

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

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- [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: PA**

**1. FEDERAL ALLOCATION**

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

\$ 24,324,168

A.Preventive and primary care for children:

\$ 13,335,000 ( 54.82% )

B.Children with special health care needs:

\$ 8,945,000 ( 36.77% )

(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:

\$ 2,044,168 ( 8.4% )

(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)

\$ 63,603,000

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

\$ 0

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

\$ 0

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

\$ 0

**7. TOTAL STATE MATCH** (Lines 3 through 6)

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

\$ 20,065,575

\$ 63,603,000

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

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

\$ 87,927,168

**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: \$ 94,644

c. CISS: \$ 0

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 170,496,864

h. AIDS: \$ 0

i. CDC: \$ 556,441

j. Education: \$ 0

k. Other: \$ 0

EPA \$ 278,348

HUD \$ 3,000,000

MA LEAD/NBS \$ 882,000

NBHS \$ 341,968

PRAMS \$ 182,422

TBI \$ 100,000

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

\$ 175,932,687

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 263,859,855

**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: PA**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 26,581,207	\$ 25,621,198	\$ 25,621,198	\$ 25,502,552	\$ 25,502,552	\$ 24,660,179
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 65,165,453	\$ 60,226,529	\$ 65,648,000	\$ 58,613,647	\$ 63,441,000	\$ 57,872,356
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 21,000	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 91,767,660	\$ 85,847,727	\$ 91,269,198	\$ 84,116,199	\$ 88,943,552	\$ 82,532,535
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 152,937,720	\$ 152,937,720	\$ 142,072,396	\$ 142,072,396	\$ 143,226,507	\$ 137,800,302
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 244,705,380	\$ 238,785,447	\$ 233,341,594	\$ 226,188,595	\$ 232,170,059	\$ 220,332,837
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

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

**STATE: PA**

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 24,660,179	\$ 24,663,638	\$ 24,660,179	\$ 0	\$ 24,324,168	\$ 0
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 67,403,000	\$ 58,642,905	\$ 66,606,000	\$ 0	\$ 63,603,000	\$ 0
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 92,063,179	\$ 83,306,543	\$ 91,266,179	\$ 0	\$ 87,927,168	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 149,301,615	\$ 146,898,531	\$ 149,243,436	\$ 0	\$ 175,932,687	\$ 0
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 241,364,794	\$ 230,205,074	\$ 240,509,615	\$ 0	\$ 263,859,855	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM NOTES FOR FORM 3**

None

**FIELD LEVEL NOTES**

- 1. Section Number:** Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Grant award was more than what we budgeted for.
- 2. Section Number:** Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Form 3 - The reason the 2006 expended amount does not equal the budgeted amount is because what was expended is in line with the actual grant award that we received. At the time the FFY06 grant application was submitted, we assumed it would be level funded with the FFY05 grant, therefore that is the amount we budgeted. However, the grant award we received was \$842K less, therefore the expended amounts reflect the award amount and are not a reflection of underspending.
- 3. Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Funds expended less than anticipated
- 4. Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Form 3 - The reason the 2006 expended amount does not equal the budgeted amount is because what was expended is in line with the actual grant award that we received. At the time the FFY06 grant application was submitted, we assumed it would be level funded with the FFY05 grant, therefore that is the amount we budgeted. However, the grant award we received was \$842K less, therefore the expended amounts reflect the award amount and are not a reflection of underspending.
- 5. Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Funds expended less than anticipated
- 6. Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Form 3 - The reason the 2006 expended amount does not equal the budgeted amount is because what was expended is in line with the actual grant award that we received. At the time the FFY06 grant application was submitted, we assumed it would be level funded with the FFY05 grant, therefore that is the amount we budgeted. However, the grant award we received was \$842K less, therefore the expended amounts reflect the award amount and are not a reflection of underspending.

**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

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

**STATE: PA**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 5,429,371	\$ 2,772,757	\$ 5,431,829	\$ 3,959,297	\$ 3,796,652	\$ 2,788,098
b. Infants < 1 year old	\$ 5,842,014	\$ 6,104,567	\$ 6,911,200	\$ 6,450,714	\$ 6,023,316	\$ 5,146,720
c. Children 1 to 22 years old	\$ 50,068,849	\$ 48,394,557	\$ 48,890,152	\$ 47,917,056	\$ 48,693,103	\$ 46,488,104
d. Children with Special Healthcare Needs	\$ 11,697,735	\$ 11,139,100	\$ 11,081,896	\$ 10,130,920	\$ 10,805,023	\$ 11,742,681
e. Others	\$ 16,799,691	\$ 15,431,700	\$ 17,024,121	\$ 13,625,922	\$ 17,695,458	\$ 13,994,229
f. Administration	\$ 1,930,000	\$ 2,005,046	\$ 1,930,000	\$ 2,032,290	\$ 1,930,000	\$ 2,372,703
g. SUBTOTAL	\$ 91,767,660	\$ 85,847,727	\$ 91,269,198	\$ 84,116,199	\$ 88,943,552	\$ 82,532,535

**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	\$ 0	\$ 0	\$ 0
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 1,729,635	\$ 0	\$ 0
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 146,000,000	\$ 140,000,000	\$ 141,000,000
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 750,000	\$ 800,000	\$ 783,434
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
EPA	\$ 0	\$ 0	\$ 274,396
MA Lead/NBS	\$ 0	\$ 453,000	\$ 453,000
NBHS	\$ 0	\$ 245,000	\$ 245,000
TBI, SECCS	\$ 0	\$ 300,000	\$ 470,677
EPA, HUD	\$ 0	\$ 274,396	\$ 0
EPA, HUD, NBHS	\$ 3,805,085	\$ 0	\$ 0
MA LEAD/NBS, TBI	\$ 653,000	\$ 0	\$ 0
<b>III. SUBTOTAL</b>	\$ 152,937,720	\$ 142,072,396	\$ 143,226,507

**FORM 4**

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

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

**STATE: PA**

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 3,385,475	\$ 2,703,608	\$ 2,323,273	\$ 0	\$ 2,676,486	\$ 0
b. Infants < 1 year old	\$ 5,593,926	\$ 5,535,796	\$ 5,592,354	\$ 0	\$ 7,810,747	\$ 0
c. Children 1 to 22 years old	\$ 47,928,150	\$ 47,427,030	\$ 48,998,186	\$ 0	\$ 48,945,267	\$ 0
d. Children with Special Healthcare Needs	\$ 12,085,938	\$ 12,922,025	\$ 11,292,820	\$ 0	\$ 9,466,260	\$ 0
e. Others	\$ 21,139,690	\$ 12,558,893	\$ 21,129,546	\$ 0	\$ 16,984,240	\$ 0
f. Administration	\$ 1,930,000	\$ 2,159,191	\$ 1,930,000	\$ 0	\$ 2,044,168	\$ 0
g. SUBTOTAL	\$ 92,063,179	\$ 83,306,543	\$ 91,266,179	\$ 0	\$ 87,927,168	\$ 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	\$ 0	\$ 94,644	\$ 94,644
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 0	\$ 1,693,422	\$ 0
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 143,741,206	\$ 142,277,779	\$ 170,496,864
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 715,339	\$ 715,339	\$ 556,441
j. Education	\$ 0	\$ 0	\$ 0
k. Other			
EPA	\$ 747,070	\$ 278,348	\$ 278,348
HUD	\$ 3,000,000	\$ 3,000,000	\$ 3,000,000
MA LEAD/NBS	\$ 0	\$ 0	\$ 882,000
NBHS	\$ 245,000	\$ 337,500	\$ 341,968
PRAMS	\$ 200,000	\$ 191,404	\$ 182,422
TBI	\$ 0	\$ 100,000	\$ 100,000
ECCS	\$ 0	\$ 102,000	\$ 0
MA Lead/NBS	\$ 453,000	\$ 453,000	\$ 0
TBI, SECCS	\$ 200,000	\$ 0	\$ 0
<b>III. SUBTOTAL</b>	\$ 149,301,615	\$ 149,243,436	\$ 175,932,687

## FORM NOTES FOR FORM 4

FY 2007 Budgeted Amount is \$875,6636 greater than FY 2007 Expended Amount due to an unanticipated decrease in Title V MCH funding for that year.

### 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:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
- 2. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Less was spent than what we budgeted for.
- 3. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
- 4. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Less was spent than what we budgeted for.
- 5. 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:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
- 6. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
- 7. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
- 8. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Less was spent than what we budgeted for.
- 9. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
- 10. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
More money was spent in Administration than what we budgeted for.

**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: PA**

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 22,375,276	\$ 20,465,335	\$ 22,657,277	\$ 18,499,175	\$ 23,224,961	\$ 18,781,121
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 7,333,421	\$ 5,765,558	\$ 6,704,411	\$ 5,766,978	\$ 7,745,642	\$ 5,212,927
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 46,613,417	\$ 46,763,605	\$ 47,445,373	\$ 45,965,786	\$ 45,731,923	\$ 44,530,065
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 15,445,546	\$ 12,853,229	\$ 14,462,137	\$ 13,884,260	\$ 12,241,026	\$ 14,008,422
<b>V. Federal-State Title V Block Grant Partnership Total</b> (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.)	\$ 91,767,660	\$ 85,847,727	\$ 91,269,198	\$ 84,116,199	\$ 88,943,552	\$ 82,532,535

**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: PA**

TYPE OF SERVICE	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 27,191,725	\$ 17,962,492	\$ 28,062,798	\$ 0	\$ 23,513,175	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 5,772,321	\$ 3,988,886	\$ 2,962,865	\$ 0	\$ 2,429,017	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 45,725,684	\$ 46,268,008	\$ 46,591,489	\$ 0	\$ 49,043,234	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 13,373,449	\$ 15,087,157	\$ 13,649,027	\$ 0	\$ 12,941,742	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (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.)	\$ 92,063,179	\$ 83,306,543	\$ 91,266,179	\$ 0	\$ 87,927,168	\$ 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:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
2. **Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Less was spent than we budgeted for.
3. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - Overall, the amount being budgeted is more than what was expended in prior years, however the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
4. **Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Less was spent than what we budgeted for.
5. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
6. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Form 4 & 5 - the variations in the components, both increases and decreases, is a result of our revised spending plan and how we have realigned our funding based on priorities, etc.
7. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Less was spent than we budgeted for.

**FORM 6**

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

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

**STATE: PA**

Total Births by Occurrence: 149,953

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	149,367	99.6	26	20	20	100
Congenital Hypothyroidism	149,367	99.6	83	62	62	100
Galactosemia	149,367	99.6	31	17	17	100
Sickle Cell Disease	149,367	99.6	104	92	92	100

**Other Screening (Specify)**

Congenital Adrenal Hyperplasia (CAH)	149,367	99.6	114	3	3	100
Maple Syrup Urine Disease (MSUD)	149,367	99.6	10	6	6	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**

Total births by occurrence for 2007 is a preliminary figure from the PA Department of Health, Bureau of Health Statistics and Research.

During Fiscal Year 2007, The Pennsylvania Newborn Screening Program (PNSP) continued to screen all newborns born in Pennsylvania, except those opting out for religious reasons, for six inborn errors of chemistry as listed on Form 6.

Currently 99.0 percent of Pennsylvania newborns receive screening for over thirty additional conditions through the supplemental screening program, offered to parents by birthing facilities. Act 47 of 2004 passed in December and amends the Newborn Child Testing Act, Act 86 of 1992, allowing health care facilities to choose alternative certified laboratories to perform the newborn screening tests. Pennsylvania health care submitters are sending the newborn screening specimens to two laboratories. The PNSP provided screening on 149,367 filter papers. During 2007, 200 newborns were diagnosed with one of the six state-mandated conditions. The following conditions were diagnosed: 62 congenital hypothyroidism, 3 congenital adrenal hyperplasia, 92 hemoglobinopathies, 20 phenylketonuria, 6 maple syrup urine disease, and 17 galactosemia.

**FIELD LEVEL NOTES****1. Section Number:** Main

**Field Name:** BirthOccurrence

**Row Name:** Total Births By Occurrence

**Column Name:** Total Births By Occurrence

**Year:** 2009

**Field Note:**

Total births by occurrence for 2007 is a preliminary figure from the PA Department of Health, Bureau of Health Statistics and Research.

**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: PA**

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	12,016	0.2	13.6	14.4	21.8	50.0
Infants < 1 year old	150,801	0.0	0.3	0.0	0.0	99.6
Children 1 to 22 years old	175,929	0.1	1.0	1.0	2.5	95.5
Children with Special Healthcare Needs	24,962	3.1	21.1	31.5	11.9	32.4
Others	73,930	6.9	7.4	29.1	35.9	20.7
<b>TOTAL</b>	<b>437,638</b>					

**FORM NOTES FOR FORM 7**

Numbers reported on this form are estimates. Our "total served" figure is not unduplicated because we do not or cannot require identifying information to be presented prior to the provision of a large number of the services upon which we report.

The estimates of insurance coverage are extrapolated from information available regarding the limited number of clients to whom we or our contractors provide direct healthcare services and from whom we require or request such information to be collected.

Data collected from the following programs below:

County-Municipal Health Departments: Numbers are reported directly from the Departments to the Title V program regarding services provided with Title V monies.

Community Health District Offices: Numbers are reported by DOH Community Health Nurse Consultants directly to the Title V program.

Safe Kids Program  
Family Planning Program  
Lead Program

Tourettes  
Medical Home  
HHSC  
Systems of Care  
Family Court  
Breastfeeding  
Epilepsy  
Barrier Elimination and Building Inclusive Communities

Categorical Direct Services Programs: The data was drawn from our CORE database, which serves as an invoicing system for each program providing direct services to patients.

Numbers may fluctuate from year-to-year depending on the various outreach programs conducted.

**FIELD LEVEL NOTES**

None

**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: PA**

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
<b>DELIVERIES</b>								
Total Deliveries in State	150,065	110,470	21,883	213	5,797			11,702
Title V Served	1,334	827	321	0	21	0	11	154
Eligible for Title XIX	57,250	31,987	15,312	125	1,261	32		8,533
<b>INFANTS</b>								
Total Infants in State	144,079							144,079
Title V Served	578	258	248	0	5	0	18	49
Eligible for Title XIX	19,650	13,800	1,978	14	327	9		3,522

**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
<b>DELIVERIES</b>								
Total Deliveries in State	134,839	13,294	1,932	3,025	184	6,620		3,465
Title V Served	801	454	79	68	0	358	4	24
Eligible for Title XIX	48,812	8,438	0					
<b>INFANTS</b>								
Total Infants in State	131,789	12,290	0					12,290
Title V Served	553	25	0	7	0	8	0	10
Eligible for Title XIX	16,519	3,131	0					

## FORM NOTES FOR FORM 8

Form 8 requires both information from the PA Department of Health, Bureau of Health Statistics and Research, which is generally only available after a one-year delay, and other program information, which is generally available fairly close to the end of the year in question. In an effort to make our reporting as current as possible, and for the convenience of the disparate program personnel who supply us with data, this year Form 8 reflects data from programs for the 2007 reporting period, final birth data for 2006 and preliminary fetal death data for 2006 from the Department of Health, Bureau of Health Statistics and Research.

'Total Deliveries in State' include live births for 2006 and preliminary fetal deaths for 2006.

Total Infants in state is 2006 population data. Racial/ethnic breakdowns are available only in a census year. 2007 population estimates are not yet available.

Eligible for Title XIX is the Pennsylvania Medical Assistance deliveries and births by race for service dates in FFY 2006/2007. Data are from the Fee-for-Service Delivery System and the HealthChoices Mandatory Managed Care Delivery System (data not available for persons in the Voluntary Managed Care Delivery System). Fee-for-Service Delivery System delivery claims were identified as claims with DRG codes between 0385 and 0391. Fee-for-Service Delivery System newborn claims were identified as claims with DRG codes between 0370 and 0375. Fee-for-Service Delivery System newborn claims were identified as claims with DRG codes between 0385 and 0391.

Source: DPW Enterprise Data Warehouse March 20, 2008

Title V Served is 2007 program data. Title V served for deliveries is number of pregnant and postpartum women served by PA's local Title V agencies. Title V served for infants is also number of infants served by PA's local Title V agencies and by our county health centers

## 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:**  
These data are live births and reported fetal deaths.
2. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_White  
**Row Name:** Total Deliveries in State  
**Column Name:** White  
**Year:** 2009  
**Field Note:**  
These data are live births and reported fetal deaths.
3. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Black  
**Row Name:** Total Deliveries in State  
**Column Name:** Black or African American  
**Year:** 2009  
**Field Note:**  
These data are live births and reported fetal deaths.
4. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Indian  
**Row Name:** Total Deliveries in State  
**Column Name:** American Indian or Native American  
**Year:** 2009  
**Field Note:**  
These data are live births and reported fetal deaths.
5. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Asian  
**Row Name:** Total Deliveries in State  
**Column Name:** Asian  
**Year:** 2009  
**Field Note:**  
These data are live births and reported fetal deaths.  
Data includes Native Hawaiian or other Pacific Islander.
6. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_Hawaiian  
**Row Name:** Total Deliveries in State  
**Column Name:** Native Hawaiian or Other Pacific Islander  
**Year:** 2009  
**Field Note:**  
Included in Asian.
7. **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:**  
Data are not available.
8. **Section Number:** I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_RaceOther  
**Row Name:** Total Deliveries in State  
**Column Name:** Other and Unknown  
**Year:** 2009  
**Field Note:**  
These data are live births and reported fetal deaths.
9. **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:**  
Data provided by Division of Child and Adult Health
10. **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:**  
N/A

11. **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:**

Total Infants in state is 2006 population data. Racial/ethnic breakdowns are available only in a census year. 2007 population estimates are not yet available.

12. **Section Number:** I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_White  
**Row Name:** Total Infants in State  
**Column Name:** White  
**Year:** 2009  
**Field Note:**

N/A

13. **Section Number:** I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_Black  
**Row Name:** Total Infants in State  
**Column Name:** Black or African American  
**Year:** 2009  
**Field Note:**

N/A

14. **Section Number:** I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_Indian  
**Row Name:** Total Infants in State  
**Column Name:** American Indian or Native American  
**Year:** 2009  
**Field Note:**

N/A

15. **Section Number:** I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_Asian  
**Row Name:** Total Infants in State  
**Column Name:** Asian  
**Year:** 2009  
**Field Note:**

N/A

16. **Section Number:** I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_Hawaiian  
**Row Name:** Total Infants in State  
**Column Name:** Native Hawaiian or Other Pacific Islander  
**Year:** 2009  
**Field Note:**

N/A

17. **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:**

N/A

18. **Section Number:** I. Unduplicated Count By Race

**Field Name:** InfantsTotal\_RaceOther  
**Row Name:** Total Infants in State  
**Column Name:** Other and Unknown  
**Year:** 2009  
**Field Note:**

Total Infants in state is 2006 population data. Racial/ethnic breakdowns are available only in a census year. 2007 population estimates are not yet available.

19. **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:**

Data provided by Division of Child and Adult Health

20. **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:**

N/A

21. **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:**

These data are live births and reported fetal deaths.

22. **Section Number:** II. Unduplicated Count by Ethnicity

- Field Name:** DeliveriesTotal\_TotalHispanic  
**Row Name:** Total Deliveries in State  
**Column Name:** Total Hispanic or Latino  
**Year:** 2009  
**Field Note:**  
 These data are live births and reported fetal deaths.
23. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_NotReported  
**Row Name:** Total Deliveries in State  
**Column Name:** Ethnicity Not Reported  
**Year:** 2009  
**Field Note:**  
 These data are live births and reported fetal deaths.
24. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_Mexican  
**Row Name:** Total Deliveries in State  
**Column Name:** Mexican  
**Year:** 2009  
**Field Note:**  
 These data are live births and reported fetal deaths.
25. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_Cuban  
**Row Name:** Total Deliveries in State  
**Column Name:** Cuban  
**Year:** 2009  
**Field Note:**  
 These data are live births and reported fetal deaths.
26. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_PuertoRican  
**Row Name:** Total Deliveries in State  
**Column Name:** Puerto Rican  
**Year:** 2009  
**Field Note:**  
 These data are live births and reported fetal deaths.
27. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_CentralAmerican  
**Row Name:** Total Deliveries in State  
**Column Name:** Central and South American  
**Year:** 2009  
**Field Note:**  
 Data are not available.
28. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_EthnicityOther  
**Row Name:** Total Deliveries in State  
**Column Name:** Other and Unknown  
**Year:** 2009  
**Field Note:**  
 These data are live births and reported fetal deaths.
29. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleXIX\_TotalHispanic  
**Row Name:** Eligible for Title XIX  
**Column Name:** Total Hispanic or Latino  
**Year:** 2009  
**Field Note:**  
 columns B1-B5 data are n/a
30. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleXIX\_Mexican  
**Row Name:** Eligible for Title XIX  
**Column Name:** Mexican  
**Year:** 2009  
**Field Note:**  
 N/A
31. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleXIX\_Cuban  
**Row Name:** Eligible for Title XIX  
**Column Name:** Cuban  
**Year:** 2009  
**Field Note:**  
 N/A
32. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleXIX\_PuertoRican  
**Row Name:** Eligible for Title XIX  
**Column Name:** Puerto Rican  
**Year:** 2009  
**Field Note:**  
 N/A
33. **Section Number:** II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTitleXIX\_CentralAmerican  
**Row Name:** Eligible for Title XIX  
**Column Name:** Central and South American  
**Year:** 2009  
**Field Note:**  
 N/A
34. **Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleXIX\_EthnicityOther

**Row Name:** Eligible for Title XIX

**Column Name:** Other and Unknown

**Year:** 2009

**Field Note:**

N/A

**35. 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:**

Total Infants in state is 2006 population data. Racial/ethnic breakdowns are available only in a census year. 2007 population estimates are not yet available.

**36. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_TotalHispanic

**Row Name:** Total Infants in State

**Column Name:** Total Hispanic or Latino

**Year:** 2009

**Field Note:**

Total Infants in state is 2006 population data. Racial/ethnic breakdowns are available only in a census year. 2007 population estimates are not yet available.

**37. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_Mexican

**Row Name:** Total Infants in State

**Column Name:** Mexican

**Year:** 2009

**Field Note:**

N/A

**38. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_Cuban

**Row Name:** Total Infants in State

**Column Name:** Cuban

**Year:** 2009

**Field Note:**

N/A

**39. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_PuertoRican

**Row Name:** Total Infants in State

**Column Name:** Puerto Rican

**Year:** 2009

**Field Note:**

N/A

**40. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_EthnicityOther

**Row Name:** Total Infants in State

**Column Name:** Other and Unknown

**Year:** 2009

**Field Note:**

Total Infants in state is 2006 population data. Racial/ethnic breakdowns are available only in a census year. 2007 population estimates are not yet available.

**41. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_CentralAmerican

**Row Name:** Title V Served

**Column Name:** Central and South American

**Year:** 2009

**Field Note:**

data not available

**42. 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:**

columns B1-B5 data are n/a

**43. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_Mexican

**Row Name:** Eligible for Title XIX

**Column Name:** Mexican

**Year:** 2009

**Field Note:**

N/A

**44. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_Cuban

**Row Name:** Eligible for Title XIX

**Column Name:** Cuban

**Year:** 2009

**Field Note:**

N/A

**45. 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:**

N/A

**46. 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:**  
N/A

**47. 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:**  
N/A

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

	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>	<b>FY 2005</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 986-2229/5437</u>	<u>(800) 986-2229/5437/455</u>	<u>(800) 986-2229/5437</u>	<u>(800) 986-2229/5437</u>	<u>(800) 986-2229 / 5437</u>
2. State MCH Toll-Free "Hotline" Name	Healthy Baby (HB) Healthy Kids (HK)	Healthy Baby(HB) Healthy Kids(HK) MCH Toll Free Hotline(MCH)	Healthy Baby Healthy Kids	Healthy Baby Healthy Kids	Healthy Baby Health Kids
3. Name of Contact Person for State MCH "Hotline"	<u>Rodney Shomper</u>	<u>Mary King-Maxey/Peggy</u>	<u>Mary King-Maxey</u>	<u>Mary King-Maxey</u>	<u>Mary King-Maxey</u>
4. Contact Person's Telephone Number	<u>(717) 772-2763</u>	<u>(717) 772-2763</u>	<u>(717) 772-2763</u>	<u>(717) 772-2763</u>	<u>(717) 772-2763</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>116,847</u>	<u>98,149</u>	<u>78,437</u>

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

	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>	<b>FY 2005</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 986-4550</u>	<u>(800) 986-4550</u>	<u>(800) 986-4550</u>	<u>(800/877) 986-4550</u>	<u>(800/877)986-4550</u>
2. State MCH Toll-Free "Hotline" Name	Special Kids Network/Recreation & Leisure Helpline	Special Kids Network/PA Recreation & Leisure Line	Special Kids Network	Special Kids Network / PA Recreation & Leisure Line	Special Kids Network / PA Recreation & Leisure Line
3. Name of Contact Person for State MCH "Hotline"	<u>Peggy Forte</u>	<u>Peggy Forte</u>	<u>Jane Mitchell</u>	<u>James Marchaman</u>	<u>James Marchaman</u>
4. Contact Person's Telephone Number	<u>(717) 772-2763</u>	<u>717) 772-2763</u>	<u>(717) 772-2763</u>	<u>(717) 772-2763</u>	<u>(717) 772-2763</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>6,025</u>	<u>7,137</u>	<u>7,820</u>

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

None

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

1. State MCH Administration:  
*(max 2500 characters)*

The Pennsylvania Department of Health's, Bureau of Family Health is the State Title V Agency overseeing the MCH Block Grant as well as other initiatives focused on maternal, child and family health. The mission of the BFH is to improve the health of pregnant women, infants, children and CSHCN.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>24,324,168</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>0</u>
4. State Funds (Line 3, Form 2)	\$ <u>63,603,000</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>0</u>
7. Program Income (Line 6, Form 2)	\$ <u>0</u>
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ <u>87,927,168</u></b>

9. Most significant providers receiving MCH funds:

Children's Hospital of Philadelphia  
Children's Hospital of Pittsburgh  
Philadelphia Department of Health  
Allegheny County Department of Health

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

a. Pregnant Women	<u>12,016</u>
b. Infants < 1 year old	<u>150,801</u>
c. Children 1 to 22 years old	<u>175,929</u>
d. CSHCN	<u>24,962</u>
e. Others	<u>73,930</u>

11. Statewide Initiatives and Partnerships:

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

Examples of direct and enabling services provided by the Bureau of Family Health include: Comprehensive Specialty Care Clinic Services for CSHCN, Children's Rehabilitative Services, Family Planning Services, Family Consultant Services, Parent to Parent Services, the Adolescent Health Program, and the Epilepsy and Tourette Syndrome Support Services Program.

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

Examples of population-based services provided by the Bureau of Family Health include: Childhood Lead Poisoning Prevention Program, Sudden Infant Death Syndrome Outreach, Folic Acid Education Program, WIC, and the Newborn Hearing and Metabolic Screening Programs.

c. Infrastructure Building Services:  
*(max 2500 characters)*

Examples of infrastructure building services provided by the Bureau of Family Health include: Special Kids Network, Love'em with a Check-up, PA Recreation and Leisure Line, Early Childhood Education Linkage System, Child Death Review, client eligibility and benefits services, and provider registry services

12. The primary Title V Program contact person:

Name Melita J. Jordan, CNM, MSN, APRN C  
Title Director, Bureau of Family Health  
Address PA Department of Health, 7th & Forster Streets  
City Harrisburg  
State Pa  
Zip 17120  
Phone 717-787-7192  
Fax 717-772-0323  
Email mejordan@state.pa.us  
Web www.health.state.pa.us

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

Name Michelle Connors  
Title Director, Div of Community Systems Development & Outreach  
Address PA Department of Health, 7th & Forster Streets  
City Harrisburg  
State PA  
Zip 17120  
Phone 717-772-2763  
Fax 717-772-0323  
Email mconnors@state.pa.us  
Web www.health.state.pa.us



**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: PA**

**Form Level Notes for Form 11**

General Note: Statistics from the PA Department of Health, Bureau of Health Statistics and Research are available only one year or more from the close of any year. We are therefore unable to provide certain statistics for 2007. All 2006 population data that appear (unless otherwise noted) are estimates calculated and provided by the PA State Data Center, Harrisburg, PA.

**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	195	226	212	197	200
Denominator	195	226	212	197	200

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:**

Data is currently provisional

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

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator data

Data source: Division of Newborn Screening and Genetics

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

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

**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	65	67	69	71	73
Annual Indicator	64.8	64.8	64.8	64.8	60.6
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?

Provisional Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	73	73.2	73.2	73.5	73.5
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**

- Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 The data was pre-populated and presently no data is available for this performance measure.

**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	52	54	52	53	54
Annual Indicator	51.2	51.2	51.2	51.2	45.8
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?

Provisional Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	54	54.1	54.1	54.2	54.2
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:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.  
  
 No denominator or numerator data was available
- Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.  
  
 No denominator or numerator data was available
- Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 The data was pre-populated and presently no data is available for this performance measure.

**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	62	64	66	68	70
Annual Indicator	61.4	61.4	61.4	61.4	66.2
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?

Provisional Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	70	70	70	70	70
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 #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 The data was pre-populated and presently no data is available for this performance measure.

**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	74	76	78	80	82
Annual Indicator	73.4	73.4	73.4	73.4	89.5
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?

Provisional Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	89.5	89.5	89.5	89.5	89.5
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**

- Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 The data was pre-populated and presently no data is available for this performance measure.

**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	30	32	34	36	38
Annual Indicator	5.8	5.8	5.8	5.8	46
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?

Provisional Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	48	50	50	52	52
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 #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: Child and Adolescent Health Measurement Initiative. 2005/2006 National Survey of Children with Special Health Care Needs, Data Resource Center for Child and Adolescent Health website.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.  
 No denominator or numerator data was available
- Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 The data was pre-populated and presently no data is available for this performance measure.

**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	90	90	87	87	87
Annual Indicator	86.2	85.7	83.2	84.6	
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

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	85	85	86	86	86.5
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 #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Currently the data information is embargoed until published in the MMWR. Usually these data are available in September of the following year

**2. Section Number:** Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The Annual Performance indicator for 2003, 2004, 2005 and 2006 was obtained from the 2003, 2004, 2005 and 2006 National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Data are for children 19-35 months of age. Numerators and denominators are not available.

Data should be in this form:

2003: 86.2+/-4.1

2004: 85.7+/-4.0

2005: 83.2+/-5.2

2006: 84.6+/-4.4

Data for 2006 will not be available until later in the year 2007.

**3. Section Number:** Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The Annual Performance Indicator for 2002, 2003, 2004 and 2005 was obtained from the 2002, 2003, 2004 and 2005 National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Data are for children 19-35 months of age. Numerators and denominators are not available.

Data should be in this form:

2002 82.4+/-4.5

2003: 86.2+/-4.1

2004: 85.7+/-4.0

2005: 83.2+/-5.2

Data for 2005 will not be available until later in the year 2006.

**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	16	15	14	13	12
Annual Indicator	16.6	15.7	15.4	16.0	
Numerator	4,376	4,198	4,162	4,313	
Denominator	264,088	267,596	269,471	270,122	

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	15.3	15.1	14.9	14.9	14.7
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 #8

**Field Name:** PM08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year

2. **Section Number:** Performance Measure #8

**Field Name:** PM08

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator Source: PA State Data Center.

3. **Section Number:** Performance Measure #8

**Field Name:** PM08

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator Source: PA State Data Center.

**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	30	34	38	38	38
Annual Indicator	0.0	23.2	25.3	29.5	
Numerator	0	10,491	11,510	13,895	
Denominator	1	45,177	45,576	47,061	

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	30	31	31.5	32	32.4
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**

- Section Number:** Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 6 months from the close of the calendar year.

- Section Number:** Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator is number of Medicaid enrollees who are 8 years old as of 09/30/07 who have a protective sealant on at least one permanent molar tooth, based on paid dental claims. The denominator is the SFY monthly average of Medicaid enrollees who are 8 years old.  
 Numerator and denominator source: PA Department of Public Welfare.

- Section Number:** Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator is number of Medicaid enrollees who are 8 years old as of 09/30/06 who have a protective sealant on at least one permanent molar tooth, based on paid dental claims. The denominator is the number of Medicaid enrollees who are 8 years old as of 09/30/06.

Numerator and denominator source: PA Department of Public Welfare

**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	3.1	3.1	2.5	2.4	2.3
Annual Indicator	2.7	2.5	2.3	2.9	
Numerator	63	59	54	66	
Denominator	2,356,033	2,339,033	2,326,570	2,313,503	

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	2.3	2.3	2.3	2.3	2.3
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 #10

**Field Name:** PM10

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data Not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. **Section Number:** Performance Measure #10

**Field Name:** PM10

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator Source: PA State Data Center.

3. **Section Number:** Performance Measure #10

**Field Name:** PM10

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator Source: PA State Data Center.

**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	35	35	35	38.5	40
Annual Indicator	30.9	32.7	37.5		
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?

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	40	41	42	43	44
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 #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2006 birth data should become available in 2009/2010. Data delay as CDC is developing new system of data collection by year of birth. These data are collected over a 3-yr period and final data are available 4 yrs from date of birth
- Section Number:** Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 2006 birth data should become available in 2009/2010. Data delay as CDC is developing new system of data collection by year of birth.

The Annual Indicator for 2003, 2004, and 2005 was obtained from the 2003, 2004, and 2005 National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Numerators and denominators are not available.

Data should be in this form:  
 2003: 30.9+/-4.2  
 2004: 32.7+/-4.9  
 2005: 37.5 +/-5.2

new data not available until August 2008.
- Section Number:** Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 The Annual Performance Indicator for 2003, 2004, and 2005 was obtained from the 2003, 2004, and 2005 National Immunization Survey conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. Numerators and denominators are not available.

**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	85	98	98	98
Annual Indicator	97.9	98.4	98.0	98.0	
Numerator	139,503	138,750	138,495	141,791	
Denominator	142,566	141,013	141,341	144,749	

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	98	98	98	98	98
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:**

Data not available and usually these data are not available until 24 months from the close of the calendar year.

Denominator only - Usually these data are available 6 months from the close of the calendar year.

2. **Section Number:** Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator

data source: Division of Newborn Screening and Genetics

Birth figures (denominator) are final births in hospitals supplied by the PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Birth figures (denominator) are final births in hospitals supplied by the PA Department of Health, Bureau of Health Statistics and Research.

Our statutory objective, according to Act 89 of 2001 is that 85% of newborns are screened.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	6.5	6.2	9.2	9.2	9.1
Annual Indicator	8.4	10.2	8.3	7.3	
Numerator	239,000	291,000	235,000	203,000	
Denominator	2,852,000	2,844,000	2,830,000	2,778,000	

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	7.3	7	6.7	6.7	6.7
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**

- Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 9 months from the close of the calendar year

- Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Percent and denominator are from Table HI-5, Health Insurance Coverage Status and Type of Coverage by State, Children Under 18, prepared by the U.S. Census Bureau. The numerator was calculated using the data from Table HI-5. PA has chosen to use the U.S. Census Bureau data because we believe it is the most consistent, reliable, and objective data available to us. The U.S. Census Bureau data for 2007 will not be available until September of 2008, so there will be a gap in our reporting on these figures. The data for year 2004 were revised based on improvements to the algorithm that assigned coverage to dependents, and there was an adjustment to the weights.

- Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Percent and denominator are from Table HI-5, Health Insurance Coverage Status and Type of Coverage by State, Children Under 18, prepared by the U.S. Census Bureau. The numerator was calculated using the data from Table HI-5. PA has chosen to use the U.S. Census Bureau data because we believe it is the most consistent, reliable, and objective data available to us. The U.S. Census Bureau data for 2006 will not be available until September of 2007, so there will be a gap in our reporting on these figures. The data for year 2004 were based on improvements to the algorithm that assigned coverage to dependents, and there was an adjustment to the weights.

There are at least two other ways that Pennsylvania could choose to derive the numerator for this performance measure. The numerator 258,000 was calculated a few years ago by the PA Insurance Commission (which administers CHIP). 258,000 is the number officially in use by the PA Insurance Commission and by many advocacy groups across the state. Families USA has also released a study (available at [www.familiesusa.org](http://www.familiesusa.org)) which indicates that 636,000 children under 18 were uninsured for at least one month during the years 2001 and 2002.

**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		13.5	13.9	13.8	13.7
Annual Indicator		25.8	25.0	24.7	
Numerator		26,828	25,787	25,570	
Denominator		103,968	103,151	103,524	

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	13.6	13.5	13.4	13.4	13.4
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:**

Data not available

2. **Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

2005 Data Not Available.

2005 Objective: 13.9

2004 Data

Objective: 14.0

Percentage: 14.0

Numerator: 103,968

Reported from 2004 Pediatric Nutrition Surveillance from CDC Table 2C.

**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				14.2	14
Annual Indicator				13.7	
Numerator				19,559	
Denominator				142,397	

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	14	14	13.9	13.8	13.7
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 #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

**2. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics

Unable to enter 2004 and 2005 data as follows:

Data for 2004

Annual Performance Indicator 14.1

Numerator 19,423

Denominator 138,077

Data for 2005

Annual Performance Indicator 14.0

Numerator 19,516

Denominator 138,988

**3. Section Number:** Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Unknowns excluded in calculations.

Source: Pa Department of Health, Bureau of Health Statistics and Research.

2005 data not available. Unable to enter 2004 data as follows:

Annual Performance Indicator: 14.4

Numerator: 19,423

Denominator: 135,077

**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	6.4	6.2	8.2	8.1	6
Annual Indicator	8.0	7.3	6.2	5.4	
Numerator	72	67	57	50	
Denominator	904,628	918,572	924,662	928,078	

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	5.2	5.1	5.1	5	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**

- Section Number:** Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

- Section Number:** Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

- Section Number:** Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

**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	69.5	70	80.1	81.9	82.5
Annual Indicator	77.7	76.1	76.0	81.1	
Numerator	1,797	1,736	1,727	1,942	
Denominator	2,312	2,282	2,272	2,394	

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	82.5	82.7	82.7	82.9	82.9
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 #17

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

2. **Section Number:** Performance Measure #17

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007

3. **Section Number:** Performance Measure #17

**Field Name:** PM17

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007

**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	85.5	86	83	83.5	84
Annual Indicator	81.9	81.3	81.1	80.1	
Numerator	97,053	97,316	97,194	96,697	
Denominator	118,524	119,668	119,787	120,770	

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	81	81.2	81.3	81.3	81.4
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 #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar.

2. **Section Number:** Performance Measure #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Performance Measure #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

**STATE PERFORMANCE MEASURE # 5**

Percent of callers who have expressed satisfaction with the services provided by the Special Kids Network Helpline.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				100	92
Annual Indicator			94.3	90.3	91.9
Numerator			482	167	406
Denominator			511	185	442
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	92	92	92	92	93
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:** 2006

**Field Note:**

1,695 surveys were sent to callers by the Health and Human Services Call Center (HHSCC) from September thru December 2006, and mailing continues in 2007. Professional surveys were not mailed in calendar year 2006, but will be sent during calendar year 2007.

Historically, MCH Block Grant satisfaction rate was based on a positive response to question #9 of the survey. The following data reflects the outcome of responses to this question:

"Would you recommend the Special Kids Network to someone you know?"

Objective 100% Satisfied Callers.

Percentage of Respondents Satisfied:

Numerator: respondents who stated they were satisfied

Denominator: total survey respondents

Percentage of satisfied callers for Calendar year 2006: (90.3%)

**STATE PERFORMANCE MEASURE # 6**

Rate of infant deaths as a result of Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				0.5	0.5
Annual Indicator		0.7	0.5	0.4	
Numerator		100	73	59	
Denominator		144,194	145,033	148,706	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	0.5	0.5	0.5	0.5	0.5
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:** State Performance Measure #6

**Field Name:** SM6

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available. Usually these data are available 12 to 18 months from the close of the calendar year.

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

**Field Name:** SM6

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

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

**Field Name:** SM6

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Source: PA Department of Health, Bureau of Health Statistics and Research.

**STATE PERFORMANCE MEASURE # 9**

The rate of pregnancy (per 1,000) among females ages 15-17

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
<b>Annual Performance Objective</b>	_____	_____	_____	_____	_____
<b>Annual Indicator</b>	_____	_____	22.3	_____	_____
<b>Numerator</b>	_____	_____	6,016	_____	_____
<b>Denominator</b>	_____	_____	269,471	_____	_____
<b>Is the Data Provisional or Final?</b>					

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
<b>Annual Performance Objective</b>	22.3	22.3	22.2	22.1	22
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

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 #9

**Field Name:** SM9

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data currently not available.

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research. Denominator Source: PA State Data Center.

Usually these data are available 12 to 18 months from the close of the calendar year

2. **Section Number:** State Performance Measure #9

**Field Name:** SM9

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data currently not available.

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research. Denominator Source: PA State Data Center.

3. **Section Number:** State Performance Measure #9

**Field Name:** SM9

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator Source: PA Department of Health, Bureau of Health Statistics and Research. Denominator Source: PA State Data Center.

**STATE PERFORMANCE MEASURE # 10**

Percent of children ages 6 years and younger tested for elevated blood lead levels

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	10.7	_____
Numerator	_____	_____	_____	109,894	_____
Denominator	_____	_____	_____	1,031,796	_____
Is the Data Provisional or Final?				Final	Provisional

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	_____ 13	_____ 13.2	_____ 13.5	_____ 14	_____ 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 #10

**Field Name:** SM10

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Numerator data source: PA NEDSS

Denominator Source: PA State Data Center.

Usually these data are available 11 to 12 months from the close of the calendar year.

2. **Section Number:** State Performance Measure #10

**Field Name:** SM10

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator data source: PA NEDSS

Denominator Source: PA State Data Center.

3. **Section Number:** State Performance Measure #10

**Field Name:** SM10

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data currently not available

Numerator data source: PA NEDSS

Denominator Source: PA State Data Center.

**STATE PERFORMANCE MEASURE # 11**

The percent of tested children ages 6 years and younger with confirmed elevated blood lead levels.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	2.3
Numerator	_____	_____	_____	_____	3,026
Denominator	_____	_____	_____	_____	130,954
Is the Data Provisional or Final?					Final

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	2.3	2.3	2.2	2.2	2.1
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**

- Section Number:** State Performance Measure #11  
**Field Name:** SM11  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Source: PA NEDSS
- Section Number:** State Performance Measure #11  
**Field Name:** SM11  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: PA NEDSS
- Section Number:** State Performance Measure #11  
**Field Name:** SM11  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 Source: PA NEDSS

**STATE PERFORMANCE MEASURE # 12**

The percentage of statewide breastfeeding initiation

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	63.7	64.6	_____
Numerator	_____	_____	86,720	90,282	_____
Denominator	_____	_____	136,168	139,794	_____
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	67	68	69	70	71
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 #12  
**Field Name:** SM12  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 No data are available for 2007 at this time. Usually these data are available 12 to 18 months from the close of the calendar year.
- Section Number:** State Performance Measure #12  
**Field Name:** SM12  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: PA Department of Health, Bureau of Health Statistics and Research.
- Section Number:** State Performance Measure #12  
**Field Name:** SM12  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 Source: PA Department of Health, Bureau of Health Statistics and Research.

**STATE PERFORMANCE MEASURE # 13**

The percentage of infants with failed hearing screenings that are lost to follow-up

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	19.3	20.7	_____
Numerator	_____	_____	271	290	_____
Denominator	_____	_____	1,402	1,400	_____
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	19.5	19	18.5	18	17
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 #13  
**Field Name:** SM13  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2007 data not available because of a 1 year turn-around time in final data
- Section Number:** State Performance Measure #13  
**Field Name:** SM13  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: Division of Newborn Screening and Genetics
- Section Number:** State Performance Measure #13  
**Field Name:** SM13  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 Source: Division of Newborn Screening and Genetics

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]  
**STATE: PA**

**Form Level Notes for Form 12**

General Note: Statistics from the PA Department of Health, Bureau of Health Statistics and Research are available only one year or more from the close of any year. We are therefore unable to provide certain statistics for 2007. All 2006 population data that appear (unless otherwise noted) are estimates calculated and provided by the PA State Data Center, Harrisburg, PA.

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective	6.8	6.7	7.2	7.1	7
Annual Indicator	7.3	7.1	7.2	7.5	
Numerator	1,060	1,026	1,047	1,122	
Denominator	145,485	144,194	145,033	148,706	

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	7	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:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Data not available

2. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 Source: PA Department of Health, Bureau of Health Statistics and Research.

**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	2.1	2	2.4	2.3	2.2
Annual Indicator	2.6	2.4	2.5	2.7	
Numerator	16.1	15	15.7	17	
Denominator	6.3	6.3	6.3	6.3	

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	2.7	2.7	2.6	2.6	2.5
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:** Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**  
data not available

2. **Section Number:** Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**  
Source: PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**  
Source: PA Department of Health, Bureau of Health Statistics and Research.

**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	4.8	4.7	5.3	5	4.8
Annual Indicator	5.3	4.8	5.1	5.4	
Numerator	775	692	742	806	
Denominator	145,485	144,194	145,033	148,706	

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	4.6	4.6	4.6	4.6	4.6
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:** Outcome Measure 3

**Field Name:** OM03

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**  
data not available

2. **Section Number:** Outcome Measure 3

**Field Name:** OM03

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**  
Source: PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Outcome Measure 3

**Field Name:** OM03

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**  
Source: PA Department of Health, Bureau of Health Statistics and Research.

**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	1.6	1.5	1.9	1.9	1.8
Annual Indicator	2.0	2.3	2.1	2.1	
Numerator	285	334	305	316	
Denominator	145,485	144,194	145,033	148,706	

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	1.8	1.8	1.8	1.8	1.8
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 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 data not available

2. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Source: PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Outcome Measure 4  
**Field Name:** OM04  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 Source: PA Department of Health, Bureau of Health Statistics and Research.

**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	10.1	10.1	7.4	7.2	7.1
Annual Indicator	7.4	6.6	7.2	7.1	
Numerator	1,075	958	1,047	1,063	
Denominator	145,903	144,567	145,460	149,098	

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	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:** Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**  
data not available

2. **Section Number:** Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**  
Source: PA Department of Health, Bureau of Health Statistics and Research.

3. **Section Number:** Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**  
Source: PA Department of Health, Bureau of Health Statistics and Research.

**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	19	18.5	18	17.5	17
Annual Indicator	18.6	18.6	18.7	17.4	
Numerator	412	409	408	377	
Denominator	2,209,492	2,193,086	2,181,508	2,169,424	

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	17	17	16.8	16.8	16.6
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:** Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**  
data not available

2. **Section Number:** Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**  
Numerator source: PA Department of Health, Bureau of Health Statistics and Research.  
Denominator source: PA State Data Center.

3. **Section Number:** Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**  
Numerator source: PA Department of Health, Bureau of Health Statistics and Research.  
Denominator source: PA State Data Center.

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: PA**

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.

    3    

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

    2    

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.

    2    

**Total Score:**     15    

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: PA 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. Increase the number of high risk, vulnerable youth who have access to comprehensive health care
2. Reduce pregnancy among females ages 15-17
3. Reduce risk factors (individual, family, peer, school, community) and increase protective factors for youth.
4. Increase lead testing among children under age 6
5. Increase coordination of systems, services and programs serving CSHCN
6. Reduce health risks for, and mortality of infants and children
7. Increase percent of pregnant women, including those at high risk, who receive early and adequate prenatal care
8. Expand the number of medical homes serving all children statewide
9. Reduce health disparities through the provision of culturally, cognitively and linguistically appropriate services
10. Increase statewide breastfeeding initiation and duration

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

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

STATE: PA

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.	<b>Data-related Issues - Needs Assessment</b> 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>	The lack of available and useful data from some programs conducting MCH activities makes it difficult to monitor and assess the effectiveness of activities.	It was identified during the most recent Needs and Capacity Assessment.	TA assistance is requested by HRSA or any State with best practices in like initiatives and in the collection
2.	<b>Data-related Issues - Needs Assessment</b> 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>	Racial/ethnic disparities in perinatal outcomes exist for some groups namely Blacks and Hispanic women who experience poor birth outcomes. Assistance is needed to gather additional data to describe the most needed areas in the State.	It was identified during the most recent Needs and Capacity Assessment.	TA assistance is requested by HRSA or any State with best practices in like initiatives and has attained success in reversing poor birth outcomes for this targeted population.
3.	<b>Data-related Issues - Needs Assessment</b> 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>	Assistance in the review of EPSDT screening data from children enrolled in the Commonwealth's managed care programs and Community/Migrant Health Center data is needed for the purpose of identifying sub-groups with low participation rates.	It was identified during the most recent Needs and Capacity Assessment	TA assistance is requested by HRSA or any State with best practices in like initiatives and has attained success in EPSDT targeted promotion.
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: PA**

SP # 5

**PERFORMANCE MEASURE:**

Percent of callers who have expressed satisfaction with the services provided by the Special Kids Network Helpline.

**STATUS:**

Active

**GOAL**

To increase the percentage of callers to the SKN who are satisfied with the services provided by SKN.

**DEFINITION**

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**Numerator:**

Number of completed calls to the SKN that resulted in a satisfactory survey response.

**Denominator:**

Number of completed calls to the SKN.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 16-23

Increase the number of states that have service systems for children with special health care needs.

.

**DATA SOURCES AND DATA ISSUES**

Health and Human Services Call Center

**SIGNIFICANCE**

Parents/guardians with children who have special health care needs are more likely to obtain the needed services if they have access to or are aware of a public system that will provide reliable and relevant information and referral services in a fast and efficient manner.

SP # 6

**PERFORMANCE MEASURE:**

Rate of infant deaths as a result of Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed per 1,000 live births.

**STATUS:**

Active

**GOAL**

To reduce the infant death rate due to SIDS and accidental suffocation and strangulation in bed to .50 per 1,000 live births.

**DEFINITION**

**Numerator:**

Number of infant (under age 1 year) deaths due to SIDS and accidental suffocation and strangulation in bed.

**Denominator:**

Number of resident live births in the State in the calendar year

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 16-1h

Reduce deaths from sudden infant death syndrome (SIDS) to 0.25 per 1,000

**DATA SOURCES AND DATA ISSUES**

State vital records.

**SIGNIFICANCE**

SIDS is the leading cause of postneonatal death among all racial and ethnic groups. A reduction in the rate of death from SIDS will contribute greatly to reducing the overall infant mortality rate. Babies are safest sleeping alone, on their backs in uncluttered cribs. Babies who are not put to sleep safely are at risk of suffocation or strangulation. In some areas of the State, more babies have died in co-sleeping environments than as a result of child abuse.

SP # 9

**PERFORMANCE MEASURE:**

The rate of pregnancy (per 1,000) among females ages 15-17

**STATUS:**

Active

**GOAL**

To reduce the rate of pregnancies among females ages 15-17

**DEFINITION**

Pregnant females ages 15-17

**Numerator:**

Number of resident pregnancies among females ages 15-17

**Denominator:**

Number of resident females ages 15-17

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 9-7

Reduce pregnancies among adolescent females

**DATA SOURCES AND DATA ISSUES**

State Vital records and census data are source

**SIGNIFICANCE**

Teen pregnancy rates in Pennsylvania have been declining; however, there are significant racial and ethnic disparities in the teen pregnancy rates. From 2000-2004 the overall teen pregnancy rate for PA residents ages 15-17 decreased from 28.1 to 23.0. However, there are significant racial/ethnic disparities. In 2004 the teen pregnancy rate (15-17 year olds) for white teens was 12.9, for black teens 71.5 and for Hispanic teens 67.2.

SP # 10

**PERFORMANCE MEASURE:**

Percent of children ages 6 years and younger tested for elevated blood lead levels

**STATUS:**

Active

**GOAL**

To increase the percent of children ages 6 years and younger who are tested for lead poisoning.

**DEFINITION**

Percent of Pennsylvania children ages 6 years and younger tested for elevated blood lead levels

**Numerator:**

Number of children ages 6 years and younger tested for lead poisoning

**Denominator:**

Number of children ages 6 years and younger

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 8-11

Eliminate elevated blood lead levels in children

**DATA SOURCES AND DATA ISSUES**

PA NEDSS and Bureau of Health Statistics (population data)

**SIGNIFICANCE**

Considerable progress has been made in reducing blood lead levels in Pennsylvania's children. However, lead poisoning, which is a preventable environmental health problem and children are the most susceptible to the adverse health, neurological and behavioral reactions from exposure to lead-containing products. An elevated blood lead can cause mental retardation, learning disabilities, and behavioral problems in children. In some cases, high blood levels can cause seizures, coma and even death.

SP # 11

**PERFORMANCE MEASURE:**

The percent of tested children ages 6 years and younger with confirmed elevated blood lead levels.

**STATUS:**

Active

**GOAL**

Decrease the number of children ages 6 years and younger with confirmed elevated blood lead levels

**DEFINITION**

The percent of tested Pennsylvania children ages 6 years and younger with confirmed elevated blood lead levels.

**Numerator:**

Number of children ages 6 years and younger with confirmed elevated blood lead levels

**Denominator:**

Number of children ages 6 years and younger tested

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 8-11 Eliminate elevated blood lead levels in children

**DATA SOURCES AND DATA ISSUES**

PA NEDSS

**SIGNIFICANCE**

Considerable progress has been made in reducing blood lead levels in Pennsylvania's children. However, lead poisoning, which is a preventable environmental health problem and children are the most susceptible to the adverse health, neurological and behavioral reactions from exposure to lead-containing products. An elevated blood lead can cause mental retardation, learning disabilities, and behavioral problems in children. In some cases, high blood levels can cause seizures, coma and even death.

SP # 12

**PERFORMANCE MEASURE:**

The percentage of statewide breastfeeding initiation

**STATUS:**

Active

**GOAL**

To increase statewide breastfeeding initiation

**DEFINITION**

Number of resident Pennsylvania women who initiate breastfeeding annually

**Numerator:**

Number of resident women who initiate breastfeeding annually

**Denominator:**

Number of resident live births annually

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 16-19a

Increase the proportion of mothers who breastfeed their babies in early postpartum period

**DATA SOURCES AND DATA ISSUES**

Pennsylvania Birth Certificate, WIC, CDC PedNSS Report

**SIGNIFICANCE**

The advantages of breastfeeding are indisputable and include nutritional, immunological and psychological benefits to both infant and mother, as well as economic benefits. In 2005, Pennsylvania ranked 35th in the nation, and 40th place in 2006 in the percentage of children ever breastfed (National Center for Chronic Disease Prevention and Health Promotion National Immunization Survey). Significant racial differences exist in Pennsylvania's breastfeeding initiation rates. African-Americans are Pennsylvania's largest minority group, comprising 15% of the state's births. In 2006, this group has the lowest initiation rate of 51%. Hispanics, comprising 8% of births has an initiation rate of 63%.

**PERFORMANCE MEASURE:**

The percentage of infants with failed hearing screenings that are lost to follow-up

**STATUS:**

Active

**GOAL**

Decrease the percentage of infants that have a failed hearing screening that are not followed to conclusion

**DEFINITION**

The percentage of Pennsylvania infants that have a failed hearing screening that are not followed to conclusion

**Numerator:**

number of infants lost to follow-up

**Denominator:**

number of infants failing re-screening

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 28-11

Increase the proportion of newborns who are screened for hearing loss by age 1 month, have audiologic evaluation by age 3 months, and are enrolled in appropriate intervention services by age 6 months. (Developmental) Increase the proportion of newborns who are screened for hearing loss by age 1 month, have audiologic evaluation by age 3 months, and are enrolled in appropriate intervention services by age 6 months.

**DATA SOURCES AND DATA ISSUES**

Newborn Hearing Screening Program and Newborn Screening Data system

**SIGNIFICANCE**

The advantages of early detection of hearing impairments are indisputable and include necessary follow-up of free and appropriate enrollment in habilitation and education programs. The national lost to follow-up rate is over 50% and PA is about 12%; our goal is reduce the % to 0.

**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: PA**

**Form Level Notes for Form 17**

General Note: Statistics from the PA Department of Health, Bureau of Health Statistics and Research are available only one year or more from the close of any year. We are therefore unable to provide certain statistics for 2007. All 2006 population data that appear (unless otherwise noted) are estimates calculated and provided by the PA State Data Center, Harrisburg, PA.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	60.7	49.3	43.4	47.1	_____
<b>Numerator</b>	4,436	3,600	3,170	3,442	_____
<b>Denominator</b>	730,943	730,462	731,167	731,116	_____

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 #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**  
data not available.

2. **Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

HSCI #01: ICD-9CM Codes for primary diagnosis.

Numerator source: PA Health Care Cost Containment Council. Denominator source: PA State Data Center.

3. **Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

HSCI #01: ICD-9CM Codes for primary diagnosis.

Numerator source: PA Health Care Cost Containment Council. Denominator source: PA State Data Center.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	83.0	80.4	81.7	75.4	
<b>Numerator</b>	44,994	53,246	56,096	56,739	
<b>Denominator</b>	54,193	66,211	68,651	75,220	

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 #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 data not available.
- Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2006 – 09/30/2007. The denominator is the SFY monthly average of Medicaid enrollees who are less than one year old.
- Section Number:** Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 HSCI #02: Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2005 – 09/30/2006. Recipient age for the report was determined as of December 2006.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>56.7</u>	<u>42.6</u>	<u>53.0</u>	<u>62.8</u>	<u>66.5</u>
<b>Numerator</b>	<u>1,334</u>	<u>578</u>	<u>683</u>	<u>787</u>	<u>968</u>
<b>Denominator</b>	<u>2,351</u>	<u>1,357</u>	<u>1,289</u>	<u>1,253</u>	<u>1,455</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:**

Numerator and denominator were provided by CHIP contractors using HEDIS-like parameters and reported for federal fiscal year 10/01/06 to 09/30/07.  
 Source: PA Department of Insurance

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

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

HSCI #03: Numerator and Denominator were provided by CHIP contractors using HEDIS-like parameters and reported for federal fiscal year 10/01/05 to 09/30/06.  
 Source: PA Department of Insurance

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

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

HSCI #03: Numerator and Denominator were provided by CHIP contractors using HEDIS-like parameters and reported for federal fiscal year 10/01/05 to 09/30/06.  
 Source: PA Department of Insurance

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>64.6</u>	<u>65.6</u>	<u>66.6</u>	<u>66.0</u>	<u>        </u>
<b>Numerator</b>	<u>73,376</u>	<u>74,663</u>	<u>75,623</u>	<u>75,410</u>	<u>        </u>
<b>Denominator</b>	<u>113,585</u>	<u>113,779</u>	<u>113,626</u>	<u>114,297</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?**

Final

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

2. **Section Number:** Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

HSCI #04: Calculated with missing data (adequacy measure could not be computed) removed from denominator.  
 Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007.

3. **Section Number:** Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

HSCI #04: Calculated with missing data (adequacy measure could not be computed) removed from denominator.  
 Source: PA Department of Health, Bureau of Health Statistics and Research

2004 data have been revised as of April 26, 2007.

**HEALTH SYSTEMS CAPACITY MEASURE # 07A**

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

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>78.6</u>	<u>86.6</u>	<u>92.0</u>	<u>88.9</u>	<u>          </u>
<b>Numerator</b>	<u>775,943</u>	<u>833,010</u>	<u>874,776</u>	<u>882,745</u>	<u>          </u>
<b>Denominator</b>	<u>986,819</u>	<u>962,085</u>	<u>950,670</u>	<u>993,176</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?

Final

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #07A

**Field Name:** HSC07A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

2. **Section Number:** Health Systems Capacity Indicator #07A

**Field Name:** HSC07A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

HSCI #07A: Numerator is provided by the PA Department of Public Welfare, from their Enterprise Data Warehouse based on claims having a date of service during the period 10/01/06 to 09/30/07, regardless of the claim adjudication date or payment date. Numerator is the number of children age 0 to 20 who received a service approved by MA either through the Fee-for-Service or Managed Care Delivery System. DPW cannot provide a number for children potentially eligible for MA who did not apply. The denominator is the number of children who have been determined to be eligible for MA who are age 0 to 20 during the reporting period.

3. **Section Number:** Health Systems Capacity Indicator #07A

**Field Name:** HSC07A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

HSCI #07A: Numerator is provided by the PA Department of Public Welfare, from their Enterprise Data Warehouse based on claims having a date of service during the period 10/01/05 to 09/30/06, regardless of the claim adjudication date or payment date. Numerator is the number of children age 0 to 20 who received a service approved by MA either through the Fee-for-Service or Managed Care Delivery System. DPW Cannot provide a number for children potentially eligible for MA who did not apply. Denominator is the number of children who have been determined to be eligible for MA who are age 0 to 20 during the reporting period.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>37.9</u>	<u>37.9</u>	<u>38.6</u>	<u>38.3</u>	<u>41.4</u>
<b>Numerator</b>	<u>66,539</u>	<u>69,373</u>	<u>76,564</u>	<u>79,334</u>	<u>86,749</u>
<b>Denominator</b>	<u>175,730</u>	<u>183,039</u>	<u>198,133</u>	<u>206,929</u>	<u>209,765</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:**  
 HSCI #07B: Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2006 – 09/30/2007.
- Section Number:** Health Systems Capacity Indicator #07B  
**Field Name:** HSC07B  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 HSCI #07B: Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2005 – 09/30/2006.
- Section Number:** Health Systems Capacity Indicator #07B  
**Field Name:** HSC07B  
**Row Name:**  
**Column Name:**  
**Year:** 2005  
**Field Note:**  
 HSCI #07B: Data is provided to the Title V program by PA Department of Public Welfare, from their CMS416 Report for the service date period 10/01/2004 – 09/30/2005. Recipient age for the report was determined as of September 30, 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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>0.2</u>	<u>0.0</u>	<u>0.0</u>	<u>0.1</u>	<u>0.0</u>
<b>Numerator</b>	<u>87</u>	<u>3</u>	<u>9</u>	<u>58</u>	<u>7</u>
<b>Denominator</b>	<u>44,095</u>	<u>58,360</u>	<u>57,809</u>	<u>56,556</u>	<u>59,545</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 Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

HSCI #8: Since State SSI beneficiaries are eligible for Medical Assistance, the percent of beneficiaries receiving benefits from the State's CSHCN program is expected to be very low relative to the number of SSI beneficiaries in the State. The majority of identified SSI beneficiaries from the State's CSHCN program were children receiving comprehensive specialty care by multi-disciplinary teams.

Numerator is State Fiscal year data from CORE (SFY 07-08).

Denominator is number of children receiving SSI payments in PA as of December 2007, the Social Security Administration's December 2007 report.

2. **Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

HSCI #8: Since State SSI beneficiaries are eligible for Medical Assistance, the percent of beneficiaries receiving benefits from the State's CSHCN program is expected to be very low relative to the number of SSI beneficiaries in the State. The majority of identified SSI beneficiaries from the State's CSHCN program were children receiving comprehensive specialty care by multi-disciplinary teams.

Numerator is State Fiscal year data from CORE (SFY 06-07).

Denominator is number of children receiving SSI payments in PA as of December 2006, the Social Security Administration's December 2006 report.

3. **Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

HSCI #8: Since State SSI beneficiaries are eligible for Medical Assistance, the percent of beneficiaries receiving benefits from the State's CSHCN program is expected to be very low relative to the number of SSI beneficiaries in the State. The majority of identified SSI beneficiaries from the State's CSHCN program were children receiving comprehensive specialty care by multi-disciplinary teams.

Numerator is State Fiscal year data from CORE (SFY 05-06).

Denominator is number of children receiving SSI payments in PA as of December 2005, the Social Security Administration's December 2005 report.

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

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 (&lt; 2,500 grams)</i>	2006	Payment source from birth certificate	<u>10.8</u>	<u>7.3</u>	<u>8.5</u>
b) <i>Infant deaths per 1,000 live births</i>	2006	Payment source from birth certificate	<u>0</u>	<u>0</u>	<u>7.5</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2006	Payment source from birth certificate	<u>70.1</u>	<u>84.7</u>	<u>80.1</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>	2006	Payment source from birth certificate	<u>63.6</u>	<u>67.4</u>	<u>66</u>

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

<b>INDICATOR #06</b> <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>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL MEDICAID</b> (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2006	<u>185</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> )	2006	<u>133</u> <u>100</u> <u>    </u>
c) <i>Pregnant Women</i>	2006	<u>185</u>

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

<b>INDICATOR #06</b> <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>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL SCHIP</b>
a) <i>Infants (0 to 1)</i>	2006	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> )	2006	<u>200</u> <u>200</u> <u>    </u>
c) <i>Pregnant Women</i>	2006	<u>200</u>

**FORM NOTES FOR FORM 18**

HSCI #05: The Title V program does not have the capability to break the data into Medicaid and non-Medicaid for section b) infant deaths per 1,000 live births.

HSCI #06: MA information is from PA Department of Public Welfare. CHIP information is from PA Department of Insurance.

Medicaid and CHIP information is current eligibility.

a)Age is infants under 1.

Medicaid Infants: 185%  
 Medicaid - Children age 1-5 = 133%  
 Children age 6-18 = 100%  
 Medicaid pregnant women: 185%

The percent of poverty level for eligibility in PA's Free CHIP program for infants under 1 is 185%-200% of the Federal Poverty Level (FPL).  
 The percent of poverty level for eligibility in PA's Free CHIP program for children 1-5 is 133% - 200% FPL.  
 The percent of poverty level for eligibility in PA's Free CHIP program for children 6-18 is 100% - 200% FPL.  
 The percent of poverty level for eligibility in PA's Subsidized 1 CHIP program is 201% - 250% FPL regardless of age.  
 The percent of poverty level for eligibility in PA's Subsidized 2 CHIP program is 251% - 275% FPL regardless of age.  
 The percent of poverty level for eligibility in PA's Subsidized 3 CHIP program is 276% - 300% FPL regardless of age.  
 Note: Children in CHIP Subsidized 1 program pay 25% of the premium, 35% of the premium in Subsidized 2, and 40% of the premium in Subsidized 3.

**FIELD LEVEL NOTES****1. Section Number:** Indicator 06 - SCHIP

**Field Name:** SCHIP\_Infant

**Row Name:** Infants

**Column Name:**

**Year:** 2009

**Field Note:**

The percent of poverty level for eligibility in PA's Free CHIP program for infants under 1 is 185%-200% of the Federal Poverty Level (FPL).

The percent of poverty level for eligibility in PA's Subsidized 1 CHIP program is 201% - 250% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 2 CHIP program is 251% - 275% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 3 CHIP program is 276% - 300% FPL regardless of age.

Note: Children in CHIP Subsidized 1 program pay 25% of the premium, 35% of the premium in Subsidized 2, and 40% of the premium in Subsidized 3.

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

**Field Name:** SCHIP\_Children

**Row Name:** SCHIP Children

**Column Name:**

**Year:** 2009

**Field Note:**

The percent of poverty level for eligibility in PA's Free CHIP program for children 1-5 is 133% - 200% FPL.

The percent of poverty level for eligibility in PA's Free CHIP program for children 6-18 is 100% - 200% FPL.

The percent of poverty level for eligibility in PA's Subsidized 1 CHIP program is 201% - 250% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 2 CHIP program is 251% - 275% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 3 CHIP program is 276% - 300% FPL regardless of age.

Note: Children in CHIP Subsidized 1 program pay 25% of the premium, 35% of the premium in Subsidized 2, and 40% of the premium in Subsidized 3.

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

**Field Name:** SCHIP\_Women

**Row Name:** Pregnant Women

**Column Name:**

**Year:** 2009

**Field Note:**

The percent of poverty level for eligibility in PA's Free CHIP program for children 6-18 is 100% - 200% FPL.

The percent of poverty level for eligibility in PA's Subsidized 1 CHIP program is 201% - 250% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 2 CHIP program is 251% - 275% FPL regardless of age.

The percent of poverty level for eligibility in PA's Subsidized 3 CHIP program is 276% - 300% FPL regardless of age.

Note: Children in CHIP Subsidized 1 program pay 25% of the premium, 35% of the premium in Subsidized 2, and 40% of the premium in Subsidized 3.

**4. Section Number:** Indicator 05

**Field Name:** LowBirthWeight

**Row Name:** Percent of ow birth weight (<2,500 grams)

**Column Name:**

**Year:** 2009

**Field Note:**

See form notes.

**5. Section Number:** Indicator 05

**Field Name:** InfantDeath

**Row Name:** Infant deaths per 1,000 live births

**Column Name:**

**Year:** 2009

**Field Note:**

HSCI #05: The Title V program does not have the capability to break the data into Medicaid and non-Medicaid for section b) infant deaths per 1,000 live births.

**6. Section Number:** Indicator 05

**Field Name:** CareFirstTrimester

**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

**Column Name:**

**Year:** 2009

**Field Note:**

See form notes.

7. **Section Number:** Indicator 05

**Field Name:** AdequateCare

**Row Name:** Percent of pregnant women with adequate prenatal care

**Column Name:**

**Year:** 2009

**Field Note:**

See form notes.

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

**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)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	2	No
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	2	Yes
Survey of recent mothers at least every two years (like PRAMS)	2	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: PA**

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)	1	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**

None

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

**Form Level Notes for Form 11**

General Note: Statistics from the PA Department of Health, Bureau of Health Statistics and Research are available only one year or more from the close of any year. We are therefore unable to provide certain statistics for 2007. All 2006 population data that appear (unless otherwise noted) are estimates calculated and provided by the PA State Data Center, Harrisburg, PA.

**HEALTH STATUS INDICATOR MEASURE # 01A**

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

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>8.1</u>	<u>8.2</u>	<u>8.3</u>	<u>8.5</u>	<u>          </u>
<b>Numerator</b>	<u>11,737</u>	<u>11,706</u>	<u>12,045</u>	<u>12,479</u>	<u>          </u>
<b>Denominator</b>	<u>144,867</u>	<u>143,475</u>	<u>144,278</u>	<u>147,333</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?**

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

2. **Section Number:** Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007

3. **Section Number:** Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007

**HEALTH STATUS INDICATOR MEASURE # 01B**

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	6.3	6.4	6.6	6.6	
Numerator	8,821	8,788	9,139	9,411	
Denominator	139,766	138,366	139,143	142,021	

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**

1. **Section Number:** Health Status Indicator #01B

**Field Name:** HSI01B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

2. **Section Number:** Health Status Indicator #01B

**Field Name:** HSI01B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

3. **Section Number:** Health Status Indicator #01B

**Field Name:** HSI01B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

**HEALTH STATUS INDICATOR MEASURE # 02A**

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

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>1.6</u>	<u>1.6</u>	<u>1.6</u>	<u>1.6</u>	<u>          </u>
<b>Numerator</b>	<u>2,312</u>	<u>2,282</u>	<u>2,272</u>	<u>2,394</u>	<u>          </u>
<b>Denominator</b>	<u>144,867</u>	<u>143,475</u>	<u>144,278</u>	<u>147,333</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?**

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #02A

**Field Name:** HSI02A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

2. **Section Number:** Health Status Indicator #02A

**Field Name:** HSI02A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

3. **Section Number:** Health Status Indicator #02A

**Field Name:** HSI02A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

**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	1.2	1.2	1.2	1.3	
Numerator	1,667	1,636	1,690	1,808	
Denominator	139,766	138,366	139,143	142,021	

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**

1. **Section Number:** Health Status Indicator #02B

**Field Name:** HSI02B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

2. **Section Number:** Health Status Indicator #02B

**Field Name:** HSI02B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

3. **Section Number:** Health Status Indicator #02B

**Field Name:** HSI02B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Unknowns excluded in calculations.

Source: PA Department of Health, Bureau of Health Statistics and Research.

2004 data have been revised as of April 26, 2007.

**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	7.1	6.8	6.3	6.1	
Numerator	168	158	146	140	
Denominator	2,356,033	2,339,033	2,326,570	2,313,503	

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 Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

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

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>2.7</u>	<u>2.5</u>	<u>2.3</u>	<u>2.9</u>	<u>          </u>
<b>Numerator</b>	<u>63</u>	<u>59</u>	<u>54</u>	<u>66</u>	<u>          </u>
<b>Denominator</b>	<u>2,356,033</u>	<u>2,339,033</u>	<u>2,326,570</u>	<u>2,313,503</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?**

Final

**Field Level Notes**

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

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

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

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	25.0	20.6	24.2	20.1	
<b>Numerator</b>	427	363	429	362	
<b>Denominator</b>	1,710,641	1,759,661	1,776,217	1,800,534	

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 Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

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

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Bureau of Health Statistics and Research.

Denominator source: PA State Data Center.

**HEALTH STATUS INDICATOR MEASURE # 04A**

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

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>298.7</u>	<u>281.0</u>	<u>258.9</u>	<u>260.9</u>	<u>          </u>
<b>Numerator</b>	<u>7,038</u>	<u>6,573</u>	<u>6,024</u>	<u>6,036</u>	<u>          </u>
<b>Denominator</b>	<u>2,356,033</u>	<u>2,339,033</u>	<u>2,326,570</u>	<u>2,313,503</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?**

Final

Provisional

**Field Level Notes**

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

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

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

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	43.9	43.3	38.9	36.2	
<b>Numerator</b>	1,034	1,012	906	838	
<b>Denominator</b>	2,356,033	2,339,033	2,326,570	2,313,503	

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**

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

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

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

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

**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.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	201.2	191.6	197.4	199.1	
<b>Numerator</b>	3,442	3,372	3,506	3,585	
<b>Denominator</b>	1,710,641	1,759,661	1,776,217	1,800,534	

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**

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

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

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

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator source: PA Department of Health, Division of Health Risk Reduction. Denominator source: PA State Data Center.

**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	26.4	25.9	14.4	14.4	
Numerator	11,763	11,744	6,589	6,629	
Denominator	446,187	453,452	457,118	460,542	

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 Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

data not available

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

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator Source: PA State Data Center

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

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator Source: PA State Data Center

**HEALTH STATUS INDICATOR MEASURE # 05B**

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

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>7.0</u>	<u>7.2</u>	<u>4.5</u>	<u>4.7</u>	<u>          </u>
<b>Numerator</b>	<u>14,499</u>	<u>14,817</u>	<u>9,146</u>	<u>9,572</u>	<u>          </u>
<b>Denominator</b>	<u>2,071,025</u>	<u>2,057,534</u>	<u>2,044,703</u>	<u>2,039,437</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 #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data not available

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

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator source: PA State Data Center

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

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Numerator Source: PA Department of Health, Division of Communicable Diseases, reported to them in accordance with PA's Communicable Disease Act.

Denominator source: PA State Data Center

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

**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: 2006 Is this data from a State Projection? Yes Is this data final or provisional? Final

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	144,079	0	0	0	0	0	0	144,079
Children 1 through 4	587,037	0	0	0	0	0	0	587,037
Children 5 through 9	766,023	0	0	0	0	0	0	766,023
Children 10 through 14	816,364	0	0	0	0	0	0	816,364
Children 15 through 19	928,078	0	0	0	0	0	0	928,078
Children 20 through 24	872,456	0	0	0	0	0	0	872,456
Children 0 through 24	4,114,037	0	0	0	0	0	0	4,114,037

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	131,789	12,290	0
Children 1 through 4	542,071	44,966	0
Children 5 through 9	713,452	52,571	0
Children 10 through 14	767,141	49,223	0
Children 15 through 19	881,180	46,898	0
Children 20 through 24	825,449	47,007	0
Children 0 through 24	3,861,082	252,955	0

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

**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

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	207	58	104	0	5	0	0	40
Women 15 through 17	4,313	1,877	1,607	9	63	0	0	757
Women 18 through 19	9,267	5,221	2,611	20	159	0	0	1,256
Women 20 through 34	111,144	83,283	15,004	161	4,431	0	0	8,265
Women 35 or older	23,595	19,207	2,162	20	1,102	0	0	1,104
Women of all ages	148,526	109,646	21,488	210	5,760	0	0	11,422

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	158	45	4
Women 15 through 17	3,324	903	86
Women 18 through 19	7,588	1,534	145
Women 20 through 34	100,470	9,541	1,133
Women 35 or older	22,114	1,179	302
Women of all ages	133,654	13,202	1,670

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

**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? Final

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	1,122	689	367	1	28	0	0	37
Children 1 through 4	153	119	26	0	4	0	0	4
Children 5 through 9	100	79	20	0	1	0	0	0
Children 10 through 14	124	97	23	0	1	0	0	3
Children 15 through 19	533	371	154	0	5	0	0	3
Children 20 through 24	903	688	198	0	15	0	0	2
Children 0 through 24	2,935	2,043	788	1	54	0	0	49

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	1,028	77	17
Children 1 through 4	135	17	1
Children 5 through 9	95	4	1
Children 10 through 14	119	4	1
Children 15 through 19	507	25	1
Children 20 through 24	858	44	1
Children 0 through 24	2,742	171	22

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

**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? Final

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	3,241,581	2,648,942.0	438,375.0	0.0	78,434.0	0.0	0.0	75,830.0	2006
Percent in household headed by single parent	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2006
Percent in TANF (Grant) families	5.5	2.2	21.1	0.0	0.0	0.0	0.0	18.1	2006
Number enrolled in Medicaid	1,000,480	556,234.0	303,199.0	0.0	0.0	0.0	0.0	141,047.0	2006
Number enrolled in SCHIP	182,317	95,214.0	23,077.0	240.0	5,135.0	90.0	3,766.0	54,795.0	2007
Number living in foster home care	20,283	9,360.0	9,595.0	0.0	0.0	0.0	0.0	1,328.0	2007
Number enrolled in food stamp program	529,696	259,862.0	192,958.0	0.0	0.0	0.0	0.0	76,876.0	2006
Number enrolled in WIC	357,487	240,328.0	93,601.0	5,513.0	9,057.0	8,988.0	0.0	0.0	2007
Rate (per 100,000) of juvenile crime arrests	3,939.4	2,811.1	11,894.4	0.0	1,064.3	0.0	0.0	0.0	2006
Percentage of high school drop-outs (grade 9 through 12)	2.4	1.8	4.5	3.0	1.9	0.0	0.0	0.0	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)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	3,035,633.0	205,948.0	0.0	2006
Percent in household headed by single parent	0.0	0.0	0.0	2006
Percent in TANF (Grant) families	4.9	14.4	0.0	2006
Number enrolled in Medicaid	872,194.0	128,286.0	0.0	2006
Number enrolled in SCHIP	177,113.0	5,204.0	0.0	2007
Number living in foster home care	18,540.0	1,743.0	0.0	2007
Number enrolled in food stamp program	449,465.0	80,231.0	0.0	2006
Number enrolled in WIC	292,039.0	62,847.0	0.0	2007
Rate (per 100,000) of juvenile crime arrests	0.0	5,373.2	0.0	2006
Percentage of high school drop-outs (grade 9 through 12)	0.0	6.0	0.0	2006

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

**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? Yes Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	0
Living in urban areas	2,872,160
Living in rural areas	369,421
Living in frontier areas	0
<b>Total - all children 0 through 19</b>	<b>3,241,581</b>

**Note:**

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

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

**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? Yes Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	12,015,358.0
Percent Below: 50% of poverty	5.2
100% of poverty	12.1
200% of poverty	28.8

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

**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? Yes Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	2,749,779.0
Percent Below: 50% of poverty	7.8
100% of poverty	16.9
200% of poverty	36.4

## FORM NOTES FOR FORM 21

'More than one race reported' is not collected for HSI #06, HSI #07, HSI#08 and all numbers with the exception of SCHIP on HSI #09.

HSI #06A: First age category is infants under 1. Source: PA State Data Center.

HSI #06B: First age category is infants under 1. Source: PA State Data Center.

HSI #07A: "Native Hawaiian or other Pacific Islander" included in Asian.  
Source: PA Department of Health, Bureau of Health Statistics and Research.

HSI #07B: Source: PA Department of Health, Bureau of Health Statistics and Research.

HSI #08A: First age category is infants under 1. "Native Hawaiian or other Pacific Islander" included in Asian. Source: PA Department of Health, Bureau of Health Statistics and Research.

HSI #08B: First age category is infants under 1. Source: PA Department of Health, Bureau of Health Statistics and Research.

HSI #09: All Children 0 through 19 – Native Hawaiian or Other Pacific Islander included in Asian.

Percent in TANF (Grant) families is for SFY 2006-2007.  
Source: PA Department of Public Welfare

Data are for SFY 2006-2007.  
Source: PA Department of Public Welfare

Number enrolled in SCHIP – figures are as of 12/31/07.  
Source: PA Department of Insurance

Number living in foster home care is as of 09/30/07. Children may be counted by more than one category of race. Total number living in foster home care as of 09/30/07 is 20,169.  
Source: PA Department of Public Welfare

Data are for SFY 2006-2007.  
Source: PA Department of Public Welfare

Number enrolled in WIC white and black are non-Hispanic white and black. Hispanics in "Number enrolled in WIC" are counted as a race and are included in the "other and unknown" column.

Rate (per 100,000) of juvenile crime arrests is based on population under age 18 and all arrests under age 18. Native Hawaiian or Other Pacific Islander is included in Asian.  
Source: Official PA State Police Web Site

Percentage of high school drop-outs (grade 9 through 12) white and black are non-Hispanic white and black and Native Hawaiian or Other Pacific Islander is included in Asian. Data are for school year 2006-2007.  
Source: PA Department of Education

HSI #10: see HSI - level note

HSI #11: Source: U.S. Census Bureau, 2006 American Community Survey

HSI #12: Data provided are for children 0-17 years of age. Source: U.S. Census Bureau, 2006 American Community Survey

## FIELD LEVEL NOTES

- Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
NA
- Section Number:** Indicator 09A  
**Field Name:** HSIRace\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Percent in TANF (Grant) families is for SFY 2006-2007.  
Source: PA Department of Public Welfare
- Section Number:** Indicator 09A  
**Field Name:** HSIRace\_MedicaidNo  
**Row Name:** Number enrolled in Medicaid  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Data are for SFY 2006-2007.  
Source: PA Department of Public Welfare
- Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Number enrolled in SCHIP – figures are as of 12/31/07.  
Source: PA Department of Insurance
- Section Number:** Indicator 09A  
**Field Name:** HSIRace\_FoodStampNo  
**Row Name:** Number enrolled in food stamp program  
**Column Name:**

**Year:** 2009  
**Field Note:**  
Data are for SFY 2006-2007.  
Source: PA Department of Public Welfare

6. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_WICNo  
**Row Name:** Number enrolled in WIC  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
This is calendar year 2007 data from the WIC database. Please note that the total number represents the number of race and ethnicity indicators, and is not indicative of individuals. Each participant is able to select more than one race.
7. **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:**  
Percentage of high school drop-outs (grade 9 through 12) white and black are non-Hispanic white and black and Native Hawaiian or Other Pacific Islander is included in Asian. Data are for school year 2006-2007.  
Source: PA Department of Education
8. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
NA
9. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Percent in TANF (Grant) families is for SFY 2006-2007.  
Source: PA Department of Public Welfare
10. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_MedicaidNo  
**Row Name:** Number enrolled in Medicaid  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Number enrolled in Medicaid is for SFY 2006-2007.  
Source: PA Department of Public Welfare
11. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Number enrolled in SCHIP is as of 12/31/07.  
Source: Department of Insurance
12. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_FoodStampNo  
**Row Name:** Number enrolled in food stamp program  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Number enrolled in food stamp program is for SFY 2006-2007.  
Source: PA Department of Public Welfare
13. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_WICNo  
**Row Name:** Number enrolled in WIC  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
This is calendar year 2007 data from the WIC database. Please note that the total number represents the number of race and ethnicity indicators, and is not indicative of individuals. Each participant is able to select more than one race.
14. **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:**  
Percentage of high school drop-outs (grade 9 through 12) data is for school year 2006-2007.  
Source: PA Department of Education
15. **Section Number:** Indicator 10  
**Field Name:** Metropolitan  
**Row Name:** Living in metropolitan areas  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
NA
16. **Section Number:** Indicator 10  
**Field Name:** Urban

**Row Name:** Living in urban areas

**Column Name:**

**Year:** 2009

**Field Note:**

HSI #10: "Living in urban areas" is the number of children ages 0-19 in 2006 living in counties designated as urban (50% or more of the total population live in urban areas) in the 2000 U.S. Census. "Living in rural areas" is the number of children ages 0-19 in 2006 living in counties designated as rural (less than 50% of total population live in urban areas) in the 2000 U.S. Census. No standard definition provided for "metropolitan" area.

17. **Section Number:** Indicator 10

**Field Name:** Rural

**Row Name:** Living in rural areas

**Column Name:**

**Year:** 2009

**Field Note:**

HSI #10: "Living in urban areas" is the number of children ages 0-19 in 2006 living in counties designated as urban (50% or more of the total population live in urban areas) in the 2000 U.S. Census. "Living in rural areas" is the number of children ages 0-19 in 2006 living in counties designated as rural (less than 50% of total population live in urban areas) in the 2000 U.S. Census. No standard definition provided for "metropolitan" area.

18. **Section Number:** Indicator 10

**Field Name:** Frontier

**Row Name:** Living in frontier areas

**Column Name:**

**Year:** 2009

**Field Note:**

NA

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

**Field Name:** HSIRace\_FosterCare

**Row Name:** Number living in foster home care

**Column Name:**

**Year:** 2009

**Field Note:**

Number living in foster home care is as of 09/30/07.

Source: PA Department of Public Welfare

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

**Field Name:** HSIethnicity\_FosterCare

**Row Name:** Number living in foster home care

**Column Name:**

**Year:** 2009

**Field Note:**

Number living in foster home care as of 09/30/07.

Source: PA Department of Public Welfare.