

Lane County, Oregon

FY 08-09 Service Options Sheet

Service: Health Serv for High Risk Pregnant Women & Infants
Dept: Health & Human Services
Program Contact: Pam Stuver / Karen Gillette
Contact Phone: 682-4670 / 682-3950

BCC Service Priorities: 1, 2, 3
Fund: 124 **Dept. Org ID:** 3427230,31
Dept. Priority: 4 of 18
Fund Priority: 24 of 46

Executive Summary

Maternal Child Health services are revenue generating, cost avoiding services addressing the health/safety of high risk pregnant women/their unborn children & medically fragile infants/young children. Prenatal access (Oregon Mother's Care) helps low income pregnant women access the Oregon Health Plan & early prenatal care which is critical to healthy babies. Maternity Case Management provides public health nurse home visiting/education/resource referral for pregnant women/teens whose personal health & the health, life, & birth of their unborn is at risk. Babies First/CaCoon provides public health nurse home visiting/health assessments/family support/education/ resource referral for medically fragile infants/young children whose lives/health/potential development are at risk.

State/Federal Mandate

ORS 431.416 **Local public health authority** or health district duties; OARs 333-014-0050 2(b), 410-130-0595, 410-138-0000 through 410-138-1080. Losing local public health authority by not providing mandated MCH services would put Lane County at significant financial/legal risk (state provided/county billed for services).

Outcome Measure/s

80% of high-risk Maternity Case Management women served will deliver full term/appropriate weight infants. By reducing % of prematurity & low birth weight, fewer infants will have serious health conditions/fewer will die within the first year of life/fewer will experience developmental delays; more infants will become healthy children ready-for-school/will reach their full potential & will become self-sufficient adults.

Service Level Descriptions. Level 1 (very bottom) = Threshold Level Below Which Service Cannot Be Provided

X=Funded	Proposed Service Funding >>	Other Funds	Expense Total	General Fund	FTE
		340,428	575,052	234,624	3.81
Level 2:		144,518	408,629	264,111	4.13
	Prenatal Access (Oregon Mother's Care) services: improve early access to prenatal care/assist in OHP application/physician referral/healthy pregnancy education. Maternity Case Mangement/Babies First/ CaCoon services for high risk pregnant women & their unborn children & for medically fragile infants/young children throughout Lane County (ex. 85 clients in Florence in 2007).				
X=Level 1:		340,428	575,052	234,624	3.81
	Maternity Case Management/Babies First/CaCoon services: management of health/developmental/economic/social/nutritional issues; parental education; resource referral for high risk pregnant women & their unborn children & for medically fragile infants/young children. Services delivered in Eugene/Springfield metro area with very limited rural services. No prenatal access help for poor pregnant women.				
X=Level 0: No General Fund		0	0	0	0.00
	Maternity Case Management/Babies First/CaCoon services: management of health/developmental/economic/social/nutritional issues; parental education; resource referral for high risk pregnant women & their unborn children & for medically fragile infants/young children. Services delivered in Eugene/Springfield metro area with very limited rural services. No prenatal access help for poor pregnant women.				

Ver: 12/18/07d-ji

- "Shall" Mandate
- Related Mandate
- No Clear Mandate
- Highly Leveraged to County provided service (100% return or greater)
- Leverages Funds to County
- Leverages Funding for Citizens and/or Community Organizations

Leverage Details

At the FY 07-08 level of service, the GF portion of this program leverages:	\$0	back to the General Fund
	\$484,946	into other County Funds
	\$0	directly or via subcontract to community orgs
	\$0	directly to citizens via services provided

206.69% General Fund Leverage Ratio

For the purpose of this comparison, only include leveraged funds that are dependent on General Fund revenue. Do not include funds that would still be leveraged if the General Fund portion of the service were decreased or eliminated.

Please use this space to explain the Proposed Service Level Funding impact on leverage of the varying levels of service described above.

At Level 1 nurse home visiting services would be reduced to approx. 430 at-risk pregnant women & teens, & medically fragile infants/children per year. Services outside of the Eugene/Springfield metro area would be severely reduced/eliminated. Level 1 will mean only 1 in 5 women will receive services. At Level 2 approx. 730 pregnant women and medically fragile children would receive nurse home visiting services (current service level) & 650 low-income pregnant women would be helped to access OHP/prenatal care (current service level). Nurse home visiting/access to early prenatal care is evidence-based, best practices in reducing fetal/infant mortality and other poor pregnancy/birth/child health/development outcomes. At 150-200 per month, current referrals for nurse home visiting services are 3 times greater than the number of clients who can be served with current 07-08 staffing (1 in 3 served).

