

Maternal and Child Health (MCH)
Health Care Program for Children and Youth with Special Health Care Needs (HCP)
Funding Changes for FY13 – FY16
FACT SHEET

Changes to MCH/HCP Local Funding Distribution

A new MCH/HCP funding distribution model for local public health agencies' (LPHAs) has been developed and will begin implementation in October 2012. The primary reasons for the change include: the restructuring of the local public health agency system in Colorado (2008); a reassessment of the HCP Program and a correction to past inconsistent funding practices; and the introduction of the state MCH priorities and Colorado Department of Public Health and Environment's Winnable Battles.

Stakeholder Engagement

- The state MCH/HCP staff shared information and solicited feedback (via a follow-up survey) about the proposed funding changes during four webinars held in October 2012. 112 LPHA staff participated in these webinars and twenty staff responded to the follow-up survey.
- In November 2011, state MCH/HCP staff shared funding data and gathered feedback from over 65 local public health staff, representing 33 out of the 55 LPHAs in Colorado, during six regional meetings held throughout the state.
- Two LPHA workgroups (8-10 participants each) met from December/January through February to provide input regarding contract expectations.

Basic Components of the Funding Model

- All 55 LPHAs will receive funding according to the same formula for MCH/HCP funding.
- MCH/HCP funding will be distributed using a funding formula of population x poverty, the same formula the federal Maternal and Child Health Bureau uses for state allocations of MCH block grant funding.
- Agencies received notice of the funding changes one year prior to implementation of the new funding formula.
- A three-year mitigation plan will be implemented to support agencies through the transition.
- NOTE: Additional funding for specialty clinics, beyond the MCH/HCP funding formula allocations, will be provided to local public health agencies outside of this funding model due to their unique value to CYSHCN in rural communities.

Impacts of the New Funding Model

- 43 out of the 55 LPHAs throughout Colorado will receive an increase in MCH/HCP funding.
- 2 agencies will receive less than 2% decrease in funding. These agencies are Denver and Jefferson County who receive significant funding levels.
- 10 agencies will receive significant decreases in funding.
- HCP Regional Offices will no longer be funded. Previous regional office funding is being redistributed across all counties and is included in the MCH/HCP funding pool that is being allocated by the MCH formula (population x poverty). State HCP consultants will provide HCP Care Coordination consultation/TA/training for local public health agencies serving CYSHCN.

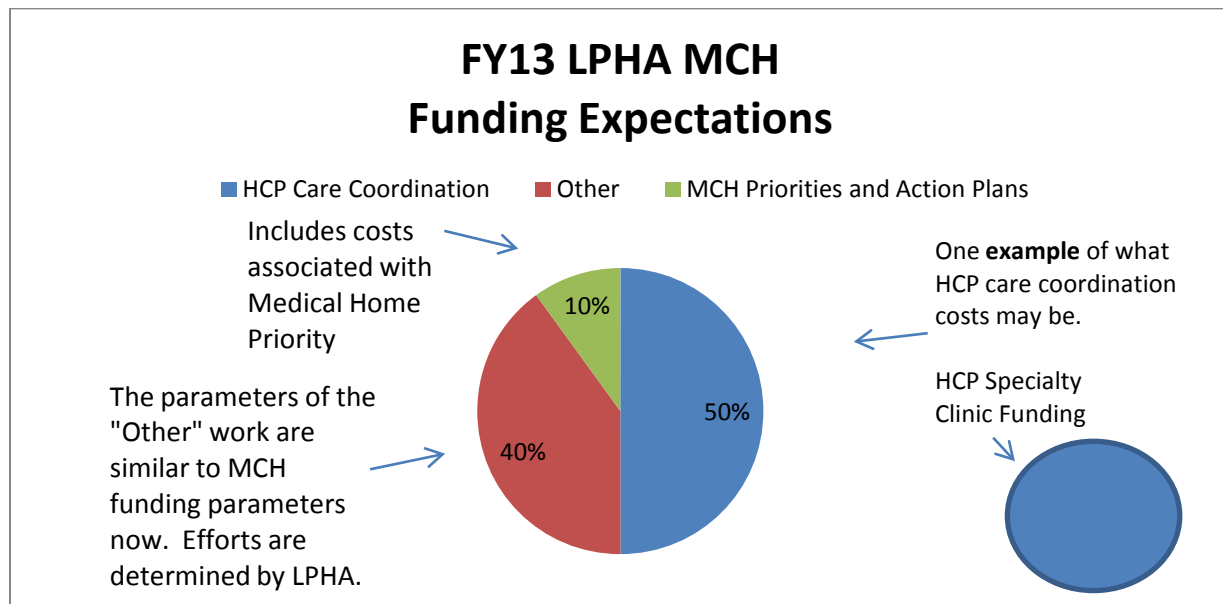
Future Contract Expectations for LPHAs

- LPHAs receiving between \$1,500 and \$50,000 will receive their MCH/HCP funds through their Office of Planning and Partnership's per capita contract. LPHAs may apply these funds towards implementing a state-developed MCH-priority action plan; implementing their agency's community health assessment and public health improvement planning process; and/or implementing HCP Care Coordination. LPHAs receiving over \$15,000 are required to implement the HCP Care Coordination model.

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- LPHAs receiving over \$50,000 will receive their MCH/HCP funds through the state MCH/HCP Programs and will participate in the required local planning, implementation and reporting processes. These LPHAs are required to implement the HCP Care Coordination model and to implement the action plan for reducing barriers to a medical home, with a focus on vulnerable populations, such as CYSHCN. These LPHAs may also apply their funds to implementing one or more of the state-developed MCH-priority action plans or working on other MCH/HCP efforts that align with funding parameters.

The below graph illustrates how LPHAs receiving over \$50,000 will be required to spend their funding.



Specialty Clinics

- The HCP Program will continue to support specialty clinics to help meet the gaps in pediatric specialty care for children and youth with special health care needs in rural areas of the state.
- Through a partnership between state HCP, the Children's Hospital Colorado and the University of Colorado's School of Medicine pediatric specialty clinics are provided for CYSHCN in rural areas. . HCP currently supports approximately 105 HCP specialty clinics, and is expected to meet or exceed this number of specialty clinics in FY13.
- An additional funding amount (\$125,000) outside of the MCH funding formula will be used to support regional specialty clinic host sites.
- Participants from HCP regional clinic host sites will be providing input on the development of consistent processes for clinic coordination in order to promote high quality and efficient pediatric specialty clinic services throughout the state.