



every baby deserves a healthy start



Healthy Start
Annual Report
2006

Healthy Start Annual Report

2006



“The purpose of Florida’s Healthy Start program is to ensure that all babies have the best possible chance of a healthy start in life.”

Dear Friends and Colleagues,

I am pleased to provide you with this copy of the Department of Health’s Healthy Start Annual Report for 2006. The report was prepared pursuant to section 383.2161, Florida Statutes. As required by the statute, the report includes data and information on the number of families identified as families at potential risk; the number of families that receive family outreach services; the increase in demand for services; and the unmet need for services for identified target groups.

The purpose of Florida’s Healthy Start program is to ensure that all babies have the best possible chance of a healthy start in life. Healthy Start is a statewide initiative designed to decrease the risk of pregnancy complications and poor birth outcomes for all pregnant women, and the risk of death or impairment to the health, intellectual or functional abilities 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 poor infant development.

If you have any questions or would like additional copies, please contact the Infant, Maternal, and Reproductive Health Unit, Family Health Services, 4052 Bald Cypress Way, Bin A13, Tallahassee, Florida 32399-1723, (850) 245-4465.

Sincerely,

Joseph Chiaro, M.D., F.A.A.P., Interim Secretary, Florida Department of Health





Table of Contents

Executive Summary, 2

Infant Mortality, 4

Healthy Start, 5

Healthy Start Infant and Prenatal Care Coalitions in Florida, 8

Florida's Healthy Start Medicaid Waiver and MomCare, 10

Department of Health Projects, 12

Conclusion, 16

Executive Summary

Purpose:

This report is submitted as required by section 383.2161, Florida Statutes, to provide the status of the Healthy Start program to the Florida Legislature.

What is Healthy Start?

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 identifies women and infants at an increased risk for poor outcomes, provides a professional assessment of their needs, and identifies resources to address those needs. Healthy Start provides timely and important linkages, referrals, or services. The purpose is to reduce the risk of poor birth outcomes among pregnant women, infants, and children up to age 3, as well as to reduce poor infant development. The Department of Health works with the Florida Association of Healthy Start Coalitions, local county health departments, and other key partners to develop and implement public health interventions that address maternal and child health. Healthy Start services are provided in all 67 Florida counties through local coalitions that include health care providers, hospitals, consumers, social service agencies, private businesses, and charitable organizations, such as the March of Dimes and United Way.

How are we doing compared to the nation?

Since the inception of the Healthy Start program in 1992, our infant mortality rate has dropped 18 percent from 8.8 deaths per 1,000 live births in 1992 to 7.2 deaths per 1,000 live births in 2005. Since 1997, there has been a leveling of infant mortality rates in Florida. Nationally, the infant mortality rate decreased 20 percent from 8.5 deaths per 1,000 live births in 1992 to 6.8 deaths per 1,000 live births in 2004. (National data for 2005 are not yet available.) The number of babies born weighing less than 5.5 pounds (2,500 grams) in Florida increased from 7.4 percent of all live births in 1992 to 8.8 percent in 2005, which mirrors the national trend.

How many families are touched by this program?

During calendar year 2005, 226,219 infants were born to women in Florida. Florida's Healthy Start screened 151,646 pregnant women and 164,203 infants, and identified 120,652 women and infants at risk for poor outcomes. The program provided 1,654,997 services to 112,190



pregnant women and 965,848 services to 10,025 infants, which includes families identified prior to 2005. This represents an increase of 5,346 in the number of women served (5% increase), an increase of 51,845 in the number of services provided to pregnant women (3.2% increase), an increase of 2,473 in the number of infants served (3.7% increase), and an increase of 27,599 in the number of services provided to infants (2.9% increase) over the numbers served in 2004. There were 76,645 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 number of babies born at a low birth weight, and the number of at-risk families still outside the Healthy Start system. Additionally, the number of resident live births increased 18 percent from 191,530 in 1992 to 226,219 in 2005. 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.

Infant Mortality

What is it, and why is it important?

Infant mortality is a key public health indicator for communities throughout the United States. Infant mortality is the death of a child before age 1. 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.

Why do babies die before their first birthday?

Infant mortality rates at both the state and national levels have steadily decreased in recent decades; however, rates have remained relatively unchanged in recent years. There are many factors influencing this flattening of the rates 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

Helping families grow healthy.

Since the inception of Healthy Start 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 18 percent over the past 13 years from 8.8 per 1,000 live births in 1992 to 7.2 in 2005. The infant mortality rate for the United States in 2004 was 6.8 per 1,000 live births, compared to Florida's rate of 7.0 per 1,000 live births during the same year (National Center for Health Statistics Report, June 2006).

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 for high-risk pregnant women, infants, and their families are available in every Florida county. 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, 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 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 outcome 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 5.5 pounds) has increased steadily during the past decade, from 7.4 percent in 1992 to 8.8 percent in 2005. This trend mirrors the national rates for low birth weight.

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, 2005.

Healthy Start Coverage

FAMILIES AT RISK The Healthy Start screening process identified 120,652 pregnant women and infants at-risk for poor outcomes.

FAMILIES RECEIVING SERVICES The program provided 1,654,997 services to 112,190 pregnant women and 965,848 services to 70,025 infants, which includes families identified prior to 2005, as well as families referred to Healthy Start for reasons other than their screening score. Examples of this type of referral include families experiencing domestic violence, special medical issues, or homelessness.

DEMAND FOR SERVICES The demand for services increased for both the prenatal and infant populations. An additional 5,346 pregnant women (5% increase) and 2,473 infants (2.9% increase) received Healthy Start services in 2005. The number of services provided increased by an additional 51,845 units of service to pregnant women (3.2% increase) and 27,599 units of service to infants (2.9% increase).

UNMET NEED There were 74,645 at-risk families that Healthy Start providers were unable to contact. Often, families who are the most difficult to contact are experiencing issues that may influence their health outcomes, such as problems with housing, homelessness, or substance use. Healthy Start uses consistent outreach to try to contact these families and offer services that may help to address their unique situation and improve their health outcomes.

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 ensuing generations.



How do I get more information?

More in-depth program information, including previous annual reports, can be found on the department's website 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 + Prenatal Care Coalitions in Florida

What are Healthy Start Coalitions?

Healthy Start coalitions are community-based nonprofit agencies located throughout the state whose purpose is to address the diverse needs of pregnant women and infants up to age 3. The coalitions conduct assessments of community assets and needs, identify gaps and barriers to effective service delivery and develop a service delivery plan to address identified problem areas and issues. They also allocate available Healthy Start direct service dollars to local providers and monitor the Healthy Start system of care.

Healthy Start services are provided in each of Florida's 67 counties. Healthy Start coalitions typically include volunteers from all facets of their local communities. Coalition members required by statute include consumers, health care providers, local health advocacy interest groups and community organizations, county and municipal governments, social service organizations, and local education communities. The coalition members know their community's unique strengths and needs, and work together to ensure key services are in place for pregnant women, infants, and their families.



Bay, Franklin, Gulf Healthy Start Coalition, Inc.

Healthy Start Coalition of Brevard County, Inc.

Broward Healthy Start Coalition, Inc.

Capital Area Healthy Start Coalition, Inc.

Central Healthy Start, Inc.

Charlotte County Healthy Start Coalition, Inc.

Chipola Healthy Start, Inc.

Escambia County Healthy Start Coalition, Inc.

The Healthy Start Coalition of Flagler and Volusia Counties, Inc.

Florida Keys Healthy Start Coalition, Inc.

Gadsden County Healthy Start Coalition, Inc.

Healthy Start Coalition of Hardee, Highlands, and Polk Counties, Inc.

Healthy Start Coalition of Hillsborough County, Inc.

Indian River County Healthy Start Coalition, Inc.

Healthy Start Coalition of Jefferson, Madison, and Taylor Counties, Inc.

Healthy Start Coalition of Manatee County, Inc.

Martin County Healthy Start Coalition, Inc.

Healthy Start Coalition of Miami-Dade, Inc.

Healthy Start of North Central Florida, Inc.

Northeast Florida Healthy Start Coalition, Inc.

Healthy Start Community Coalition of Okaloosa and Walton Counties, Inc.

Okeechobee County Family Health/Healthy Start Coalition, Inc.

Orange County Healthy Start Coalition, Inc.

The Healthy Start Coalition of Osceola County, Inc.

Healthy Start Coalition of Palm Beach County, Inc.

Healthy Start Coalition of Pasco County, Inc.

Healthy Start Coalition of Pinellas County, Inc.

Healthy Start Coalition of Santa Rosa County, Inc.

Healthy Start Coalition of Sarasota County, Inc.

Seminole County Healthy Start Coalition, Inc.

Healthy Start Coalition of St. Lucie County, Inc.

Healthy Start Coalition of Southwest Florida, Inc.

Florida's Healthy Start Medicaid Waiver + MomCare

Does Medicaid help us provide Healthy Start services in Florida?

Section 1915 (b) of the Social Security Act authorizes the Secretary of Health and Human Services to waive compliance with certain portions of the Medicaid statute. In 2001, a Medicaid 1915(b)(1) waiver was implemented to include Healthy Start services as a reimbursable service. 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 help Medicaid-eligible women receive the prenatal care they need through the MomCare program as early as possible. MomCare focuses on assisting all Medicaid-eligible pregnant women, regardless of risk status, in accessing this care.**

During fiscal year 2005-2006 (July 1 through June 30), the Medicaid waiver Healthy Start services component provided \$11,631,489 in federal funds for at-risk pregnant women and children in Florida. With this additional funding, the Healthy Start program was able to provide more needed Healthy Start services to clients.

The waiver also provided \$5,659,875 in funding for MomCare during fiscal year 2005-2006. Through the MomCare program, women who are eligible for Medicaid during pregnancy receive assistance in selecting a health care 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 health care provider (private physicians, clinics, hospitals, and public health agencies) can request a supply of these applications for distribution to patients. Florida was one of the first states in the nation to implement this process. The state uses a streamlined process to review completed Medicaid applications. In most cases, eligible women receive their final determination in less than two weeks.

The Healthy Start Medicaid waiver has increased services to those most in need by building upon the existing infrastructure and ensuring that services are not duplicated.

In 2005, the Lawton and Rhea Chiles Center for Healthy Mothers and Babies, at the University of South Florida, with assistance from the Maternal Child Health and Education Research Center at the University of Florida, performed an evaluation of the Florida Medicaid Healthy Start Waiver. The evaluation determined that the waiver was having a positive impact. More Sixth Omnibus Budget Reconciliation Act (SOBRA) beneficiaries entered early prenatal care and were seen in prenatal care more frequently, and the number of Medicaid beneficiaries who received Healthy Start services increased by 100 percent or more. Healthy Start saw its clients more frequently and spent more time with them after the waiver was initiated. Pregnant women who were Healthy Start clients experienced improvements in the perinatal outcomes of their infants, while the comparison group experienced a worsening of those same outcomes. These differences in outcomes were most evident in women who were at the highest risk of a poor perinatal outcome Children's Medical Services high-risk pregnancy beneficiaries and those with known higher risk demographics.



Department of Health Projects

What else do we do to promote healthy babies and families?

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.

Assistance to local communities:

The department provides technical assistance to local communities regarding new techniques and tools to analyze birth outcomes for use in developing unique local-level strategies to meet specific needs.

Florida utilizes funding from the Health Resources and Services Administration through the State Systems Development Initiative Grant Program (SSDI) to enhance and improve statewide data capacity. Over the last three years, efforts have included: establishing and improving linkages between existing data files; developing and expanding local level data access and capacity; expanding the agency's data capacity for national reporting; and increasing the evaluation and analytic activities for MCH issues. Immediate goals include: improve access to linked and unlinked files for the department, for state partners and for Florida communities while protecting confidentiality and program integrity; improve accuracy, efficiency and sustainability of current file linkage activities; and improve use of linked and unlinked files for policy and program purposes. The ultimate goal of the SSDI grant, the new Office of Surveillance, Evaluation and Epidemiology, and other departmental efforts is to have information needed to improve the health of women, children and families in a useable format that is readily available to people who can make decisions at individual, family, neighborhood, community, or state levels.

Many of the larger Florida communities use the Perinatal Periods of Risk (PPOR) analysis, developed by the World Health Organization, to identify the influencing factors related to fetal and infant deaths. The results of this analysis are very similar on both the state and local levels indicating there is great opportunity to improve perinatal outcomes by providing greater emphasis on care provided between pregnancies. To address these findings, Florida has worked with state and local partners to create standards and guidelines for the provision of interconception care to women. Technical assistance guidelines are also available to communities as well as on-site technical assistance for areas that are developing local

protocols for this care. Findings from these and other analyses are available by contacting the individual Healthy Start coalitions.

How are other states doing?

When compared to the six states with similar proportions of births with mother's race black, (18.9 percent to 25.7 percent black with Florida in the middle at 22.3 percent, based on births in 2003) Florida ranks second. New York has a lower infant death rate for 2003 while Delaware, North Carolina, Virginia, Tennessee, and Arkansas all have higher infant death rates for 2003.

For the eight states in the U.S. Department of Health and Human Services Region IV (Southeast U.S.), Florida ranks second with Kentucky being the only state in the region with a lower infant mortality rate for 2003. The other states, Alabama, Georgia, Mississippi, North Carolina, South Carolina, and Tennessee, all had higher infant mortality rates than Florida in 2003.

Among the 10 most populous states, Florida ranks sixth with California, Texas, New York, Pennsylvania, and New Jersey having lower infant death rates for 2003 and Illinois, Michigan, Ohio, and Georgia having higher infant death rates for 2003.

Do we partner with others doing similar work?

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.

Responding to findings in the PPOR analysis and infant and maternal mortality review data, the Department of Health and local Healthy Start coalitions implemented a program in the fall of 2003 that provides interconception education and counseling services. These services are offered between pregnancies to Healthy Start women or mothers who are at risk for poor infant and maternal outcomes in subsequent pregnancies. Interconception topics include: access to care, baby spacing, nutrition and physical activity, maternal infections, chronic health conditions, substance abuse and smoking, mental health issues, and environmental risks. In 2005, a total of 5,259 women received 11,525 units of service for interconception education and counseling through Healthy Start. Interconception education and counseling have been incorporated into the Healthy Start system using existing funding. In 2006, the Centers for Disease Control and Prevention published guidelines for preconception and interconception care, encouraging all women to have a reproductive plan. Florida is a recognized leader in this area.



The Department of Health is also actively involved in promoting public awareness of the abandoned baby initiative. Section 383.50, Florida Statutes, allows parents to anonymously leave their unwanted newborn infant (up to 3 days old) with personnel at a fire station, EMS station, or hospital without fear of being charged with abandonment. Department of Health activities, in collaboration with the Healthy Start coalitions, include distribution of public service announcements, educational videos, radio spots, and printed materials emphasizing safe places to take a newborn as an alternative to abandonment. Various forms of advertising have been funded to increase public awareness of this statute, including newspapers, billboards, posters placed in drug stores, and movie theater ads. As of October 2006, 53 newborns have been rescued from possible abandonment through this initiative, which began in 2001.

March of Dimes

Another exciting partnership to improve the health of women prior to pregnancy is the Florida VitaGrant project. To facilitate greater awareness and consumption of folic acid in women of childbearing age, multivitamins containing the recommended daily allowance of folic acid (400 micrograms) are distributed free to nonpregnant women, along with preconception and interconception health education materials. Healthy Start has been very successful in incorporating the VitaGrant resource into their core services and uses the education and materials to supplement their interconception education services in the clinic, home visit, and peer group setting. Healthy Start coalitions also play an active role in raising awareness of the importance of folic acid among the general population

Family Planning Medicaid Waiver

An important initiative in Florida to help reduce financial barriers for maternal health care services is the Family Planning Waiver Program. The Family Planning Waiver Program was developed to reduce infant deaths and unplanned pregnancies, and to help a woman get family planning services and interconception education after delivering a baby or having a miscarriage. Prior to the waiver program, women who were enrolled in Medicaid due to their pregnancy only were no longer eligible for Medicaid coverage 60 days after the birth of a child or after a miscarriage. Thanks to the waiver program, women with a pregnancy-related Medicaid payment are provided limited family planning services for up to 24 months after loss of Medicaid coverage. Healthy Start and MomCare staff play a key role in educating women about this waiver.

Healthy Start Prenatal Screening Revisions

In July 2005, the Florida Department of Health began evaluating the performance of the prenatal screen and assessing the potential for improving the screening. The purpose of this analysis was to assess the potential improvement in performance that may be achieved with a revised screening. This work continued in 2006 with evaluation and literature reviews for current and proposed screening risk factors and assessment and evaluation of the screening forms and questions. These efforts indicate that an additional 5 to 10 percent of women who have a preterm or low birth weight infant could be identified by a revised screening, and improvements can also be made in the ease of use and acceptability of the screening. This project will continue in 2007 with the implementation of the revised Healthy Start prenatal screen scheduled to take place in early 2008.



Conclusion

Why this matters to all of us.

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, helps ensure that children can grow healthy, strong, and happy.

