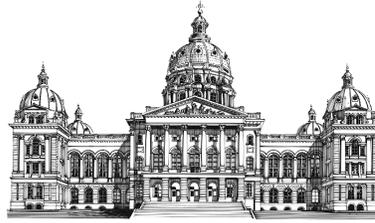

Iowa Legislative Fiscal Bureau

Dennis Prouty
(515) 281-5279
FAX 281-8451



State Capitol
Des Moines, IA 50319
November 5, 1998

Maternal and Child Health Clinics

ISSUE

This *Issue Review* provides an informational review of the history, funding, services, and issues of Maternal and Child Health Clinics.

AFFECTED AGENCIES

Department of Human Services
Department of Public Health

CODE AUTHORITY

Chapter 135.11, Code of Iowa

BACKGROUND

Maternal and Child Health Clinics are a part of the Maternal and Child Health Program administered by the Iowa Department of Public Health. The Iowa Maternal and Child Health Program was established in 1935 when Title V of the Social Security Act became law, and the Governor directed the Department of Public Health to develop and oversee Maternal and Child Health Programs statewide.

The goal of Maternal and Child Health Programs is to promote health for all Iowa women, infants, children, and adolescents by providing access to quality, comprehensive health care services. Maternal Health Clinics have a team of professionals who provide prenatal, postpartum, and enhanced services to pregnant and postpartum women. Child Health Clinics work to ensure that every child receives the ongoing services needed to support growth and development.

FUNDING

Maternal and Child Health Clinics are funded primarily through the Iowa Title V Maternal and Child Health Block Grant. The Iowa Title V Maternal and Child Health Service Block Grant Program conducts a statewide assessment of needs, develops policies, plans, and programs

to improve the health of women, infants, children, adolescents, and families in Iowa and supports the statewide initiatives described in **Attachment A**.

Funding sources for the Clinics in addition to the Block Grant include: sliding fees; administrative funds from Women, Infants, and Children grants; Early and Periodic Screening, Diagnosis, and Treatment Medicaid reimbursement; Targeted Case Management; Medicaid service reimbursement; United Way funds; Head Start Program receipts; Early Head Start Program receipts; and other billable services such as Well Child Clinics performed within the community. **Attachment B** details total funding for Maternal and Child Health Clinics.

SERVICES

Populations Served

Targeted Population - Title V Maternal and Child Health Programs serve pregnant and postpartum Iowa women and children under 21 years of age.

Income Guidelines - Financial guidelines specifying eligibility for the Programs are established by the federal government. Currently, the standard is income of less than 185.0% of federal poverty level for both Programs (185% of the federal poverty level = \$25,253 annual income for a family of three). Families whose income is below 185.0% of the federal poverty level receive services at no charge. Families whose income is between 185.0% and 200.0% of the federal poverty level are charged based on their ability to pay.

Client Entry - Clients learn of the Clinics from a variety of different sources. Points of entry include: the Department of Human Services, physicians, schools, student health centers, county public health offices, preschool programs, Headstart Programs, Child Care Resource and Referral agencies, and Healthy Child Care Iowa initiatives. Self-referral, based on articles, brochures, and word-of-mouth, is the most common point of entry in many regions.

Service Areas

For the purpose of Maternal Health Services, the State is divided into 26 regions. For Child and Adolescent Health Services, the State is divided into 25 regions. The Department of Public Health contracts with an entity in each region to deliver maternal and child health services. In 22 instances, a single entity/agency has the contract for both maternal and child health services.

Attachments C and D show how the State is divided and the contracting entity for each region.

Services Provided

Maternal and Child Health Programs and Clinics typically serve persons who otherwise would go without medical services. Once they enter the Program(s), clients are provided access to a family doctor. Because clients have a regular physician, Maternal and Child Health Clinics can function as wellness programs and focus on education, prevention, care coordination, and counseling in issues such as nutrition, school readiness and behavioral matters. Contracting agencies report it is not uncommon for a client to visit both a regular physician and a Child Health Clinic for a well baby check, because of the additional developmental screenings and education available at the Clinic.

Maternal Health Clinic services include: medical and dental assessment, health and nutrition education, psychosocial screening and referral, care coordination, assistance with plans for delivery, and postpartum home visiting. Child and Adolescent Health Clinic services include: physical examinations, vision and hearing screening, dental education and referral, health

education, immunizations, developmental assessment, nutrition and psychosocial screening, and laboratory tests including lead screening. **Attachment E** lists the services in more detail.

Although most closely associated with Maternal and Child Health Programs, Maternal and Child Health Clinics may provide a variety of additional services to clients. Maternal and Child Health Clinics function as the service provider for the Women, Infants, and Children (WIC) Program in 14 regions. Early and Periodic Screening Diagnosis and Treatment (EPSDT) Services are provided in 24 regions. These services focus on preventing illness through periodic examinations to identify illnesses early enough to intervene with effective diagnosis and treatment. Services include comprehensive developmental and physical exams, immunizations, laboratory tests including blood lead levels, and health education. Coordinating WIC and EPSDT services at Maternal and Child Health Clinic sites is convenient for the clients and provides a revenue stream to support Clinic functions.

Staffing

In most regions, the staff of the contracting agency includes administrative, nursing, and clerical staff. Half of the agencies also maintain social workers and nutrition counselors. For FY 1999, the average number of full-time staff is 8.7 per agency. The total FY 1999 staff reported for all agencies is 259.9 FTE positions. An additional 67.3 FTE contract positions are planned.

ISSUES

1. Dental Health

Access to regular dental care is limited in some regions due to: 1) low reimbursement from Title XIX, 2) behavioral problems of young children, 3) busy dentists, and 4) a history of Title XIX patients not keeping their appointments. Maternal and Child Health dental hygienists require an exemption from Title XIX regulations to allow them to be reimbursed for screenings provided at Maternal and Child Health Clinics. Should the exemption be denied, many children in the Child Health Program would be without dental care as the only care they receive is at the Clinic.

2. Empowerment Areas

Senate File 2406, passed by the 1998 General Assembly, created Community Empowerment Areas for the purpose of allowing local citizens to lead collaborative efforts involving education, health, and human services. Issues related to Empowerment Areas which could have an effect on Maternal and Child Health Clinics include the following:

- Local politics - Senate File 2406 requires that Community Empowerment Areas be governed by Community Empowerment Boards. The composition and leadership of each Board will have a large impact on the community focus. If health is not a primary focus, it may effect the area's Clinics.
- Blended funding - As a community pools existing federal, State and other funds, moneys currently funding Maternal and Child Health Clinics may be redirected from the existing Programs into something unknown, with uncertain outcomes for clients.
- Community readiness - In regions where collaboration is not currently occurring between various health, human services, and education programs, considerable staff time may need to be invested in developing the communities' ability to operate as an Empowerment Area.

3. State Children's Health Insurance Program (SCHIP)

The eventual effect of the SCHIP Program on Maternal and Child Health Clinics is uncertain.

- Medicaid expansion component - Managed care is an option to clients for delivery of Medicaid services in 88 counties. Expanding Medicaid will not necessarily benefit Maternal and Child Health Clinics unless the Clinic is assigned/accepted as a provider by the service area managed care organization. However, clients choosing fee-for-service delivery of Medicaid services would continue the process of Maternal and Child Health Clinics receiving reimbursements for services.
- Healthy and Well Kids in Iowa (HAWK-I) Program - Rules will determine who can be a provider for the insurance component of the SCHIP (HAWK-I). If a Maternal and Child Health Clinic is designated as a provider by insurance companies carrying the HAWK-I plan, more persons may be served off of the waiting list.
- At a minimum, if Maternal and Child Health Clinics cannot provide SCHIP Program services due to managed care and/or provider determination issues, the Clinics will provide outreach and referral services.

4. Technology

In many regions, Maternal and Child Health Clinics provide a variety of services which have different computer tracking systems. For example, American Home Finding in Ottumwa provides EPSDT, WIC, Maternal and Child Health, lead screening, and immunization services. Each Program has its own, stand alone computer system, and the agency has its own internal system, for a total of six unique systems. The systems are not linked, so client information must be entered and maintained in multiple systems. Comprehensive technology planning is needed.

STAFF CONTACT: Valerie Thacker (Ext. 15270)

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Maternal and Child Health Clinics

Iowa Title V Maternal and Child Health Block Grant Programs

The Iowa Title V Maternal and Child Health Program supports the following statewide initiatives and partnerships by providing resources and by promoting coordination and collaboration at the State and local levels.

- **Children with Special Health Care Needs (CSHCN):** A statewide network of 16 parent consultants provides resource information, peer support, and problem solving to an estimated 250 families; a Title V CSHCN and Iowa Department of Education partnership supports statewide training of 15 community teams to meet needs of children with autism and their families; and Title V CSHCN partners with a State University of Iowa affiliated program to provide leadership training to providers from ten disciplines.
- **Iowa Healthy Families Program:** Provides support services to families during the prenatal and preschool periods. Services are designed to promote optimal child development, improve family coping skills and functions, and promote positive parenting skills and family interactions. The goal is to prevent child abuse and neglect. The Program's four components are Healthy Opportunities for Parents to Experience Success (HOPES), Infant Mortality and Morbidity Prevention, increased use of Mid-Level Practitioners, and the Infant Death Research Component, including the Barriers to Prenatal Care project.
- **Healthy Child Care Iowa:** This project establishes a relationship between child health and child care systems. Goals are to 1) link child health and child care programs and services in the context of the family support service system; 2) facilitate the linkage of child health and child care systems through model multidisciplinary collaboration; 3) sustain the linkage of child health and child health care by engaging both the public and private sectors in multidisciplinary collaboration.
- **Early and Periodic Screening, Diagnosis and Treatment (EPSDT):** The Department of Human Services has primary responsibility for the administration of the EPSDT screening program. The Department of Public Health provides technical assistance to facilitate an increase in the percentage of eligible children receiving EPSDT screens. Activities include: outreach and care coordination for targeted case management; development of criteria for EPSDT screening center; and development of certification standards for nurses providing EPSDT screens.
- **School-Based Youth Services:** The purpose of School-Based Youth Services Programs is to develop centers located in or near schools that will increase the ability of community service providers to deliver services coordinated with children. Goals include: impacting areas with high rates of at-risk teens and youth involved with the courts; improving coordination between schools and other service providers; increasing the utilization of economic resources by schools to improve the employment and productivity of students leaving school; and increasing voluntary use of available services by elementary, middle, and high school students and their families.

In addition to assessing and monitoring the health status of all mothers and children in the State, the Title V Program engages in other population-based activities. Examples include:

- **Childhood Lead Poisoning Prevention Programs:** Maternal and Child Health coordinates all Center for Disease Control (CDC), Title XIX, laboratory services, and local providers in the State's effort to prevent childhood lead poisoning.
- **Iowa Birth Defects Registry:** The registry has identified several differences in total and categorical birth defect rates between urban and rural residents: northern and southern counties, and Iowa and other U.S. regions. Rates of birth defect occurrence are provided for 163 categories.

FY 1999 Maternal and Child Health Clinic Funding

ATTACHMENT B

Contracting Agency	Child Health Grant*	Maternal Health Grant	Women, Infants, and Children Grant	Family Planning Grant	Early and Periodic Screening, Diagnosis, and Treatment	Title XIX Screening	Title XX	Third Party Payors	Patient Fees	Other (Cash)	In-Kind	Total
Allen Memorial Hospital		\$ 88,964		\$ 106,366		\$ 170,000	\$ 25,000	\$ 325,000	\$ 250,000	\$ 140,102	\$ 85,942	\$ 1,191,374
American Home Finding Association	\$ 117,012	84,773	\$ 359,992		\$ 87,920	277,174		67,008	1,500	50,000		1,045,379
Anamosa Community Hospital	54,323				25,010	4,679		687	520		20,261	105,480
Black Hawk Co. Health Department	177,220				133,984	47,700			487	110,145	13,682	483,218
Clinton County Board of Health	36,849				50,453	3,600		3,600	1,200	2,500	4,560	102,762
Community Health Resources	65,673	46,445			54,000	23,400		1,920	4,200	26,681		222,319
Community Health Resources of Marion County	52,267	20,503	131,887		50,291	7,748					7,877	270,573
Community Opportunities	144,294	47,249	250,537	30,626	91,218	70,812	25,000	6,000	30,525	8,758		705,019
Crawford County Home Health	79,260	30,399		24,943	36,421	23,832	56,835		15,717	9,000	70,356	346,763
Crittenton Center		90,471				129,070		21,700	3,950	54,000		299,191
Des Moines Co. Health Department	58,958	39,016			5,671	52,799					7,322	163,766
Grinnell Regional Medical Center	67,644	32,285			30,000	53,145			1,000		66,025	250,099
Hawkeye Area Community Action	89,207	44,140	441,798		102,951	60,591		22,000	500	16,875		778,062
Hillcrest Family Services		54,762	455,557		92,122	140,160				3,566		746,167
Johnson Co. Department of Public Health	86,028	22,249	261,202		43,132	40,285			2,300	161,870	13,434	630,500
Marshalltown Medical & Surgical Center	137,629	50,527			60,000	166,443		5,000	6,953		155,769	582,321
Maternal Health Center	151,758	95,531	473,088			772,579		302,318	47,558	148,642		1,991,474

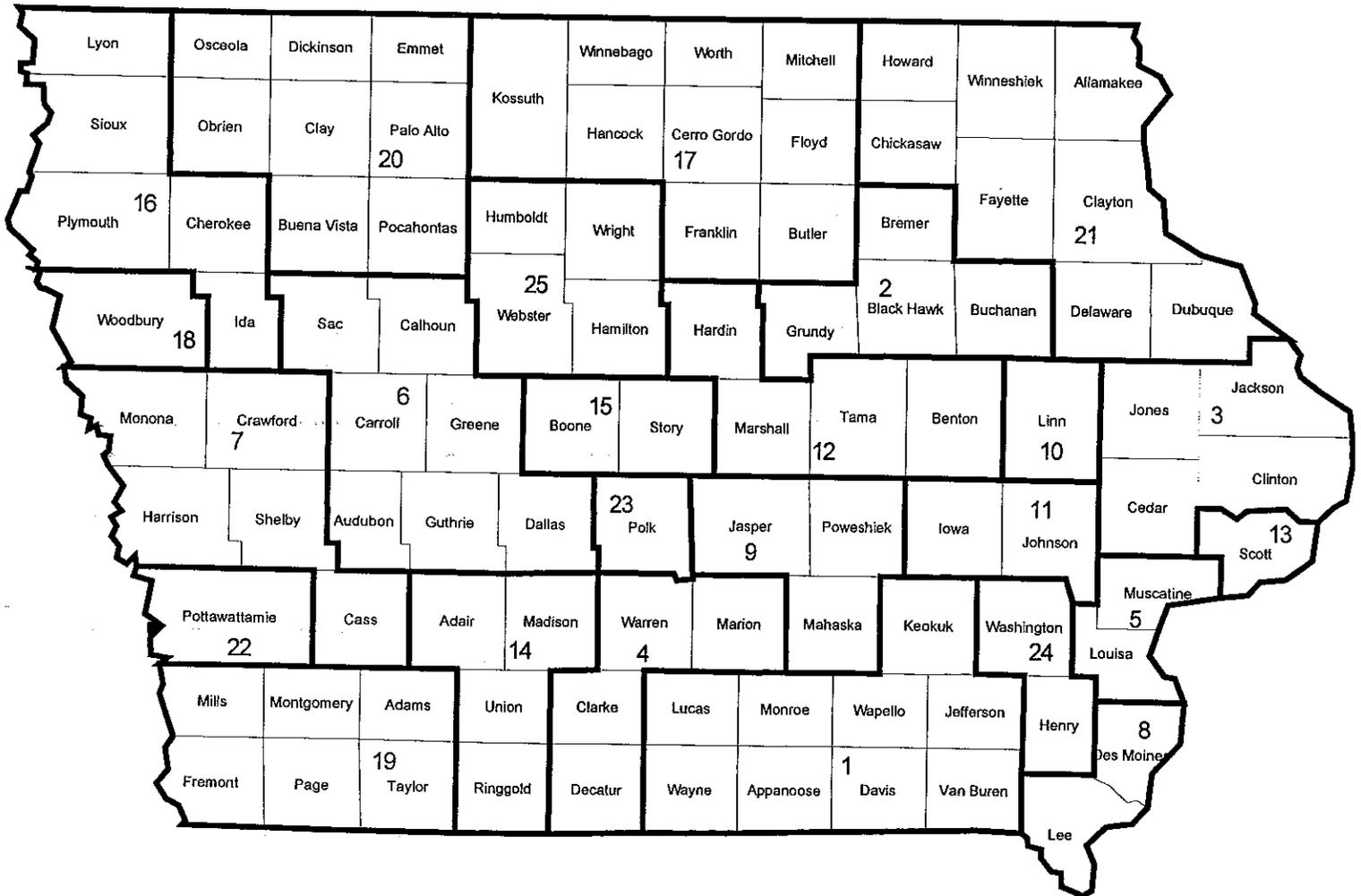
FY 1999 Maternal and Child Health Clinic Funding

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MATURA Action Corporation	28,823	14,857	229,145		28,190	9,454		5,041			4,151	319,661
Mid-Iowa Community Action, Inc.	72,825	28,728	607,413		69,148	29,802			500	7,484	16,308	832,208
Mid-Sioux Opportunity, Inc.	76,257	43,978	215,226		33,800	96,005						465,266
North Iowa Community Action Organization	122,395	57,679	361,910	81,524	59,065	67,487	100,107		105,301	411		955,879
Siouxland Community Health Center	97,995		434,363		425,000	51,225			26,235	16,777	9,899	1,061,494
Taylor County Public Health	53,326	22,701			37,500	26,000		22,730		32,000	6,260	200,517
Upper Des Moines Opportunity, Inc.	66,575	64,446	294,551		59,503	37,269				1,301		523,645
Visiting Nurse Association - Dubuque	173,218	36,299			80,000	56,540		1,134	200	35,000	67,917	450,308
Visiting Nurse Services	119,950	92,353			219,719			113,626		236,871	97,865	880,384
VNA of Pottawattamie Co.	59,626	30,483			59,000	9,897		239,559		28,126	25,702	452,393
Washington Co. Public Health & Home Care	36,477	16,225			10,000	7,445			300		8,682	79,129
Webster Co. Public Health	70,558	28,710	244,776		70,176	44,096					168,486	626,802
Women's Health Services		52,748				76,790		15,000	600	9,000	87,800	241,938
Totals	\$ 2,296,147	\$ 1,236,521	\$ 4,761,445	\$ 243,459	\$ 2,014,274	\$ 2,556,027	\$ 206,942	\$ 1,152,323	\$ 499,546	\$ 1,099,109	\$ 938,298	\$ 17,004,091

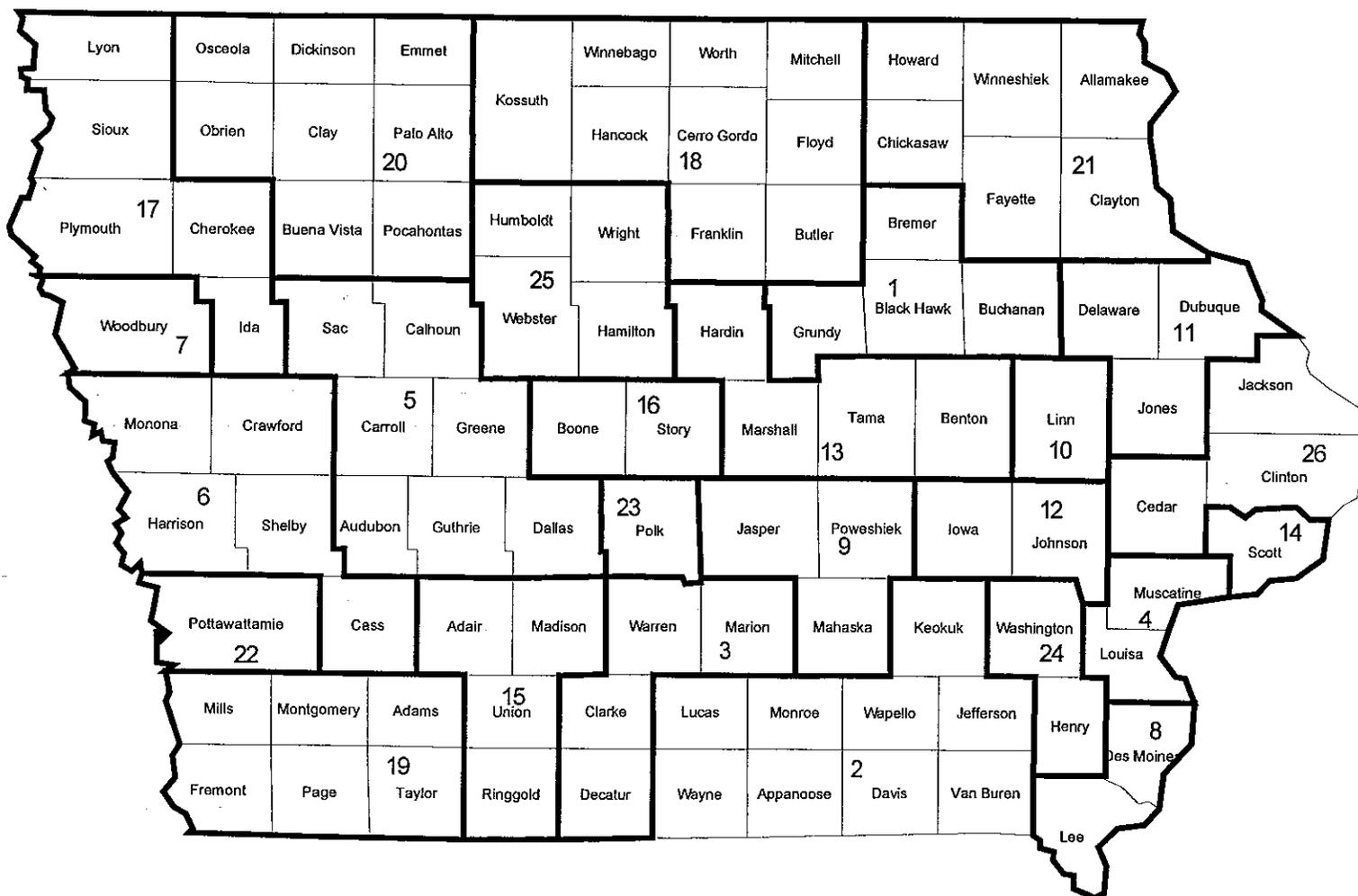
*Includes dental and sealant funds

Child and Adolescent Health Service Regions



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|--|---|---|
| <p>1. American Home Finding Association*
Ottumwa</p> <p>2. Black Hawk County Child Health Center
Waterloo</p> <p>3. Community Health of Jones County
Anamosa</p> <p>4. Community Health Services of Marion County
Knoxville</p> <p>5. Community Health Resources
Muscatine</p> <p>6. Community Opportunities, Inc.
Carroll</p> <p>7. Crawford County Home Health Agency
Denison</p> <p>8. Des Moines County Health Department
Burlington</p> <p>9. Grinnell Regional Medical Center
Grinnell</p> | <p>10. Hawkeye Area Community Action Program, Inc.
Cedar Rapids</p> <p>11. Johnson County Department of Public Health
Iowa City</p> <p>12. Marshalltown Medical and Surgical Center
Marshalltown</p> <p>13. Maternal Health Center
Bettendorf</p> <p>14. MATURA Action Corporation
Creston</p> <p>15. Mid-Iowa Community Action, Inc.
Marshalltown</p> <p>16. Mid-Sioux Opportunity, Inc.
Remsen</p> <p>17. North Iowa Community Action Organization
Mason City</p> <p>18. Siouxland Community Health Center
Sioux City</p> | <p>19. Taylor County Public Health
Bedford</p> <p>20. Upper Des Moines Opportunities, Inc.
Graettinger</p> <p>21. Visiting Nurse Association
Dubuque</p> <p>22. VNA of Pottawattamie County
Council Bluffs</p> <p>23. Visiting Nurse Services
Des Moines</p> <p>24. Washington County PHN Service
Washington</p> <p>25. Webster County Public Health
Fort Dodge</p> <p>* Child & School based clinics</p> |
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Maternal Health Service Regions



- | | | |
|--|---|---|
| 1. Allen Memorial Hospital
Waterloo | 10. Hawkeye Area Community Action Program, Inc.
Cedar Rapids | 19. Taylor County Public Health
Bedford |
| 2. American Home Finding Association
Ottumwa | 11. Hillcrest Family Services
Dubuque | 20. Upper Des Moines Opportunity, Inc.
Graettinger |
| 3. Community Health Services of Marion County
Knoxville | 12. Johnson County Department of Public Health
Iowa City | 21. Visiting Nurse Association
Dubuque |
| 4. Community Health Resources
Muscatine | 13. Marshalltown Medical and Surgical Center
Marshalltown | 22. VNA of Pottawattamie County
Council Bluffs |
| 5. Community Opportunities, Inc.
Carroll | 14. Maternal Health Center
Bettendorf | 23. Visiting Nurse Services
Des Moines |
| 6. Crawford County Home Health Agency
Denison | 15. MATURA Action Corporation
Creston | 24. Washington County PHN Service
Washington |
| 7. Crittenton Center
Sioux City | 16. Mid-Iowa Community Action, Inc.
Marshalltown | 25. Webster County Public Health
Fort Dodge |
| 8. Des Moines County Health Department
Burlington | 17. Mid-Sioux Opportunity, Inc.
Remsen | 26. Women's Health Services
Clinton |
| 9. Grinnell Regional Medical Center
Grinnell | 18. North Iowa Community Action Organization
Mason City | |

Maternal and Child Health Services

Maternal Health Services follow standards set by the American College of Obstetrics and Gynecology for ambulatory obstetric care. At local agencies, physicians, nurses, nutritionists, dental hygienists, and social workers provide the following health care services:

- Early case finding to assist women in accessing prenatal care
- Prenatal risk assessment upon entry into care and as indicated
- Ongoing prenatal and postpartum care
- Care coordination for pregnant women and additional services for women at high risk
- Health education and preparation for labor, delivery, and infant care
- Help in arranging for delivery
- Nutrition assessment and counseling. Supplemental food services are available for eligible women through the Women, Infants and Children (WIC) Program
- Oral assessment and dental referral
- Social assessment and referral
- Home visits after delivery for high risk women and their infants
- Referral for family planning and child health services
- Statewide 24-hour telephone lines

Child and Adolescent Health Services follow the American Academy of Pediatrics guidelines, in collaboration with a local physician advisor. Families receive the following health services:

- Care coordination
- Health assessments through history and physical examinations
- Immunizations
- Developmental screening
- Hearing and speech screening
- Nutrition assessment and counseling. Supplemental food services are available for eligible children through the Women, Infants, and Children (WIC) Program
- Social assessment and referral to community resources
- Oral health assessment and dental referral
- Selected laboratory tests
- Health education
- Selective payment for diagnostic tests and prescriptions
- Referrals to other care providers
- Statewide 24 hour telephone lines