

FREQUENTLY ASKED QUESTIONS (FAQ) FOR THE FY17 LOCAL MCH WORK PLAN

Question 1: Is there a minimum number of National Performance Measures (NPMs) and State Performance Measures (SPMs) that must be selected as part of our local plan?

Answer: *No, there is no minimum number that must be selected, although we do strongly encourage you to select at least 1 or 2 NPM's or SPMs to focus on as part of your plan as these are the priority needs that Michigan is focusing on as part of the overall Title V Block Grant.*

Question 2: Do we have to identify a Locally Defined need/measure?

Answer: *No, you do not have to identify a locally defined need or measure. If your top unmet MCH needs fall within the NPMs and SPMs listed, that is fine. However, if you have an unmet need that is not covered through a NPM or SPM, we wanted to give you the flexibility of directing resources and efforts accordingly.*

Question 3: Should our Local MCH Work Plan include only activities that are covered with LMCH funding or can we include work that is supported from other grants?

Answer: *Your LMCH plan should only include activities and strategies that are being supported by LMCH funds.*

Question 4: Is there a minimum number of objectives that the work plan should have? How many activities should there be before each objective?

Answer: *The work plan should be a robust document. The plan should reflect what is happening in your community to help move the needle on outcomes for maternal child health. Ideally there will be multiple objectives. Each objective should have multiple strategies. There is no "set" number.*

Question 5: Can we use local MCH funds to cover transportation costs?

Answer: *Yes, you can use MCH funding for transportation costs that are not eligible for reimbursement by another source (e.g. Health Plan, other insurance coverage). If proposing transportation assistance, please explain how this is an unmet need for the population you are targeting.*

Question 6: Can we continue to use funds for direct services as we have in previous years?

Answer: *One of the changes with this new 5-year federal MCH Block grant is the move away from using Title V funding to direct services that could be reimbursed or covered through other means such as the Affordable Care Act, Health Plan/Insurance Coverage, etc. If you are using*

FREQUENTLY ASKED QUESTIONS (FAQ) FOR THE FY17 LOCAL MCH WORK PLAN

MCH dollars for direct services, please explain how this fills a gap in coverage for that population.

Question 7: I don't see MIHP-women, MIHP-children, Family Planning-Women, Family Planning-Adolescents, Immunizations-women, or Immunizations-children in EGrAMS. Does that mean we can't use MCH Funding for these services?

Answer: *You can still use MCH funding for these services. We are asking you to determine whether the activities you are proposing are a direct service, enabling service or public health infrastructure and then list them under those service categories in EGrAMS. If you have specific questions about this, please contact Robin Orsborn or Trudy Esch.*

Question 8: For question 1 that asks us to identify the top 5 MCH needs in our community, should we only list the needs that we plan on using LMCH funding to address?

Answer: *We want you to list the top 5 MCH needs in your community, including any that might not be addressed in your annual plan. This first question gives us a picture of the overall needs within your community and helps us understand your community better. You might have a top need that is adequately funded at this time and therefore wouldn't be appropriate to direct MCH funding to address.*

Question 9: Can I allocate MCH funds to activities that are not listed in the top five priorities?

Answer: *Please add any activity that you are using MCH funds for in the priority list and provide justification for the need.*

Question 10: How should we submit the Local MCH Plan?

Answer: *Please see page 2 of Attachment D Instructions-Examples-LMCH for the directions to name your document rules. Please save and upload as a Word document. The department has Word 2013. If you have a more recent version, please save as an earlier version.*

Question 11: Can we use LMCH funding for home visiting programs? What about home visits?

Answer: *Yes you can use LMCH funds for evidence-based home visiting programs. Public Act 291 of 2012 in Michigan states that public funds being used for home visiting must be used for evidence-based home visiting (EBHV) models. In Michigan, a model is considered to be evidence-based if it meets the Federal definition of evidence-based, or if it meets the State definition of evidence-based (which is very similar to the federal definition). For a list of home visiting models that have gone through a federal review and deemed to meet the federal definition of evidence-based, please refer to: www.homvee.acf.hhs.gov. The Maternal Infant Health Program (MIHP) does meet the state definition of evidence based as outlined in Public Act 291 of 2012.*

FREQUENTLY ASKED QUESTIONS (FAQ) FOR THE FY17 LOCAL MCH WORK PLAN

If you wanted to pursue funding an evidence-based home visiting model, be aware that PA 291 of 2012 requires an annual data report to the legislature, and any MCH funding used for home visiting would be subject to that reporting requirement, e.g. you would need to provide specific data for the report. Should you decide to move forward with funding evidence-based home visiting with MCH funds, you will need to follow up with Tiffany Kostelec for additional information (KostelecT@michigan.gov). Please keep in mind that LMCH funds cannot be used for services that are eligible for reimbursement by 3rd party payers, unless a documented gap exists and can be substantiated.

In terms of other public health activities that are delivered in the home, yes LMCH funds can be used to support that work as long as there is a documented MCH need for that particular service or intervention and you are using an evidence based or informed approach. Although other activities and services are delivered in the home, they should not be referenced as Home Visiting. In order to avoid confusion with state and federal home visiting requirements, please delineate any other home-based public health activities that you are considering funding by using an alternate term such as “in-home family visits” or “home based services”.

Question 12: We want to use LMCH funds to provide immunizations to pregnant moms in our county; we notice that SPM 5 that addresses immunizations is specifically targeting the % of children 19 to 36 months with completed immunizations and % of adolescents 13-18 years of age who have a completed HPV series. Does that mean I can't target pregnant women under SPM 5?

Answer: *We want you to put all of your immunizations efforts targeting the MCH population under SPM 5, because this SPM was selected based on a broader priority need for immunization services, supports and infrastructure for the MCH population. While we honed in on the two priority populations for tracking the measure, that doesn't mean that you have to exclusively focus on these two groups in order to address the broader priority need for immunizations. This goes for the other NPMs and SPMs too; all lead prevention activities should go under SPM 1, all breastfeeding under NPM 4, etc. If you have specific questions about where to put objectives and activities, please let us know.*

Question 13: MDHHS is asking local health departments to be data-driven. In some cases, we are having difficulty finding local data sources. It would be helpful to have additional state sources for local data.

Answer: *We recognize that some sources of data have limited local sources. There are local sources of data that you may have access to including focus groups, survey results and interviews with key stakeholders. We will work with our partners in epidemiology to identify additional data resources. In the meantime, here are two suggestions of Maternal Child Health web-based data that is available on a county wide basis for Michigan:*

FREQUENTLY ASKED QUESTIONS (FAQ) FOR THE FY17 LOCAL MCH WORK PLAN

- *Kids Count Michigan – 2016 (county profiles available on line only)*
- <http://www.mlpp.org/kids-count/michigan-2/mi-data-book-2016>
- *MDHHS Community Health Information (available by county and by local health department) -* http://www.michigan.gov/mdhhs/0,5885,7-339-73970_2944_5326---,00.html