



2004 HEALTHY START ANNUAL REPORT

Office of Infant, Maternal, and Reproductive Health
Bureau of Family and Community Health
Division of Family Health Services
Florida Department of Health

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John O. Agwunobi, M.D., M.B.A., M.P.H.
Secretary, Department of Health

Jeb Bush
Governor

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EXECUTIVE SUMMARY

This report is submitted as required by section 383.2161, *Florida Statutes*, to advise the Florida Legislature about the Healthy Start program.

Healthy Start is a statewide initiative designed to reduce infant mortality, reduce the number of low birth weight babies, and improve health and developmental outcomes. Healthy Start primarily identifies women and infants at high risk for poor outcomes, provides a professional assessment of their needs, identifies resources, and provides timely and important linkages, referrals, or services to reduce the risk of poor birth outcomes among pregnant women, infants, and children up to age three, as well as to reduce poor infant development. The Department of Health works in collaboration with the Florida Association of Healthy Start Coalitions, local county health departments, and other key partners to ensure the development and implementation of public health interventions. Healthy Start services are provided in all 67 Florida counties through local coalitions that include healthcare providers, hospitals, consumers, social service agencies, private businesses, and charitable organizations such as the March of Dimes and United Way.

Since the inception of Florida's Healthy Start program in 1992, Florida's infant mortality rate has dropped 15 percent from 8.8 deaths per 1,000 live births in 1992 to 7.5 deaths per 1,000 live births in 2003. Most recent years show a leveling of infant mortality rates at both the state and national levels. Nationally, the infant mortality rate increased from 6.8 deaths per 1,000 live births in 2001 to 7.0 deaths per 1,000 live births in 2002. National infant mortality statistics for 2003 are not yet available. The number of babies born prematurely or weighing less than about five and one-half pounds (2,500 grams) in Florida increased from 7.4 percent of all live births in 1992 to 8.5 percent in 2003, which mirrors the national trend.

During calendar year 2003, 212,243 infants were born to women in Florida. Florida's Healthy Start screened 108,213 pregnant women and 149,644 infants, and identified 92,167 women and infants at risk for poor outcomes. The program provided 1,468,517 services to 98,104 pregnant women and 900,972 services to 67,307 infants, which includes families identified prior to 2003. This represents an increase of 4,512 in the number of women served, and an increase of 261,007 in the number of services provided to pregnant women, an increase of 2,144 in the number of infants served, and increase of 104,600 in the number of services provided to infants over the numbers served during fiscal year 2002. There were 37,922 at-risk families that Healthy Start providers were unable to contact.

Although infant mortality has declined, the demand for Healthy Start services continues to increase as is evident in the increase in the numbers of babies born at a low birth weight, and the number of at-risk families still outside the Healthy Start system. There also continues to be a need for increased intensity and duration of services to meet identified needs while simultaneously providing risk-appropriate care to program participants.

In 2004, to address increases in infant mortality, the department created and implemented a pilot infant mortality technical assistance project to provide concentrated medical and epidemiological assistance in analyzing and addressing infant mortality in 15 local communities. The findings from this project will be helpful in both state and local planning and policy development regarding maternal and child health. The department also continued teaching local communities new techniques and tools to analyze birth outcomes for use in developing unique local-level strategies to meet specific local needs. Many Florida communities are also

undertaking the use of "Perinatal Periods of Risk Analysis," developed by the World Health Organization to identify factors related to fetal and infant deaths.

INFANT MORTALITY

Infant mortality is a key public health indicator for communities throughout the United States. The death of an infant is a tragic event for families and communities. Infant death rates also serve as an indicator for the overall health of a community and the infrastructure of its public and private health systems. Throughout the nation, public and private partnerships are working to address infant mortality and the key contributing factors, such as low birth weight and prematurity.

Infant mortality rates at both the state and national levels have steadily decreased in recent decades; however, rates have been increasing in recent years. There are many factors influencing this increase including rising numbers of multiple births (attributed to greater access to assisted reproductive technology), increases in maternal age (women are waiting to begin their families), and increases in prematurity and low birth weight (babies born too soon and too small).

There also remain significant racial disparities in infant mortality and low birth weight. African-American infants are more than twice as likely to die before their first birthday when compared to infants of other races. When compared to states with similar racial makeup in birth populations, Florida infants are faring better than those in neighboring Southeastern states. This comparison to states with similar demographics helps target resources to the areas in greatest need, including those areas with large African-American communities.

There are additional factors that place infants at risk, including prenatal smoking and substance abuse. All Florida communities are working to ensure that the most vulnerable, high-risk groups are provided access to key public health services. Florida's Healthy Start provides a way for local communities to do this.

HEALTHY START

Since the inception of Florida's Healthy Start program in 1992, Florida has made great strides in reducing infant mortality, which is defined as a baby dying before his or her first birthday. Florida's infant mortality rate has declined 15 percent over the past 11 years from 8.8 per 1,000 live births in 1992 to 7.5 by 2003. The infant mortality rate for the United States in 2002 was 7.0 per 1,000 live births, up from 6.8 per 1,000 live births in 2001 (National Center for Health Statistics Report, February 2004).

Although Florida continues to make great strides in caring for its youngest citizens, there is still much work to be done. Florida's Healthy Start program plays a key role in the lives of our most precious resource – our future generation. The goal of Healthy Start is to reduce infant mortality, reduce the number of low birth weight babies, and improve their health and developmental outcomes. Through Healthy Start, families receive information about risks that can result in poor birth outcomes and services to address those risks. Healthy Start services are available in every Florida county for high-risk pregnant women, infants, and their families. The Healthy Start program provides the opportunity for all babies to have the best possible chance for a healthy start in life.

Pregnancy and childbirth can be a stressful time for families bringing new feelings, experiences, and responsibilities. Healthy Start is there to help families navigate these new experiences, through referrals, provision of key services including care coordination, and/or linkages to services, education, support, and follow-up. By linking women and infants to medical care and providing a wide range of services for families, Healthy Start helps to ensure healthy mothers, healthy babies, and healthy families.

Healthy Start is a statewide initiative designed to decrease the risk of pregnancy complications and poor birth outcomes for all pregnant women, and decrease the risk of death or impairment in health, intellect, or functional ability for all infants. The primary tasks of Healthy Start are to: identify, through a screening process, those who are at high risk; provide professional assessment of their needs and decide what resources are available to meet those needs; and provide timely and important linkages, referrals, or services to reduce the risk of having a poor birth outcome and/or poor infant development.

Babies are still being born too soon and too small. The rate for babies born with a low birth weight (less than 2,500 grams, or less than approximately five and a half pounds) has increased steadily during the past decade, from 7.4 percent in 1992 to 8.5 percent in 2003. This trend mirrors the national rates for low birth weight. Healthy Start's prenatal program works to address both low birth weight and prematurity.

Section 383.2161, *Florida Statutes*, requires certain data points to be reported each year in this annual report. The following data were collected for the period January 1 through December 31, 2003:

Families at Risk – The Healthy Start screening process identified 92,167 pregnant women and infants at-risk for poor outcomes.

Families Receiving Services – The program provided 1,468,517 services to 98,104 pregnant women and 900,972 services to 67,307 infants, which includes families identified prior to 2003.

Demand for Services – The demand for services increased for both the prenatal and infant populations. An additional 4,512 pregnant women and 2,144 infants received Healthy Start services in 2003. The number of services provided increased by an additional 261,007 units of service to pregnant women and 104,600 units of service to infants.

Unmet Need – There were 37,922 at-risk families that Healthy Start providers were unable to contact.

Florida's Healthy Start continues to serve as an integral component of Florida's public health system for pregnant women, infants, and their families. These federal, state, and local partnerships provide critical resources to ensure the best possible start for our next generation of healthy Floridians.

More in-depth program information, including previous annual reports, can be found on the department's web site at: <http://www.doh.state.fl.us/family/mch/index.html>.

Data in this report are for the most recent year available. The department updates data on a continual basis, and the latest data is available on the department's website at: http://www.doh.state.fl.us/planning_eval/intro.html.

HEALTHY START INFANT AND PRENATAL CARE COALITIONS IN FLORIDA

Healthy Start services are provided in each of Florida's 67 counties. Healthy Start coalitions typically include volunteers representing all facets of their local communities and represent healthcare providers, hospitals, consumers, social service agencies, private businesses, and organizations such as the March of Dimes and the United Way. The coalition members know their community's unique strengths and needs, and work together to assure that key services are in place for pregnant women, infants, and their families. Key information for the following coalitions can be found at <http://www.doh.state.fl.us/family/mch/hs/hsreport2003-1.pdf>.

Bay, Franklin, Gulf Healthy Start Coalition, Incorporated
Broward Healthy Start Coalition, Incorporated
Capital Area Healthy Start Coalition, Incorporated
Central Healthy Start, Incorporated
Charlotte County Healthy Start Coalition, Incorporated
Chipola Healthy Start, Incorporated
Desoto County Health Department
Escambia County Healthy Start Coalition, Incorporated
Florida Keys Healthy Start Coalition, Incorporated
Gadsden Healthy Start Coalition.
Healthy Start Coalition of Hardee, Highlands, and Polk Counties, Incorporated
Healthy Start Coalition of Hillsborough County, Incorporated
Healthy Start Coalition of Jefferson, Madison, Taylor Counties, Incorporated
Healthy Start Coalition of Manatee County, Incorporated
Healthy Start Coalition of Miami-Dade, Incorporated
Healthy Start Coalition of Okaloosa and Walton Counties, Incorporated
Healthy Start Coalition of Pasco County
Healthy Start Coalition of Saint Lucie County
Indian River County Healthy Start Coalition
Healthy Start Coalition of Pinellas County
Healthy Start Coalition of Santa Rosa County
Martin County Healthy Start Coalition
Healthy Start Coalition of Palm Beach County, Incorporated
Healthy Start Coalition of Sarasota County
Healthy Start Coalition of Southwest Florida
Healthy Start of North Central Florida
Northeast Florida Healthy Start Coalition
Okeechobee County Family Health/Healthy Start Coalition
Orange County Healthy Start Coalition
Brevard County Healthy Start Coalition, Incorporated
Seminole County Healthy Start Coalition
Healthy Start Coalition of Flagler and Volusia Counties
Healthy Start Coalition of Osceola County

FLORIDA'S HEALTHY START MEDICAID WAIVER AND MOMCARE

In 2001, a Medicaid 1915(b)(1) waiver was implemented to include a Healthy Start service provision as a part of the amended MediPass Waiver program, which made available new Medicaid funding for Healthy Start. This waiver was the result of a collaborative effort among the Florida Association of Healthy Start Coalitions, the Agency for Health Care Administration, and the Florida Department of Health. The Healthy Start Medicaid waiver has a dual purpose:

1. To provide more intensive Healthy Start services for at-risk Medicaid-eligible women and infants.
2. To make it easier for all Medicaid-eligible women to access the prenatal care they need through the MomCare program. MomCare is a new arm of Healthy Start, focusing on assisting all Medicaid-eligible pregnant women in getting the health care they need.

During fiscal year 2003-2004 (July 1 through June 30), the Medicaid waiver Healthy Start services component accounted for approximately \$11,569,762 in federal funds for Florida's at-risk pregnant women and children. With this additional funding, the Healthy Start program was able to provide more needed Healthy Start services to clients.

The waiver also provided \$4,851,863 in funding for MomCare during fiscal year 2003-2004. Through MomCare, women who are eligible for Medicaid during pregnancy receive assistance through Healthy Start outreach and care management in selecting a healthcare provider; keeping medical appointments; and obtaining other help through the Women, Infants, and Children's (WIC) Program, Healthy Start, and other services. MomCare has become an integral part of the maternal and child-health service delivery system, working efficiently to link women to the services they need.

As part of the Healthy Start waiver program, pregnant women in Florida are able to apply for Medicaid using a simple, one-page, mail-in application. Any healthcare provider (private physicians, clinics, hospitals, and public health agencies) can request a supply of these applications for distributing to patients.

The state uses a streamlined process to review completed Medicaid applications, which must include proof of pregnancy. In most cases, eligible women receive their final determination in less than two weeks.

The Healthy Start Medicaid waiver efficiently increased services to those most in need by building upon the existing infrastructure.

DEPARTMENT OF HEALTH PROJECTS

The maternal and child-health system continues to be a priority for the Florida Department of Health. The department works in collaboration with the Florida Association of Healthy Start Coalitions, the local county health departments, and other key partners to ensure the development and implementation of public health interventions to address the key issues facing high-risk populations.

In 2004, to address increases in infant mortality, the department created an infant mortality technical assistance project for local communities. Using three years of county-specific data, 15 local communities were identified and invited to receive concentrated technical assistance in analyzing and addressing infant mortality in their communities. Three teams were created and include membership from the local county health department, the local Healthy Start coalition, and state maternal and child health staff. In addition, Florida's assigned Centers for Disease Control and Prevention medical epidemiologist served as a member of each team, providing medical and epidemiological consultation, as needed. The technical assistance project, which will continue in 2005, includes special emphasis and training related to:

- Analyzing birth-weight specific mortality.
- Examining trends in the causes of death for infants.
- Using geographic information systems (GIS) mapping.
- Using Florida's Healthy Start linked, infant birth and death files to identify trends and issues specific to local areas.

The findings from this project will help to inform state and local planning and policy makers about maternal and child health issues.

Many of the larger Florida communities are also undertaking the use of the "Perinatal Periods of Risk Analysis," developed by the World Health Organization, to identify the influencing factors related to fetal deaths, as well as infant deaths. The results of this analysis on both the state and local levels indicate there is great opportunity to improve perinatal outcomes by providing greater emphasis on care provided between pregnancies. Findings from these and other analyses are available by contacting the individual, local Healthy Start Coalitions.

The Department of Health is also teaching local communities new techniques and tools for analyzing birth outcomes, so communities can develop unique, local-level strategies to meet individual local needs. The department will continue to provide assistance to communities as these new tools are used to uncover underlying factors in infant mortality rates.

Infant mortality rates in Florida are higher than the nation as a whole, with the national rate for 2002 at 7.0 infant deaths per 1,000 births, while the rate for Florida was at 7.5 per 1,000 births that same year. Florida does have a more diverse racial makeup than the nation, and the mortality rate for black infants is approximately twice as high as for white infants. When compared to the eight states with similar racial make-ups among the birth population (20 to 24 percent of the births were black infant births), only New York has a lower total infant mortality rate than Florida. Florida also has the lowest total infant mortality rate and black infant mortality rate compared to other states with similar racial make-ups in the Southeast region.

The department continues to work in close collaboration with the March of Dimes to better understand the factors associated with prematurity. Being born too soon creates significant health problems for newborns and their families. The root cause of prematurity remains poorly understood. Florida is working with national partners to examine factors related to premature labor and delivery.

In addition, the department began the process for a comprehensive maternal and child health needs assessment in 2004, which will be completed in 2005. This process, conducted every five years, includes state and local partners, such as sister agencies, consumers, healthcare providers, Healthy Start coalitions, the March of Dimes, and other maternal and child health

advocates across the state. The end product of this needs assessment will be used in the development of program priorities and strategic plans for the next five years.

CONCLUSION

Each infant death and low birth weight infant impacts the overall health of our state. The Department of Health and Healthy Start, in partnership with the Florida Association of Healthy Start Coalitions, local county health departments, and key partners throughout the state are working to ensure that each baby born in Florida arrives with the best possible chance for a healthy start in life. Identifying women and infants in need of care, and providing the needed services, referrals, and linkages to other resources within the community, ensures that children can grow healthy, strong, and happy.