



Healthy Start Annual Report
2008

Florida Department of Health

Infant, Maternal, and Reproductive Health

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EXECUTIVE SUMMARY

The Florida Healthy Start Program, initiated in April 1992, helps pregnant women and infants obtain the health care and social support they need. 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. Section 383.2161, Florida Statutes, requires the Department of Health to provide the status of the Healthy Start program to the Florida Legislature.

During calendar year 2007, women in Florida gave birth to 239,120 infants. The program screened 161,206 pregnant women and 194,441 infants in 2007. The screening process identified a total of 124,645 women and infants at risk for poor outcomes. The program provided 1,957,951 services to 111,989 pregnant women and 1,228,916 services to 78,102 infants. While the number of pregnant women served by Healthy Start fell by less than 1 percent (1,067 less pregnant women received services in 2007 than in 2006), the number of services provided to pregnant women increased. Healthy Start provided an additional 152,688 services to pregnant women in 2007. Healthy Start provided services to 2,754 more infants in 2007 than in 2006, and provided 145,239 more services to infants than in the previous year. There were 73,240 at-risk families that Healthy Start providers were unable to contact.

Healthy Start provides screening of pregnant women and newborns for environmental, medical, nutritional, and behavioral factors that may put the pregnant woman or infant at risk. Depending on need and available resources, Healthy Start provides services to address identified risk factors.

Community-based Healthy Start coalitions assess local needs, develop plans to meet those needs, allocate funding to local providers, and monitor the Healthy Start system of care. Healthy Start services are available in each of Florida's 67 counties. 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.

INTRODUCTION:

In 1991, the Florida Legislature enacted the Florida Healthy Start Program. Initiated in April 1992, the program helps pregnant women and infants obtain the health care and social support they need. 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. The program provides timely and important linkages, referrals, or services. Services help reduce the risks for poor maternal and infant health outcomes, including infant mortality. The purpose is to reduce the risk of poor birth outcomes among pregnant women, reduce poor infant development, and address the health needs of infants and children up to age 3.

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. The local coalitions, whose boards include health care providers, hospitals, consumers, social service agencies, private businesses, and charitable organizations such as the March of Dimes and United Way, provide Healthy Start services statewide.

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 they receive services to address those risks. The Healthy Start program provides the opportunity for all babies to have the best possible chance for a healthy start in life.

Section 383.2161, Florida Statutes, requires the Department of Health to provide the status of the Healthy Start program to the Florida Legislature.

PEOPLE SERVED BY HEALTHY START

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.

Pregnancy and childbirth can be a stressful time for families. Healthy Start is there to help families through referrals, provision of key services including care coordination, linkages to services, education, support, and follow-up.

During calendar year 2007, women in Florida gave birth to 239,120 infants. The Healthy Start program screened 161,206 pregnant women and 194,441 infants in 2007.

Section 383.2161, Florida Statutes, requires the Department of Health to report certain data points each year in this annual report. We collected the following data for the period January 1 through December 31, 2007.

Families at Risk – The Healthy Start screening process identified a total of 124,645 women and infants at risk for poor outcomes. This total includes 45,826 pregnant women and 25,937 infants who scored positive on their respective screens, and 52,882 pregnant women who entered Healthy Start based on other factors.

Families Receiving Services – The program provided 1,957,951 services to 111,989 pregnant women and 1,228,916 services to 78,102 infants, which includes families identified prior to 2007, 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 – While the number of pregnant women served by Healthy Start fell by less than 1 percent (1,067 less pregnant women received services in 2007 than in 2006), the number of services provided to pregnant women increased. Healthy Start provided an additional 152,688 services to pregnant women in 2007 (8.4 percent increase). Healthy Start provided services to 2,754 more infants in 2007 than in 2006 (3.7 percent increase), and provided 145,239 more services to infants than in the previous year (13.4 percent increase).

Unmet Need – There were 73,240 at-risk families that Healthy Start providers were unable to contact in 2007. Often times 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.

SERVICES HEALTHY START PROVIDES

An important role of Healthy Start is increasing access to early, risk-appropriate prenatal care. Eligibility for Medicaid increased through Healthy Start, and women identified as at-risk may receive additional assistance in accessing care, such as transportation to prenatal visits. Healthy Start care coordinators provide referral and follow-up to ensure pregnant women continue to receive the care they need.

Healthy Start provides screening of pregnant women and newborns for environmental, medical, nutritional and behavioral factors that may put the pregnant woman at risk for pregnancy complications or the infant at risk for postneonatal mortality or other poor health outcomes. Every pregnant woman and every infant born in Florida is eligible for the screening process.

In June 2007, the Florida Department of Health launched the first statewide public information campaign to promote completion of the Healthy Start risk screening, the gateway into the Healthy Start program. The campaign, which included television and radio public service announcements, billboards, printed reminders mailed to doctors' offices, and point of purchase displays at the pregnancy test aisle in Winn Dixie grocery stores across the state, raised awareness of the importance of Healthy Start risk screenings. Information about screening, the Healthy Start program, and media and marketing resources is available online at www.HealthyStartBaby.com. The campaign concluded in August 2007.

Depending on need and available resources, Healthy Start provides or facilitates a number of services. Services for pregnant women include prenatal care, laboratory and other testing services, nutrition counseling and referral to WIC, social services, and health education including child birth and parenting education. Breastfeeding education and support, psychosocial counseling, and tobacco cessation assistance are additional services at-risk women receive.

Ongoing care coordination helps families receive needed services. The purpose of ongoing care coordination is to optimize pregnancy, birth, growth and developmental outcomes. Care coordinators accomplish this by addressing the financial, legal, geographical, and personal barriers participants and their families experience by exploring these barriers with them in greater depth and promoting progress toward problem resolution.

Care coordination includes direct contact with the participant and family, as well as contact with other service providers on the participant's and family's behalf. Activities range from tracking to intensive coordination of services addressing complex problems using a family support plan. The family's own perceived goals, and strategies to meet the goals agreed upon by the family, form the basis of the family support plan. Care coordinators can provide this service in the home, the neighborhood, school, workplace, clinic, or wherever they can best meet the needs of the participant.

IMPACT OF HEALTHY START

Since the time the Healthy Start program began in 1992, our infant mortality rate dropped 19 percent from 8.8 deaths per 1,000 live births in 1992 to 7.1 deaths per 1,000 live births in 2007. Since 1997, there has been a leveling of infant mortality rates in Florida. Nationally, the infant mortality rate decreased 19 percent from 8.5 deaths per 1,000 live births in 1992 to 6.9 deaths per 1,000 live births in 2006.

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 tragic 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 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, but rates have remained relatively unchanged in recent years. There are many factors influencing this flattening of the rates including women with chronic health conditions, obesity, more women getting pregnant who previously could not do so (through the use of 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. Black infants are more than twice as likely to die before their first birthday when compared to infants of other races. While both black and white infant mortality rates have dropped, the disparity between the two rates has increased. In 1970, the black

infants were 1.9 times more likely to suffer an infant death than white infants. By 2007, the ratio of the black infant mortality rate to the white infant mortality rate climbed to 2.6.

With the flattening of the infant mortality rates and the continuing disparity between outcomes for black and white infants, Healthy Start is continually challenged to evaluate the local service delivery system to ensure service provision is evidence-based and effective. Healthy Start had an active year in 2007, with an increased number of services being provided, changes in local service delivery networks, and an increased emphasis on interconception care.

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 has increased 25 percent from 191,530 in 1992 to 239,120 in 2007. The need continues for increased intensity and duration of services to meet identified needs while simultaneously providing risk-appropriate care to program participants.

The rate for babies born with a low birth weight (less than 2,500 grams, or less than approximately 5 ½ pounds) has increased slowly during the past decade, from 7.4 percent in 1992 to 8.7 percent in 2007. This trend mirrors the national rates for low birth weight.

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

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 state direct service dollars to local providers and monitor the Healthy Start system of care.

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.

In 2008, 30 coalitions covered 64 of the 67 counties in Florida, with coverage areas for each coalition ranging from one to 12 counties. Healthy Start services are available in all of the 67 counties in Florida, as Desoto, Gadsden, and Seminole counties provide Healthy Start services through the county health department. Following is a listing of the Healthy Start coalitions in Florida.

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.
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.
Healthy Start Coalition of St. Lucie County, Inc.
Healthy Start Coalition of Southwest Florida, Inc.

FLORIDA'S HEALTHY START MEDICAID WAIVER AND MOMCARE

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. Using this strategy, a Medicaid 1915(b)(1) waiver was implemented in 2001 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 2007-2008 (July 1 through June 30), the Medicaid waiver Healthy Start services component provided \$13,017,180 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 \$5,854,170 in funding for MomCare during fiscal year 2007-2008. 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.

The Healthy Start Medicaid Waiver and the MomCare Program benefit pregnant women and infants in a number of ways. Florida was one of the first states in the nation to implement a process allowing pregnant women to apply for Medicaid using a simple, one-page application. The state uses a streamlined process to review completed Medicaid applications. An evaluation conducted by the Lawton and Rhea Chiles Center for Healthy Mothers and Babies in 2005 showed positive impacts associated with the waiver and the MomCare program. MomCare beneficiaries entered prenatal care earlier and had more frequent prenatal care visits. Healthy Start saw clients more frequently and spent more time with them after initiation of the waiver. 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.

CONCLUSION

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. Each infant death and low birth weight infant impacts the overall health of our state. 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.

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.

You can find more in-depth program information, including previous annual reports on the department's website at: <http://www.doh.state.fl.us/family/mch/index.html>. You can also find more detailed information about individual Healthy Start coalitions at <http://www.healthystartflorida.com>.

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