

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

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FORM 2
MCH BUDGET DETAILS FOR FY 2009

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

STATE: RI

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

A. Preventive and primary care for children:

\$ 740,566 (39.82%)

B. Children with special health care needs:

\$ 578,921 (31.12%)

(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:

\$ 106,884 (5.75%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

\$ 1,860,000

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 471,103

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 1,784,133

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

\$ 0

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

\$ 4,985,383

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

\$ 16,896,062

7. TOTAL STATE MATCH (Lines 3 through 6)

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

\$ 1,875,000

\$ 23,665,578

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

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

\$ 25,996,681

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: \$ 110,926

c. CISS: \$ 151,509

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 52,687

f. EMSC: \$ 0

g. WIC: \$ 24,021,092

h. AIDS: \$ 7,575,030

i. CDC: \$ 13,025,190

j. Education: \$ 187,232

k. Other:

EPA \$ 293,337

federal medicaid \$ 1,566,456

HRSA \$ 675,416

Other (OSHA, NESHP) \$ 562,637

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

\$ 48,221,512

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 74,218,193

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: OtherFunds
Row Name: Other Funds
Column Name:
Year: 2009
Field Note:
Does not include \$1422578.88 in Medicaid and OSHA state match funds

FORM 3
STATE MCH FUNDING PROFILE

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

STATE: RI

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 1,790,611	\$ 2,447,361	\$ 1,768,713	\$ 2,214,593	\$ 1,768,713	\$ 1,572,786
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 175,000	\$ 523,720	\$ 262,026	\$ 380,473	\$ 290,150	\$ 618,600
3. State Funds <i>(Line3, Form 2)</i>	\$ 7,014,844	\$ 9,313,074	\$ 6,936,010	\$ 2,897,680	\$ 3,001,829	\$ 2,594,550
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 7,140,306	\$ 3,867,464	\$ 5,723,009	\$ 4,104,095	\$ 5,685,269	\$ 5,131,267
7. Subtotal <i>(Line8, Form 2)</i>	\$ 16,120,761	\$ 16,151,619	\$ 14,689,758	\$ 9,596,841	\$ 10,745,961	\$ 9,917,203
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 26,745,904	\$ 31,748,830	\$ 30,848,458	\$ 27,066,952	\$ 27,955,087	\$ 26,768,821
9. Total <i>(Line11, Form 2)</i>	\$ 42,866,665	\$ 47,900,449	\$ 45,538,216	\$ 36,663,793	\$ 38,701,048	\$ 36,686,024
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

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

STATE: RI

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 1,860,000	\$ 2,036,820	\$ 1,860,000	\$ 0	\$ 1,860,000	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 250,000	\$ 458,166	\$ 200,000	\$ 0	\$ 471,103	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 3,961,639	\$ 2,929,653	\$ 3,676,035	\$ 0	\$ 1,784,133	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 4,985,383	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 6,875,852	\$ 6,862,779	\$ 18,186,461	\$ 0	\$ 16,896,062	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 12,947,491	\$ 12,287,418	\$ 23,922,496	\$ 0	\$ 25,996,681	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 26,507,197	\$ 27,957,936	\$ 26,566,186	\$ 0	\$ 48,221,512	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 39,454,688	\$ 40,245,354	\$ 50,488,682	\$ 0	\$ 74,218,193	\$ 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:
Includes carryforward from previous period
2. **Section Number:** Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2006
Field Note:
carryforward for next period higher than expected
3. **Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2007
Field Note:
Includes carry forward from previous period. Carry forward for 07 higher than expected. Some expenses related to Infants and toddlers were transferred to DHS. State constrains to hire personnel and delays in contracting processes.
4. **Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2006
Field Note:
State of RI implemented a new financial system, which caused delays in contracting processes.
5. **Section Number:** Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2007
Field Note:
State Budget cuts
6. **Section Number:** Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2006
Field Note:
Reduction of School Based clinic state funds

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

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

STATE: RI

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 585,818	\$ 910,457	\$ 723,443	\$ 772,495	\$ 990,052	\$ 970,817
b. Infants < 1 year old	\$ 5,435,448	\$ 2,623,154	\$ 6,064,613	\$ 2,476,230	\$ 2,866,049	\$ 2,807,823
c. Children 1 to 22 years old	\$ 2,600,859	\$ 3,629,973	\$ 2,370,680	\$ 3,761,170	\$ 4,191,032	\$ 3,846,356
d. Children with Special Healthcare Needs	\$ 7,355,387	\$ 8,761,310	\$ 5,401,124	\$ 2,438,068	\$ 2,528,303	\$ 2,031,882
e. Others	\$ 0	\$ 61,375	\$ 0	\$ 81,865	\$ 49,196	\$ 24,436
f. Administration	\$ 143,249	\$ 165,350	\$ 129,898	\$ 67,013	\$ 121,329	\$ 235,889
g. SUBTOTAL	\$ 16,120,761	\$ 16,151,619	\$ 14,689,758	\$ 9,596,841	\$ 10,745,961	\$ 9,917,203

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

a. SPRANS	\$ 568,226	\$ 508,071	\$ 286,322
b. SSDI	\$ 98,286	\$ 121,611	\$ 64,286
c. CISS	\$ 0	\$ 0	\$ 0
d. Abstinence Education	\$ 129,592	\$ 208,881	\$ 209,131
e. Healthy Start	\$ 0	\$ 0	\$ 19,679,256
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 17,631,176	\$ 19,517,000	\$ 0
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 3,899,626	\$ 4,432,764	\$ 4,308,969
j. Education	\$ 2,438,710	\$ 3,848,705	\$ 0
k. Other			
HSRA	\$ 0	\$ 0	\$ 980,243
Medicaid Match	\$ 0	\$ 0	\$ 1,246,044
TITLE X	\$ 0	\$ 1,254,260	\$ 1,180,836
HRSA	\$ 705,199	\$ 957,166	\$ 0
Title X	\$ 1,275,089	\$ 0	\$ 0
III. SUBTOTAL	\$ 26,745,904	\$ 30,848,458	\$ 27,955,087

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

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

STATE: RI

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 1,071,062	\$ 653,125	\$ 1,897,701	\$ 0	\$ 1,148,892	\$ 0
b. Infants < 1 year old	\$ 4,003,778	\$ 2,172,603	\$ 6,063,186	\$ 0	\$ 2,302,639	\$ 0
c. Children 1 to 22 years old	\$ 5,219,123	\$ 6,885,949	\$ 8,615,818	\$ 0	\$ 13,065,815	\$ 0
d. Children with Special Healthcare Needs	\$ 2,515,602	\$ 2,205,451	\$ 3,402,086	\$ 0	\$ 3,120,267	\$ 0
e. Others	\$ 70,400	\$ 196,430	\$ 3,727,413	\$ 0	\$ 5,915,968	\$ 0
f. Administration	\$ 67,526	\$ 173,860	\$ 216,292	\$ 0	\$ 443,100	\$ 0
g. SUBTOTAL	\$ 12,947,491	\$ 12,287,418	\$ 23,922,496	\$ 0	\$ 25,996,681	\$ 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	\$ 99,810	\$ 100,000	\$ 110,926
c. CISS	\$ 0	\$ 0	\$ 151,509
d. Abstinence Education	\$ 165,277	\$ 70,425	\$ 0
e. Healthy Start	\$ 0	\$ 0	\$ 52,687
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 19,604,165	\$ 19,702,811	\$ 24,021,092
h. AIDS	\$ 0	\$ 0	\$ 7,575,030
i. CDC	\$ 4,115,844	\$ 4,176,414	\$ 13,025,190
j. Education	\$ 0	\$ 0	\$ 187,232
k. Other			
EPA	\$ 0	\$ 0	\$ 293,337
federal medicaid	\$ 0	\$ 0	\$ 1,566,456
HRSA	\$ 0	\$ 1,663,978	\$ 675,416
Other (OSHA, NESHAP)	\$ 0	\$ 0	\$ 562,637
Medicaid match	\$ 0	\$ 852,558	\$ 0
HSRA	\$ 375,000	\$ 0	\$ 0
Medicaid	\$ 1,065,418	\$ 0	\$ 0
Title x	\$ 1,081,683	\$ 0	\$ 0
III. SUBTOTAL	\$ 26,507,197	\$ 26,566,186	\$ 48,221,512

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2007
Field Note:
Significant increase in services for Children (Vaccines)
2. **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:
Significant increase in services for Children (Vaccines)
3. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2007
Field Note:
Significant increase in services for Children (Vaccines)
4. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2007
Field Note:
Significant increase in services for Children (Vaccines)
5. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2006
Field Note:
Investment in Family Outreach Program decreased. Other federal funds utilized
6. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2007
Field Note:
Significant increase in services for Children (Vaccines)
7. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2006
Field Note:
Investments in "Men 2 to Be" programs reduced.
8. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2007
Field Note:
Increases in administrative activities related to state budgets cuts
9. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2006
Field Note:
Increase in Administrative personnel salaries

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: RI

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 2,459,381	\$ 1,338,243	\$ 1,328,515	\$ 514,118	\$ 691,427	\$ 300,222
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 502,314	\$ 2,346,394	\$ 482,631	\$ 1,416,900	\$ 1,369,921	\$ 767,267
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 7,852,933	\$ 5,290,819	\$ 7,391,122	\$ 5,218,806	\$ 4,248,380	\$ 6,843,290
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 5,306,133	\$ 7,176,163	\$ 5,487,490	\$ 2,447,017	\$ 4,436,233	\$ 2,006,424
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 16,120,761	\$ 16,151,619	\$ 14,689,758	\$ 9,596,841	\$ 10,745,961	\$ 9,917,203

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: RI

TYPE OF SERVICE	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 663,508	\$ 296,338	\$ 405,866	\$ 0	\$ 1,173,502	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 1,776,432	\$ 290,889	\$ 964,137	\$ 0	\$ 1,690,156	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 7,898,729	\$ 8,299,280	\$ 20,536,077	\$ 0	\$ 14,265,753	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,608,822	\$ 3,400,911	\$ 2,016,416	\$ 0	\$ 8,867,270	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 12,947,491	\$ 12,287,418	\$ 23,922,496	\$ 0	\$ 25,996,681	\$ 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:
Increase in investments in Enabling services, Population based services and infrastructure building
2. **Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2006
Field Note:
Direct Services investments were reduced to increased investments in Enabling Services and Infrastructure Building Services
3. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2007
Field Note:
Decrease in direct services investments
4. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2006
Field Note:
Direct Services investments were reduced to increased investments in Enabling Services (Family planning, Community Partnership Programs, etc) and Infrastructure Building Services
5. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2006
Field Note:
Cost of vaccines and population served increased
6. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2007
Field Note:
Decrease in direct services investments
7. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2006
Field Note:
Direct Services investments were reduced to increased investments in Enabling Services and Infrastructure Building Services

FORM 6

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

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

STATE: RI

Total Births by Occurrence: 13,191

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	13,129	99.5	37	2	2	100
Congenital Hypothyroidism	13,129	99.5	178	14	14	100
Galactosemia	13,129	99.5	4	2	2	100
Sickle Cell Disease	13,129	99.5	6	6	6	100

Other Screening (Specify)

Biotinidase Deficiency	13,129	99.5	3	2	2	100
Cystic Fibrosis	13,129	99.5	35	3	3	100
Hemoglobinopathies	13,129	99.5	10	1	1	100
Homocystinuria	13,129	99.5	48	0	0	
Congenital Adrenal Hyperplasia (CAH)	13,129	99.5	139	1	1	100
Maple Syrup Urine Disease (MSUD)	13,129	99.5	16	0	0	
Medium Chain AcylCo-A Dehydrogenase (MCAD)	13,129	99.5	0	0	0	
Metabolic Conditions	13,129	99.5	64	2	2	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
- (2) Report only those from resident births.
- (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: BirthOccurence
Row Name: Total Births By Occurrence
Column Name: Total Births By Occurrence
Year: 2009
Field Note:
Total occurrence births for 2007 equal 13,191, however 59 infants died within hours of birth and were not screened.

2. **Section Number:** Main
Field Name: SickCellDisease_Presumptive
Row Name: SickCellDisease
Column Name: Presumptive positive screens
Year: 2009
Field Note:
Number of presumptive positive screens and number of confirmed cases are the same as of 05/21/2008.

3. **Section Number:** Main
Field Name: SickCellDisease_Confirmed
Row Name: SickCellDisease
Column Name: Confirmed Cases
Year: 2009
Field Note:
Number of presumptive positive screens and number of confirmed cases are the same as of 05/21/2008.

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: RI

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	7,358	86.3		2.5	10.4	0.8
Infants < 1 year old	13,191	43.7		54.9	1.2	0.2
Children 1 to 22 years old	38,131	33.0		58.8	8.2	
Children with Special Healthcare Needs	8,024	57.5		40.0	1.6	0.9
Others	11,467	41.4		21.2	37.4	
TOTAL	78,171					

FORM NOTES FOR FORM 7

Data are estimated and reflect calendar year. Unduplicated count is not yet possible.

The Family Resources Counselors [FRC] and School Based Health Centers [SBHC] Programs are no longer included. Both programs, as of 2007, are no longer funded by HEALTH.

'Other' in column A, includes Family Planning Services provided to non pregnant women aged 23 and older as well as services provided to adults.

Title XXI is part of Rhode Island's extended Medicaid/Rite Care Plan and serves children aged 8-18.

Title V program data does not capture Title XXI as a separate category, rather those who are covered by Title XXI are included in the Rite Care data.

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: RI

Reporting Year: 2007

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	13,191	11,040	1,247	165	555		127	57
Title V Served	13,191	11,040	1,247	165	555		127	57
Eligible for Title XIX	5,763	4,460	856	122	211		87	27
INFANTS								
Total Infants in State	12,365	10,285	1,225	155	525		123	52
Title V Served	12,016	9,967	1,209	155	513		123	49
Eligible for Title XIX	5,657	4,377	843	119	206		87	25

II. UNDUPLICATED COUNT BY ETHNICITY

	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	HISPANIC OR LATINO (Sub-categories by country or area of origin)				
				(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	8,204	2,610	2,377	181	18	799	1,514	98
Title V Served	8,204	2,610	2,377	181	18	799	1,514	98
Eligible for Title XIX	2,896	2,020	847	142	8	659	1,145	66
INFANTS								
Total Infants in State	7,602	2,585	2,178	181	18	792	1,498	96
Title V Served	7,318	2,566	2,132	178	18	784	1,491	95
Eligible for Title XIX	2,812	2,012	833	142	8	656	1,140	66

FORM NOTES FOR FORM 8

2007: Data are provisional.

Approximately 450-520 resident births occur out-of-state and insurance status is seldom reported on these births. Therefore, 'TITLE V SERVED' and 'ELIGIBLE FOR XIX' , reflect only resident births born in Rhode Island.

FIELD LEVEL NOTES

None

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Main

Field Name: calls_2

Row Name: Number of calls received On the State MCH Hotline This reporting period

Column Name: FY

Year: 2007

Field Note:

In 2007 the Family Health Information Line became the point of contact for all calls received at HEALTH. The information line became the Rhode Island Department of Health Information Line.

2007 Calendar year total reported.

Of the total 6,590 calls received; 2,255 were for other HEALTH divisions, 1,493 were about immunizations, 1080 were about WIC and 504 were about Lead and Mold.

The primary type of caller was consumer [5,574] and 416 callers spoke Spanish.

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

1. State MCH Administration:
(max 2500 characters)

RI Department of Health, Division of Community, Family Health and Equity administers RI's title V Program. It strives to preserve, protect and promote the health and development of all women of maternal age, children and families with a goal of reducing and preventing diseases and disabilities. The Division develops and supports community-based programs and systems of care that address the health and development needs for all children and their families, evaluates the health and development of children with a focus on policy development and planning, and invests in information, education, public engagement, and community partnership development with a focus on prevention. The Division involved parents in all aspects of Community, Family Health and Equity activities. The Division is home to several major public health programs and services for children and families, including WIC, Immunization, Lead Poisoning Prevention, School Health, Special Health Care Needs and Family Planning.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <u>1,860,000</u>
3. Unobligated balance (Line 2, Form 2)	\$ <u>471,103</u>
4. State Funds (Line 3, Form 2)	\$ <u>1,784,133</u>
5. Local MCH Funds (Line 4, Form 2)	\$ <u>0</u>
6. Other Funds (Line 5, Form 2)	\$ <u>4,985,383</u>
7. Program Income (Line 6, Form 2)	\$ <u>16,896,062</u>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <u>25,996,681</u>

9. Most significant providers receiving MCH funds:

<u>Rhode Island Parent Information Network</u>
<u>Rhode Island Family Voices</u>
<u>Visiting Nurse Agencies</u>
<u>Family Planning Agencies</u>

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

a. Pregnant Women	<u>7,358</u>
b. Infants < 1 year old	<u>13,191</u>
c. Children 1 to 22 years old	<u>38,131</u>
d. CSHCN	<u>8,024</u>
e. Others	<u>11,467</u>

11. Statewide Initiatives and Partnerships:

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

School-based Health Center Program: The DFH supports eight school-based health centers to offer critical health services to students who may not have source for needed care. School-based health centers provide comprehensive health and mental health services to children and youth. Some of the school-based health centers also provide oral health services. In RI, school-based health centers primarily serve low-income adolescents living in racially, ethnically diverse urban communities. Pediatric Practice Enhancement Project: The PPEP promotes the medical home model of care by fostering partnerships among families, pediatric practices, and available community resources. The project assists and supports pediatric primary and specialty care practices in providing improved short and long-term health outcomes for children with special health care needs and their families within a medical home. The project places and support trained Parent Consultants in clinical settings to link families with community resources, assist physicians and families in accessing specialty services, and identify systems barriers to coordinated care. The primary role of the Parent Consultant is to create linkages between the family, pediatric practice, and the community as a whole.

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

Newborn Screening Program: Newborn Screening Program assures early screening, diagnosis and intervention for all newborns born in RI. The program provides screening and follow-up for 29 inherited conditions, including hearing screening. The program also screens newborns for medical, social and economic risk factors for developmental delay. The Family Outreach Program provides follow-up for the Newborn Screening Program to ensure that newborns with metabolic disorders, hearing loss, or developmental risks are connected to appropriate medical and social services. Newborn Screening data is housed in KIDSNET, the state's confidential, computerized child health information system. Immunization Program: The Immunization Program provides at no cost all recommended childhood vaccines to Vaccine for Children Program-enrolled pediatricians and family practitioners statewide. Outreach and culturally appropriate immunization education activities for children are featured throughout the state. The program primarily targets low-income children and adolescents living in racially/ethnically diverse communities. The Immunization Program links with other Division of Family Health programs to ensure that children who are most at risk for under-immunization are reached. RI currently enjoys one of the highest childhood immunization rates in the nation. The program also supports the "Vaccinate Before You Graduate" initiative that provides vaccines to high school seniors at participating public and private schools statewide at no cost.

c. Infrastructure Building Services:
(max 2500 characters)

KIDSNET: KIDSNET is RI's confidential, computerized child health information system. KIDSNET serves families, pediatric providers and public health programs, including Immunization, WIC, Early Intervention, and many others. The purpose of KIDSNET is to help make sure that all children in RI are as healthy as possible by getting the right health screening and preventive care at the right time. KIDSNET started collecting information from all births in RI on January 1, 1997. KIDSNET also obtains information about children born out of state if they see a RI participating doctor or receive services at a KIDSNET participating program. For health care providers and other authorized users, KIDSNET provides easy access to key patient information including immunization records, results from metabolic, hearing and developmental risk assessments for newborns, results from lead tests, and other information such as home visiting and participation in the Early Intervention and WIC Programs. KIDSNET allows users to run lists of patients who are behind on immunizations. Successful Start Early Childhood Systems Initiative: Successful Start is a statewide collaborative effort to strengthen RI's system of service for young children and families. The project is focused on four critical domains of early childhood health and development; Early Care & Education, Medical Homes/Health Care, Parent Education & Family Support, and Social-Emotional Development. The Successful Start Early Childhood Systems Plan is the result of a two-year strategic planning

and systems-building process undertaken by an enthusiastic group of partners working to improve RI's system of services for young children and families. Successful Start goals focus on effective state policies and systems changes that are likely to have the greatest positive impact on children and families statewide and in local communities.

12. The primary Title V Program contact person:

Name William Hollinshead
Title Medical Director
Address 3 Capitol Hill room 302
City Providence
State RI
Zip 02908
Phone 401-222-4655
Fax 401-222-1442
Email William.Hollinshead@health.ri.gov
Web _____

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

Name Deborah Garneau
Title Chief, Spec Health Care Needs
Address 3 Capitol Hill room 302
City Providence
State RI
Zip 02908
Phone 401-222-5929
Fax 401-222-1442
Email Deborah.Garneau@health.ri.gov
Web _____

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: RI

Form Level Notes for Form 11

2007 data are considered provisional. Previous years of data are updated when numbers are finalized. 2000 US Census was used for years prior to 2004. 2005 Rhode Island Projections were used for 2004 and 2005. 2006 US Census estimates were used for 2006 and 2007, else other source will be listed.

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	99.2	99.2	99.5	99.5	99.5
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	26	22	19	20	33
Denominator	26	22	19	20	33

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	99.6	99.6	99.6	99.6	99.6
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

None

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	68.6	68.6	68.6	70	70
Annual Indicator	68.6	68.6	68.6	68.6	61.4
Numerator					
Denominator					

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	61.4	61.4	61.4	63	63
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2007
Field Note:
 Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.
- 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.
- Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2005
Field Note:
 SLAITS-Rhode Island data for 2002 are provided. SLAITS Survey is conducted every 5 years.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	53.9	53.9	53.9	55.2	55.2
Annual Indicator	53.9	53.9	53.9	53.9	50.9
Numerator					
Denominator					

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	50.9	50.9	50.9	55.5	55.5
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 #3
Field Name: PM03
Row Name:
Column Name:
Year: 2007
Field Note:
 Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.
- 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.
- Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2005
Field Note:
 SLAITS-Rhode Island data for 2002 are provided. SLAITS Survey is conducted every 5 years.

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	68.9	68.9	68.9	70.2	70.2
Annual Indicator	68.9	68.9	68.9	68.9	68.2
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?

Final Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	68.2	68.2	68.1	70.2	70.2
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 #4
Field Name: PM04
Row Name:
Column Name:
Year: 2007
Field Note:
 Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.
- 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.
- Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2005
Field Note:
 SLAITS-Rhode Island data for 2002 are provided. SLAITS Survey is conducted every 5 years.

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	78.8	78.8	78.8	80	80
Annual Indicator	78.8	78.8	78.8	78.8	87.6
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 Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	87.6	87.6	87.6	80	80
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:
 Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.
- 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.
- Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2005
Field Note:
 SLAITS-Rhode Island data for 2002 are provided. SLAITS Survey is conducted every 5 years.

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	5.8	5.8	5.8	6.4	6.4
Annual Indicator	5.8	5.8	5.8	5.8	37.6
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 Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	37.6	37.6	37.6	38.4	38.4
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 #6

Field Name: PM06

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

2. **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.

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

Field Name: PM06

Row Name:

Column Name:

Year: 2005

Field Note:

SLAITS-Rhode Island data for 2002 are provided. SLAITS Survey is conducted every 5 years.

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	85.5	87.7	86.5	86.5	80.5
Annual Indicator	85.2	86.7	83.1	82.2	84.4
Numerator	10,829	11,180	10,968	10,504	10,710
Denominator	12,710	12,895	13,199	12,778	12,690

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	84.5	84.5	84.9	85	85
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 for 2007 is estimated.

Data for this performance measure reflects the 4:3:1:3:3 series collected through the National Immunization Survey. Data will be updated when final survey results are available.

Denominator is estimated based on number of resident births that occurred two years prior.

2. Section Number: Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2006

Field Note:

Data for 2006 is provisional.

Data for this performance measure reflects the 4:3:1:3:3 series collected through the National Immunization Survey. Data will be updated when final survey results are available.

Denominator is estimated based on number of resident births that occurred two years prior.

3. Section Number: Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2005

Field Note:

Data for this performance measure reflects the 4:3:1:3:3 series collected through the National Immunization Survey. Data will be updated when final survey results are available.

Denominator is estimated based on number of resident births that occurred two years prior.

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	21.3	21	20.5	18.3	19.3
Annual Indicator	19.6	18.3	18.3	18.1	18.0
Numerator	386	361	361	388	386
Denominator	19,730	19,730	19,730	21,390	21,390

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	18.3	19	18.8	18.7	18.5
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

None

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	51.5	51.7	51.9	54	34.3
Annual Indicator	48.5	31.4	32.7	33.2	36.3
Numerator	7,094	4,600	4,780	4,230	4,625
Denominator	14,628	14,628	14,628	12,740	12,740

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	36.3	36.3	36.3	36.9	37.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2007

Field Note:

The Basic Screening Survey (BSS) was conducted in the fall of 2007. The BSS was funded by the CDC and conducted in 35 States. The actual number of 3rd graders screened was 1303.

Denominator from US Census estimate for 2006.

2. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2006

Field Note:

Data are estimated.

Denominator from US Census estimate for 2006.

3. Section Number: Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2005

Field Note:

2005 Data are estimated.

As part of Rhode Island's State Systems Development Initiative (SSDI) grant, the Department of Health along with the Dental Program are interested in obtaining information from school records. This involves working with the Department of Education to obtain parental consent. Such permission is required under federal educational privacy laws (FERPA).

In addition, The Robert Wood Johnson Foundation provided \$737,308 for oral health projects. The grant was administered by The Rhode Island Foundation and organizations were invited to apply for funds to: increase the supply of dentists, dental hygienists and dental assistants by increasing the number of graduates from training programs in the state; increase the capacity of dental safety net providers that serve low-income or underserved children and adults; and expand the "Providence Smiles" model - a school-linked dental program - to the state's core cities.

Grants were awarded to 12 organizations for 15 projects throughout the state for an 18-month period.

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	1	1.5	1.5	1.5	1.5
Annual Indicator	2.1				
Numerator	4				
Denominator	194,965	186,874	186,874	181,152	181,152

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?

Yes Yes Yes

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	1.5	1.5	1.5	1.5	1.5
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 #10

Field Name: PM10

Row Name:

Column Name:

Year: 2007

Field Note:

Data are for children aged 1 -14.

Denominator is from the US 2006 estimated Census.

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

Field Name: PM10

Row Name:

Column Name:

Year: 2006

Field Note:

Data are for children aged 1 -14.

Denominator is from the US 2006 estimated Census.

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

Field Name: PM10

Row Name:

Column Name:

Year: 2005

Field Note:

Data are for children aged 1 -14.

Denominator is estimated using Statewide Planning numbers for 2005.

PERFORMANCE MEASURE # 11

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

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective				28.5	31.5
Annual Indicator		28.3	32.9	32.9	31.2
Numerator		3,616	4,175	4,070	3,858
Denominator		12,778	12,690	12,370	12,365

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	32.5	32.5	32.7	33	33
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:
 2007 data from United States National Immunization Survey, 2004 Births.
- Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2006
Field Note:
 2006 data are estimated.
- Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
 Data from National Immunization Data [NIS] for 2004.

Exclusive breastfeeding was defined in the 2004 study as ONLY breast milk - no solids, no water and no other liquids. Previously, exclusive breastfeeding included breast milk and water.

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	99.3	99.3	99.5	99.5	96.5
Annual Indicator	99.6	99.6	99.4	96.0	97.3
Numerator	13,705	13,468	13,336	12,597	12,783
Denominator	13,763	13,521	13,416	13,121	13,139

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	97.3	97.3	96.6	96.8	96.8
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:** Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2007

Field Note:

Data for 2007 was provided by the Kidsnet Database and reflects total screened before DISCHARGE.

Denominator reflects births occurring in Rhode Island minus 52 infants that died within hours of birth.

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

Field Name: PM12

Row Name:

Column Name:

Year: 2006

Field Note:

Data for 2006 was provided by the Family Health's Kidsnet Database and reflects total screened before DISCHARGE. Data for 2001 through 2005 were provided by the Rhode Island Hearing Assessment Program [RIHAP] which was unable to select infants screened before discharge.

Denominator reflects births occurring in Rhode Island minus 58 infants that died within hours of birth.

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

Field Name: PM12

Row Name:

Column Name:

Year: 2005

Field Note:

Data reflect births occurring in Rhode Island and should be considered estimated. VLBW infants that died within days or infants that died within hours are excluded from the denominator. Data for 2001 through 2005 were provided by the Rhode Island Hearing Assessment Program [RIHAP].

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2003	2004	2005	2006	2007
Annual Performance Objective	4.7	4.7	5.4	7.2	7.5
Annual Indicator	5.2	7.2	7.6	4.1	5.2
Numerator	12,890	18,180	19,114	9,735	12,347
Denominator	247,822	252,500	251,500	237,451	237,451

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	5.7	5.7	5.7	6	6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2007
Field Note:
 2007 Data are estimated.

Data is from US Census Bureau March Current Population Survey [CPS]:
 Table HIA-5: Health Insurance Coverage Status and Type of Coverage by State - Children under 18. Data are updated to reflect the most recent tables provided.

- Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2006
Field Note:
 Data is from US Census Bureau March Current Population Survey [CPS]:
 Table HIA-5: Health Insurance Coverage Status and Type of Coverage by State - Children under 18. Data are updated to reflect the most recent tables provided.

- Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2005
Field Note:
 Data is from US Census Bureau March Current Population Survey [CPS]:
 Table HIA-5: Health Insurance Coverage Status and Type of Coverage by State - Children under 18. Data are updated to reflect the most recent tables provided.

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				42.3	36.2
Annual Indicator			42.0	35.6	35.6
Numerator			4,930	3,826	4,443
Denominator			11,737	10,753	12,482

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	35.9	35.6	35.8	35.8	35.8
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:** Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2007

Field Note:

Data reflects children aged 24 to 59 months old. Rhode Island's WIC data system changed in June 2006. The new system retains the same child idnum which reduces duplicates.

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

Field Name: PM14

Row Name:

Column Name:

Year: 2006

Field Note:

Data reflects children aged 24 to 59 months old. Rhode Island's WIC data system changed in June 2006. The new system retains the same child idnum which reduces duplicates.

Unable to revise data for 2005. Data for 2005 should be:

Performance Indicator 35.8%

Numerator 4207

Denominator 11750

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

Field Name: PM14

Row Name:

Column Name:

Year: 2005

Field Note:

Data available for only 2004 and 2005. The average of the 2 years was 42.3%. The target for 2006 became 42.3%.

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				11.7	11.5
Annual Indicator		11.3	11.7	13.4	13.4
Numerator		1,359	1,382	1,548	1,548
Denominator		12,024	11,827	11,520	11,520

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	12.9	12.9	12.7	12.7	12.4
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 #15

Field Name: PM15

Row Name:

Column Name:

Year: 2007

Field Note:

Data for 2007 are estimated..

Data for PRAMS 2007 will not be completed until July 2008 and the weighted data for 2007 will not be available to states until Fall of 2008.

- Section Number:** Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2006

Field Note:

Data for 2006 are estimated..

Data for PRAMS 2006 will not be completed until July 2007 and the weighted data for 2006 will not be available to states until Spring of 2008.

- Section Number:** Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2005

Field Note:

Source of data is the Rhode Island PRAMS program for 2003. Data are for Rhode Island resident births occurring in Rhode Island and unknown or blank responses are excluded.

The Annual Performance Objective for 2006 reflects the average of both 2002 and 2003 data.

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	4	4	4	5.3	5
Annual Indicator	2.7	9.3			
Numerator	2	7			
Denominator	75,445	75,445	82,818	81,557	81,557

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?

Yes Yes Yes

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	3.7	3.7	3.7	4	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 #16

Field Name: PM16

Row Name:

Column Name:

Year: 2007

Field Note:

The US Census estimates for 2006 are used for 2006 and 2007.

Data are provisional and todate, there are 5 events for the year and the average of the last 3 years [2005-2007] is 5 events.

2. **Section Number:** Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2006

Field Note:

Due to small numbers, this performance measure fluctuates from year to year.

3. **Section Number:** Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2005

Field Note:

Due to small numbers, this performance measure fluctuates from year to year.

PERFORMANCE MEASURE # 17

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

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	93.2	93.5	93.5	94.2	94.2
Annual Indicator	96.1	93.0	90.6	91.8	92.5
Numerator	219	173	173	168	198
Denominator	228	186	191	183	214

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	92.8	92.5	92.5	92.8	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

- Section Number:** Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2007
Field Note:
 Data reflects VLBW babies born in Rhode Island hospitals to Rhode Island residents. Hospital of birth is not entered for Rhode Island resident births occurring out-of-state.
- Section Number:** Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2006
Field Note:
 Data reflects VLBW babies born in Rhode Island hospitals to Rhode Island residents. Hospital of birth is not entered for RI resident births occurring out-of-state.
- Section Number:** Performance Measure #17
Field Name: PM17
Row Name:
Column Name:
Year: 2005
Field Note:
 Data reflects VLBW babies born in Rhode Island hospitals to Rhode Island residents. Hospital of birth is not entered for RI resident births occurring out-of-state.

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	91.5	91.8	90.2	89.4	85
Annual Indicator	90.8	89.6	89.8	84.5	82.1
Numerator	10,989	10,759	10,541	10,211	9,909
Denominator	12,107	12,002	11,744	12,086	12,064

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	82.5	84.5	85.2	85.2	85.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2007

Field Note:

Data for 2007 reflects calendar year and are provisional.

Starting in 2006, source for Month Prenatal Care Began, changed from mother's work sheet [self-reported] to OB chart provided hospital of birth.

Birth records with unknown or missing 'month of prenatal care' are excluded from the denominator.

2. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2006

Field Note:

Starting in 2006, source for Month Prenatal Care Began, changed from mother's work sheet [self-reported] to OB chart provided hospital of birth.

Birth records with unknown or missing 'month of prenatal care' are excluded from the denominator.

3. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2005

Field Note:

Data reflects calendar year.

Prior to 2003, data reflected Rhode Island resident births occurring in Rhode Island.

Due to system changes in Vital Records, out-of-state events are now entered in a timely manner. Therefore, starting with 2003, data reflects all Rhode Island resident births to date. Birth records with unknown or missing 'month of prenatal care' are excluded from the denominator.

STATE PERFORMANCE MEASURE # 1

Percent of PRAMS population who had a diagnosis of depression before or during pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				15.2	15.2
Annual Indicator		14.8	12.4	14.6	13.1
Numerator		221	1,465	1,653	1,545
Denominator		1,498	11,802	11,334	11,754
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	13.7	13.7	13.2	13.2	13.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

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

Field Name: SM1

Row Name:

Column Name:

Year: 2007

Field Note:

2007: Since collection of PRAMS surveys for 2007 is not yet completed, data are estimate.

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

Field Name: SM1

Row Name:

Column Name:

Year: 2005

Field Note:

Unable to update data for 2004. Data for 2004 reflects unweighted data. else weighted data for 2004 is 14.6%.

STATE PERFORMANCE MEASURE # 2

Percent of children aged 2-5 enrolled in the WIC Program with BMI's >=95th percentile

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				23.2	18.2
Annual Indicator		19.1	18.7	17.2	17.4
Numerator		2,219	2,195	1,854	2,167
Denominator		11,640	11,750	10,753	12,482
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	17.7	17.5	17.2	17.2	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 #2
Field Name: SM2
Row Name:
Column Name:
Year: 2007
Field Note:
 Data reflects children aged 24 to 59 months old. Rhode Island's WIC data system changed in June 2006. The new system retains the same child idnum which reduces duplicates
- Section Number:** State Performance Measure #2
Field Name: SM2
Row Name:
Column Name:
Year: 2006
Field Note:
 Data reflects children aged 24 to 59 months old. Rhode Island's WIC data system changed in June 2006. The new system retains the same child idnum which reduces duplicates

STATE PERFORMANCE MEASURE # 3

Percent of Rhode Island resident families with at-risk newborns that received a home visit from the Family Outreach Program within the newborn period (<=90 days)

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	53.5	54	54.5	55	55
Annual Indicator	53.0	58.5	56.4	56.1	45.3
Numerator	3,588	3,960	3,894	3,960	3,308
Denominator	6,768	6,768	6,902	7,065	7,300
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	47	49	51.2	52.7	52.7
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:** State Performance Measure #3
Field Name: SM3
Row Name:
Column Name:
Year: 2007
Field Note:

The number of Rhode Island Resident newborns who received a home visit declined in 2007 because the primary contractor providing the services [VNA Care of NE], decided to close their pediatric service division. Only children with the most significant risk profiles received visits. The capacity of the Home Visiting Program remains to be determined in 2008 due to budget constraints.

STATE PERFORMANCE MEASURE # 4

Percent of children aged less than 6 who live in the core cities and have blood lead levels at or above 10ug/dL

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	<u>12.5</u>	<u>11</u>	<u>10.5</u>	<u>6</u>	<u>5</u>
Annual Indicator	<u>8.2</u>	<u>7.6</u>	<u>5.8</u>	<u>4.7</u>	<u>4.0</u>
Numerator	<u>1,340</u>	<u>1,226</u>	<u>916</u>	<u>746</u>	<u>611</u>
Denominator	<u>16,334</u>	<u>16,225</u>	<u>15,664</u>	<u>15,721</u>	<u>15,224</u>
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	<u>4.5</u>	<u>4</u>	<u>3.7</u>	<u>3.7</u>	<u>3.7</u>
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

None

STATE PERFORMANCE MEASURE # 6

Ratio of the Black or African American prematurity rate to the White prematurity rate

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				1.5	1.4
Annual Indicator	1.1	1.3	1.3	1.2	1.2
Numerator	2.8	12.2	13	12	12.2
Denominator	2.5	9.6	9.9	10.3	10.6
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	1.3	1.2	1.2	1.2	1.2
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

None

STATE PERFORMANCE MEASURE # 7

Percent of children (who have had at least one immunization from a primary care provider) with complete immunization series (4:3:1:3) and at least one lead screening by age 2

	Annual Objective and Performance Data				
	2003	2004	2005	2006	2007
Annual Performance Objective				55.7	53.2
Annual Indicator			53.2	53.0	49.7
Numerator			6,307	6,150	5,948
Denominator			11,848	11,608	11,957
Is the Data Provisional or Final?				Final	Provisional

	Annual Objective and Performance Data				
	2008	2009	2010	2011	2012
Annual Performance Objective	50.2	50.7	51.7	52.2	53.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2007
Field Note:
 Medical Home Indicator Measure (Comprehensive)

All children with a most recent address of RI, who have had at least one immunization reported to KIDSNET by a Primary Care Provider are included in this measure. The numerator includes those who have had at least one lead test and completed the 4:3:1:3 (DTP, Polio, MMR, Hib) immunization series by their second birthday. This year's data includes children who were born in 2005 and turned 2 during 2007 and shows only 50% of children with both the immunization series and a lead test by the second birthday.

It is important to keep in mind that in order for a child to be considered complete for immunization, 11 separate immunizations had to be reported for each child by the second birthday. Failure to report just one of these 11 events means the child is incomplete for immunization. Nationally 40% of children in registries had incomplete immunization records, resulting in lower estimates of vaccine coverage when compared to the National Immunization Survey with provider verified results.

This measure underestimates actual coverage due to data gaps in KIDSNET. Children who have moved into RI and had their Lead test performed out of state may not have the test reported to KIDSNET. However, the largest gap in data can be attributed to missing immunizations. Immunization data may be missing because a provider has failed to report an individual visit, failed to report an immunization history of a new patient, or used an incorrect vaccine code. Children may also be included who have moved out of state prior to finishing their immunization series.

- Section Number:** State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2006
Field Note:
 Medical Home Indicator Measure (Comprehensive)

All children with a most recent address of RI, who have had at least one immunization reported to KIDSNET by a Primary Care Provider are included in this measure. The numerator includes those who have had at least one lead test and completed the 4:3:1:3 (DTP, Polio, MMR, Hib) immunization series by their second birthday. This year's data includes children who were born in 2004 and turned 2 during 2006 and shows only 53% of children with both the immunization series and a lead test by the second birthday.

It is important to keep in mind that in order for a child to be considered complete for immunization, 11 separate immunizations had to be reported for each child by the second birthday. Failure to report just one of these 11 events means the child is incomplete for immunization. Nationally 40% of children in registries had incomplete immunization records, resulting in lower estimates of vaccine coverage when compared to the National Immunization Survey with provider verified results.

This measure underestimates actual coverage due to data gaps in KIDSNET. Children who have moved into RI and had their Lead test performed out of state may not have the test reported to KIDSNET. However, the largest gap in data can be attributed to missing immunizations. Immunization data may be missing because a provider has failed to report an individual visit, failed to report an immunization history of a new patient, or used an incorrect vaccine code. Children may also be included who have moved out of state prior to finishing their immunization series.

- Section Number:** State Performance Measure #7
Field Name: SM7
Row Name:
Column Name:
Year: 2005
Field Note:
 Medical Home Indicator Measure (Comprehensive)

All children with a most recent address of RI, who have had at least one immunization reported to KIDSNET by a Primary Care Provider are included in this measure. The numerator includes those who have had at least one lead test and completed the 4:3:1:3 (DTP, Polio, MMR, Hib) immunization series by their second birthday. This year's data includes children who were born in 2003 and turned 2 during 2005 and shows only 53% of children with both the immunization series and a lead test by the second birthday.

9% of the children were missing both a lead test and at least 1 immunization. 4% were missing just a lead test and 43% were missing just immunization(s). It is important to keep in mind that in order for a child to be considered complete for immunization, 11 separate immunizations had to be reported for each child by the second birthday. Failure to report just one of these 11 events means the child is incomplete for immunization. Nationally 40% of children in registries had incomplete immunization records, resulting in lower estimates of vaccine coverage when compared to the National Immunization Survey with provider verified results.

This measure underestimates actual coverage due to data gaps in KIDSNET. Children who have moved into RI and had their Lead test performed out of state may not have the test reported to KIDSNET. However, the largest gap in data can be attributed to missing immunizations. Immunization data may be missing because a provider has failed to report an individual visit, failed to report an immunization history of a new patient, or used an incorrect vaccine code. Children may also be included who have moved out of state prior to finishing their immunization series.

STATE PERFORMANCE MEASURE # 8

Percent of at-risk newborns who live in a neighborhood or community with MCH community systems building partnerships

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				35.5	35.5
Annual Indicator	34.2	35.4	34.4	35.0	36.4
Numerator	2,316	2,434	2,395	2,486	2,685
Denominator	6,768	6,877	6,965	7,112	7,379
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	36.4	36.4	36.8	37.2	37.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- 1. **Section Number:** State Performance Measure #8
- Field Name:** SM8
- Row Name:**
- Column Name:**
- Year:** 2007
- Field Note:**
2007 data are estimated.

STATE PERFORMANCE MEASURE # 9

Percent of licensed child care providers with on-site health consultants

Annual Objective and Performance Data					
	2003	2004	2005	2006	2007
Annual Performance Objective				30	35
Annual Indicator				0.3	0.4
Numerator				148	162
Denominator				423	426
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2008	2009	2010	2011	2012
Annual Performance Objective	40	45	50	55	55
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 #9

Field Name: SM9

Row Name:

Column Name:

Year: 2007

Field Note:

Results are from a phone survey conducted of licensed child care providers.

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

Field Name: SM9

Row Name:

Column Name:

Year: 2006

Field Note:

Data are estimated.

This state performance measure continues to serve as a placeholder. In FY 2006 the state released a Request for Proposals to implement a statewide model of health consultation to child care providers. Imbedded within this model was a state child care health consultant. This position is responsible for collecting the data relevant to this performance measure. Due to the poor quality of applications received, no contract was awarded and the RFP has just been re-released in June of 2006. By January of 2007 the information to show status on this performance measure will be available.

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

Field Name: SM9

Row Name:

Column Name:

Year: 2005

Field Note:

Similar to other states, Rhode Island has regulations in place regarding child care health consultation. Current regulations require that child care centers serving infants under 18 months of age have a nurse onsite for a minimum of three hours per day. Centers serving children over 18 months of age are required to have "readily available" the consultant services of a licensed physician or registered nurse. However, on-site services are not required. There are no regulations pertaining to health consultation for family child care homes. In addition, some child care programs (e.g. Head Start) utilize the services of a nurse/health consultant even though they are not mandated to do so.

At this time, the exact number of licensed child care providers with on-site health consultants is unknown. Currently, this state performance measure serves as a placeholder. The state Title V agencies in federal Region I have agreed to develop an indicator that reflects the assets of their early childhood health and development systems. The region has chosen to focus on their collective assets regarding child care health consultants (CCHCs). CCHCs improve the general health and safety of children in child care and promote the development of children in other domains (e.g., social-emotional development, cognitive development, etc.). Rhode Island will work with Title V agencies in Region 1 to examine what strategies can be employed to measure the prevalence of CCHCs, their contributions to child health and development, and their role in the early childhood service system.

STATE PERFORMANCE MEASURE # 10

Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				25.7	25.5
Annual Indicator	24.3	25.7	25.7	25.7	23.6
Numerator	11,252	11,188	12,896	13,390	11,442
Denominator	46,316	43,505	50,241	52,100	48,482
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	24.2	24.2	24.8	24.8	24.8
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:** State Performance Measure #10

Field Name: SM10

Row Name:

Column Name:

Year: 2007

Field Note:

Weighted data from YRBS for 2007 entered in this cell.

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

Field Name: SM10

Row Name:

Column Name:

Year: 2006

Field Note:

Data for 2006 is estimated.

The Youth Risk Behavior Survey [YRBS] is conducted every other year. The survey was conducted in 2001, 2003 and 2005.

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

Field Name: SM10

Row Name:

Column Name:

Year: 2005

Field Note:

Weighted data from YRBS for 2005 entered in this cell.

STATE PERFORMANCE MEASURE # 11

Percent of families of CSHCN served by the Pediatric Practice Enhancement Project (PPEP).

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	1.8	3.1	5.3
Numerator	_____	_____	740	1,292	2,200
Denominator	_____	_____	41,783	41,783	41,783
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	6	6.4	6.7	6.9	7.1
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

None

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

Form Level Notes for Form 12

Data for 2006 and 2007 are considered provisional. All outcome measures reflect Rhode Island resident data . Updates are made to previous years when data are available. Mother's race is used for infant mortality rates by race. If mother's race is unknown then Infant's race listed on the death file is used.

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	6.3	6.1	6.1	6.2	6.2
Annual Indicator	6.7	5.3	6.5	6.0	7.3
Numerator	88	68	82	74	90
Denominator	13,200	12,778	12,690	12,370	12,365

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	6.7	6.5	6.5	6.3	6.3
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

None

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	2.5	2.2	2.2	2.5	2.5
Annual Indicator	1.7	2.3	2.9	2.1	2.2
Numerator	9.9	11.1	14.3	11.1	13.9
Denominator	6	4.8	5	5.4	6.4

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	2.5	2.5	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:** Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2005

Field Note:

Mother's race is used for infant mortality rates by race. If mother's race is unknown then Infant's race listed on the death file is used.

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	5	5	4.8	4.8	4.8
Annual Indicator	5.0	4.0	5.0	4.9	5.4
Numerator	66	51	64	60	67
Denominator	13,200	12,778	12,690	12,370	12,365

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	5.2	5.2	5	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

None

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	1.5	1.4	1.4
Annual Indicator	1.7	1.3	1.4	1.1	1.9
Numerator	22	17	18	14	23
Denominator	13,200	12,778	12,690	12,370	12,365

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	1.7	1.7	1.5	1.5	1.4
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

None

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	6.4	6.4	6	6.2	6.4
Annual Indicator	5.3	5.7	7.1	6.4	6.4
Numerator	76	79	97	85	83
Denominator	14,405	13,839	13,617	13,299	13,006

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	6.4	6.2	6.2	6.2	6.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- 1. **Section Number:** Outcome Measure 5
- Field Name:** OM05
- Row Name:**
- Column Name:**
- Year:** 2005
- Field Note:**
2005 data are estimated.

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	15.2	15	14.8	14.8	13.5
Annual Indicator	13.3	11.2	19.3	15.5	7.7
Numerator	26	21	36	28	14
Denominator	194,971	186,886	186,886	181,152	181,152

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Annual Objective and Performance Data

	2008	2009	2010	2011	2012
Annual Performance Objective	12.5	12.5	12.2	12.2	12.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

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

Field Name: OM06

Row Name:

Column Name:

Year: 2007

Field Note:

2000 US Population Census was used for 2003.

2005 RI Statewide Projections were used for 2004 and 2005.

2006 US Census estimates were used for 2006 and 2007.

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

Field Name: OM06

Row Name:

Column Name:

Year: 2005

Field Note:

Denominator is estimated using Statewide Planning projections for 2005.

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

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

 3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

 2

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

 3

4. Family members are involved in service training of CSHCN staff and providers.

 2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

 3

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

 3

Total Score: 16

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

Sixteen parent consultants completed Form 13. Eleven of the parent consultants had 2 years or more work experience with RIPIN and the special needs programs. The average score for each question was entered in Form 13.

On March 1, 2006, the Parent Consultant Program at RIPIN [Rhode Island Parent Information Network] was awarded two contracts by the RI Departments of Health and Human Services totaling \$6.28 million dollars. The new contracts enable more than forty parent consultants across the state to continue their work with families.

RIPIN Parent Consultants are placed all over the state to work with families through Early Intervention programs, pediatric practices, at Hasbro Children's Hospital and within the RI Department of Health working on specific initiatives such as immunization, lead, and children with special health care needs. Parent Consultants are parents or family members of a child who accessed some kind of specialized service or program in the state. Many are parents of children with special needs

The Pediatric Practice Enhancement Project [PEPP] supports pediatric primary and specialty practices in providing care to children with special health care needs and their families within a medical home. The PPEP places and supports trained parent consultants in primary and specialty care to link families with community resources, access specialty services, assist physicians in providing family centered care, and identifying systems barriers to coordinated care. There are currently twenty participating practices in a variety of settings. The project is recognized locally and nationally as an innovative best practice -- demonstrating improved short and long-term health outcomes for children and their families within a medical home.

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: RI FY: 2009

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Improve Maternal Health Through the Reproductive Lifespan
2. Promote Healthy Lifestyles and Healthy Weights for All Rhode Islanders
3. Engage, Empower, Support and Inform Families
4. Support Safe and Healthy Environments for Children and Families
5. Address Social, Emotional and Behavioral Health Needs of the MCH Population
6. Improve Pregnancy Outcomes
7. Ensure a Medical Home for All Rhode Island Families
8. Enhance MCH Programs
9. Promote Healthy Human Development in Children, Adolescents and Families
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

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

STATE: RI

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.	National Performance Measure Issues 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>03</u>	DCFHE requires TA to dev approaches in response to a mandate to track and screen for ASD when it doesn't offer /fund direct services for ASD.	The RI ASD Evaluation & Treatment Act requiried DCFHE take the lead in combating proglems assoicated with ASDD. How can the DCFHE affect the policices and programming for families raising children with ASD?	TBD
2.	National Performance Measure Issues 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>07</u>	RI has begun to collect the data, but need TA to create an overall index of medical home indivators for each of the 7 components of medical home.	A key RI priority for maternal and child health is to assure that all RI families have a medical home. This will allow RI to develop a medical home index.	TBD
3.	National Performance Measure Issues 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>08</u>	A site visit form Youth Infusion to obtain contextual assessment of the youth action research program model and outcomes, and provide staff training.	Youth Infusion has provided RA and has been valuable in youth training curricula, staff training, tools/eval de and advise on sustainability and infrastrucrture dev.	Youth Infusion
4.	National Performance Measure Issues 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>13</u>	Community partnership proejects require TA to support local partners to acquire knowledge and skills around improving community-based MCH systems.	The newly expanded division includes new staff and community partners that would benefit from this TA.	TBD
5.	National Performance Measure Issues 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>01</u>	This project is requesting TA in implementing our goals and ogjectives related to Parent Education and Family Support.	This is a broad field and no one agency is the lead; there is no formal infrastrucrturre to support capacity building, coordination or quality improvement.	TBD
6.	National Performance Measure Issues 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>07</u>	Immunizations request TA in engage key partners in expanding vaccination efforts for MCH population.	There is currently no comprehensive plan to target the expanded flu vaccine recommendations.	TBD
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: _____			
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: _____			
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: _____			
10.				

	<p>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: _____</p>			
11.	<p>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: _____</p>			
12.	<p>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: _____</p>			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: RI

SP # 1

PERFORMANCE MEASURE:

Percent of PRAMS population who had a diagnosis of depression before or during pregnancy.

STATUS:

Active

GOAL

To improve maternal health and birth outcomes

DEFINITION

0

Numerator:

Weighted number of PRAMS respondents with diagnosed depression

Denominator:

Weighted PRAMS population

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Rhode Island Pregnancy Risk Assessment Monitoring System (PRAMS)

SIGNIFICANCE

Research has shown that approximately one in five women experience perinatal depression and Rhode Island PRAMS data also reflect this statistic. Women with perinatal depression are also at a higher risk for poor birth outcomes. Identifying women with depression and understanding their characteristics and experiences should lead to program enhancements and policies resulting in earlier identification and referrals.

SP # 2

PERFORMANCE MEASURE:

Percent of children aged 2-5 enrolled in the WIC Program with BMI's \geq 95th percentile

STATUS:

Active

GOAL

To improve children's health and development

DEFINITION

Overweight is defined as having a Body Mass Index (BMI) at or above the 95th percentile

Numerator:

Children aged 2-5 enrolled in the WIC Program with a BMI greater at or above the 95th percentile

Denominator:

Total number of children aged 2-5 enrolled in the WIC Program

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Rhode Island WIC data system

SIGNIFICANCE

The percentage of children who are overweight has been rising both at the national and state level. Overweight children are at a higher risk for physical and psychosocial problems. Rhode Island WIC data have shown that more than one five children aged 2-5 are overweight.

SP # 3

PERFORMANCE MEASURE:

Percent of Rhode Island resident families with at-risk newborns that received a home visit from the Family Outreach Program within the newborn period (<=90 days)

STATUS:

Active

GOAL

To reduce risks among newborns and their families

DEFINITION

0

Numerator:

Number of at-risk newborns who received a home visit

Denominator:

Total number of at-risk newborns

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Universal Newborn Developmental Risk Screening, Family Outreach and KIDSNET data systems.

SIGNIFICANCE

Access to a broad range of health and family support services is critical to helping children grow into strong, healthy, and productive adults. Children are at increased risk if their parents or caretakers are overwhelmed by multiple problems such as inadequate income, lack of a job or a decent place to live, emotional stress, isolation from extended family or friends, drug and/or alcohol abuse, mental illness or domestic violence. Many parents lack essential parenting skills and are struggling with a combination of social and economic issues. Families benefit from access to comprehensive services that are able to flexibly respond to their needs.

SP # 4

PERFORMANCE MEASURE:

Percent of children aged less than 6 who live in the core cities and have blood lead levels at or above 10ug/dL

STATUS:

Active

GOAL

To reduce lead poisoning among children aged less than 6

DEFINITION

Rhode Island has identified the following six core cities based on the proportion of children living in poverty: Central Falls, Newport, Pawtucket, Providence, West Warwick and Woonsocket.

Numerator:

Number of children aged less than 6 living in the core cities with blood lead levels at or above 10ug/dL

Denominator:

Total number of children aged less than 6 living in the core cities that were screened for lead poisoning

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

8-11. Elevated blood lead levels in children
Eliminate elevated blood lead levels in children

DATA SOURCES AND DATA ISSUES

Lead Elimination Surveillance System(LESS)and KIDSNET data systems

SIGNIFICANCE

Severe lead poisoning can lead to profound mental retardation, coma, seizures and death. Even low levels of exposure can impair central nervous system function causing delayed cognitive development, hearing problems, growth retardation, and metabolic disorders. Homes and play areas, particularly in substandard housing areas remain a significant source of lead in children's blood. The chief sources of lead exposure are thought to be old flaking lead-based paint, dust and soil. Lead poisoning is more prevalent among children living in poverty, often in inner cities, than among those in higher socioeconomic levels. In Rhode Island, lead poisoning rates are highest among children who reside in the core cities.

SP # 6

PERFORMANCE MEASURE:

Ratio of the Black or African American prematurity rate to the White prematurity rate

STATUS:

Active

GOAL

To reduce prematurity and eliminate disparities in prematurity rates

DEFINITION

Prematurity will be measured by physician estimate of gestational age at birth.

Numerator:

Percent of Black or African American babies with gestational ages of less than 37 weeks

Denominator:

Percent of White babies with gestational ages of less than 37 weeks

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

16.11 Reduce preterm births
Reduce total preterms births to 7.6%

DATA SOURCES AND DATA ISSUES

Birth File, Rhode Island Vital Statistics. Physician's estimate used and not LMP.

SIGNIFICANCE

Preterm births are the leading cause of infant mortality in Rhode Island. Babies born prematurely are more likely to have complications such as, breathing/lung problems, heart problems, anemia, jaundice, infections, etc. Among racial and ethnic groups, Black or African American women have the highest rate of preterm births.

SP # 7

PERFORMANCE MEASURE:

Percent of children (who have had at least one immunization from a primary care provider) with complete immunization series (4:3:1:3) and at least one lead screening by age 2

STATUS:

Active

GOAL

To assure the all children have a medical home and receive preventive services

DEFINITION

Numerator:

Number of two year-old children with complete immunization series (4:3:1:3) and at least one lead screening

Denominator:

Number of two year-old children with at least one immunization from a primary care provider

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

KIDSNET data system. Since not all providers participate in KIDSNET, the denominator requires that children have at least one immunization.

SIGNIFICANCE

Children are more likely to receive preventive, specialty and other necessary services if they have a medical home. According to the AAP a medical home should be: accessible, family centered, continuous, comprehensive, compassionate, culturally effective, and coordinated.

SP # 8

PERFORMANCE MEASURE:

Percent of at-risk newborns who live in a neighborhood or community with MCH community systems building partnerships

STATUS:

Active

GOAL

To measure the impact of community systems on at-risk newborns

DEFINITION

Numerator:

Number of at-risk newborns living in neighborhoods or communities with MCH community building partnerships

Denominator:

Number of at-risk newborns

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Newborn Developmental Risk Screening Program data system; CATCH program data

SIGNIFICANCE

Community systems building partnerships develop and support maternal and child health system assessment and strategic planning in high need communities in Rhode Island. Through collaboration with the AAP CATCH initiative, the Division of Family Health supports projects that focus on improving medical homes. A new maternal health systems project plans to improve the system of care for women in their childbearing years.

SP # 9

PERFORMANCE MEASURE:

Percent of licensed child care providers with on-site health consultants

STATUS:

Active

GOAL

Survey licensed child care providers.

DEFINITION

None

Numerator:

Number of licensed child care providers with on-site health consultants

Denominator:

Number of all licensed child care providers

Units: 1 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Survey

SIGNIFICANCE

The state Title V agencies in federal Region I have chosen to focus their collective assets regarding child care health consultants (CCHC). CCHC's improve the general health and safety of children in child care and promote the development of children in other domains—e.g., socio-emotional development, cognitive development, etc. This indicator is used by all NE States, but each state may develop its own tool to measure the success of their efforts.

SP # 10

PERFORMANCE MEASURE:

Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months.

STATUS:

Active

GOAL

The Goal is to address social, emotional and behavioral health needs of the MCH population.

DEFINITION

0

Numerator:

Weighted number of students who felt sad or hopeless

Denominator:

Weighted total number of respondents

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

None

DATA SOURCES AND DATA ISSUES

The data source is the Youth Risk Behavior Survey [YRBS]. Data limitations: (1) survey is conducted every other year (2) survey conducted only in public high schools [9-12th grades]and CSHCN are not included. (3) participating in the survey is voluntary

SIGNIFICANCE

Identifying and meeting the emotional and behavioral health needs of children is critical for their success. In addition, adequate capacity to address the mental health needs remains a statewide concern.

SP # 11

PERFORMANCE MEASURE:

Percent of families of CSHCN served by the Pediatric Practice Enhancement Project (PPEP).

STATUS:

Active

GOAL

To build a connected community system of services for families raising CSHCN through the placement of trained parents of CSHCN throughout the health care delivery system. These parents help other families navigate the service delivery system and link them with community resources, assist physicians and families in accessing specialty services, and identify barriers to coordinated care.

DEFINITION

The number of families served by PPEP among the estimated number of CSHCN.

Numerator:

Number of families served by PPEP

Denominator:

Number of CSHCN

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Pediatric Practice Enhancement Project (numerator) National Survey CSHCN (denominator)

SIGNIFICANCE

The complex medical and social needs of children with special health care needs make it essential that they are cared for within a community system of services. Families raising children and youth with special needs struggle to navigate systems concerning health care, insurance, education, and a variety of home and community based services. Families and providers in RI have consistently reported difficulties navigating the service delivery system and accessing prescribed services

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: RI

Form Level Notes for Form 17

None

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	89.9	88.0	79.9	79.1	81.0
Numerator	576	564	512	490	502
Denominator	64,080	64,080	64,080	61,961	61,961

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

1. Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2007

Field Note:

Denominator from the 2006 US Census Estimates.

Data reflect children aged 0 - 4.

2. Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2006

Field Note:

Denominator from the 2006 US Census Estimates.

Data reflect children aged 0 - 4.

3. Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2005

Field Note:

Rhode Island's Population Projections for 2005 was used.

Data reflect children aged 0 - 4.

HEALTH SYSTEMS CAPACITY MEASURE # 02

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>91.4</u>	<u>93.2</u>	<u>93.8</u>	<u>91.0</u>	<u>89.7</u>
Numerator	<u>10,652</u>	<u>11,889</u>	<u>12,274</u>	<u>11,717</u>	<u>11,968</u>
Denominator	<u>11,650</u>	<u>12,752</u>	<u>13,081</u>	<u>12,878</u>	<u>13,342</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

- Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2007
Field Note:
 Data are provided by RI Department of Human Services the Center for Child and Family Health.
- Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2006
Field Note:
 Data are provided by RI Department of Human Services the Center for Child and Family Health.
- Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2005
Field Note:
 Data are provided by RI Department of Human Services the Center for Child and Family Health.

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	NaN	100.0	100.0	100.0	100.0
Numerator	0	1	1	1	1
Denominator	0	1	1	1	1

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:

In Rhode Island, children in SCHIP are aged 8-18. Infants and children less than 8 years old are enrolled in our Medicaid Managed Program [RiteCare]. This Health Systems Capacity Indicator does not apply to Rhode Island.

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

Field Name: HSC03

Row Name:

Column Name:

Year: 2006

Field Note:

In Rhode Island, children in SCHIP are aged 8-18. Infants and children less than 8 years old are enrolled in our Medicaid Managed Program [RiteCare]. This Health Systems Capacity Indicator does not apply to Rhode Island.

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

Field Name: HSC03

Row Name:

Column Name:

Year: 2005

Field Note:

In Rhode Island, children in SCHIP are aged 8-18. Infants and children less than 8 years old are enrolled in our Medicaid Managed Program [RiteCare]. This Health Systems Capacity Indicator does not apply to Rhode Island.

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>88.0</u>	<u>83.7</u>	<u>81.4</u>	<u>76.0</u>	<u>76.3</u>
Numerator	<u>9,937</u>	<u>9,431</u>	<u>9,311</u>	<u>8,915</u>	<u>8,970</u>
Denominator	<u>11,291</u>	<u>11,266</u>	<u>11,441</u>	<u>11,733</u>	<u>11,763</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Field Level Notes

- Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2007
Field Note:
 Data reflects calendar year.
- Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2006
Field Note:
 Data reflects calendar year.
- Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2005
Field Note:
 Data reflects calendar year.

Starting with 2003, totals include all births to Rhode Island residents aged 15 -44 regardless of location of birth.

The TVIS system does not allow revision of data prior to 2003.

HEALTH SYSTEMS CAPACITY MEASURE # 07A

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>86.5</u>	<u>85.9</u>	<u>85.1</u>	<u>82.9</u>	<u>84.1</u>
Numerator	<u>89,628</u>	<u>91,638</u>	<u>91,144</u>	<u>90,731</u>	<u>88,641</u>
Denominator	<u>103,628</u>	<u>106,638</u>	<u>107,144</u>	<u>109,411</u>	<u>105,365</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 Systems Capacity Indicator #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2007

Field Note:

Data is are estimated.

Source of data: Department of Human Services and reported in 2008 Rhode Island Kids Count Factbook.

Data is reporting children under the age of 19 receiving Medical Assistance.

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

Field Name: HSC07A

Row Name:

Column Name:

Year: 2006

Field Note:

Data is are estimated.

Source of data: Department of Human Services and reported in 2007 Rhode Island Kids Count Factbook.

Data is reporting children under the age of 19 receiving Medical Assistance.

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

Field Name: HSC07A

Row Name:

Column Name:

Year: 2005

Field Note:

Data is are estimated.

Source of data: Department of Human Services and reported in 2006 Rhode Island Kids Count Factbook.

Data is reporting children under the age of 19 receiving Medical Assistance.

HEALTH SYSTEMS CAPACITY MEASURE # 07B

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	54.1	56.1	58.7	62.0	67.5
Numerator	12,152	11,358	12,033	12,392	13,043
Denominator	22,451	20,262	20,484	19,976	19,309

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 #07B
Field Name: HSC07B
Row Name:
Column Name:
Year: 2007
Field Note:
 Data are provided by RI Department of Human Services the Center for Child and Family Health.
- Section Number:** Health Systems Capacity Indicator #07B
Field Name: HSC07B
Row Name:
Column Name:
Year: 2006
Field Note:
 Data are provided by RI Department of Human Services the Center for Child and Family Health.
- Section Number:** Health Systems Capacity Indicator #07B
Field Name: HSC07B
Row Name:
Column Name:
Year: 2005
Field Note:
 Data are provided by RI Department of Human Services the Center for Child and Family Health.

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	9.1	8.1	7.9	100.0	100.0
Numerator	293	295	296	1	1
Denominator	3,236	3,654	3,768	1	1

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:

The Rhode Island Department of Health does not paid for any rehabilitation services through the CSHCN Program for three primary reasons.

1) The Early Intervention Program [EI] transferred to the Department of Human Services in 2005.

2) Late in 2005, Rhode Island eliminated carve-out funding of services for children and youth with complex special needs, and requested insurers to reimburse for these services.

3) SSI recipients are enrolled in Medicaid which funds rehabilitation services.

Please note that this health system capacity indicator does not apply to Rhode Island.

2. Section Number: Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2006

Field Note:

The Rhode Island Department of Health has not in the past year paid for any rehabilitation services through the CSHCN Program for three primary reasons.

First, the Early Intervention Program [EI] transferred to the Department of Human Services and a private insurance mandate passed in 2005.

Second, the State in late 2005 eliminated carve-out funding of services for children and youth with complex special needs, and requested insurers to reimburse for these services.

Third, SSI recipients are enrolled in Medicaid which funds rehabilitation services.

Please note that this health system capacity indicator does not apply to Rhode Island.

3. Section Number: Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2005

Field Note:

2005: Data are estimated.

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

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2006	Payment source from birth certificate	<u>8.7</u>	<u>7.4</u>	<u>8</u>
b) <i>Infant deaths per 1,000 live births</i>	2006	Payment source from birth certificate	<u>6.9</u>	<u>4.3</u>	<u>6</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>75.8</u>	<u>92.4</u>	<u>84.5</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>66.6</u>	<u>83.8</u>	<u>76</u>

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

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2007	<u>250</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>18</u>) (Age range _____ to _____) (Age range _____ to _____)	2007	<u>250</u> _____ _____
c) <i>Pregnant Women</i>	2007	<u>185</u>

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

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>		_____
b) <i>Medicaid Children</i> (Age range <u>8</u> to <u>18</u>) (Age range _____ to _____) (Age range _____ to _____)	2007	<u>250</u> _____ _____
c) <i>Pregnant Women</i>	2007	<u>250</u>

FORM NOTES FOR FORM 18

Form 18 Indicator #06 no changes from previous years.

Medicaid eligibility levels:

Infants qualify if <250% of Poverty Level.

Children (1-18) qualify if <250% of Poverty Level.

Pregnant/Postpartum Women qualify if < 185% of Poverty Level.

SCHIP eligibility levels:

SCHIP does not include infants

Children (8-18) qualify if < 250% of Poverty Level.

Pregnant/Postpartum Women (8-18) qualify if 185-250% of Poverty Level.

Families with incomes > 150% of Poverty Levels are subject to a family partial premium. Threshold increases to 185% for families consisting only of pregnant women and infants

FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - Medicaid
Field Name: Med_Infant
Row Name: Infants
Column Name:
Year: 2009
Field Note:
Infants < 250% percent of poverty for Medicaid.
2. **Section Number:** Indicator 06 - SCHIP
Field Name: SCHIP_Infant
Row Name: Infants
Column Name:
Year: 2009
Field Note:
SCHIP does not include infants. Infants are covered by RItE Care.
3. **Section Number:** Indicator 06 - SCHIP
Field Name: SCHIP_Children
Row Name: SCHIP_Children
Column Name:
Year: 2009
Field Note:
Children aged 8 - 18 qualify for SCHIP if poverty level from 100 - 250%.
4. **Section Number:** Indicator 06 - SCHIP
Field Name: SCHIP_Women
Row Name: Pregnant Women
Column Name:
Year: 2009
Field Note:
Pregnant women aged 8 - 18 qualify if 185 - 250%.
5. **Section Number:** Indicator 05
Field Name: InfantDeath
Row Name: Infant deaths per 1,000 live births
Column Name:
Year: 2009
Field Note:
Nine infant deaths were missing insurance status.

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

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	1	No
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:

- 1 = No, the MCH agency does not have this ability.
- 2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
- 3 = Yes, the MCH agency always has this ability.

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

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other: School Accountability for Learning and Teaching	3	No
Youth Tobacco Survey	3	No

*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

Youth Tobacco Survey began in 2001 and is conducted every two years.

FIELD LEVEL NOTES

None

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

Form Level Notes for Form 11

For HSI 03, 04 and 05: US 2000 Census was used for data prior to 2004. Rhode Island Population Projections for 2005 were used for 2004 and 2005 data. US 2006 Census Estimates were used for 2006 and 2007 data.

HEALTH STATUS INDICATOR MEASURE # 01A

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

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	8.6	8.0	7.8	8.0	8.1
Numerator	1,139	1,028	992	992	997
Denominator	13,200	12,778	12,690	12,370	12,365

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

None

HEALTH STATUS INDICATOR MEASURE # 01B

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

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	<u>6.3</u>	<u>6.4</u>	<u>5.8</u>	<u>6.3</u>	<u>6.4</u>
Numerator	<u>798</u>	<u>790</u>	<u>704</u>	<u>742</u>	<u>759</u>
Denominator	<u>12,644</u>	<u>12,274</u>	<u>12,175</u>	<u>11,870</u>	<u>11,930</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

None

HEALTH STATUS INDICATOR MEASURE # 02A

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

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	1.8	1.5	1.6	1.6	1.7
Numerator	238	189	198	193	216
Denominator	13,200	12,778	12,690	12,370	12,365

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Field Level Notes

None

HEALTH STATUS INDICATOR MEASURE # 02B

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

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	<u>1.2</u>	<u>1.1</u>	<u>1.2</u>	<u>1.2</u>	<u>1.2</u>
Numerator	<u>150</u>	<u>141</u>	<u>145</u>	<u>143</u>	<u>149</u>
Denominator	<u>12,644</u>	<u>12,274</u>	<u>12,175</u>	<u>11,870</u>	<u>11,930</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional Provisional

Field Level Notes

None

HEALTH STATUS INDICATOR MEASURE # 03A

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>5.3</u>	<u>4.0</u>	<u>5.0</u>	<u>3.5</u>	<u>2.9</u>
Numerator	<u>11</u>	<u>8</u>	<u>10</u>	<u>21</u>	<u>17</u>
Denominator	<u>207,171</u>	<u>199,674</u>	<u>199,674</u>	<u>592,741</u>	<u>586,460</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

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

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

Data reflect unintentional injuries to children aged 0 - 14.
 Data for 2007 was 3 cases and population was 193,393.

2007 Data reflects 3 year average [2005 - 2007].

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

Field Name: HSI03A

Row Name:

Column Name:

Year: 2006

Field Note:

Data reflect unintentional injuries to children aged 0 - 14.
 Data for 2006 was 3 cases and population was 193,393.

2006 Data reflects 3 year average [2004 - 2006]

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

Field Name: HSI03A

Row Name:

Column Name:

Year: 2005

Field Note:

Data reflect unintentional injuries to children aged 0 - 14.
 Population estimates for 2005 used.

HEALTH STATUS INDICATOR MEASURE # 03B

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	1.9	0.0	2.5		
Numerator	4	0	5		
Denominator	207,171	199,674	199,674	193,393	193,393

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?

	Yes	Yes
Is the Data Provisional or Final?	Provisional	Provisional

Field Level Notes

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

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

Data are provisional and it 5 events.

Data reflect unintentional motor vehicle deaths to children aged 0 - 14.

Denominator from the 2006 US Census Estimates.

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

Field Name: HSI03B

Row Name:

Column Name:

Year: 2006

Field Note:

Data are provisional and it 5 events.

Data reflect unintentional motor vehicle deaths to children aged 0 - 14.

Denominator from the 2006 US Census Estimates.

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

Field Name: HSI03B

Row Name:

Column Name:

Year: 2005

Field Note:

Data reflect all unintentional deaths involving a motor vehicle to children aged 0 - 14 for calendar year.

RI Population estimates for 2005 used.

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.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>24.4</u>	<u>18.3</u>	<u>13.9</u>	<u>14.4</u>	<u>12.5</u>
Numerator	<u>36</u>	<u>29</u>	<u>22</u>	<u>23</u>	<u>20</u>
Denominator	<u>147,258</u>	<u>158,534</u>	<u>158,534</u>	<u>160,131</u>	<u>160,131</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

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

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

Data reflect all unintentional deaths involving a motor vehicle for those aged 15 - 24.

Denominator from the 2006 US Census Estimate.

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

Field Name: HSI03C

Row Name:

Column Name:

Year: 2006

Field Note:

Data reflect all unintentional deaths involving a motor vehicle for those aged 15 - 24.

Denominator from the 2006 US Census Estimate.

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

Field Name: HSI03C

Row Name:

Column Name:

Year: 2005

Field Note:

Data reflect all unintentional deaths involving a motor vehicle for those aged 15 - 24. State Population Estimate for 2005 used.

HEALTH STATUS INDICATOR MEASURE # 04A

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>150.6</u>	<u>153.8</u>	<u>138.7</u>	<u>117.4</u>	<u>131.9</u>
Numerator	<u>312</u>	<u>307</u>	<u>277</u>	<u>227</u>	<u>255</u>
Denominator	<u>207,171</u>	<u>199,674</u>	<u>199,674</u>	<u>193,393</u>	<u>193,393</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

- Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2007
Field Note:
 Data reflect children aged 0 -14.
 Denominator from 2006 US Census Estimate.
- Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2006
Field Note:
 Data reflect children aged 0 -14.
 Denominator from 2006 US Census Estimate.
- Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2005
Field Note:
 Data reflect children aged 0 -14.
 State Population Estimates for 2005 used.

HEALTH STATUS INDICATOR MEASURE # 04B

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	15.4	19.5	19.5	7.8	8.3
Numerator	32	39	39	15	16
Denominator	207,171	199,674	199,674	193,393	193,393

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

- Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2007
Field Note:
 Data reflect children aged 0 -14.
 Denominator from 2006 US Census Estimate.
- Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2006
Field Note:
 Data reflect children aged 0 -14.
 Denominator from 2006 US Census Estimate.
- Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2005
Field Note:
 Data reflect children aged 0 - 14.
 State Population Estimates for 2005 used.

HEALTH STATUS INDICATOR MEASURE # 04C

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>72.0</u>	<u>96.5</u>	<u>53.6</u>	<u>75.6</u>	<u>61.8</u>
Numerator	<u>106</u>	<u>153</u>	<u>85</u>	<u>121</u>	<u>99</u>
Denominator	<u>147,258</u>	<u>158,534</u>	<u>158,534</u>	<u>160,131</u>	<u>160,131</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

- Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2007
Field Note:
 Denominator from the 2006 US Census Estimates.
- Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2006
Field Note:
 Denominator from the 2006 US Census Estimates.
- Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2005
Field Note:
 Denominator from State Population Estimates for 2005.

HEALTH STATUS INDICATOR MEASURE # 05A

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>21.4</u>	<u>23.3</u>	<u>23.2</u>	<u>20.0</u>	<u>20.5</u>
Numerator	<u>796</u>	<u>876</u>	<u>873</u>	<u>809</u>	<u>829</u>
Denominator	<u>37,246</u>	<u>37,676</u>	<u>37,676</u>	<u>40,481</u>	<u>40,481</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

- Section Number:** Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2007
Field Note:
 Denominator from the 2006 US Census Estimates.
- Section Number:** Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2006
Field Note:
 Denominator from the 2006 US Census Estimates.
- Section Number:** Health Status Indicator #05A
Field Name: HSI05A
Row Name:
Column Name:
Year: 2005
Field Note:
 Denominator from State Population Estimates for 2005.

HEALTH STATUS INDICATOR MEASURE # 05B

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

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	<u>7.0</u>	<u>8.4</u>	<u>7.9</u>	<u>7.1</u>	<u>7.5</u>
Numerator	<u>1,373</u>	<u>1,542</u>	<u>1,459</u>	<u>1,319</u>	<u>1,394</u>
Denominator	<u>194,977</u>	<u>183,863</u>	<u>183,863</u>	<u>186,155</u>	<u>186,155</u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

- Section Number:** Health Status Indicator #05B
Field Name: HSI05B
Row Name:
Column Name:
Year: 2007
Field Note:
 Denominator from the 2006 US Census Estimates.
- Section Number:** Health Status Indicator #05B
Field Name: HSI05B
Row Name:
Column Name:
Year: 2006
Field Note:
 Denominator from the 2006 US Census Estimates.
- Section Number:** Health Status Indicator #05B
Field Name: HSI05B
Row Name:
Column Name:
Year: 2005
Field Note:
 Denominator from State Population Estimates for 2005.

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

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? Provisional

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	12,691	10,166	1,507	182	836	0	0	0
Children 1 through 4	49,954	40,851	5,375	665	3,063	0	0	0
Children 5 through 9	63,955	53,743	5,924	721	3,567	0	0	0
Children 10 through 14	69,905	59,362	6,109	719	3,715	0	0	0
Children 15 through 19	78,663	68,656	6,153	507	3,347	0	0	0
Children 20 through 24	69,215	61,002	4,982	443	2,788	0	0	0
Children 0 through 24	344,383	293,780	30,050	3,237	17,316	0	0	0

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

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	10,470	2,221	0
Children 1 through 4	41,859	8,095	0
Children 5 through 9	54,795	9,160	0
Children 10 through 14	59,808	10,097	0
Children 15 through 19	69,063	9,600	0
Children 20 through 24	61,177	8,038	0
Children 0 through 24	297,172	47,211	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: RI

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? Yes Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	8	6	1	0	1	0	0	0
Women 15 through 17	388	292	64	7	18	0	0	7
Women 18 through 19	739	584	98	20	27	0	0	10
Women 20 through 34	8,964	7,481	861	104	419	0	0	99
Women 35 or older	2,271	1,980	146	19	105	0	0	21
Women of all ages	12,370	10,343	1,170	150	570	0	0	137

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

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	3	5	0
Women 15 through 17	158	167	63
Women 18 through 19	371	267	101
Women 20 through 34	5,561	1,873	1,530
Women 35 or older	1,619	236	416
Women of all ages	7,712	2,548	2,110

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

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? Yes Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	74	40	10	1	1	0	0	22
Children 1 through 4	10	7	0	0	0	0	0	3
Children 5 through 9	6	4	0	0	0	0	0	2
Children 10 through 14	12	9	2	0	0	0	0	1
Children 15 through 19	27	21	2	0	0	0	0	4
Children 20 through 24	54	43	3	0	0	0	0	8
Children 0 through 24	183	124	17	1	1	0	0	40

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

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	45	25	4
Children 1 through 4	8	2	0
Children 5 through 9	4	2	0
Children 10 through 14	11	1	0
Children 15 through 19	24	3	0
Children 20 through 24	47	7	0
Children 0 through 24	139	40	4

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

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	275,168	232,778.0	25,068.0	2,794.0	14,528.0	0.0	0.0	0.0	2006
Percent in household headed by single parent	33.0	24.0	61.0	62.0	26.0	0.0	0.0	0.0	2006
Percent in TANF (Grant) families	7.1	5.4	24.7	0.8	23.1	0.0	0.0	0.0	2007
Number enrolled in Medicaid	69,093	26,590.0	8,980.0	242.0	1,068.0	0.0	0.0	32,213.0	2007
Number enrolled in SCHIP	11,589	4,024.0	759.0	29.0	200.0	0.0	0.0	6,577.0	2007
Number living in foster home care	2,399	1,553.0	479.0	29.0	46.0	1.0	167.0	124.0	2007
Number enrolled in food stamp program	39,788	14,899.0	6,493.0	150.0	680.0	0.0	0.0	17,566.0	2007
Number enrolled in WIC	21,024	14,727.0	3,476.0	130.0	592.0	254.0	1,748.0	97.0	2007
Rate (per 100,000) of juvenile crime arrests	4,500.0	3,759.0	13,865.0	0.0	2,249.0	0.0	0.0	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	25.0	17.0	25.0	24.0	20.0	0.0	0.0	0.0	2007

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	235,995.0	39,173.0	0.0	2006
Percent in household headed by single parent	40.0	53.0	0.0	2006
Percent in TANF (Grant) families	5.9	14.1	0.0	2007
Number enrolled in Medicaid	24,862.0	12,018.0	32,213.0	2007
Number enrolled in SCHIP	2,445.0	2,567.0	6,577.0	2007
Number living in foster home care	1,741.0	536.0	122.0	2007
Number enrolled in food stamp program	12,796.0	9,426.0	17,566.0	2007
Number enrolled in WIC	12,539.0	8,388.0	97.0	2007
Rate (per 100,000) of juvenile crime arrests	4,118.0	6,906.0	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	20.0	29.0	0.0	2007

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

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

Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	261,143
Living in urban areas	276,430
Living in rural areas	0
Living in frontier areas	0
Total - all children 0 through 19	276,430

Note:

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

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

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

Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	1,053,565.0
Percent Below: 50% of poverty	4.9
100% of poverty	11.3
200% of poverty	26.4

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

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: 2007 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	276,430.0
Percent Below: 50% of poverty	7.8
100% of poverty	17.1
200% of poverty	33.7

FORM NOTES FOR FORM 21

Data for HSI #06 comes from the 2006 US Census State Projections. The state projections provide some race and ethnicity breakdown, although Native Hawaiian, More than one Race and Other \Unkn are not listed. Also, the 2006 State Projections and the 2006 Census Estimates for this age group do not match. The US Census Estimates includes about 8400 more teens aged 0 thru 19 than the State Projection.

HSI #09A & HSI #09B: Most of the data was provided by the Department of Human Services [DHS] and reflects number of children enrolled in various programs on 12/31/2007. The data reports a point in time and not calendar year. Currently, Race and Ethnicity are not required fields for eligibility and therefore, 45% to 49% of the cases are unknown.

With such a large percent of race and ethnicity missing, the estimated breakdown of race and ethnicity are not considered reliable.

HSI #10 data are estimated.

HSI #11 & # 12: Data from Current Population Survey, three year average, 2005-2007.

FIELD LEVEL NOTES

- 1. Section Number:** Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2009
Field Note:
Data source: The 2006 US Census State Projections. The state projections provide some race and ethnicity breakdown, although Native Hawaiian, More than one Race and Other \Unkn are not listed.
- 2. Section Number:** Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2009
Field Note:
Data source: The 2008 Rhode Island Kids Count Factbook.
Data reflects children aged 0 -17 living in single parent families in 2006.
Percent by Race and ethnicity are just estimates and are not considered reliable.
- 3. Section Number:** Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2009
Field Note:
Data source: Department of Human Services for children aged 0 thru 18.
Rhode Island reports percent of children on Family Independence Program [FIP] and not number of families on FIP
FIP reported 49.4% of children had unknown race/ethnicity. Percents by race and ethnicity are not reliable.

Total families on FIP for 2007 was 9993 which is about 7%.
- 4. Section Number:** Indicator 09A
Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2009
Field Note:
Data source: Department of Human Services.
Children aged 0 thru 19.
- 5. Section Number:** Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2009
Field Note:
Data Source: Department of Human Services and reflects children aged 8 -18.
- 6. Section Number:** Indicator 09A
Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2009
Field Note:
Data source: Department of Human Services for children aged 0 thru 19.
- 7. Section Number:** Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2009
Field Note:
Data provided by the WIC Program.
- 8. Section Number:** Indicator 09A
Field Name: HSIRace_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2009
Field Note:
Data Source: 2008 Rhode Island Kids Count Factbook.
Data reflects youth aged 10 thru 17 referred to Family Court in 2007.
Due to high number of unknowns, race and ethnicity data should be considered estimates.
- 9. Section Number:** Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2009

Field Note:

All data are estimated. It has been reported that Rhode Island's graduation and drop out rates were calculated differently from national rates. Revised data will be provided when available.

10. Section Number: Indicator 09B

Field Name: HSIEthnicity_Children

Row Name: All children 0 through 19

Column Name:

Year: 2009

Field Note:

Data Source: 2006 US Census - State Projections.

The Census does not provided a denominator for the category 'Ethnicity Not Reported'.

Since race and ethnicity are not currently required fields for eligibility, many of the programs report 45% to 49% of children with race\ethnicity as unknown. When percents or rates are requested the unknown cases are added into the Hispanic and Non Hispanic categories and a zero is entered into the 'Ethnicity Not Reported' column.

When number is requested, number of unknowns is entered in the 'Ethnicity Not Reported' column.

11. Section Number: Indicator 09B

Field Name: HSIEthnicity_TANFPercent

Row Name: Percent in TANF (Grant) families

Column Name:

Year: 2009

Field Note:

Rhode Island reports percent of children aged 0 thru 18 on the Family Independence Program.

12. Section Number: Indicator 09B

Field Name: HSIEthnicity_SCHIPNo

Row Name: Number enrolled in SCHIP

Column Name:

Year: 2009

Field Note:

The breakdown by ethnicity is estimated.

13. Section Number: Indicator 12

Field Name: S12_Children

Row Name: Children 0 through 19 years old

Column Name:

Year: 2009

Field Note:

Total of Children 0 through 19 is estimated.

14. Section Number: Indicator 12

Field Name: S12_50percent

Row Name: Percent Below: 50% of poverty

Column Name:

Year: 2009

Field Note:

Percents of Poverty Levels reflects 3 year averages of CPS 2005 - 2007.

15. Section Number: Indicator 09A

Field Name: HSIRace_FosterCare

Row Name: Number living in foster home care

Column Name:

Year: 2009

Field Note:

Data provided by the Department for Children, Youth and Families.

Data reflect children aged 0 thru 19 in placement as of 12/31/2007.