name:

Column Name:

Year: 2005

Field Note:

The total number of eligibles receiving at least 1 periodic screen, 48,965, accounts for all the screens done in FY 2005--regardless of the child's possible change in eligibility. The average period of eligibility for infants (under 1 year) was only 76.0% of a year during this reporting period.

HEALTH SYSTEMS CAPACITY MEASURE # 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.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>76.1</u>	<u>81.9</u>	<u>94.3</u>	<u>96.7</u>	<u>94.7</u>
Numerator	<u></u>	<u>222</u>	<u>82</u>	<u>208</u>	<u>213</u>
Denominator	<u></u>	<u>271</u>	<u>87</u>	<u>215</u>	<u>225</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

- Section Number:** Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2007

Field Note:

The source document for the 2007 estimate is: Alabama's submission of the "Framework for the Annual Report of the State Children's Health Insurance Plans under Title XXI of the Social Security Act. FY 2007."

- Section Number:** Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2006

Field Note:

Methods for estimating this indicator, as well as the underlying rationale, are discussed in this indicator's field note for 2005.

The source document for the 2006 estimate is: Alabama's December 2006 submission of the "Framework for the Annual Report of the State Children's Health Insurance Plans under Title XXI of the Social Security Act. FY 2006."

- Section Number:** Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2005

Field Note:

All estimates for this indicator pertain to fiscal years (FYs). Estimates for 2003-2006 are based on different methods than the estimate for 2002. Thus, the estimate for 2002 does not provide an appropriate baseline for assessing trends in this indicator.

In FY 2006, after considering methodological issues involved, ALL Kids staff and Maternal and Child Health Epidemiology Unit staff agreed that a standardized measure used in annual reports produced by ALL Kids would provide the best available estimate for the proportion of ALL Kids-enrolled infants who receive 1 or more well child visits. (ALL Kids is Alabama's State Children's Health Insurance Program [SCHIP].) The indicator chosen via this consultation is based on specifications provided by the Health Plan Employer Data and Information Set (HEDIS [TM]), and reports well child visits in the first 15 months of life. In these field notes, this chosen indicator is subsequently termed the "HEDIS-based indicator." Estimates for all years shown are those reported for the HEDIS-based indicator.

Reasons for choosing the HEDIS-based indicator are detailed in the narrative discussion of this health systems capacity indicator. Basically, the HEDIS-based indicator pertains to children who turned 15 months old during the reporting year and who were continuously enrolled in ALL Kids from 31 days of age. Per the ALL Kids' federally submitted FY 2005 Annual Report, the "Definition of Population Included" in the HEDIS-based indicator is: the percentage of enrolled members who turned 15 months old during the measurement year, who were continuously enrolled from 31 days of age and who received either 0, 1, 2, 3, 4, 5, 6 or more well child visits with a primary care provider during their first 15 months of life.

The source document for the 2005 estimate is: Alabama's submission of the "Framework for the Annual Report of the State Children's Health Insurance Plans under Title XXI of the Social Security Act. FY 2005."

HEALTH SYSTEMS CAPACITY MEASURE # 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.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>79.8</u>	<u>79.8</u>	<u>78.6</u>	<u>73.4</u>	<u>73.9</u>
Numerator	<u>47,351</u>	<u>47,024</u>	<u>47,182</u>	<u>46,861</u>	<u>47,318</u>
Denominator	<u>59,356</u>	<u>58,956</u>	<u>60,065</u>	<u>63,838</u>	<u>63,994</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?

Provisional Final

Field Level Notes

- Section Number:** Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2007

Field Note:

The estimate for year 2007 was added on September 19, 2008, and is not discussed in the narrative.

- Section Number:** Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2006

Field Note:

This estimate was provided by the Alabama Department of Public Health's Center for Health Statistics, per an internal report received on April 18, 2008. Conjecturally, the lower percentage reported for 2006 than for earlier years shown may be a reporting artifact, and the possibility of such an artifact will be explored by FY 2009.

HEALTH SYSTEMS CAPACITY MEASURE # 07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>85.9</u>	<u>87.1</u>	<u>88.9</u>	<u>88.5</u>	<u>89.6</u>
Numerator	<u>386,624</u>	<u>403,378</u>	<u>417,705</u>	<u>442,295</u>	<u>413,797</u>
Denominator	<u>449,906</u>	<u>463,226</u>	<u>469,972</u>	<u>499,796</u>	<u>462,044</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

- Section Number:** Health Systems Capacity Indicator #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2007

Field Note:

Numbers reported are for fiscal years. The numbers were provided by the Alabama Medicaid Agency, based on that agency's query of their data system, on April 15, 2008. The numerator and denominator are notably less than those reported for 2006, but the percentage is about the same as that reported for 2006. For 2 reasons, we cannot determine whether the methods used for the 2006 and 2007 numbers were precisely comparable: A log documenting how the query was made is not available, and staff turnover has occurred. That is, the Alabama Department of Public Health (ADPH) staff member who made the request for 2006 and the Medicaid Agency staff member who provided the requested numbers for that year are no longer with their respective agencies. However, documentation available for ADPH's corresponding request for 2006 and Alabama Medicaid's reply for 2006 were reviewed, and each agency sought to duplicate the methods used for the 2006 estimate.

- Section Number:** Health Systems Capacity Indicator #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2006

Field Note:

The HCFA-2082 report from which previous years' data were compiled is no longer produced for the Alabama Medicaid Agency (Medicaid).

The FY 2006 estimate is from Medicaid's query system and may not be comparable to estimates for prior years.

HEALTH SYSTEMS CAPACITY MEASURE # 07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>46.5</u>	<u>49.8</u>	<u>51.4</u>	<u>53.0</u>	<u>65.3</u>
Numerator	<u>42,774</u>	<u>46,860</u>	<u>49,619</u>	<u>52,976</u>	<u>64,652</u>
Denominator	<u>91,927</u>	<u>94,101</u>	<u>96,606</u>	<u>99,995</u>	<u>99,022</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

- Section Number:** Health Systems Capacity Indicator #07B
Field Name: HSC07B
Row Name:
Column Name:
Year: 2007
Field Note:
 The source document is: Alabama Title XIX Annual EPSDT Participation Report, FY 2007.
- Section Number:** Health Systems Capacity Indicator #07B
Field Name: HSC07B
Row Name:
Column Name:
Year: 2006
Field Note:
 The source document is: Alabama Title XIX Annual EPSDT Participation Report, FY 2006.
- Section Number:** Health Systems Capacity Indicator #07B
Field Name: HSC07B
Row Name:
Column Name:
Year: 2005
Field Note:
 The source document is: Alabama Title XIX Annual EPSDT Participation Report, FY 2005.

HEALTH SYSTEMS CAPACITY MEASURE # 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.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	18.3	16.2	15.1	13.6	14.5
Numerator	4,327	3,824	3,591	3,298	3,533
Denominator	23,635	23,677	23,845	24,186	24,442

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

- Section Number:** Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator was provided to each state by the Social Security Administration (SSA) for fiscal year (FY) 2007. It represents the number of children in Alabama who were under age 16 years and were receiving federally administered Supplemental Security Income (SSI) payments as of December 2007. The file is in Characteristic Extract Record format and is 100% data. The numerator is programmatic data based on a database match between Children's Rehabilitation Service and the Alabama Medicaid Agency.

- Section Number:** Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2006

Field Note:

The denominator was provided to each state by the SSA for FY 2006. It represents the number of children in Alabama who were under age 16 years and were receiving federally administered SSI payments as of December 2006. The file is in Characteristic Extract Record format and is 100% data. The numerator is programmatic data based on a database match between Children's Rehabilitation Service and the Alabama Medicaid Agency.

- Section Number:** Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2005

Field Note:

The denominator was provided to each state by the SSA for FY 2005. It represents the number of children in Alabama who were under age 16 years and were receiving federally administered SSI payments as of December 2005. The numerator is an estimate of programmatic data based on a calculated mean of percent decreases in this value since FY 2002. (To obtain an estimate for the numerator, the percent decreases in the numerator were calculated between FY 2002 and FY 2003 and between FY 2003 and FY 2004. Between FY 2002 and FY 2003, there was a 0.57% decrease and between FY 2003 and FY 2004 there was an 11.6% decrease. A mean percent decrease was calculated, 6.1%, and then this figure was used to project a decrease for FY 2005--subtracting 6.1% from the numerator for FY 2004 to yield an estimated numerator for FY 2005.)

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

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>	2007	Payment source from birth certificate	<u>11.7</u>	<u>9.3</u>	<u>10.4</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Payment source from birth certificate	<u>11</u>	<u>9.1</u>	<u>10</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2007	Payment source from birth certificate	<u>70.2</u>	<u>87.4</u>	<u>79.2</u>
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>	2007	Payment source from birth certificate	<u>66.7</u>	<u>80.5</u>	<u>73.9</u>

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

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>	2007	133
b) <i>Medicaid Children</i> (Age range <u> </u> 1 to <u> </u> 5) (Age range <u> </u> 6 to <u> </u> 18) (Age range <u> </u> to <u> </u>)	2007	133 100
c) <i>Pregnant Women</i>	2007	133

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

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2007	200
b) <i>Medicaid Children</i> (Age range <u> </u> 1 to <u> </u> 5) (Age range <u> </u> 6 to <u> </u> 18) (Age range <u> </u> to <u> </u>)	2007	200 200
c) <i>Pregnant Women</i>	2007	200

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - SCHIP

Field Name: SCHIP_Infant

Row Name: Infants

Column Name:

Year: 2009

Field Note:

Medicaid covers infants whose household income is at or below 133% of the federal poverty level (FPL). SCHIP covers infants whose household income is greater than 133% of FPL, but does not exceed 200% of FPL.

2. **Section Number:** Indicator 06 - SCHIP

Field Name: SCHIP_Children

Row Name: SCHIP_Children

Column Name:

Year: 2009

Field Note:

Medicaid and SCHIP each has 2 age-specific income criteria for children and youth: 0-5 years inclusive, and 6-18 years inclusive.

For 0-5 year-olds, the upper parameter for Medicaid is 133% of the federal poverty level (FPL), and SCHIP eligibility specifies a household income greater than 133% of FPL, but not to exceed 200% of FPL.

For 6-18 year-olds, the upper parameter for Medicaid is 100% of FPL, and SCHIP eligibility specifies a household income greater than 100% of FPL, but not to exceed 200% of FPL.

3. **Section Number:** Indicator 06 - SCHIP

Field Name: SCHIP_Women

Row Name: Pregnant Women

Column Name:

Year: 2009

Field Note:

For pregnant women, the upper parameter for Medicaid eligibility is 133% of the federal poverty level (FPL). Alabama's SCHIP covers pregnant females only if they are less than 19 years of age and already eligible for ALL Kids, with household incomes exceeding the Medicaid criterion but not exceeding 200% of the FPL.

4. **Section Number:** Indicator 05

Field Name: AdequateCare

Row Name: Percent of pregnant women with adequate prenatal care

Column Name:

Year: 2009

Field Note:

In previous years, Title V Information Reporting System staff stated that the percentage reported for "All" in HSCI #5D should match that for the corresponding year for HSCI #4. Therefore, because HSCI #4 pertains to women 15 through 44 years of age, the percentages shown for HSCI #5D also pertain to women 15 through 44 years of age.

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

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	1	No
Annual linkage of birth certificates and WIC eligibility files	2	Yes
Annual linkage of birth certificates and newborn screening files	2	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	1	No
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: AL

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:		

*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

1. **Section Number:** Indicator 09B
Field Name: YRBSS_09B
Row Name: Youth Risk Behavior Survey (YRBS)
Column Name:
Year: 2009
Field Note:

As of June 6, 2008, year 2007 Youth Risk Behavior Survey (YRBS) findings for Alabama were not available on the Center for Disease Control and Prevention's YRBS Web page. The most recent year for which Alabama numbers were shown was 2005. By September 2008 we will consult with the Alabama Department of Public Health's Bureau of Health Promotion and Chronic Disease, where Alabama's YRBS program is administratively located, regarding when Alabama YRBS findings for 2007 will become available.

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: AL

Form Level Notes for Form 11

Health Status Indicators (HSIs) #4A, #4B, and #4C: Alabama does not have a database from which to directly estimate the number of nonfatal injuries. In order to meet federal reporting requirements, Bureau of Family Health Services (FHS) staff estimated the numerator for each of these indicators by multiplying a factor times the numerator for the corresponding mortality indicator (HSI #3A, #3B, or #3C). This factor is based on Kentucky's experience: that is, Kentucky's numbers for HSIs #3A-3C and #4A-4C, as reported in Kentucky's on-line Maternal and Child Health Services Block Grant 2003 Annual Report/2005 Application (as it appeared circa May 2005). Kentucky was chosen from several potential states because, compared to the other states under consideration, Kentucky is geographically closer to Alabama. As well, Kentucky's 2003 estimate for HSI #3A was closer to Alabama's 2003 estimate than estimates from the other states under consideration were. Therefore, the assumption underlying our estimated numbers of nonfatal injuries (HSIs #4A, #4B, and #4C) in Alabama is this: that Alabama's ratio of the number of nonfatal injuries to the corresponding number of fatal injuries (HSIs #3A, #3B, or #3C) is the same as Kentucky's ratio over a combined 3-year period, 2000-2002. Other than meeting federal reporting requirements, the only purpose served by the reported estimates for HSIs #4A, #4B, and #4C is to provide a rough, conjectural estimate of the actual number of individual Alabama residents in the specified age group who experienced the specified type of nonfatal injury.

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	10.0	10.5	10.7	10.5	10.4
Numerator	5,932	6,204	6,428	6,616	6,695
Denominator	59,356	59,170	60,262	62,915	64,180

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:** Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2007

Field Note:

The estimate for 2007 was added on September 19, 2008, and is not discussed in the narrative.

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	8.1	8.4	8.7	8.5	8.6
Numerator	4,664	4,815	5,035	5,176	5,306
Denominator	57,406	57,101	58,180	60,638	62,001

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

- Section Number:** Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2007
Field Note:
 The estimate for 2007 was added on September 19, 2008, and is not discussed in the narrative.

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	<u>2.0</u>	<u>2.0</u>	<u>2.1</u>	<u>2.0</u>	<u>2.1</u>
Numerator	<u>1,216</u>	<u>1,178</u>	<u>1,291</u>	<u>1,273</u>	<u>1,348</u>
Denominator	<u>59,356</u>	<u>59,170</u>	<u>60,262</u>	<u>62,915</u>	<u>64,180</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

- Section Number:** Health Status Indicator #02A
Field Name: HSI02A
Row Name:
Column Name:
Year: 2007
Field Note:
 The estimate for 2007 was added on September 19, 2008, and is not discussed in the narrative.

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	<u>1.6</u>	<u>1.6</u>	<u>1.7</u>	<u>1.6</u>	<u>1.6</u>
Numerator	<u>930</u>	<u>887</u>	<u>971</u>	<u>987</u>	<u>1,022</u>
Denominator	<u>57,406</u>	<u>57,101</u>	<u>58,180</u>	<u>60,638</u>	<u>62,001</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:** Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2007

Field Note:

The estimate for 2007 was added on September 19, 2008, and is not discussed in the narrative.

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	12.3	12.7	13.9	13.3	
Numerator	115	119	130	124	
Denominator	934,255	935,145	936,034	935,525	

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?

Provisional

Field Level Notes

1. **Section Number:** Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

Though the final year 2006 file is available, staffing limitations have delayed analysis of the file. We expect to have a final estimate for 2006 by September 2008.

2. **Section Number:** Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 rate is provisional. Per Center for Health Statistics staff, the 2006 death file includes all the deaths -- though they are waiting for the cause of death for about 100 records.

The denominators for the years shown represent the population projection for children 14 years of age and younger in the specified calendar year. These projections are made by Alabama's Center for Business and Economic Research.

International Classification of Diseases, Tenth Revision (ICD-10) codes have been used since 1999 (inclusive).

3. **Section Number:** Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2005

Field Note:

See year 2006 notes for comments pertaining to this item.

HEALTH STATUS INDICATOR MEASURE # 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				
	2003	2004	2005	2006	2007
Annual Indicator	5.4	6.6	6.5	6.3	
Numerator	50	62	61	59	
Denominator	934,255	935,145	936,034	935,525	

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?

Provisional

Field Level Notes

1. **Section Number:** Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

Though the final year 2006 file is available, staffing limitations have delayed analysis of the file. We expect to have a final estimate for 2006 by September 2008.

2. **Section Number:** Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 rate is provisional. Per Center for Health Statistics staff, the 2006 death file includes all the deaths -- though they are waiting for the cause of death for about 100 records.

The denominators for the years shown represent the population projection for children 14 years of age and younger in the specified calendar year. These projections are made by Alabama's Center for Business and Economic Research.

International Classification of Diseases, Tenth Revision (ICD-10) codes have been used since 1999 (inclusive). We assume that deaths in which a motor vehicle crash is coded as the underlying cause are unintentional.

3. **Section Number:** Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2005

Field Note:

See year 2006 notes for comments pertaining to this item.

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	38.1	46.3	41.0	46.0	
Numerator	248	304	272	307	
Denominator	650,445	656,780	663,113	667,145	

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?

Provisional

Field Level Notes

- Section Number:** Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

Though the final year 2006 file is available, staffing limitations have delayed analysis of the file. We expect to have a final estimate for 2006 by September 2008.

- Section Number:** Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 rate is provisional. Per Center for Health Statistics staff, the 2006 death file includes all the deaths -- though they are waiting for the cause of death for about 100 records.

The denominators for the years shown represent the population projection for youth 15 through 24 years of age in the specified calendar year. These projections are made by Alabama's Center for Business and Economic Research.

International Classification of Diseases, Tenth Revision (ICD-10) codes have been used since 1999 (inclusive). We assume that deaths in which a motor vehicle crash is coded as the underlying cause are unintentional.

- Section Number:** Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2005

Field Note:

See year 2006 notes for comments pertaining to this item.

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	126.5	130.8	142.7	136.2	
Numerator	1,182	1,223	1,336	1,274	
Denominator	934,255	935,145	936,034	935,525	

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?

Provisional

Field Level Notes

1. **Section Number:** Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. (For reasons described in the form-level note for Form 20, estimating this indicator for Alabama requires the use of death files.) Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

2. **Section Number:** Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2006

Field Note:

For 2000-2002 combined, Kentucky reported 3,104 numerator events for Health Status Indicator (HSI) #4A and 302 numerator events for HSI #3A. Dividing the former by the latter yields the factor 10.27815. Multiplying this factor times Alabama's respective numerators for HSI #3A (fatal injuries) for 2002 through 2006 yielded the numerators shown on Form 20 for HSI #4A. For the underlying rationale for this method of estimating numerators, see form-level note entitled "Health Status Indicators (HSIs) #4A, #4B, and #4C."

3. **Section Number:** Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2005

Field Note:

This indicator is very roughly estimated, as described in the year 2006 field note for this indicator.

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>23.2</u>	<u>28.8</u>	<u>28.3</u>	<u>27.4</u>	<u> </u>
Numerator	<u>217</u>	<u>269</u>	<u>265</u>	<u>256</u>	<u> </u>
Denominator	<u>934,255</u>	<u>935,145</u>	<u>936,034</u>	<u>935,525</u>	<u> </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?

Provisional

Field Level Notes

1. **Section Number:** Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. (For reasons described in the form-level note for Form 20, estimating this indicator for Alabama requires the use of death files.) Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

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

Field Name: HSI04B

Row Name:

Column Name:

Year: 2006

Field Note:

For 2000-2002 combined, Kentucky reported 543 numerator events for Health Status Indicator (HSI) #4B and 125 numerator events for HSI #3B. Dividing the former by the latter yields the factor 4.34400. Multiplying this factor times Alabama's respective numerators for HSI #3B (fatal motor vehicle crash injuries) for 2002 through 2006 yielded the numerators shown on Form 20 for HSI #4B. For the underlying rationale for this method of estimating numerators, see form-level note entitled "Health Status Indicators (HSIs) #4A, #4B, and #4C."

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

Field Name: HSI04B

Row Name:

Column Name:

Year: 2005

Field Note:

This indicator is very roughly estimated, as described in the year 2006 field note for this indicator.

HEALTH STATUS INDICATOR MEASURE # 04C

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	164.0	199.0	176.4	197.9	
Numerator	1,067	1,307	1,170	1,320	
Denominator	650,445	656,780	663,113	667,145	

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?

Provisional

Field Level Notes

1. **Section Number:** Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2007

Field Note:

Due to the time required to receive, manage, and edit vital statistics data, final year 2007 death files are not yet available for Alabama. (For reasons described in the form-level note for Form 20, estimating this indicator for Alabama requires the use of death files.) Our experience has shown that the incomplete, provisional files available at this time sometimes provide misleading results. If the final files are available by August 2008, staffing resources permit us to analyze the files, and the Title V Information System can be accessed in September 2008, we will provide the year 2007 estimate in September 2008. Otherwise, the estimate will be provided by July 2009.

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

Field Name: HSI04C

Row Name:

Column Name:

Year: 2006

Field Note:

For 2000-2002 combined, Kentucky reported 2,748 numerator events for Health Status Indicator (HSI) #4C and 639 numerator events for HSI #3C. Dividing the former by the latter yields the factor 4.30047. Multiplying this factor times Alabama's respective numerators for HSI #3C (fatal injuries sustained in motor vehicle crashes) for 2002 through 2006 yielded the numerators shown on Form 20 for HSI #4C. For the underlying rationale for this method of estimating numerators, see form-level note entitled "Health Status Indicators (HSIs) #4A, #4B, and #4C."

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

Field Name: HSI04C

Row Name:

Column Name:

Year: 2005

Field Note:

This indicator is very roughly estimated, as described in the year 2006 field note for this indicator.

HEALTH STATUS INDICATOR MEASURE # 05A

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>32.4</u>	<u>30.9</u>	<u>38.1</u>	<u>51.6</u>	<u>47.0</u>
Numerator	<u>5,254</u>	<u>5,026</u>	<u>6,231</u>	<u>8,229</u>	<u>7,501</u>
Denominator	<u>162,159</u>	<u>162,823</u>	<u>163,488</u>	<u>159,480</u>	<u>159,480</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?

Provisional Provisional

Field Level Notes

1. **Section Number:** Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2007

Field Note:

The numerator represents cases rather than unduplicated patient counts.

Because the estimated population for 2007 is not yet available, the estimated population for 2006 is shown as the best currently available estimate for 2007 as well. The source of this estimate and the rationale for using estimated, rather than projected, populations for the next several years is explained in the year 2006 note.

2. **Section Number:** Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2006

Field Note:

The numerator represents cases rather than unduplicated patient counts.

The denominator is the estimated population of Alabama 15-19 year-old females. Estimated populations numbers often differ notably from projected population numbers-- which probably accounts for the notable drop in the denominator in 2006 relative to earlier years. Thus, the notably lower denominator in 2006 is probably a reporting artifact. Using the 2005 projected population of 163,488 as the denominator for the 2006 rate yields a chlamydia rate of 50.3 per 1,000 in this age group.

Because estimated populations are probably more accurate than projected populations, especially in the latter half of a decade, we plan to use the estimated population for this denominator until the year 2010 census has been implemented and reported. The secondary source for the population estimate is "County Health Profile Alabama 2000," which cites the primary source as the U.S. Census Bureau, at the following url address: <http://www.census.gov/popest/counties/asrh/CC-EST2006-alldata.html>.

3. **Section Number:** Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2005

Field Note:

The numerator represents cases rather than unduplicated patient counts.

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>8.9</u>	<u>9.6</u>	<u>12.9</u>	<u>16.8</u>	<u>14.2</u>
Numerator	<u>7,164</u>	<u>7,721</u>	<u>10,359</u>	<u>13,211</u>	<u>11,131</u>
Denominator	<u>806,356</u>	<u>804,901</u>	<u>803,448</u>	<u>784,434</u>	<u>784,434</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

Field Level Notes

- Section Number:** Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2007

Field Note:

The numerator represents cases rather than unduplicated patient counts.

Because the estimated population for 2007 is not yet available, the estimated population for 2006 is shown as the best currently available estimate for 2007 as well. The source of this estimate and the rationale for using estimated, rather than projected, populations for the next several years is explained in the year 2006 note.

- Section Number:** Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2006

Field Note:

The numerator represents cases rather than unduplicated patient counts.

The denominator is the estimated population of Alabama 20-44 year-old females. Estimated populations numbers often differ notably from projected population numbers-- which probably accounts for the notable drop in the denominator in 2006 relative to earlier years. Thus, the notably lower denominator in 2006 is probably a reporting artifact. Using the 2005 projected population of 803,448 as the denominator for the 2006 rate yields a chlamydia rate of 16.4 per 1,000 in this age group.

Because estimated populations are probably more accurate than projected populations, especially in the latter half of a decade, we plan to use the estimated population for this denominator until the year 2010 census has been implemented and reported. The secondary source for the population estimate is "County Health Profile Alabama 2000," which cites the primary source as the U.S. Census Bureau, at the following url address: <http://www.census.gov/popest/counties/asrh/CC-EST2006-alldata.html>.

- Section Number:** Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2005

Field Note:

The numerator represents cases rather than unduplicated patient counts.

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL**

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: 2007 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	62,390	39,548	20,452	354	629	35	1,372	0
Children 1 through 4	245,844	162,085	75,215	899	2,783	86	4,776	0
Children 5 through 9	306,870	202,929	93,891	1,297	2,973	118	5,662	0
Children 10 through 14	310,249	202,464	98,555	1,607	2,748	144	4,731	0
Children 15 through 19	326,423	209,428	108,493	1,972	2,475	158	3,897	0
Children 20 through 24	318,679	206,935	102,530	2,190	3,518	120	3,386	0
Children 0 through 24	1,570,455	1,023,389	499,136	8,319	15,126	661	23,824	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	58,373	4,017	0
Children 1 through 4	230,926	14,918	0
Children 5 through 9	293,558	13,312	0
Children 10 through 14	299,957	10,292	0
Children 15 through 19	317,922	8,501	0
Children 20 through 24	309,491	9,188	0
Children 0 through 24	1,510,227	60,228	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL

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: 2006 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	163	54	108	0	0	0	0	1
Women 15 through 17	2,683	1,349	1,306	6	4	0	0	18
Women 18 through 19	5,824	3,416	2,335	19	21	3	0	30
Women 20 through 34	48,484	33,163	14,276	149	639	8	0	249
Women 35 or older	5,746	4,343	1,217	14	152	1	0	19
Women of all ages	62,900	42,325	19,242	188	816	12	0	317

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	145	17	1
Women 15 through 17	2,456	223	4
Women 18 through 19	5,349	465	10
Women 20 through 34	44,764	3,688	32
Women 35 or older	5,425	312	9
Women of all ages	58,139	4,705	56

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL**

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: 2006 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	569	284	275	3	4	0	0	3
Children 1 through 4	100	53	44	1	0	0	0	2
Children 5 through 9	61	31	30	0	0	0	0	0
Children 10 through 14	61	42	19	0	0	0	0	0
Children 15 through 19	291	197	92	0	1	0	0	1
Children 20 through 24	523	334	182	1	5	0	0	1
Children 0 through 24	1,605	941	642	5	10	0	0	7

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	533	34	2
Children 1 through 4	95	5	0
Children 5 through 9	57	4	0
Children 10 through 14	61	0	0
Children 15 through 19	281	10	0
Children 20 through 24	501	22	0
Children 0 through 24	1,528	75	2

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL**

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	1,246,014	813,532.0	395,271.0	6,072.0	11,125.0	508.0	19,506.0	0.0	2006
Percent in household headed by single parent	29.6	17.9	56.8	26.0	13.9	32.1	32.7	23.8	2006
Percent in TANF (Grant) families	2.6	1.2	5.5	0.9	0.4	3.1	0.0	0.0	2006
Number enrolled in Medicaid	505,989	215,051.0	249,896.0	1,720.0	2,875.0	0.0	0.0	36,447.0	2006
Number enrolled in SCHIP	65,343	39,222.0	22,209.0	601.0	575.0	16.0	0.0	2,720.0	2006
Number living in foster home care	5,802	2,826.0	2,898.0	13.0	4.0	4.0	0.0	57.0	2006
Number enrolled in food stamp program	274,895	103,128.0	163,311.0	582.0	666.0	139.0	0.0	7,069.0	2006
Number enrolled in WIC	146,937	77,692.0	63,691.0	1,426.0	912.0	414.0	2,802.0	0.0	2006
Rate (per 100,000) of juvenile crime arrests	4,417.0	3,723.0	5,598.0	0.0	0.0	0.0	0.0	0.0	2006
Percentage of high school drop-outs (grade 9 through 12)	2.6	2.3	3.0	1.3	1.3	0.0	0.0	3.3	2006

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	1,198,820.0	47,194.0	0.0	2006
Percent in household headed by single parent	29.6	25.7	0.0	2006
Percent in TANF (Grant) families	2.6	0.9	0.0	2006
Number enrolled in Medicaid	473,389.0	26,222.0	6,378.0	2006
Number enrolled in SCHIP	63,419.0	1,797.0	127.0	2006
Number living in foster home care	5,648.0	140.0	14.0	2006
Number enrolled in food stamp program	271,173.0	3,722.0	0.0	2006
Number enrolled in WIC	131,536.0	15,401.0	0.0	2006
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	4,417.0	2006
Percentage of high school drop-outs (grade 9 through 12)	2.5	3.4	1.2	2006

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL**

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2006 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	868,854
Living in urban areas	675,268
Living in rural areas	542,715
Living in frontier areas	0
Total - all children 0 through 19	1,217,983

Note:

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

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL**

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2006 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	4,482,152.0
Percent Below: 50% of poverty	7.3
100% of poverty	16.6
200% of poverty	37.6

**FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: AL**

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: 2006 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,098,926.0
Percent Below: 50% of poverty	11.5
100% of poverty	23.0
200% of poverty	46.4

FORM NOTES FOR FORM 21

The data source for HSIs #7A-7B is the year 2006 Alabama residential live birth statistical file. The Title V Information System automatically calculates the number for "Women of all ages" and, therefore, excludes infants whose mother's age was not reported. There were a total of 15 infants whose mother's age was not reported. Six of these infants were White, 3 were Black, and 6 were of unknown race. Seven of the 15 infants were not Hispanic, 4 were Hispanic, and 4 were of unknown ethnicity.

Alabama's birth and death certificates do not include a multiracial category, so zero is entered in each cell under "More than one race reported."

FIELD LEVEL NOTES

- Section Number:** Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2009
Field Note:

The estimates for this item were provided by the Center for Business and Economic Research and are based on Census Bureau data.

- Section Number:** Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2009
Field Note:

The data for the percent in household headed by single parent do not change annually as this information is only available during censal years.

The estimates for this item were provided by the Center for Business and Economic Research and are based on Census Bureau data for 2000. The Title V Information System selection box for "Specific Reporting Year" does not provide "2000" as an option.

Numbers shown are for the 0-17 year group, since data are available only for this group.

- Section Number:** Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2009
Field Note:

Numbers for this item were derived from numbers provided by the Alabama Department of Human Resources (DHR).

As of December 31, 2006, a total of 31,865 children and youth (0-19 years of age) lived in households that received Family Assistance (TANF) in Alabama. The total number of families receiving TANF was 18,095.

The race-specific numbers of children and youth living in households receiving TANF were not provided by DHR, but the race-specific numbers of TANF households were provided. Therefore, the race-specific numbers of children and youth living in households receiving TANF were estimated by multiplying each race-specific number of households receiving TANF by a factor derived as follows: the total number of children and youth in TANF households (31,865) divided by the total number of households receiving TANF (18,095). The factor yielded by this method was 1.76098. For example, 5,353 White households received TANF. Multiplying 5,353 by the unrounded factor yielded 9,427, which is our estimate for the number of White children and youth living in TANF households. Using 9,427 White children and youth as the numerator and 813,532 White children and youth (from the "All children 0 through 19 row") as the denominator yields the estimate that 1.2% of White children and youth were in households receiving TANF.

The above method assumes that the ratio of the number of children and youth living in TANF households to the number of households receiving TANF is identical (1.76098) in all racial categories. We do not have the data to test the correctness of this assumption.

- Section Number:** Indicator 09A
Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2009
Field Note:

Numbers were derived from the Alabama Medicaid Agency's Form HCFA-2082 (Statistical Report on Medical Care: Eligibles, Recipients, Payments and Services; Section D (1) - Eligibles for Medical Care by Age, Race, Ethnicity and Sex) Eligibles report. Numbers reported here are the number of eligible individuals.

The 4 pertinent age categories reported by Medicaid were: less than 1 year, 1-5 years, 6-14 years, and 15-20 years. For the total group and each racial category shown, the number of eligible individuals in the 15-19 year-old age group was estimated by multiplying a factor (5/6) times the number in the 15-20 year age category. Numbers were summed across age groups to yield the total (505,989) or race-specific number of eligible individuals aged 19 years or younger. The multiplication factor yielded fractions of individuals, which were rounded to whole numbers.

The Medicaid report did not classify Hispanic individuals by race; accordingly, Hispanic individuals were assumed to be White when deriving numbers by race from this report.

The Medicaid report included a category for "Asian or Pacific Islander," and the number reported for this combined category is shown in the "Asian" category. Because the Medicaid report did not have a "Native Hawaiian or Other Pacific Islander" category, we do not know how many Medicaid-enrolled children and youth were in this racial group.

- Section Number:** Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2009
Field Note:

Numbers for this item were provided by the Alabama State Children's Health Insurance Program (SCHIP) and reflect enrollment in ALL Kids as of September 30, 2006.

The SCHIP report did not classify Hispanic individuals by race; accordingly, Hispanic individuals were assumed to be White when deriving numbers by race from this report.

SCHIP enrollment is limited to eligible persons aged 18 years or younger.

- Section Number:** Indicator 09A
Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2009
Field Note:

Numbers for this item were provided by the Alabama Department of Human Resources (DHR). Numbers provided by DHR and reported here COVER ONLY 64 OF ALABAMA'S 67 COUNTIES, because the remaining counties do not participate in DHR's data system. The numbers enrolled in the Food Stamp Program as of December

31, 2006 are reported here. All numbers pertain to food stamp recipients on this date in the 64 counties for which data were available.

The report provided by DHR shows the total number of food stamp recipients according to several age categories, including 0-11 years, 12-15 years, 16-17 years, 18-20 years, and 5 categories of older age groups. The number of 18-19 year-old recipients was estimated by multiplying 2/3 times the number reported for the 18-20 year-old group.

In the 64 counties, as of December 31, 2006, a total of 520,351 individuals (regardless of age) were receiving food stamps. Of these individuals, 274,895 were 0-19 years of age. Age of food stamp recipients was not reported according to race. To estimate the number of 0-19 year-old food stamp recipients according to race, we multiplied the proportion of all food stamp recipients who were 19 years of age or younger (274,895/520,351, or .5282876) times each race-specific number of food stamp recipients. This method assumes an identical age distribution across racial categories of food stamp recipients, and we do not have data to test the correctness of this assumption.

7. **Section Number:** Indicator 09A

Field Name: HSIRace_WICNo

Row Name: Number enrolled in WIC

Column Name:

Year: 2009

Field Note:

Numbers reported here are provided by the Alabama Department of Public Health's Computer Systems Center and represent an unduplicated count of WIC enrollees. These numbers represent WIC enrollment through 12/31/2006.

8. **Section Number:** Indicator 09A

Field Name: HSIRace_JuvenileCrimeRate

Row Name: Rate (per 100,000) of juvenile crime arrests

Column Name:

Year: 2009

Field Note:

Numerators were derived from the Alabama Criminal Justice Information Center's (CJIC's) Web site and represent arrests in Alabama in 2006. The aforesaid Web site reports "Part I" and "Part II" arrests for all ages combined and for multiple age groups. Part I crimes pertain to more serious criminal acts, and Part II crimes to less serious offenses. Three age groups (under 18 years, 18 years, and 19 years) were summed to calculate Part I and Part II arrests for persons aged 19 years or younger. The numbers of Part I and Part II arrests in this age group were then summed to calculate the total number of arrests of persons aged 19 years or younger (29,314 arrests). Presumably, virtually all arrests in this age group involved youth whose ages were from 10 through 19 years.

CJIC's Web site did not report arrests according to age and race concurrently. However, it said that: Of persons arrested for Part I offenses, 46% were White and 54% were Black; and of persons arrested for Part II offenses, 55% were White and 45% were Black. To estimate the numbers of arrests of White youth and of Black youth in the 0-19 year age group, the proportion corresponding to each of the aforesaid percentages was applied to the corresponding total number of Part I and Part II arrests of 0-19 year-old persons. For example, to estimate the number of arrests of White persons aged 0-19 years in Alabama in 2006: .46 was multiplied by the number of Part I arrests in this age group, .55 was multiplied by the number of Part II arrests in this age group, and the 2 resulting products were summed. A corresponding procedure using factors of .54 (for Part I arrests) and .45 (for Part II arrests) was followed to estimate the number of arrests of Black 0-19 year-old youth.

While numerators were estimated as described above, denominators were provided by the Center for Business and Economic Research, are based on Census Bureau data, and are for the 10-19 year age group. The denominators were provided for only 2 racial categories: White and "Nonwhite." Thus, the denominator for "Nonwhite" was used to calculate the juvenile crime arrest rate for Black youth. Accordingly, the juvenile crime arrest rate reported for Black youth may slightly underestimate the actual juvenile crime arrest rate for this population.

As previously stated, CJIC's Web site did not report arrests for juveniles according to race, which necessitated estimating race-specific numbers for White youth and for Black youth. These race-specific estimates assume that the racial distribution for arrests of youth was the same as that for arrests of all ages combined, and we do not have the data to test this assumption. Further, a few of the youths arrested may have been of a race other than White or Black. Because we have no data-based way of estimating the number of arrests of youths whose race was other than White or Black, zeroes have been entered into cells for these racial categories

9. **Section Number:** Indicator 09A

Field Name: HSIRace_DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2009

Field Note:

Numbers for this item were provided by the Alabama State Department of Education (SDE).

Because the racial composition of Hispanics was unknown, the Hispanic count was added to the "Other and Unknown" category.

SDE did not report a category for "Native Hawaiian or Other Pacific Islander."

The Enrollment data for 2006 were collected in November 2005 for the 2005-06 school year. Dropout data for 2006 were collected in October 2006 for the 2005-06 school year.

10. **Section Number:** Indicator 09B

Field Name: HSIethnicity_Children

Row Name: All children 0 through 19

Column Name:

Year: 2009

Field Note:

The estimates for this item were provided by the Center for Business and Economic Research and are based on Census Bureau data.

11. **Section Number:** Indicator 09B

Field Name: HSIethnicity_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name:

Year: 2009

Field Note:

The data for the percent in household headed by single parent do not change annually as this information is only available during censusal years.

The estimates for this item were provided by the Center for Business and Economic Research and are based on Census Bureau data for 2000. The Title V Information System selection box for "Specific Reporting Year" does not provide "2000" as an option.

Numbers shown are for the 0-17 year age group, since data are available only for this group.

12. **Section Number:** Indicator 09B

Field Name: HSIethnicity_TANFPercent

Row Name: Percent in TANF (Grant) families

Column Name:

Year: 2009

Field Note:

Numbers for this item were derived from numbers provided by the Alabama Department of Human Resources (DHR).

As of December 31, 2006, a total of 31,865 children lived in households that received Family Assistance (TANF) in Alabama. The total number of households receiving

Family Assistance was 18,095.

As stated in the corresponding field note for Health Status Indicator (HSI) #9A, the race-specific number of children and youth living in households receiving TANF was not provided by DHR. Similarly, the number of Hispanic children and youth living in households receiving TANF was not reported by DHR, but the number of Hispanic households (245) receiving TANF was provided. Using the rationale described in the corresponding field note for HSI #9A, by multiplying 1.76098 (using the unrounded decimal) times the 245 Hispanic households, we estimated that 431.4410 Hispanic children and youth were in households receiving food stamps. Using 431.4410 Hispanic children and youth as the numerator and 47,194 Hispanic individuals (from the "All children 0 through 19" row of HSI #9B) as the denominator yields the estimate that 0.9% of Hispanic children and youth were in households receiving TANF.

A corresponding procedure was used to estimate the percentage of non-Hispanic children and youth who were in households receiving TANF.

The above method assumes that the ratio of the number of children and youth living in TANF households to the number of households receiving TANF is identical (1.76098) in both the Hispanic and non-Hispanic categories. We do not have the data to test the correctness of this assumption.

13. **Section Number:** Indicator 09B

Field Name: HSIEthnicity_MedicaidNo

Row Name: Number enrolled in Medicaid

Column Name:

Year: 2009

Field Note:

Numbers were derived from the Alabama Medicaid Agency's Form HCFA-2082 (Statistical Report on Medical Care: Eligibles, Recipients, Payments and Services; Section D (1) - Eligibles for Medical Care by Age, Race, Ethnicity and Sex) Eligibles report. Numbers reported here are the number of eligible individuals.

The 4 pertinent age categories reported by Medicaid were: less than 1 year, 1-5 years, 6-14 years, and 15-20 years. For the total group and each racial and ethnic category shown, the number of eligible individuals in the 15-19 year-old age group was estimated by multiplying a factor (5/6) times the number in the 15-20 year age category. Numbers were summed across age groups to yield the total or race- or ethnic-specific number of eligible individuals aged 19 years or younger.

The total number of non-Hispanic children and youth enrolled in Medicaid was estimated by summing the following racial categories reported by Medicaid: White, not of Hispanic origin; Black, not of Hispanic origin; American Indian or Alaskan native; and Asian or Pacific Islander.

14. **Section Number:** Indicator 09B

Field Name: HSIEthnicity_SCHIPNo

Row Name: Number enrolled in SCHIP

Column Name:

Year: 2009

Field Note:

Numbers for this item were provided by the Alabama State Children's Health Insurance Program (SCHIP) and reflect enrollment in ALL Kids as of September 30, 2006. SCHIP enrollment is limited to eligible persons aged 18 years or younger.

The SCHIP report did not report numbers for race and ethnicity concurrently. Here, the number shown for the non-Latino group is the sum across the White, Black, Native American, Asian, Hawaiian/Pacific Islander, and "other" categories

15. **Section Number:** Indicator 09B

Field Name: HSIEthnicity_FoodStampNo

Row Name: Number enrolled in food stamp program

Column Name:

Year: 2009

Field Note:

The Alabama Department of Human Resources (DHR) does not report food stamp enrollment according to ethnicity (Latino versus non-Latino). We have provided a very ROUGH estimate of food stamp enrollment according to ethnicity, by assuming that the ethnic distribution of children and youth (19 years of age and younger) enrolled in food stamps (which DHR does not report) is the same as the ethnic distribution of those enrolled in TANF (which DHR does report for families). We do not have the data to test the correctness of this assumption.

Specifically, the percentages shown for "Percent in TANF (Grant) families" are partly based on the estimated numbers of children and youth enrolled in TANF, which comprised the numerators for corresponding percentages in TANF. Based on these numerators, a total of 31,865 children and youth were enrolled in TANF. Of these 31,865 individuals, 431.4410 were Hispanic. (The latter number is a fraction because a factor, described in the field note for "Percent in TANF [Grant] families," was used to derive it.) Thus, an estimated 1.3539% (431.4410/31,865) of children and youth enrolled in TANF were of Hispanic ethnicity. Under the previously stated assumption, we estimate that 3,722 (.013539 times the 274,895 children and youth enrolled in the food stamp program) Hispanic children and youth were enrolled in the food stamp program.

16. **Section Number:** Indicator 09B

Field Name: HSIEthnicity_WICNo

Row Name: Number enrolled in WIC

Column Name:

Year: 2009

Field Note:

Numbers reported here are provided by the Alabama Department of Public Health's Computer Systems Center and represent an unduplicated count of WIC enrollees. These numbers represent WIC enrollment through 12/31/2006.

17. **Section Number:** Indicator 09B

Field Name: HSIEthnicity_JuvenileCrimeRate

Row Name: Rate (per 100,000) of juvenile crime arrests

Column Name:

Year: 2009

Field Note:

As detailed in the Health Status Indicator (HSI) 9A field note for this indicator, numerators for the juvenile crime arrest rate were derived from the Alabama Criminal Justice Information Center's (CJIC's) Web site. The aforesaid Web site did not report crimes according to ethnicity, so we cannot report the juvenile crime arrest rate according to ethnicity. For this reason, the estimated juvenile crime rate for the total population of 0-19 year-old Alabama residents is placed in the "Ethnicity Not Reported" column. Because the Title V Information System does not allow blank cells in HSI 9A or 9B, a zero is placed in each of the 2 cells intended for reporting the juvenile crime arrest rate according to ethnicity. However, the actual juvenile crime arrest rates for the 2 groups--respectively Hispanic and non-Hispanic children and youth living in Alabama--are not known.

18. **Section Number:** Indicator 09B

Field Name: HSIEthnicity_DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2009

Field Note:

Numbers for this item were provided by the Alabama State Department of Education (SDE).

The Enrollment data for 2006 were collected in November 2005 for the 2005-06 school year. Dropout data for 2006 were collected in October 2006 for the 2005-06 school year.

The source document provided by SDE apparently reported "Ethnicity" as a single variable, with each individual classified as being of a particular race, OR as being

Hispanic, OR as being "Not Reported." For this reason, the percentage for persons whose race was not reported is shown in the "Ethnicity Not Reported" column. This percentage is based on small numbers, however (3/250, or 1.2%).

- 19. Section Number:** Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2009
Field Note:
Reference for HSI #10: U.S. Census Bureau, Census 2000, and Center for Business and Economic Research (CBER), The University of Alabama. However, per CBER, as of May 2008, data on urban and rural population was compiled only for the decennial census, so 2000 rural/urban breakdowns for only the total population were available. CBER obtained the number of Alabama residents aged 0-19 years from the 2006 Census Bureau Estimates for the State and each county. Then, to estimate the number living in metropolitan areas, CBER summed the estimated 0-19 year-old population in 2006 for Alabama's 28 metropolitan area counties. To estimate urban and rural numbers, CBER assumed that the urban area share of the 0-19 year-old population remained as it had been in 2000 (about 55.44%). The rural share was then estimated as the difference between the total and the urban share. The definitions used were irrespective of metropolitan area definitions and pertained to density and land use.
- 20. Section Number:** Indicator 10
Field Name: Urban
Row Name: Living in urban areas
Column Name:
Year: 2009
Field Note:
For source and methods, see note to "Living in metropolitan areas."
- 21. Section Number:** Indicator 10
Field Name: Rural
Row Name: Living in rural areas
Column Name:
Year: 2009
Field Note:
For source and methods, see note to "Living in metropolitan areas."
- 22. Section Number:** Indicator 11
Field Name: S11_total
Row Name: Total Population
Column Name:
Year: 2009
Field Note:
The source is: U.S. Census Bureau, 2006 American Community Survey, and Center for Business and Economic Research, the University of Alabama. The number for "Total Population" pertains to the population for whom poverty status is determined.
- 23. Section Number:** Indicator 11
Field Name: S11_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2009
Field Note:
For the source, see note to "Total Population."
- 24. Section Number:** Indicator 11
Field Name: S11_100percent
Row Name: 100% of poverty
Column Name:
Year: 2009
Field Note:
For the source, see note to "Total Population."
- 25. Section Number:** Indicator 11
Field Name: S11_200percent
Row Name: 200% of poverty
Column Name:
Year: 2009
Field Note:
For the source, see note to "Total Population."
- 26. Section Number:** Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2009
Field Note:
The source is: U.S. Census Bureau, 2006 American Community Survey, and Center for Business and Economic Research, the University of Alabama. The number for "Total Population" pertains to the population for whom poverty status is determined. Numbers shown pertain to persons under 18 years of age, because numbers for 0 through 19 years of age are not available.
- 27. Section Number:** Indicator 12
Field Name: S12_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2009
Field Note:
For the source, see note to "Children 0 through 19 years old."
- 28. Section Number:** Indicator 12
Field Name: S12_100percent
Row Name: 100% of poverty
Column Name:
Year: 2009
Field Note:
For the source, see note to "Children 0 through 19 years old."
- 29. Section Number:** Indicator 12
Field Name: S12_200percent
Row Name: 200% of poverty
Column Name:
Year: 2009

Field Note:

For the source, see note to "Children 0 through 19 years old."

30. Section Number: Indicator 09A

Field Name: HSIRace_FosterCare

Row Name: Number living in foster home care

Column Name:

Year: 2009

Field Note:

Numbers for this item were provided by the Alabama Department of Human Resources through their "Characteristics of Children in Foster Care" report for October 2006.

The above report showed numbers of individuals in foster care for each year of age through 21 years, plus a group (11 individuals) who were older than 21 years. This entire age range (0 through 21 years plus those older than 21 years) totaled 5,907 individuals. Of these 5,907 individuals, 5,802 were 19 years of age or younger.

Age of enrollees was not reported according to race. To estimate the number of 0-19 year-old individuals in foster care according to race, we multiplied the proportion of all foster care recipients who were 19 years of age or younger (5,802/5,907) times the race-specific numbers of individuals receiving foster care. The race-specific numbers did not add to total in care, so the difference between the total number of 0-19 year-old recipients and the sum across racial categories of 0-19 year-old recipients (43 individuals) was added to the unknown racial category.

31. Section Number: Indicator 09B

Field Name: HSEthnicity_FosterCare

Row Name: Number living in foster home care

Column Name:

Year: 2009

Field Note:

Numbers for this item were provided by the Alabama Department of Human Resources (DHR) through their "Characteristics of Children in Foster Care" report for October 2006.

Per the method described in this item's field note to Health Status Indicator #9A, 5,802 Alabama residents aged 19 years of age or younger were in foster care.

The report provided by DHR reported ethnicity for all children and youth enrolled in foster care--105 of whom were 20 years of age or older. Age of enrollees was not reported according to race or ethnicity. To estimate the number of 0-19 year-old Hispanic individuals in foster care, we multiplied the proportion of all foster care recipients who were 19 years of age or younger (5,802/5,907, or .9756) times the number of all Hispanic individuals of any age who were receiving foster care (143). Per this method, we estimate that 140 Hispanic individuals aged 19 years or younger received foster care.

Per the DHR report, neither race nor ethnicity was known for 14 individuals receiving foster care, and this number did not change with application of the aforesaid factor (.9756). The number of non-Hispanic persons aged 19 years or younger who received foster care was estimated by subtracting the Hispanic and "Ethnicity Not Reported" categories from the total number in this age group who received foster care (5,802 minus 140 minus 14).