

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: ID
APPLICATION YEAR: 2015

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FORM 2
MCH BUDGET DETAILS FOR FY 2015
[Secs. 504 (d) and 505(a)(3)(4)]
STATE: ID

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

\$

A.Preventive and primary care for children:

\$ (%)

B.Children with special health care needs:

\$ (%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ (%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$

5. OTHER FUNDS (Item 15e of SF 424)

\$

6. PROGRAM INCOME (Item 15f of SF 424)

\$

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$

\$

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$

b. SSDI: \$

c. CISS: \$

d. Abstinence Education: \$

e. Healthy Start: \$

f. EMSC: \$

g. WIC: \$

h. AIDS: \$

i. CDC: \$

j. Education: \$

k. Home Visiting: \$

l. Other:

\$

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

None

FORM 3
STATE MCH FUNDING PROFILE
[Secs. 505(a) and 506((a)-(3))]
STATE: ID

	FY 2010		FY 2011		FY 2012	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 3,236,834	\$ 3,287,077	\$ 3,236,441	\$ 2,830,910	\$ 3,203,380	\$ 2,785,566
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 0	\$ 2,100,482	\$ 0	\$ 0	\$ 2,402,535	\$ 2,089,174
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 2,427,626	\$ 364,826	\$ 2,427,331	\$ 2,123,182	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
7. Subtotal	\$ 5,664,460	\$ 5,752,385	\$ 5,663,772	\$ 4,954,092	\$ 5,605,915	\$ 4,874,740
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 39,298,375	\$ 36,999,062	\$ 38,829,252	\$ 39,243,535	\$ 36,440,601	\$ 38,400,114
9. Total <i>(Line11, Form 2)</i>	\$ 44,962,835	\$ 42,751,447	\$ 44,493,024	\$ 44,197,627	\$ 42,046,516	\$ 43,274,854
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE
[Secs. 505(a) and 506((a)(1-3)]
STATE: ID

	FY 2013		FY 2014		FY 2015	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 3,203,380	\$ 2,926,860	\$ 3,203,380		\$ 3,216,931	
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
3. State Funds <i>(Line3, Form 2)</i>	\$ 2,402,535	\$ 2,195,146	\$ 2,402,535		\$ 2,412,699	
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
6. Program Income <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0		\$ 0	
7. Subtotal	\$ 5,605,915	\$ 5,122,006	\$ 5,605,915	\$ 0	\$ 5,629,630	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 40,530,062	\$ 38,262,321	\$ 38,058,901		\$ 40,620,256	
9. Total <i>(Line11, Form 2)</i>	\$ 46,135,977	\$ 43,384,327	\$ 43,664,816	\$ 0	\$ 46,249,886	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES**1. Section Number:** Form3_Main**Field Name:** FedAllocExpended**Row Name:** Federal Allocation**Column Name:** Expended**Year:** 2012**Field Note:**

In the Children's Special Health Program, payment of participant's medical claims is behind by approximately 10 weeks due to staffing and enrollment in the program has decreased compared with previous years resulting in decreased payment of claims. A contract with a local health district to deliver cleft lip and palate services did not meet contract expectations for 2 quarters resulting in no payment to the contractor during that time, therefore there was less draw federal MCH funds. Further, contracts in the reproductive health program were delayed due to vacancy of program manager.

2. Section Number: Form3_Main**Field Name:** StateMCHFundsExpended**Row Name:** State Funds**Column Name:** Expended**Year:** 2012**Field Note:**

This reflects a 75% match for the expended funds for FY12, not budgeted funds.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: ID

	FY 2010		FY 2011		FY 2012	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 261,759	\$ 253,326	\$ 243,008	\$ 235,455	\$ 242,818	\$ 276,728
b. Infants < 1 year old	\$ 1,401,870	\$ 1,348,385	\$ 1,386,063	\$ 1,158,311	\$ 1,373,275	\$ 1,137,144
c. Children 1 to 22 years old	\$ 2,247,972	\$ 2,305,110	\$ 2,231,083	\$ 2,125,773	\$ 2,218,445	\$ 2,019,208
d. Children with Special Healthcare Needs	\$ 1,217,759	\$ 1,436,639	\$ 1,312,898	\$ 1,038,280	\$ 1,280,507	\$ 1,001,749
e. Others	\$ 270,100	\$ 267,637	\$ 265,720	\$ 268,418	\$ 265,870	\$ 299,432
f. Administration	\$ 265,000	\$ 141,288	\$ 225,000	\$ 127,855	\$ 225,000	\$ 140,479
g. SUBTOTAL	\$ 5,664,460	\$ 5,752,385	\$ 5,663,772	\$ 4,954,092	\$ 5,605,915	\$ 4,874,740
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 0		\$ 0		\$ 0	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 32,168,428		\$ 32,652,784		\$ 29,369,567	
h. AIDS	\$ 2,058,400		\$ 2,248,135		\$ 2,133,507	
i. CDC	\$ 3,388,935		\$ 2,294,736		\$ 2,319,421	
j. Education	\$ 0		\$ 0		\$ 0	
k. Home Visiting	\$ 0		\$ 0		\$ 0	
l. Other						
MIECHV	\$		\$		\$ 1,000,000	
Title X	\$		\$		\$ 1,618,106	
Title X	\$ 1,682,612		\$ 1,633,597		\$	
III. TOTAL	\$ 39,298,375		\$ 38,829,252		\$ 36,440,601	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: ID

	FY 2013		FY 2014		FY 2015	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 314,376	\$ 288,549	\$ 369,616		\$ 319,956	
b. Infants < 1 year old	\$ 1,377,507	\$ 1,215,457	\$ 1,381,248		\$ 1,396,728	
c. Children 1 to 22 years old	\$ 2,190,196	\$ 2,135,248	\$ 2,176,867		\$ 2,192,348	
d. Children with Special Healthcare Needs	\$ 1,255,566	\$ 1,050,027	\$ 1,164,248		\$ 1,269,578	
e. Others	\$ 265,870	\$ 251,578	\$ 248,620		\$ 248,620	
f. Administration	\$ 202,400	\$ 181,147	\$ 265,316		\$ 202,400	
g. SUBTOTAL	\$ 5,605,915	\$ 5,122,006	\$ 5,605,915	\$ 0	\$ 5,629,630	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 0		\$ 0		\$ 0	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 32,684,119		\$ 30,320,679		\$ 31,764,360	
h. AIDS	\$ 2,550,540		\$ 2,679,762		\$ 2,802,196	
i. CDC	\$ 2,049,784		\$ 2,182,100		\$ 3,338,970	
j. Education	\$ 0		\$ 0		\$ 0	
k. Home Visiting	\$ 1,317,564		\$ 1,000,000		\$ 1,000,000	
l. Other						
Title X	\$		\$ 1,876,360		\$ 1,714,730	
Title X	\$ 1,928,055		\$		\$	
III. TOTAL	\$ 40,530,062		\$ 38,058,901		\$ 40,620,256	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2012
Field Note:
Funds expended differ by more than 10% of the budget amount due to delay in contract execution and vacancy of a program manager in reproductive health program.
2. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2013
Field Note:
Expended differs by more than 10% (actual 12%) of budgeted primarily due to decline in Idaho birthrate 2013.
3. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2012
Field Note:
The expended amount differs by more than 10% of the budgeted amount due to decline in birth rate
4. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2012
Field Note:
The expended amount differs by more than 10% of the budgeted amount due to low enrollment of children aged 1 to 18 years of age in the Children's Special Health Program and a 10 week delay in claims payment.
5. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2013
Field Note:
Expended 2013 for CYSHCN differs by more than 10% of budgeted amount due to lower enrollment of children 1 to 18 years of age in the CYSHCN program and a delay in claims payment.
6. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2012
Field Note:
The expended amount differs by more than 10% of the budgeted amount due to low enrollment of children less than 1 year of age in the Children's Special Health Program and a 10 week delay in claims payment.
7. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AIOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2012
Field Note:
The expended amount differs by more than 10% of the budgeted amount due to fewer men accessing family planning and STD services.
8. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2013
Field Note:
FFY13 expended costs exceeded the 10% budgeted amount in Administration. This was due to lower indirect costs than anticipated. Idaho uses a Cost allocation plan.
9. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2012

Field Note:

The expended amount differs by more than 10% of the budgeted amount due to salary savings from division reorganization and less indirect cost incurred than budgeted.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES
[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: ID

TYPE OF SERVICE	FY 2010		FY 2011		FY 2012	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 1,748,690	\$ 1,960,694	\$ 1,837,850	\$ 1,586,526	\$ 1,809,050	\$ 1,631,284
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 46,620	\$ 73,282	\$ 46,700	\$ 46,510	\$ 46,750	\$ 48,318
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,985,505	\$ 3,167,990	\$ 2,988,681	\$ 2,838,520	\$ 2,964,335	\$ 2,687,841
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 883,645	\$ 550,419	\$ 790,541	\$ 482,536	\$ 785,780	\$ 507,297
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 5,664,460	\$ 5,752,385	\$ 5,663,772	\$ 4,954,092	\$ 5,605,915	\$ 4,874,740

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES
[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: ID

TYPE OF SERVICE	FY 2013		FY 2014		FY 2015	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 1,773,050	\$ 1,545,680	\$ 1,471,550	\$	\$ 1,560,482	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 46,750	\$ 50,251	\$ 45,000	\$	\$ 45,000	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,937,268	\$ 2,872,052	\$ 2,921,667	\$	\$ 2,931,831	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 848,847	\$ 654,023	\$ 1,167,698	\$	\$ 1,092,317	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 5,605,915	\$ 5,122,006	\$ 5,605,915	\$ 0	\$ 5,629,630	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES**1. Section Number:** Form5_Main**Field Name:** DirectHCExpended**Row Name:** Direct Health Care Services**Column Name:** Expended**Year:** 2013**Field Note:**

The expended amount in Direct Health Care Services differed by budgeted amount more than 10%. The MCH program has contracted in 2012 with St. Lukes Regional Medical Center for specialty clinic services. Within the context of the contract, the Medical Center is required to bill and collect for services on their end. Prior to 2012, this service was being done by the State MCH program which has reduced costs. There is value to this change because the MCH program was not structured to be as efficient or effective in performing this function.

2. Section Number: Form5_Main**Field Name:** InfrastrBuildExpended**Row Name:** Infrastructure Building Services**Column Name:** Expended**Year:** 2013**Field Note:**

The expended amount in Infrastructure Building Services differs by more than 10% of budget due to a reduction in actual indirect costs, movement of genetic clinic administration to St Lukes Regional Medical Center and a portion of salary savings due to the Division of Public Health re-organization in 2013.

3. Section Number: Form5_Main**Field Name:** InfrastrBuildExpended**Row Name:** Infrastructure Building Services**Column Name:** Expended**Year:** 2012**Field Note:**

The expended amount differs by more than 10% of the budgeted amount due to less indirect costs (by approx. \$115k), genetic program savings, and administrative costs/salary savings than budgeted.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: ID

Total Births by Occurrence:

Reporting Year: 2013

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	21,769	98.9	4	1	1	100
Congenital Hypothyroidism	21,769	98.9	389	6	6	100
Galactosemia	21,769	98.9	19	1	1	100
Sickle Cell Disease	21,769	98.9	241	2	2	100

Other Screening (Specify)

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
- (2) Report only those from resident births.
- (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

None

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: ID

Number of Individuals Served - Historical Data by Annual Report Year

Types of Individuals Served	2008	2009	2010	2011	2012
Pregnant Women	2,863	2,821	2,272	2,062	2,104
Infants < 1 year old	24,522	24,276	23,251	22,738	23,557
Children 1 to 22 years old	72,800	61,486	64,604	63,827	49,533
Children with Special Healthcare Needs	441	729	1,193	1,362	1,401
Others	58,581	67,985	66,825	69,781	67,389
Total	159,207	157,297	158,145	159,770	143,984

Reporting Year: 2013

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	1,491	13.4	0.9	8.7	75.6	1.4
Infants < 1 year old	22,811	36.6	2.3	52.2	8.7	0.2
Children 1 to 22 years old	42,110	26.2	1.7	57.4	14.7	0.0
Children with Special Healthcare Needs	1,635	2.0	0.0	3.9	1.8	92.4
Others	57,078	0.0	0.0	0.0	0.0	100.0
TOTAL	125,125					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Form7_Main

Field Name: CSHCN_TS

Row Name: Children with Special Health Care Needs

Column Name: Title V Total Served

Year: 2015

Field Note:

Increase in number of CYSHCN served is due to expansion of speciality clinics contract funding for eastern Idaho public health district to hold additional clinics, including cardiac clinics.

2. **Section Number:** Form7_Main

Field Name: AllOthers_Unknown

Row Name: Others

Column Name: Unknown %

Year: 2015

Field Note:

Multiple data sources used to derive total served most do not collect any insurance status.

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX
(BY RACE AND ETHNICITY)

[Sec. 506(a)(2)(C-D)]

STATE: ID

Reporting Year: 2012

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	22,941	20,140	148	392	337	46	446	1,432
Title V Served	22,481	19,737	145	384	330	45	437	1,403
Eligible for Title XIX	8,931	7,412	103	253	80	23	261	799
INFANTS								
Total Infants in State	22,190	19,825	223	471	334	60	1,277	0
Title V Served	21,747	19,429	219	462	327	59	1,251	0
Eligible for Title XIX	8,611	7,296	155	304	79	30	747	0

II. UNDUPLICATED COUNT BY ETHNICITY

	HISPANIC OR LATINO (Sub-categories by country or area of origin)							
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	19,388	3,491	62	0	0	0	0	3,491
Title V Served	19,000	3,421	61	0	0	0	0	3,421
Eligible for Title XIX	7,057	1,851	23	0	0	0	0	1,851
INFANTS								
Total Infants in State	18,171	4,019	0	0	0	0	0	4,019
Title V Served	17,808	3,939	0	0	0	0	0	3,939
Eligible for Title XIX	6,614	2,131	0	0	0	0	0	2,131

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2015
Field Note:
Medicaid includes actually served, not eligible as eligibility is not known.
Information from birth certificates primary pay source.
2. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: InfantsTotal_All
Row Name: Total Infants in State
Column Name: Total All Races
Year: 2015
Field Note:
Data source is Census population estimate 2012 as latest available age and race data as of date of entry. Source does not include an "Other or unknown" category.
3. **Section Number:** Form8_I. Unduplicated Count By Race
Field Name: InfantsTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2015
Field Note:
Medicaid includes estimate actually served, not eligible as eligibility is not known.
4. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTotal_TotalNotHispanic
Row Name: Total Deliveries in State
Column Name: Total Not Hispanic or Latino
Year: 2015
Field Note:
Birth certificate does not include country or area of origin for Hispanic ethnicity.
5. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleV_TotalNotHispanic
Row Name: Title V Served
Column Name: Total Not Hispanic or Latino
Year: 2015
Field Note:
Data source is Census population estimate 2012 as latest available age and race data as of date of entry.
6. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: DeliveriesTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2015
Field Note:
Medicaid includes actually served, not eligible as eligibility is not known.
Information from birth certificates primary pay source.
7. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_TotalNotHispanic
Row Name: Total Infants in State
Column Name: Total Not Hispanic or Latino
Year: 2015
Field Note:
Data source is Census population estimate 2012 as latest available age and race data as of date of entry. Source does not include an unknown ethnicity or country or area of origin.
8. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTotal_NotReported
Row Name: Total Infants in State
Column Name: Ethnicity Not Reported
Year: 2015
Field Note:
Census estimate used does not include an unknown ethnicity category.
9. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2015
Field Note:

Medicaid includes estimate actually served, not eligible as eligibility is not known.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: ID

	FY 2015	FY 2014	FY 2013	FY 2012	FY 2011
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: ID

	FY 2015	FY 2014	FY 2013	FY 2012	FY 2011
1. State MCH Toll-Free "Hotline" Telephone Number	211 or 1-800-296-2588				
2. State MCH Toll-Free "Hotline" Name	Idaho Careline				
3. Name of Contact Person for State MCH "Hotline"	Alex Zamora	Heller, Gretchan	Heller, Gretchan	Keith, Courtney	Gonzalez, Cruz A.
4. Contact Person's Telephone Number	208-287-1030	208-287-1030	208-287-1030	208-287-1030	208-287-1030
5. Contact Person's Email	zamoraa@dhw.idaho.gov	hellerg@dhw.idaho.gov	hellerg@dhw.idaho.gov	KeithC@dhw.idaho.gov	GonzaleC@dhw.idaho.gov
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	43717	51955	68895

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2015

[Sec. 506(a)(1)]
STATE: ID

1. State MCH Administration:
(max 2500 characters)

The Bureau of Clinical and Preventive Services, Division of Public Health, Idaho Department of Health and Welfare, administers the Title VMCH Block Grant. The Bureau Chief serves as the MCH Title V Director. The programs directly under the MCH Director include: Maternal and Child Health Program, which includes the Newborn Screening, Genetics, and Maternal, Infant, and Early Childhood Home Visiting programs; Family Planning (Title X), STD/HIV Prevention and Care, Ryan White Part B, Adult Viral Hepatitis; Women's Health Check - Breast and Cervical Cancer Screening/Diagnostics; and Women, Infants, and Children's (WIC) Supplemental Nutrition Program. Title V also funds programs and/or staff in the Bureau of Community and Environmental Health, the Bureau of Vital Records and Health Statistics, and the Office of Epidemiology, Food Protection, an Immunization.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ <input type="text" value="3,216,931"/>
3. Unobligated balance (Line 2, Form 2)	\$ <input type="text" value="0"/>
4. State Funds (Line 3, Form 2)	\$ <input type="text" value="2,412,699"/>
5. Local MCH Funds (Line 4, Form 2)	\$ <input type="text" value="0"/>
6. Other Funds (Line 5, Form 2)	\$ <input type="text" value="0"/>
7. Program Income (Line 6, Form 2)	\$ <input type="text" value="0"/>
8. Total Federal-State Partnership (Line 8, Form 2)	\$ <input type="text" value="5,629,630"/>

9. Most significant providers receiving MCH funds:

Local Public Health Districts
St. Luke's Children's Hospital

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	<input type="text" value="1,491"/>
b. Infants < 1 year old	<input type="text" value="22,811"/>
c. Children 1 to 22 years old	<input type="text" value="42,110"/>
d. CSHCN	<input type="text" value="1,635"/>
e. Others	<input type="text" value="57,078"/>

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

The Maternal and Child Health Program has a positive working relationship with St. Luke's Children's Hospital and the Oregon Health Sciences University to provide a board certified metabolic specialist to staff clinics and provide counseling to Idaho clients in rural areas. The local public health districts provide reproductive health services to all 44 counties in Idaho. The 2-1-1 Idaho CareLine, a free statewide community information and referral service, is a program of the Idaho Department of Health and Welfare. The comprehensive database includes programs that offer free or low cost health and human services or social services, such as Rental Assistance, Energy Assistance, Medical Assistance, Food and Clothing, Child Care Resources, Emergency Shelter, and more.

b. Population-Based Services:
(max 2500 characters)

The WIC/Immunization linkage is a collaboration between the two programs on a statewide basis in which local public health district personnel screen WIC participants 0-24 months of age for immunization status and those not up-to-date are referred to their health care provider or the District for services. Further, the WIC program provides referrals to families in need of lead screening. The Oral Health Program provides population-based services through the health districts for fluoride varnish. The Newborn Screening Program provides follow-up care and coordination for families with infants who have a positive and confirmed newborn screen. The Maternal and Child Health Program is the state lead partner on the Text4Baby campaign which is a mobile text service that connects expecting and new mothers with important pregnancy and infant health information.

c. Infrastructure Building Services:
(max 2500 characters)

The Pregnancy Risk Assessment Tracking System is the state's primary source of perinatal data which is an annual survey of new mothers about behaviors and experiences surrounding pregnancy. The Electronic Birth Certificate 4 (EBC4) project establishes a method for medical providers to submit birth records electronically to the Idaho Bureau of Vital Records and Health Statistics. The Maternal and Child Health Program has partnered with the Medicaid Children's Healthcare Improvement Collaboration Project to implement a medical home pilot for children with special health care needs residing in rural areas of the state.

The Injury Prevention Program supports the operation of the state Poison Control Hotline. The oversight for the poison control contract with Nebraska Poison Control for Idaho will transition July, 2014 to the MCH Program. Funding through the Office of Epidemiology, Food Protection and Immunization provides capacity to address vaccine preventable and communicable diseases which can impact children, schools and child care facilities.

12. The primary Title V Program contact person:

Name	Kris Spain, MS, RD, LD
Title	Chief, Bureau of Clinical and Preventive Services
Address	450 West State Str, 4th Floor
City	Boise
State	Idaho
Zip	83720
Phone	208-334-6960
Fax	208-334-0614
Email	spaink@dhw.idaho.gov
Web	

13. The children with special health care needs (CSHCN) contact person:

Name	Jacquie Watson
Title	Program Manager, Maternal and Child Health
Address	450 West State Str, 4th Floor
City	Boise
State	Idaho
Zip	83720
Phone	208-334-5963
Fax	208-334-4946
Email	watsonj1@dhw.idaho.gov
Web	

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (a)(2)(A)(iii)]
STATE: ID

Form Level Notes for Form 11

None

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	19	29	18	19	19
Denominator	19	29	18	19	19
Data Source	Idaho Newborn Screening Program	Idaho Newborn Screening Program	Idaho Newborn Screening Program	Idaho Newborn Screening Program	Idaho Newborn Screening Program

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)
 Is the Data Provisional or Final?

Final Final

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

None

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	53	53	53	73	75
Annual Indicator	52.7	52.7	72.4	72.4	72.4
Numerator					
Denominator					
Data Source	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	75	75	75	75	75
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2013

Field Note:

For 2011-2015, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate this indicator for both the 2001 and the 2005-06 CSHCN survey. However, in 2009-2010 there were wording changes and additions to the questions used to generate this indicator. The data for 2009-2010 are NOT comparable to earlier versions of the survey.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

2. Section Number: Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2012

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate this indicator for both the 2001 and the 2005-06 CSHCN survey. However, in 2009-2010 there were wording changes and additions to the questions used to generate this indicator. The data for 2009-2010 are NOT comparable to earlier versions of the survey.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

3. Section Number: Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2011

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate this indicator for both the 2001 and the 2005-06 CSHCN survey. However, in 2009-2010 there were wording changes and additions to the questions used to generate this indicator. The data for 2009-2010 are NOT comparable to earlier versions of the survey.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	52	52	52	43	45
Annual Indicator	47.7	47.7	42.9	42.9	42.9
Numerator					
Denominator					
Data Source	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	45	50	50	50	50
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2013

Field Note:

For 2011-2015, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. The data for the 2001 and 2005-2006 surveys are not comparable for NPM3. However, the same questions were used to generate the NPM3 indicator for both the 2005-2006 and 2009-2010, therefore these two surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

2. Section Number: Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2012

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. The data for the 2001 and 2005-2006 surveys are not comparable for NPM3. However, the same questions were used to generate the NPM3 indicator for both the 2005-2006 and 2009-2010, therefore these two surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

3. Section Number: Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2011

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. The data for the 2001 and 2005-

2006 surveys are not comparable for NPM3. However, the same questions were used to generate the NPM3 indicator for both the 2005-2006 and 2009-2010, therefore these two surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	Annual Objective and Performance Data				
	2009	2010	2011	2012	2013
Annual Performance Objective	60	60	60	60	60
Annual Indicator	56.9	56.9	55.2	55.2	55.2
Numerator					
Denominator					
Data Source	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Final

	Annual Objective and Performance Data				
	2014	2015	2016	2017	2018
Annual Performance Objective	60	60	60	60	60
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #4

Field Name: PMD4

Row Name:

Column Name:

Year: 2013

Field Note:

For 2011-2015, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate the NPM4 indicator for the 2001, 2005-06, and 2009-2010 CSHCN surveys.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

2. Section Number: Form11_Performance Measure #4

Field Name: PMD4

Row Name:

Column Name:

Year: 2012

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate the NPM4 indicator for the 2001, 2005-06, and 2009-2010 CSHCN surveys.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

3. Section Number: Form11_Performance Measure #4

Field Name: PMD4

Row Name:

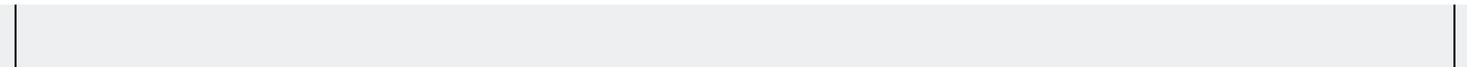
Column Name:

Year: 2011

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate the NPM4 indicator for the 2001, 2005-06, and 2009-2010 CSHCN surveys.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.



PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	86	86	86	65	65
Annual Indicator	86	86	64.6	64.6	64.6
Numerator					
Denominator					
Data Source	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	67	67	70	70	70
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2013

Field Note:

For 2011-2015, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were revisions to the wording, order, and number of questions used to generate this indicator for the 2005-06 CSHCN survey. The questions were also revised extensively for the 2009-2010 CSHCN survey. Therefore, none of the three rounds of the surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

2. Section Number: Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2012

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were revisions to the wording, order, and number of questions used to generate this indicator for the 2005-06 CSHCN survey. The questions were also revised extensively for the 2009-2010 CSHCN survey. Therefore, none of the three rounds of the surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

3. Section Number: Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2011

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were revisions to the wording, order, and number of questions used to generate this indicator for the 2005-06 CSHCN survey. The questions were also revised extensively for the 2009-2010 CSHCN survey. Therefore, none of the three rounds of the surveys are comparable.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	46	46	46	47	47
Annual Indicator	45.8	45.8	46.6	46.6	46.6
Numerator					
Denominator					
Data Source	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2005-2006	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010	National Survey of CSHCNs 2010

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	49	49	51	51	51
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2013

Field Note:

For 2011-2015, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the 2 surveys are not comparable for NPM6, and findings from the 2005-06 survey may be considered baseline data. However, the same questions were used to generate the NPM6 indicator for the 2009-2010 survey. Therefore, the 2005-2006 and 2009-2010 surveys can be compared.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

2. Section Number: Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2012

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the 2 surveys are not comparable for NPM6, and findings from the 2005-06 survey may be considered baseline data. However, the same questions were used to generate the NPM6 indicator for the 2009-2010 survey. Therefore, the 2005-2006 and 2009-2010 surveys can be compared.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

3. Section Number: Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2011

Field Note:

For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources

and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the 2 surveys are not comparable for NPM6, and findings from the 2005-06 survey may be considered baseline data. However, the same questions were used to generate the NPM6 indicator for the 2009-2010 survey. Therefore, the 2005-2006 and 2009-2010 surveys can be compared.

All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	83	75	75	75	75
Annual Indicator	65.8	65.1	68.8	64.5	64.5
Numerator					
Denominator					
Data Source	NIS	NIS	NIS	NIS	NIS

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	75	75	75	75	75
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2013

Field Note:

NIS data for CY2013 is not available until August, 2014. 2012 value used as estimate for 2013,

The value entered is 4:3:1 plus >2or >3 doses of Hib vaccine depending on brand type (primary series only), 3 or more doses of HepB, and 1 or more doses of varicella vaccine.

The percentages come from the National Immunization Survey. No numbers are given as to appropriate population numerator or denominator.

2. Section Number: Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2012

Field Note:

The value entered is 4:3:1 plus >2or >3 doses of Hib vaccine depending on brand type (primary series only), 3 or more doses of HepB, and 1 or more doses of varicella vaccine.

The percentages come from the National Immunization Survey. No numbers are given as to appropriate population numerator or denominator.

Comparable data point in 2011 was 59.3.

3. Section Number: Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2011

Field Note:

NIS data for CY2011 is not available until August, 2012. 2010 value used as estimate for 2011,

The value entered is 4:3:1 plus >2or >3 doses of Hib vaccine depending on brand type (primary series only), 3 or more doses of HepB, and 1 or more doses of varicella vaccine.

The percentages come from the National Immunization Survey. No numbers are given as to appropriate population numerator or denominator.

Rate is depressed because of shortage of Hib vaccine for birth cohort. Excluding Hib rate raises 70.1

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	17.7	16	16	15	15
Annual Indicator	16.8	15.1	11.5	11.7	11.7
Numerator	548	505	385	391	391
Denominator	32,573	33,362	33,425	33,513	33,513
Data Source	Birth Certificate				

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	13.7	13.3	13	12.8	12.6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes1. **Section Number:** Form11_Performance Measure #8**Field Name:** PIV08**Row Name:****Column Name:****Year:** 2013**Field Note:**

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	60.6	60.6	60.6	60.7	60
Annual Indicator	57.1	57.1	57.1	62.7	62.7
Numerator					
Denominator					
Data Source	Smile Survey 2009	Smile Survey 2009	Smile Survey 2009	Smile Survey 2012	Smile Survey 2012

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	62.7	62.8	62.8	62.8	62.9
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2013

Field Note:

The Idaho Smile Survey is conducted every four years conducted through out the school year. Data was collected during the 2012/2013 school year.

Numerator and denominator not provided as the results would be from weighted survey data and imply artificial precision.

2. **Section Number:** Form11_Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2012

Field Note:

The Idaho Smile Survey is conducted every four years conducted through out the school year. Data was collected during the 2008/2009 school year. Data collection for the 2012/2013 period will not be completed before June 2013.

Numerator and denominator not provided as the results would be from weighted survey data and imply artificial precision.

3. **Section Number:** Form11_Performance Measure #9

Field Name: PM09

Row Name:

Column Name:

Year: 2011

Field Note:

The Idaho Smile Survey is conducted every four years conducted through out the school year. Data was collected during the 2008/2009 school year.

Numerator and denominator not provided as the results would be from weighted survey data and imply artificial precision.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	5.5	5.5	4.3	4	3.9
Annual Indicator	4.8	3.9	2.2	2.2	2.8
Numerator	17	14	8	8	10
Denominator	351,924	359,922	359,046	357,402	357,402

Data Source Death Certificates Death Certificates Death Certificate Death Certificate Dept of Transportation

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.
 (Explain data in a year note. See Guidance, Appendix IX.)

<input type="checkbox"/>				
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Is the Data Provisional or Final?

Final Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	3	2.9	2.8	2.7	2.6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2013

Field Note:

Death count preliminary total from Idaho Dept of Transportation for 2013. IDT records usually reflect deaths at the scene of an accident and therefore will be lower than subsequent death certificate data.

2013 population data by age not available at time of entry, 2012 used as best estimate for denominator.

The death rate is also subject to significant fluctuation from year to year as a single multi-death crash can move the rate significantly. Also crashes in rural areas are likely to have delays in medical treatment.

PERFORMANCE MEASURE # 11

The percent of mothers who breastfed their infants at 6 months of age.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	52	52.1	52.2	53	53
Annual Indicator	55.2	55.4	53	57.1	57.1
Numerator					
Denominator					
Data Source	PRATS	PRATS	PRATS	PRATS	PRATS

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	55.1	55.2	55.3	55.4	55.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2013**Field Note:**

Data source is the 2011 Idaho PRATS survey. Data for 2013 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision. Rate reported has approximately +/- 2 percent confidence limits from survey methodology.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

2. Section Number: Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2012**Field Note:**

Data source is the 2011 Idaho PRATS survey. Data for 2012 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

3. Section Number: Form11_Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2011**Field Note:**

Data source is the 2010 Idaho PRATS survey. Data for 2011 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	98.8	98.8	98.8	99.6	99.6
Annual Indicator	99.3	99.5	99.4	99.3	99.1
Numerator	22,179	21,632	20,273	20,500	20,152
Denominator	22,341	21,751	20,397	20,650	20,337
Data Source	HiTrack	HiTrack	HiTrack	HiTrack	HiTrack

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	99.3	99.3	99.3	99.4	99.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2013**Field Note:**

Data Source is State NHS program tracking and surveillance program –HiTrack.

Rate reflects births in hospitals. Not all Idaho births occur in hospitals so use of hearing screening by time of hospital discharge misses roughly 8 percent of births. Final birth rates for Idaho not available at time of entry.

2. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2012**Field Note:**

Data Source is State NHS program tracking and surveillance program –HiTrack.

Rate reflects births in hospitals. Not all Idaho births occur in hospitals so use of hearing screening by time of hospital discharge misses roughly 8 percent of births. If using all births in state with hearing checked in hospitals the rate is 91.6.

3. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2011**Field Note:**

Data Source is State NHS program tracking and surveillance program –HiTrack.

If births in hospitals are used the rate is approximately 99.4. Not all Idaho births occur in hospitals so use of hearing screening by time of hospital discharge misses roughly 8 percent of births.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	12.4	8.8	10	9	9
Annual Indicator	8.9	10.2	9.0	11.3	10.0
Numerator	37,161	42,845	37,721	48,315	45,859
Denominator	418,764	421,894	417,962	427,360	456,430
Data Source	Current Population Survey				
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)	<input type="checkbox"/>				
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	9	8.9	8.9	8.9	8.9
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2013**Field Note:**

Source: U.S. Census Bureau

Current Population Survey, Annual Social and Economic Supplement,

<http://www.census.gov/cps/data/cpstablecreator.html>

The Current Population Survey Annual Social and Economic Supplement is an annual survey of approximately 78,000 households nationwide. Therefore, use extreme caution when making inferences when the cell sizes are small.

Objectives in future years may be notably higher or lower than current performance. The data source tends to have swings from year to year due to nature of the survey.

2. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2012**Field Note:**

Source: U.S. Census Bureau

Current Population Survey, Annual Social and Economic Supplement,

http://www.census.gov/hhes/www/cpstc/cps_table_creator.html

The Current Population Survey Annual Social and Economic Supplement is an annual survey of approximately 78,000 households nationwide. Therefore, use extreme caution when making inferences when the cell sizes are small.

Objectives in future years may be higher than current performance. The data source tends to have swings from year to year due to nature of the survey.

3. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2011**Field Note:**

Source: U.S. Census Bureau

Current Population Survey, Annual Social and Economic Supplement,

http://www.census.gov/hhes/www/cpstc/cps_table_creator.html

The Current Population Survey Annual Social and Economic Supplement is an annual survey of approximately 78,000 households nationwide. Therefore, use extreme caution when making inferences when the cell sizes are small.

Objectives in future years may be higher than current performance. The data source tends to have swings from year to year due to nature of the survey.

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	30.9	30.8	29.5	29.4	28.9
Annual Indicator	30.1	29.5	29.4	28.9	28.1
Numerator	7,314	7,259	7,012	6,555	5,639
Denominator	24,316	24,629	23,828	22,716	20,060

Data Source	2009	2010	2011	2012	2013
	State WIC Data	State WIC Data	State WIC Data	State WIC Data	State WIC Database

Check this box if you cannot report the numerator because

- There are fewer than 5 events over the last year, and
- The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	28.8	28.8	28.7	28.7	28.6

Annual Indicator

Numerator

Denominator

Field Level Notes**1. Section Number:** Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2013**Field Note:**

As of last certification visit per child within age group with valid height and weight measurement.

2. Section Number: Form11_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2012**Field Note:**

As of last certification visit per child.

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	8.5	8.4	8.4	8.3	8.3
Annual Indicator	9.1	8.8	8.1	8.0	8.0
Numerator	2,158	2,033	1,804	1,838	1,838
Denominator	23,713	23,173	22,277	22,916	22,916
Data Source	Birth Certificate				

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	8	8	8	7.9	7.9
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2013

Field Note:

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	10.9	9.8	9.8	9.8	16.5
Annual Indicator	8.7	16.5	23.3	20.2	20.2
Numerator	10	19	27	23	23
Denominator	114,944	115,359	116,117	113,782	113,782
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	16.5	16.5	16.4	16.4	16.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2013

Field Note:

2013 death records have not been finalized, 2012deaths have been used as best estimate.

2013 population data by age not available at time of entry, 2012used as best estimate.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	75	99	99	99	99
Annual Indicator	99	99	99	99	99
Numerator					
Denominator					
Data Source	No reliable data source	No reliable data source	No reliable data source	No reliable data source	No reliable data source

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	99	99	99	99	99
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2013**Field Note:**

Prior to data year 2003, Idaho hospitals with a NICU were used as a proxy measure. However, Idaho has since found errors in that proxy measure and currently does not have a replacement measure. 99 entered to save form.

2. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2012**Field Note:**

Prior to data year 2003, Idaho hospitals with a NICU were used as a proxy measure. However, Idaho has since found errors in that proxy measure and currently does not have a replacement measure. 99 entered to save form.

3. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2011**Field Note:**

Prior to data year 2003, Idaho hospitals with a NICU were used as a proxy measure. However, Idaho has since found errors in that proxy measure and currently does not have a replacement measure. 99 entered to save form.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	73.2	73.2	73.2	73.6	75
Annual Indicator	71.5	73.6	74.4	73.9	73.9
Numerator	16,880	17,016	16,529	16,884	16,884
Denominator	23,611	23,104	22,206	22,841	22,841
Data Source	Birth Certificate				

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	75	75.1	75.1	75.1	75.2
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2013**Field Note:**

2004, the Idaho birth certificate was revised. Beginning in 2004, Idaho prenatal care data are based on date of first prenatal care visit as reported in the mother's medical record. Data are not comparable with Idaho or national data based on month prenatal care began. Prior to the revision, month prenatal care began may have been estimated from mother's recollection or based on information in mother's medical record

Denominator is the total number of births to Idaho women minus the number of births in which trimester prenatal care began was unknown.

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

2. Section Number: Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2012**Field Note:**

2004, the Idaho birth certificate was revised. Beginning in 2004, Idaho prenatal care data are based on date of first prenatal care visit as reported in the mother's medical record. Data are not comparable with Idaho or national data based on month prenatal care began. Prior to the revision, month prenatal care began may have been estimated from mother's recollection or based on information in mother's medical record

Denominator is the total number of births to Idaho women minus the number of births in which trimester prenatal care began was unknown.

3. Section Number: Form11_Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2011**Field Note:**

2004, the Idaho birth certificate was revised. Beginning in 2004, Idaho prenatal care data are based on date of first prenatal care visit as reported in the mother's medical record. Data are not comparable with Idaho or national data based on month prenatal care began. Prior to the revision, month prenatal care began may have been estimated from mother's recollection or based on information in mother's medical record

Denominator is the total number of births to Idaho women minus the number of births in which trimester prenatal care began was unknown.

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (a)(2)(A)(iii)]
STATE: ID

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR

Percent of 9th - 12th grade students that report having engaged in sexual intercourse.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	<input type="text"/>	<input type="text" value="35.5"/>	<input type="text" value="39"/>	<input type="text" value="39"/>	<input type="text" value="39"/>
Annual Indicator	<input type="text" value="39"/>	<input type="text" value="39"/>	<input type="text" value="40"/>	<input type="text" value="40"/>	<input type="text" value="38.5"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	YRBS	YRBS	YRBS	YRBS	YRBS
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	<input type="text" value="39"/>	<input type="text" value="38.9"/>	<input type="text" value="38.9"/>	<input type="text" value="38.9"/>	<input type="text" value="38.9"/>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2013
Field Note:
 Results from: RESULTS OF THE 2013 IDAHO YOUTH RISK BEHAVIOR SURVEY , Numerator and denominator not available. Latest data available.
- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2012
Field Note:
 Results from: RESULTS OF THE 2011 IDAHO YOUTH RISK BEHAVIOR SURVEY , Numerator and denominator not available. Latest data available.
- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2011
Field Note:
 Results from: RESULTS OF THE 2011 IDAHO YOUTH RISK BEHAVIOR SURVEY , Numerator and denominator not available. Latest data available.

STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR

Percent of pregnant women 18 and older who received dental care during pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective		55	55	55	55
Annual Indicator	53.9	53.9	51.1	54.4	54.4
Numerator					
Denominator					
Data Source	PRATS	PRATS	PRATS	PRATS	PRATS
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	55	55	55	55	55
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2013

Field Note:

Data source is the 2011 Idaho PRATS survey. Data for 2013 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values. Received at a minimum teeth cleaning or regular check-up.

2. Section Number: Form11_State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2012

Field Note:

Data source is the 2011 Idaho PRATS survey. Data for 2012 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values. Received at a minimum teeth cleaning or regular check-up.

3. Section Number: Form11_State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2011

Field Note:

Data source is the 2010 Idaho PRATS survey. Data for 2011 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

Received at a minimum teeth cleaning or regular check-up.

STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR

Percent of 9th – 12th grade students that are overweight.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	<input type="text" value="18"/>	<input type="text" value="18"/>	<input type="text" value="18"/>	<input type="text" value="18"/>	<input type="text" value="18"/>
Annual Indicator	<input type="text" value="20.8"/>	<input type="text" value="20.8"/>	<input type="text" value="22.6"/>	<input type="text" value="22.6"/>	<input type="text" value="25.3"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	YRBS	YRBS	YRBS	YRBS	YRBS
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	<input type="text" value="18"/>	<input type="text" value="18"/>	<input type="text" value="18"/>	<input type="text" value="18"/>	<input type="text" value="18"/>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2013

Field Note:

Results from: RESULTS OF THE 2013 IDAHO YOUTH RISK BEHAVIOR SURVEY , Numerator and denominator not available. Latest data available.

2. **Section Number:** Form11_State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2012

Field Note:

Results from: RESULTS OF THE 2011 IDAHO YOUTH RISK BEHAVIOR SURVEY , Numerator and denominator not available. Latest data available.

3. **Section Number:** Form11_State Performance Measure #3

Field Name: SM3

Row Name:

Column Name:

Year: 2011

Field Note:

Results from: RESULTS OF THE 2011 IDAHO YOUTH RISK BEHAVIOR SURVEY , Numerator and denominator not available. Latest data available.

STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR

Percent of women 18 and older who fell into the "normal" weight category according to the body Mass Index (BMI=18.5 to 24.9) prior to pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective		59	59	59	59
Annual Indicator	49.8	48.2	49.7	48.9	48.9
Numerator	11,475	10,943	10,890	11,019	11,019
Denominator	23,036	22,684	21,909	22,538	22,538
Data Source	Birth Certificate	Birth Certificate	Birth Certificate	Birth Certificate	Birth Certificate
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	51	51	51	51.1	51.1
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2013

Field Note:

Based on records where valid pre-pregnancy height and weight were recorded on birth certificates.

Due to out-of-state birth certificates not received as of date of entry, 2012 values are used as estimate.

2. **Section Number:** Form11_State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2012

Field Note:

Based on records where valid pre-pregnancy height and weight were recorded on birth certificates.

3. **Section Number:** Form11_State Performance Measure #4

Field Name: SM4

Row Name:

Column Name:

Year: 2011

Field Note:

Based on records where valid pre-pregnancy height and weight were recorded on birth certificates.

STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR

Percent of women 18 and older who regularly (4 or more times per week) took a multivitamin in the month prior to getting pregnant.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	<input type="text"/>	<input type="text" value="43"/>	<input type="text" value="43"/>	<input type="text" value="43"/>	<input type="text" value="43"/>
Annual Indicator	<input type="text" value="40.3"/>	<input type="text" value="40.3"/>	<input type="text" value="41.3"/>	<input type="text" value="41.8"/>	<input type="text" value="41.8"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	PRATS	PRATS	PRATS	PRATS	PRATS
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	<input type="text" value="43"/>	<input type="text" value="43"/>	<input type="text" value="43"/>	<input type="text" value="43"/>	<input type="text" value="43"/>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2013

Field Note:

Data source is the 2011 Idaho PRATS survey. Data for 2013 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

2. Section Number: Form11_State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2012

Field Note:

Data source is the 2011 Idaho PRATS survey. Data for 2012 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

3. Section Number: Form11_State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2011

Field Note:

Data source is the 2010 Idaho PRATS survey. Data for 2011 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR

Percent of women 18 and older who gave birth and drank alcohol in the 3 months prior to pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	<input type="text"/>	<input type="text" value="35"/>	<input type="text" value="50"/>	<input type="text" value="50"/>	<input type="text" value="50"/>
Annual Indicator	<input type="text" value="79.2"/>	<input type="text" value="79.2"/>	<input type="text" value="78.7"/>	<input type="text" value="79.4"/>	<input type="text" value="79.4"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	PRATS	PRATS	PRATS	PRATS	PRATS
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	<input type="text" value="50"/>	<input type="text" value="50"/>	<input type="text" value="50"/>	<input type="text" value="50"/>	<input type="text" value="50"/>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2013

Field Note:

Data source is the 2011 Idaho PRATS survey. Data for 2013 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

2. Section Number: Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2012

Field Note:

Data source is the 2011 Idaho PRATS survey. Data for 2012 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

3. Section Number: Form11_State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2011

Field Note:

Data source is the 2010 Idaho PRATS survey. Data for 2011 births is not available at time of submission. PRATS is a representative sample of resident women aged 18+ who gave birth in Idaho. Numeration and denominator not provided as they would be the results of weighted survey sample data and imply artificial precision.

Due to the nature of the survey data variability the target goals are not adjusted based on a single year's values.

STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR

Percent of children at kindergarten enrollment who meet state immunization requirements.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective		90	90	90	91
Annual Indicator	85.0	85.8	86.4	91.1	92.0
Numerator	19,240	19,654	19,675	21,761	22,016
Denominator	22,624	22,913	22,762	23,888	23,934
Data Source	SIR 2009	SIR 2010	SIR 2011	SIR 2012	SIR 2013
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	91.1	91.1	91.2	91.2	91.3
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2013

Field Note:

SIR = School Immunization Report, self-reported rates by schools. The immunizations required for Idaho school attendance are set by state policy not necessarily matching national standards.

The numerator includes a record category of "Conditional Admittance" which counts students with partial immunization series where parents/guardians indicated they would bring the child up to date within three weeks. Also students whose parents have filed an exemption to vaccinations for medical, religious or medical grounds.

2. Section Number: Form11_State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2012

Field Note:

SIR = School Immunization Report, self-reported rates by schools. The immunizations required for Idaho school attendance are set by state policy not necessarily matching national standards.

The numerator includes a record category of "Conditional Admittance" which counts students with partial immunization series where parents/guardians indicated they would bring the child up to date within three weeks. Also students whose parents have filed an exemption to vaccinations for medical, religious or medical grounds.

3. Section Number: Form11_State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2011

Field Note:

SIR = School Immunization Report, self-reported rates by schools. The immunizations required for Idaho school attendance are set by state policy not necessarily matching national standards.

In 2011 Idaho added Varicella and Hepatitis A to required vaccinations. The numerator includes a new record category of "Conditional Admittance" which counts students with partial immunization series where parents/guardians indicated they would bring the child up to date within three weeks.

STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR

Percent of children at seventh grade enrollment who meet state immunization requirements.

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective		95	95	95	95
Annual Indicator	93.8	93.5	78.3	81.3	86.8
Numerator	19,997	20,293	17,736	18,396	20,160
Denominator	21,317	21,714	22,659	22,636	23,232
Data Source	SIR 2009	SIR 2010	SIR 2011	SIR 2012	SIR 2013
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2014	2015	2016	2017	2018
Annual Performance Objective	90	90	90	90	90.1
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_State Performance Measure #8

Field Name: SMB

Row Name:

Column Name:

Year: 2013

Field Note:

SIR = School Immunization Report, self-reported rates by schools. The immunizations required for Idaho school attendance are set by state policy not necessarily matching national standards.

The numerator includes a record category of "Conditional Admittance" which counts students with partial immunization series where parents/guardians indicated they would bring the child up to date within three weeks. Also students whose parents have filed an exemption to vaccinations for medical, religious or medical grounds.

2. Section Number: Form11_State Performance Measure #8

Field Name: SMB

Row Name:

Column Name:

Year: 2012

Field Note:

SIR = School Immunization Report, self-reported rates by schools. The immunizations required for Idaho school attendance are set by state policy not necessarily matching national standards.

The numerator includes a record category of "Conditional Admittance" which counts students with partial immunization series where parents/guardians indicated they would bring the child up to date within three weeks. Also students whose parents have filed an exemption to vaccinations for medical, religious or medical grounds.

In 2011 Idaho added Tdap and Meningitis to required vaccinations. There was an increase in the rate of incomplete records at least partially attributed to the additional vaccinations.

3. Section Number: Form11_State Performance Measure #8

Field Name: SMB

Row Name:

Column Name:

Year: 2011

Field Note:

SIR = School Immunization Report, self-reported rates by schools. The immunizations required for Idaho school attendance are set by state policy not necessarily matching national standards.

In 2011 Idaho added Tdap and Meningitis to required vaccinations. There was an increase in the rate of incomplete records at least partially attributed to the additional vaccinations. The numerator includes a new record category of "Conditional Admittance" which counts students with partial immunization series where parents/guardians indicated they would bring the child up to date within three weeks.

Changes in data reporting make rates prior to 2011 not directly comparable.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (a)(2)(B)(iii) AND 506 (a)(2)(A)(iii)]
STATE: ID

Form Level Notes for Form 12

None

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	6	6	6	6	5.8
Annual Indicator	5.3	4.8	5.0	5.3	5.3
Numerator	126	112	112	121	121
Denominator	23,726	23,202	22,311	22,916	22,916
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	5.8	5.8	5.8	5.7	5.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 1

Field Name: OMD1

Row Name:

Column Name:

Year: 2013

Field Note:

2013 death records have not been finalized, 2012 deaths have been used as best estimate.

2013 population data by age not available at time of entry, 2012 used as best estimate.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	<input type="text" value="2"/>				
Annual Indicator	<input type="text"/>				
Numerator	<input type="text"/>				
Denominator	<input type="text"/>				
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because

- 1. There are fewer than 5 events over the last year, and
- 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

<input type="text"/>	<input type="text"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>	<input type="text" value="Yes"/>
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Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2013

Field Note:

2013 death records have not been finalized, 2012 deaths have been used as best estimate.

The average number of black infant deaths per year 2010-2012 is 1.7

2. **Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2012

Field Note:

The average number of black infant deaths per year 2010-2012 is 1.7

3. **Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2011

Field Note:

Average number of black infant deaths per year 2009-2011 is 1.7

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	3.9	3.9	3.9	3.9	3.8
Annual Indicator	3.4	2.7	3.0	3.7	3.7
Numerator	80	63	68	85	85
Denominator	23,726	23,202	22,311	22,916	22,916
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	3.8	3.8	3.8	3.7	3.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 3

Field Name: OM03

Row Name:

Column Name:

Year: 2013

Field Note:

2013 death records have not been finalized, 2012 deaths have been used as best estimate.

2013 population data by age not available at time of entry, 2012 used as best estimate.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	2	2	2	1.9	1.9
Annual Indicator	1.9	2.1	2.0	1.6	1.6
Numerator	46	49	44	36	36
Denominator	23,726	23,202	22,311	22,916	22,916
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	1.9	1.9	1.9	1.9	1.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual				
Denominator	Indicators are not required for future year data.				

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 4

Field Name: OM04

Row Name:

Column Name:

Year: 2013

Field Note:

2013 death records have not been finalized, 2012 deaths have been used as best estimate.

2013 population data by age not available at time of entry, 2012 used as best estimate.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	8.8	8.8	8.8	8.7	8.7
Annual Indicator	7.5	7.5	8.6	10.2	10.2
Numerator	178	174	193	236	236
Denominator	23,726	23,325	22,448	23,031	23,031
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	8.7	8.7	8.6	8.6	8.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2013

Field Note:

2013 death records have not been finalized, 2012 deaths have been used as best estimate.

2013 population data by age not available at time of entry, 2012 used as best estimate.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	25	22	22	21.5	20.5
Annual Indicator	17.1	18.4	17.2	13.7	13.7
Numerator	56	62	58	46	46
Denominator	326,739	336,312	336,285	335,212	335,212
Data Source	Death Certificates	Death Certificates	Death Certificates	Death Certificate	Death Certificate

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2014	2015	2016	2017	2018
Annual Performance Objective	20	20	19.9	19.9	19.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual				
Denominator	Indicators are not required for future year data.				

Field Level Notes1. **Section Number:** Form12_Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2013**Field Note:**

2013 death records have not been finalized, 2012 deaths have been used as best estimate.

2013 population data by age not available at time of entry, 2012 used as best estimate.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (a)(2)(B)(iii) AND 506 (a)(2)(A)(iii)]
STATE: ID

Form Level Notes for Form 12

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: ID

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

4. Family members are involved in service training of CSHCN staff and providers.

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

6. Family members of diverse cultures are involved in all of the above activities.

Total Score:

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: ID FY: 2015

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Reduce premature births and low birth weight.
2. Reduce the incidence of teen pregnancy.
3. Increase the percent of women incorporating effective preconception and prenatal health practices.
4. Improve immunization rates.
5. Decrease childhood overweight and obesity prevalence.
6. Reduce intentional injuries in children and youth.
7. Improve access to medical specialists for CSHCNs.
- 8.
- 9.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE ID

APPLICATION YEAR: 2015

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested <i>(max 250 characters)</i>	Reason(s) Why Assistance Is Needed <i>(max 250 characters)</i>	What State, Organization or Individual Would You suggest Provide the TA (if known) <i>(max 250 characters)</i>
1.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text" value="NA"/>	Idaho would like technical assistance with strategies and methods to obtain unduplicated counts across agencies and external data sources.	The ability to report unduplicated counts will present a more realistic view of Idaho issues	Unknown
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
9.				

	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <input type="text"/>			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: ID

SP() #

PERFORMANCE MEASURE:	Percent of 9th - 12th grade students that report having engaged in sexual intercourse.
STATUS:	Active
GOAL	Reduce the number of teens that are infected with an STD and/or experience an unplanned pregnancy.
DEFINITION	<p>Percentage</p> <p>Numerator: Number of 9th – 12th grade students who had sexual intercourse</p> <p>Denominator: Number of 9th – 12th grade students surveyed</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2020 OBJECTIVE	<p>25-11.</p> <p>Increase the proportion of adolescents who abstain from sexual intercourse or use condoms if currently sexually active to 95%.</p>
DATA SOURCES AND DATA ISSUES	Idaho Youth Behavioral Risk Factor Survey.
SIGNIFICANCE	<p>Unintended pregnancies and sexually transmitted diseases (STDs), including infection with the human immunodeficiency virus that causes AIDS, can result from unprotected sexual behaviors. Abstinence is the only method of complete protection. Condoms, if used correctly and consistently, can help prevent both unintended pregnancy and STDs. Half of all pregnancies in the United States are unintended; that is, at the time of conception the pregnancy was not planned or not wanted. Unintended pregnancy rates in the United States have been declining. The rates remain highest among teenagers, women aged 40 years or older, and low-income African American women. Approximately 1 million teenage girls each year in the United States have unintended pregnancies. Nearly half of all unintended pregnancies end in abortion. Sexually transmitted diseases are common in the United States, with an estimated 15 million new cases of STDs reported each year. Almost 4 million of the new cases of STDs each year occur in adolescents. Women generally suffer more serious STD complications than men, including pelvic inflammatory disease, ectopic pregnancy, infertility, chronic pelvic pain, and cervical cancer from the human papilloma virus. African Americans and Hispanics have higher rates of STDs than whites. According to the 2003 Idaho YRBSS, 36.4% of 9th - 12th grade students reported having sexual intercourse.</p>

SP() #

PERFORMANCE MEASURE:

Percent of pregnant women 18 and older who received dental care during pregnancy.

STATUS:

Active

GOAL

To increase the number of pregnant women of receive at least one dental visit during the second trimester of pregnancy. Purpose of the visit is to identify and correct periodontal disease which lead to low birth weight deliveries and other health consequences for the mother and her young child.

DEFINITION

Percentage

Numerator:

Number of pregnant women who received dental care.

Denominator:

Number of women surveyed.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Idaho's Pregnancy Risk Assessment Tracking System.

SIGNIFICANCE

Poor dental health has been found as a cause of low birth weight deliveries. By intervening during the second trimester, studies have shown improve birth weights. Low birth weight is associated with a number of health issues for young children. According to the 2001 PRATS survey, only 37.6 percent of all mothers went for dental care during pregnancy.

SP() #

PERFORMANCE MEASURE:

Percent of 9th – 12th grade students that are overweight.

STATUS:

Active

GOAL

Reduce the number of school age children who are overweight or obese.

DEFINITION

Percentage

Numerator:

Number of 9th – 12th grade students overweight.

Denominator:

Number of 9th – 12th grade students surveyed.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

19-3c.

Reduce the proportion of children and adolescents who are overweight or obese to 5%.

DATA SOURCES AND DATA ISSUES

Idaho Youth Risk Behavior Surveillance System.

SIGNIFICANCE

Overweight and obesity are major contributors to many preventable causes of death. On average, higher body weights are associated with higher death rates. The number of overweight children, adolescents, and adults has risen over the past four decades. Total costs (medical cost and lost productivity) attributable to obesity alone amounted to an estimated \$99 billion in 1995. Overweight and obesity substantially raise the risk of illness from high blood pressure, high cholesterol, type 2 diabetes, heart disease and stroke, gallbladder disease, arthritis, sleep disturbances and problems breathing, and certain types of cancers. Obese individuals also may suffer from social stigmatization, discrimination, and lowered self-esteem. During 1988–94, 11 percent of children and adolescents aged 6 to 19 years were overweight or obese. According to the 2003 Idaho YRBSS 7.4% of 9th – 12th grade students were reported as being overweight.

SP() #

PERFORMANCE MEASURE:

Percent of women 18 and older who fell into the "normal" weight category according to the body Mass Index (BMI=18.5 to 24.9) prior to pregnancy.

STATUS:

Active

GOAL

To improve birth outcomes by promoting appropriate weight in women prior to becoming pregnant.

DEFINITION

Percentage

Numerator:

Women who report a before-pregnancy BMI between 18.5 and 24.9.

Denominator:

All women surveyed

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Idaho Pregnancy Risk Assessment Tracking System

SIGNIFICANCE

According to the March of Dimes, research has shown that obesity increases the risk of adverse outcomes, such as those listed above, for both mother and baby. The dramatically increasing rate of obesity and the increasing rate of preterm births (PTB) have led to recent investigations of an association of maternal obesity with PTB. Findings suggest that, while obesity may not be an independent risk factor for PTB, obesity does increase rates of medical complications (such as hypertension and diabetes) that have been shown to contribute to PTB.

SP() #

PERFORMANCE MEASURE:

Percent of women 18 and older who regularly (4 or more times per week) took a multivitamin in the month prior to getting pregnant.

STATUS:

Active

GOAL

Increase the number of women who regularly take a multivitamin in the month prior to getting pregnant.

DEFINITION

Percentage

Numerator:

Number of women who report regularly take a multivitamin in the month prior to getting pregnant.

Denominator:

Total number of women surveyed.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Idaho Pregnancy Risk Assessment Tracking System

SIGNIFICANCE

According to the March of Dimes, healthy foods, such as whole grains, fruits and vegetables, are the best sources of vitamins and minerals. But because it is sometimes hard to get all the nutrients we need from foods, all adults should take one multivitamin per day. It is especially important for women who can become pregnant to get enough folic acid. Folic acid, a B vitamin, helps prevent birth defects of the brain and spinal cord when taken before and very early in pregnancy. It is available in most multivitamins, as a folic acid-only supplement and in some foods. The March of Dimes recommends that all women of childbearing age take a multivitamin with 400 micrograms of folic acid every day, as part of a healthy diet. During pregnancy, a woman needs more of some nutrients, such as iron, calcium and folic acid. For this reason, it is wise to start taking a multivitamin before pregnancy.

SP() #

PERFORMANCE MEASURE:

Percent of women 18 and older who gave birth and drank alcohol in the 3 months prior to pregnancy.

STATUS:

Active

GOAL

To reduce the number of women who report drinking any alcohol in the three months prior to their pregnancy.

DEFINITION

Percentage

Numerator:

Number of women who report drinking any alcohol in the three months prior to their pregnancy.

Denominator:

All women surveyed.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Idaho Pregnancy Risk Assessment Tracking System

SIGNIFICANCE

According to the CDC, although women tend to decrease alcohol consumption once they realize they are pregnant, many don't realize they are pregnant until late in the first trimester. In reporting first trimester consumption, many women report their drinking levels after they became aware that they were pregnant. Alcohol consumption prior to pregnancy is reported to be a better measure of consumption during the first trimester.

SP() #

PERFORMANCE MEASURE:

Percent of children at kindergarten enrollment who meet state immunization requirements.

STATUS:

Active

GOAL

To increase the number of children at kindergarten enrollment who meet state immunization requirements.

DEFINITION

Percent of kindergarteners who have received all of the state-required immunizations. This does not include the children whose parents have completed an immunization exemption form.

Numerator:

The number of children at kindergarten enrollment who meet state immunization requirements.

Denominator:

All children enrolled in kindergarten in Idaho.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

School Immunization Reports (SIR)

SIGNIFICANCE

According to the CDC, making sure that children at every age receive all of their vaccinations on time is one of the most important things parents can do to ensure their children's long-term health ? as well as the health of their friends and classmates. Not only do vaccines protect children against common seasonal diseases like seasonal influenza, they also help prevent diseases that are much rarer. However, vaccine-preventable diseases are still out there, so, if children don't stay up to date with vaccinations, the U.S. could see new epidemics of diseases. More children would get sick, and more would die.

SP() #

PERFORMANCE MEASURE:

Percent of children at seventh grade enrollment who meet state immunization requirements.

STATUS:

Active

GOAL

Increase the number of children at seventh grade enrollment who meet state immunization requirements.

DEFINITION

Percent of 7th graders who have received all of the state-required immunizations. This does not include the children whose parents have completed an immunization exemption form.

Numerator:

The number of children at seventh grade enrollment who meet state immunization requirements.

Denominator:

All Idaho children enrolled in the 7th grade.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2020 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Idaho School Immunization Reports (SIR)

SIGNIFICANCE

According to the CDC, making sure that children at every age receive all of their vaccinations on time is one of the most important things parents can do to ensure their children's long-term health ? as well as the health of their friends and classmates. Not only do vaccines protect children against common seasonal diseases like seasonal influenza, they also help prevent diseases that are much rarer. However, vaccine-preventable diseases are still out there, so, if children don't stay up to date with vaccinations, the U.S. could see new epidemics of diseases. More children would get sick, and more would die.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: ID

Form Level Notes for Form 17

Data reflects Medicaid and Idaho CHIP enrollees only. General hospitalization data not available.

HEALTH SYSTEMS CAPACITY #01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	<u>Annual Indicator Data</u>				
	2009	2010	2011	2012	2013
Annual Indicator	15.9	11.2	9.3	12.5	12.5
Numerator	99	89	70	95	92
Denominator	62,348	79,476	75,665	76,113	73,623
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2013
Field Note:
 Data reflects Medicaid and Idaho CHIP enrollees only. General hospitalization data not available.

2. **Section Number:** Form17_Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2012
Field Note:
 Data reflects Medicaid and Idaho CHIP enrollees only. General hospitalization data not available.

3. **Section Number:** Form17_Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2011
Field Note:
 Data reflects Medicaid and Idaho CHIP enrollees only. General hospitalization data not available.

HEALTH SYSTEMS CAPACITY #02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	72.9	72.3	60.5	59.4	59.9
Numerator	18,596	17,983	14,254	13,960	14,114
Denominator	25,510	24,869	23,575	23,502	23,576

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is
 fewer than 5 and therefore a 3-year moving average cannot
 be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2013
Field Note:
 None

HEALTH SYSTEMS CAPACITY #03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	46.0	55.7	57.9	59.3	59.4
Numerator	974	600	453	499	507
Denominator	2,116	1,077	783	841	853

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2013

Field Note:

None

HEALTH SYSTEMS CAPACITY #04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	<u>Annual Indicator Data</u>				
	2009	2010	2011	2012	2013
Annual Indicator	74.6	76.9	77.2	76.1	76.1
Numerator	17,541	17,724	17,093	17,322	17,322
Denominator	23,508	23,062	22,132	22,750	22,750
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.</p> <p style="text-align: center;"><i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

1. Section Number: Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2013

Field Note:

In 2004, the Idaho birth certificate was revised. Beginning in 2004, Idaho prenatal care data are based on date of first prenatal care visit as reported in the mother's medical record. Data are not comparable with Idaho or national data based on month prenatal care began. Prior to the revision, month prenatal care began may have been estimated from mother's recollection or based on information in mother's medical record.

Denominator is the total number of births to Idaho women aged 15-44 minus the number of births in which trimester prenatal care began, number of visits, or length of gestation was unknown.

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

2. Section Number: Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2012

Field Note:

In 2004, the Idaho birth certificate was revised. Beginning in 2004, Idaho prenatal care data are based on date of first prenatal care visit as reported in the mother's medical record. Data are not comparable with Idaho or national data based on month prenatal care began. Prior to the revision, month prenatal care began may have been estimated from mother's recollection or based on information in mother's medical record.

Denominator is the total number of births to Idaho women aged 15-44 minus the number of births in which trimester prenatal care began, number of visits, or length of gestation was unknown.

3. Section Number: Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2011

Field Note:

In 2004, the Idaho birth certificate was revised. Beginning in 2004, Idaho prenatal care data are based on date of first prenatal care visit as reported in the mother's medical record. Data are not comparable with Idaho or national data based on month prenatal care began. Prior to the revision, month prenatal care began may have been estimated from mother's recollection or based on information in mother's medical record.

Denominator is the total number of births to Idaho women aged 15-44 minus the number of births in which trimester prenatal care began, number of visits, or length of gestation was unknown.

HEALTH SYSTEMS CAPACITY #07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	86.0	98.6	83.3	82.1	83.0
Numerator	136,168	160,614	146,161	150,424	151,056
Denominator	158,298	162,963	175,373	183,202	181,953

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is
 fewer than 5 and therefore a 3-year moving average cannot
 be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #07A
Field Name: HSC07A
Row Name:
Column Name:
Year: 2013
Field Note:
 None

HEALTH SYSTEMS CAPACITY #07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	67.6	73.9	53.2	53.3	52.4
Numerator	29,788	38,094	27,293	28,715	28,964
Denominator	44,075	51,575	51,328	53,869	55,227

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2013

Field Note:

Data source is Medicaid Dental Contractor: DentaQuest

2. **Section Number:** Form17_Health Systems Capacity Indicator #07B

Field Name: HSC07B

Row Name:

Column Name:

Year: 2011

Field Note:

Idaho Medicaid has contracted out dental services in 2011. Reporting system differences used by the contractor may result in rate changes.

HEALTH SYSTEMS CAPACITY #08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<u>Annual Indicator Data</u>				
	2009	2010	2011	2012	2013
Annual Indicator	0.0	0.0	0.0	0.0	0.0
Numerator	0	0	0	0	0
Denominator	4,437	4,626	4,705	4,705	4,705
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.</p> <p style="text-align: center;"><i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2013

Field Note:

As was reported in previous years, children who qualify for SSI in Idaho are automatically eligible for Medicaid. Since the Children's Special Health Program only serves children without insurance, this means the numerator remains at zero each year.

2. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2011

Field Note:

As was reported in previous years, children who qualify for SSI in Idaho are automatically eligible for Medicaid. Since the Children's Special Health Program only serves children without insurance, this means the numerator remains at zero each year.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: ID

INDICATOR#05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2012	Payment source from birth certificate	7.7	5.6	6.5
b) <i>Infant deaths per 1,000 live births</i>	2012	Payment source from birth certificate	7.2	3.9	5.3
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2012	Payment source from birth certificate	66	79	73.9
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2012	Payment source from birth certificate	70.8	79.6	76.1

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)
STATE: ID

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
<i>a) Infants (0 to 1)</i>	2013	<input type="text" value="133"/>
<i>b) Medicaid Children</i>	2013	<input type="text" value="133"/>
(Age range <input type="text" value="1"/> to <input type="text" value="5"/>)		<input type="text" value="133"/>
(Age range <input type="text" value="6"/> to <input type="text" value="16"/>)		<input type="text" value="133"/>
(Age range <input type="text" value="17"/> to <input type="text" value="18"/>)		
<i>c) Pregnant Women</i>	2013	<input type="text" value="133"/>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: ID

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2013	185
b) <i>Medicaid Children</i> (Age range <input type="text" value="1"/> to <input type="text" value="5"/>) (Age range <input type="text" value="6"/> to <input type="text" value="16"/>) (Age range <input type="text" value="17"/> to <input type="text" value="18"/>)	2013	185 185 185
c) <i>Pregnant Women</i>	2013	185

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

None

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: ID

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	1	No
Annual linkage of birth certificates and WIC eligibility files	2	Yes
Annual linkage of birth certificates and newborn screening files	1	No
REGISTRIES AND SURVEYS Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	1	No
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: ID

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other:		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: ID

Form Level Notes for Form 20

None

HEALTH STATUS INDICATOR #01A

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2009	2010	2011	2012	2013
Annual Indicator	6.6	6.8	6.1	6.5	6.5
Numerator	1,557	1,582	1,355	1,481	1,481
Denominator	23,713	23,195	22,306	22,936	22,936
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is					
fewer than 5 and therefore a 3-year moving average cannot					
be applied.					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2013

Field Note:

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

2. **Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2012

Field Note:

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

3. **Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2011

Field Note:

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

HEALTH STATUS INDICATOR #01B

The percent of live singleton births weighing less than 2,500 grams.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	5.2	5.2	4.5	4.9	4.9
Numerator	1,189	1,175	976	1,079	1,079
Denominator	23,021	22,463	21,623	22,219	22,219

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2013

Field Note:

Denominator is the total number of singleton births to Idaho women minus the number of births in which birth weight was unknown.

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

2. **Section Number:** Form20_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2012

Field Note:

Denominator is the total number of singleton births to Idaho women minus the number of births in which birth weight was unknown.

3. **Section Number:** Form20_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2011

Field Note:

Denominator is the total number of singleton births to Idaho women minus the number of births in which birth weight was unknown.

HEALTH STATUS INDICATOR #02A

The percent of live births weighing less than 1,500 grams.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	1.1	1.1	1.0	1.0	1.0
Numerator	264	249	216	220	220
Denominator	23,713	23,195	22,306	22,936	22,936

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes1. **Section Number:** Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2013**Field Note:**

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

2. **Section Number:** Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2012**Field Note:**

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

3. **Section Number:** Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2011**Field Note:**

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

HEALTH STATUS INDICATOR #02B

The percent of live singleton births weighing less than 1,500 grams.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	0.9	0.8	0.7	0.7	0.7
Numerator	206	181	153	161	161
Denominator	23,021	22,463	21,623	22,219	22,219

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2013

Field Note:

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

Due to out-of-state birth certificates not received as of date of entry 2012 values are used as estimate.

2. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2012

Field Note:

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

3. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2011

Field Note:

Denominator is the total number of births to Idaho women minus the number of births in which birth weight was unknown.

HEALTH STATUS INDICATOR #03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	8.5	8.1	7.0	6.4	6.4
Numerator	30	29	25	23	23
Denominator	351,924	359,922	359,046	357,402	357,402

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2013

Field Note:

2013 population data by age not available at time of entry, 2012 used as best estimate.

2013 Death certificates not finalized by date of entry, 2012 used as best estimate.

HEALTH STATUS INDICATOR #03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	4.8	3.9	2.2	2.2	2.8
Numerator	17	14	8	8	10
Denominator	351,924	359,922	359,046	357,402	357,402

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2013

Field Note:

Department of Transportation accident death reports used as estimate for 2013. Since accident reports only include deaths at the scene, the number will vary from finalized death certificates.

2013 population data by age not available at time of entry, 2012 used as best estimate.

the 999 is waiting on DoT number

HEALTH STATUS INDICATOR #03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	27.1	25.0	24.8	17.7	21.2
Numerator	62	56	56	40	48
Denominator	228,653	223,568	225,947	226,098	226,098

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes1. **Section Number:** Form20_Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2013**Field Note:**

Department of Transportation accident death reports used as estimate for 2013. Since accident reports only include deaths at the scene, the number will vary from finalized death certificates.

2013 population data by age not available at time of entry, 2012 used as best estimate.

999 is waiting on DoT number.

HEALTH STATUS INDICATOR #04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	999	999	999	999	999
Numerator					
Denominator					

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2013

Field Note:

Could not identify a realistic source of data.
Entered 999 so that the form would save.

2. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2012

Field Note:

Could not identify a realistic source of data.
Entered 999 so that the form would save.

3. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2011

Field Note:

Could not identify a realistic source of data.
Entered 999 so that the form would save.

HEALTH STATUS INDICATOR #04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	275.6	307.3	248.4	275.0	277.3
Numerator	970	1,106	892	983	991
Denominator	351,924	359,922	359,046	357,402	357,402

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2013

Field Note:

Injuries reflect accidents classified as reportable by Idaho Dept of Transportation where age of injured, or possibly injured person is known. 2013 injuries are preliminary count.

2013 population data by age not available at time of entry, 2012 used as best estimate.

2. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2012

Field Note:

Injuries reflect accidents classified as reportable by Idaho Dept of Transportation where age of injured, or possibly injured person is known.

HEALTH STATUS INDICATOR #04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	1,474.7	1,522.6	1,318.5	1,377.3	1,404.7
Numerator	3,372	3,404	2,979	3,114	3,176
Denominator	228,653	223,568	225,947	226,098	226,098

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is

fewer than 5 and therefore a 3-year moving average cannot

be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2013

Field Note:

Injuries reflect accidents classified as reportable by Idaho Dept of Transportation where age of injured, or possibly injured person is known.

2013 injuries are preliminary count.

2013 population data by age not available at time of entry, 2012 used as best estimate.

2. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2012

Field Note:

Injuries reflect accidents classified as reportable by Idaho Dept of Transportation where age of injured, or possibly injured person is known.

3. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2011

Field Note:

Injuries reflect accidents classified as reportable by Idaho Dept of Transportation where age of injured, or possibly injured person is known.

Injuries are a preliminary count.

HEALTH STATUS INDICATOR #05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	19.6	18.8	20.2	19.7	22.5
Numerator	1,114	1,060	1,156	1,090	1,246
Denominator	56,771	56,423	57,116	55,452	55,454

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is
 fewer than 5 and therefore a 3-year moving average cannot
 be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)***Is the Data Provisional or Final?**

Final

Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #05A**Field Name:** HSI05A**Row Name:****Column Name:****Year:** 2013**Field Note:**

2013 population data by age and gender not available at time of entry, 2012 used as best estimate.

2. Section Number: Form20_Health Status Indicator #05A**Field Name:** HSI05A**Row Name:****Column Name:****Year:** 2012**Field Note:**

2012 population data by age not available at time of entry, 2011 used as best estimate.

HEALTH STATUS INDICATOR #05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

Annual Indicator Data

	2009	2010	2011	2012	2013
Annual Indicator	6.5	7.6	8.6	8.2	10.0
Numerator	1,621	1,904	2,151	2,083	2,552
Denominator	249,682	249,880	251,559	254,384	254,384

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is
 fewer than 5 and therefore a 3-year moving average cannot
 be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)***Is the Data Provisional or Final?**

Final

Provisional

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #05B**Field Name:** HSI05B**Row Name:****Column Name:****Year:** 2013**Field Note:**

2013 population data by age and gender not available at time of entry, 2012 used as best estimate.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2012 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	22,190	19,825	223	471	334	60	1,277	0
Children 1 through 4	93,782	85,502	984	1,854	1,123	173	4,146	0
Children 5 through 9	122,203	112,195	1,286	2,353	1,460	225	4,684	0
Children 10 through 14	119,227	109,824	1,213	2,267	1,513	264	4,146	0
Children 15 through 19	113,782	104,855	1,297	2,281	1,479	270	3,600	0
Children 20 through 24	112,316	103,658	1,343	2,194	1,711	415	2,995	0
Children 0 through 24	583,500	535,859	6,346	11,420	7,620	1,407	20,848	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	18,171	4,019	0
Children 1 through 4	76,004	17,778	0
Children 5 through 9	100,120	22,083	0
Children 10 through 14	99,502	19,725	0
Children 15 through 19	95,571	18,211	0
Children 20 through 24	95,842	16,474	0
Children 0 through 24	485,210	98,290	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2012 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	9	6	0	1	0	0	0	2
Women 15 through 17	391	302	4	13	0	1	24	47
Women 18 through 19	1,176	954	11	44	2	3	38	124
Women 20 through 34	18,890	16,742	116	300	273	37	345	1,077
Women 35 or older	2,472	2,133	17	34	62	5	39	182
Women of all ages	22,938	20,137	148	392	337	46	446	1,432

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	3	6	0
Women 15 through 17	246	143	2
Women 18 through 19	866	305	5
Women 20 through 34	16,188	2,655	47
Women 35 or older	2,082	382	8
Women of all ages	19,385	3,491	62

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2012 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	121	104	2	4	2	0	1	8
Children 1 through 4	13	12	0	1	0	0	0	0
Children 5 through 9	14	14	0	0	0	0	0	0
Children 10 through 14	19	19	0	0	0	0	0	0
Children 15 through 19	69	67	0	1	0	1	0	0
Children 20 through 24	94	90	0	0	2	0	0	2
Children 0 through 24	330	306	2	6	4	1	1	10

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	91	29	1
Children 1 through 4	10	3	0
Children 5 through 9	12	2	0
Children 10 through 14	16	3	0
Children 15 through 19	61	8	0
Children 20 through 24	84	9	1
Children 0 through 24	274	54	2

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	471,184	432,201	5,003	9,226	5,909	992	17,853	0	2012
Percent in household headed by single parent	22.5	22.7	0.0	0.0	22.2	0.0	14.0	0.0	2013
Percent in TANF (Grant) families	1.0	1.0	1.9	1.1	0.2	1.0	0.5	0.0	2013
Number enrolled in Medicaid	194,609	178,860	2,075	2,025	1,085	287	2,325	7,952	2013
Number enrolled in SCHIP	23,780	22,394	97	125	133	37	183	811	2013
Number living in foster home care	2,382	2,085	50	142	3	0	87	15	2013
Number enrolled in food stamp program	157,396	144,701	2,018	1,671	799	251	2,016	5,940	2013
Number enrolled in WIC	42,130	37,527	532	1,805	507	148	1,611	0	2013
Rate (per 100,000) of juvenile crime arrests	3,940.9	3,847.1	8,854.7	3,631.0	2,217.0	0.0	0.0	0.0	2013
Percentage of high school drop-outs (grade 9 through 12)	13.5	13.4	3.1	51.9	13.5	13.4	13.5	0.0	2013

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	389,368	81,816	0	2012
Percent in household headed by single parent	22.4	23.0	0.0	2013
Percent in TANF (Grant) families	0.9	1.3	0.0	2013
Number enrolled in Medicaid	147,400	43,617	3,592	2013
Number enrolled in SCHIP	17,239	6,181	360	2013
Number living in foster home care	2,023	359	0	2013
Number enrolled in food stamp program	119,562	35,359	2,475	2013
Number enrolled in WIC	28,283	13,847	0	2013
Rate (per 100,000) of juvenile crime arrests	3,711.7	3,380.8	0.0	2013

Percentage of high school drop-outs (grade 9 through 12)

12.7

18.7

0.0

2013

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2012 Is this data from a State Projection? No Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	0
Living in urban areas	334,801
Living in rural areas	109,020
Living in frontier areas	27,363
Total - all children 0 through 19	471,184

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2013 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	1,587,970
Percent Below: 50% of poverty	5.4
100% of poverty	14.4
200% of poverty	38

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: ID

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2013 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	468,352
Percent Below: 50% of poverty	6.9
100% of poverty	19.4
200% of poverty	47.8

FORM NOTES FOR FORM 21

U.S. Census Bureau, more than one race file, for 2012. "Other and Unknown" race and "Ethnicity not reported" categories not available on the intercensal file.

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 07A
Field Name: Race_Women15
Row Name: Women < 15
Column Name:
Year: 2015
Field Note:
There were 3 White Only women whose age could not be determined are not included in the body of the data.
2. **Section Number:** Form21_Indicator 07B
Field Name: Ethnicity_Women15
Row Name: Women < 15
Column Name:
Year: 2015
Field Note:
There were 3 Not Hispanic or Latino women whose age could not be determined are not included in the body of the data.
3. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2015
Field Note:
From Census population by age estimates. Source does not have an "Other or unknown" category.
4. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey. Some categories have no or unreliable sample and a value of 0 is entered. Also data source does not have an "Other or Unknown" race category.
5. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2015
Field Note:
Population data source, census estimate, does not have a count for "Other and Unknown" so there is no denominator to calculate a rate for that category. The raw number of children aged 0-19 with race of Other or Unknown is 143.
6. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_WCNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2015
Field Note:
State WIC database does not have and "Other or unknown" category.
7. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2015
Field Note:
Arrest records from Idaho State Police do not distinguish between Asian and NHOP, rate for Asian includes both.
Also arrest records do not have a "more than one race reported".
A rate for "other or unknown" cannot be reported because the census population data for race and age does not include an "unknown race" count.
Approximately 5.6% of arrests were unknown race.
8. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2015
Field Note:
Data sources for this measure are not consistent with previous years' data. Prior to 2014 the Idaho Department of Education website provided a drop-out rate by race/ethnicity for 9 to 12 grade students but methodology for calculation was not provided.

Starting with the 2015 application the data for dropout is calculated using the number of students graduating in the stated data year divided by the enrollment of the 9th grade class four years prior: $100 * (1 - \text{Graduates/enrolled 9th grade})$. The rate results in a much greater dropout rate than previously reported.

The data used does not have an "Other or unknown" race category.

9. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_Children
Row Name: All children 0 through 19
Column Name:
Year: 2015
Field Note:
From Census population by age estimates. Source does not have an "Other or unknown" category.
10. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey. Data source does not have an "Ethnicity not reported" category.
11. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2015
Field Note:
Population data source, census estimate, does not have a count for "Ethnicity Not Reported" so there is no denominator to calculate a rate for that category. The raw number of children aged 0-19 with ethnicity of Ethnicity Not Reported is 42.
12. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2015
Field Note:
State WIC database does not have an "Ethnicity not reported" category.
13. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2015
Field Note:
Rate for "Ethnicity not reported" cannot be calculated as census population estimates for age and ethnicity do not include an "Ethnicity not reported" or unknown category. Approximately 7.2% of arrests were unknown ethnicity.
14. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2015
Field Note:
Data sources for this measure are not consistent with previous years' data. Prior to 2014 the Idaho Department of Education website provided a drop-out rate by race/ethnicity for 9 to 12 grade students but methodology for calculation was not provided.

Starting with the 2015 application the data for dropout is calculated using the number of students graduating in the stated data year divided by the enrollment of the 9th grade class four years prior: $100 * (1 - \text{Graduates/enrolled 9th grade})$. The rate results in a much greater dropout rate than previously reported.

The data used does not have an "Ethnicity not reported" category.
15. **Section Number:** Form21_Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2015
Field Note:
Idaho has no areas considered metropolitan.
16. **Section Number:** Form21_Indicator 11
Field Name: S11_total
Row Name: Total Population
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.
17. **Section Number:** Form21_Indicator 11
Field Name: S11_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2015
Field Note:

Data is from Census.gov Current Population Survey.

18. **Section Number:** Form21_Indicator 11
Field Name: S11_100percent
Row Name: 100% of poverty
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.
19. **Section Number:** Form21_Indicator 11
Field Name: S11_200percent
Row Name: 200% of poverty
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.
20. **Section Number:** Form21_Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.
21. **Section Number:** Form21_Indicator 12
Field Name: S12_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.
22. **Section Number:** Form21_Indicator 12
Field Name: S12_100percent
Row Name: 100% of poverty
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.
23. **Section Number:** Form21_Indicator 12
Field Name: S12_200percent
Row Name: 200% of poverty
Column Name:
Year: 2015
Field Note:
Data is from Census.gov Current Population Survey.