

# TOBACCO TAX FUNDS REPORT

(FY 2010 Appropriation Bill - Public Act 131 of 2009)

**April 1, 2010**

**Section 213: The state departments, agencies, and commissions receiving tobacco tax funds and healthy Michigan funds from part 1 shall report by April 1 of the current fiscal year to the senate and house of representatives appropriations committees, the senate and house fiscal agencies, and the state budget director on the following: (a) Detailed spending plan by appropriation line item including description of programs and a summary of organizations receiving these funds. (b) Description of allocations or bid processes including need or demand indicators used to determine allocations. (c) Eligibility criteria for program participation and maximum benefit levels where applicable. (d) outcome measures used to evaluate programs, including measures of the effectiveness of these programs in improving the health of Michigan residents. (e) Any other information considered necessary by the house of representatives or senate appropriations committees or the state budget director.**

*Michigan Department  
of Community Health*



**Jennifer M. Granholm, Governor  
Janet Olszewski, Director**

## Healthy Michigan Fund – FY 2009 Report

### MICHIGAN DEPARTMENT OF COMMUNITY HEALTH FY 2009 Medical Services Program Tobacco Tax Report

#### Healthy Michigan Fund

In FY2009, \$18,807,900 of the Healthy Michigan Fund was appropriated as match for Medical Services and leveraged \$44,157,800 in federal Medicaid dollars to provide health care services to Medicaid beneficiaries.

#### Medicaid Benefit Trust Fund

In FY2009, \$359,400,000 of Medicaid Benefit Trust Fund was appropriated as match for Medical Services and leveraged \$843,813,900 in federal Medicaid dollars to provide health care services to Medicaid beneficiaries.

#### Health & Safety Welfare Fund

In FY2009, \$5,987,100 of Health and Safety Welfare Fund was appropriated as match for Medical Services and leveraged \$14,056,800 in federal Medicaid dollars to support Disproportionate health care services to cover uncompensated hospital costs.

#### Wayne County Tobacco Tax

In FY2009, \$5,455,100 of Wayne County Tobacco Tax was appropriated as match for Medical Services and leveraged \$12,807,800 in federal SCHIP dollars to provide outpatient health care services for Adult Benefit Waiver beneficiaries in Wayne County.

<b>Summary of Medical Services Tobacco Tax Match Revenue</b>			
<b>Revenue</b>	<b>Total</b>	<b>Tobacco Tax</b>	<b>Federal</b>
Healthy Michigan Fund	\$62,965,700	\$18,807,900	\$44,157,800
Medicaid Benefits Trust Fund	\$1,203,213,900	\$359,400,000	\$843,813,900
Health & Safety Welfare Fund	20,043,900	\$5,987,100	\$14,056,800
Wayne County Tobacco Tax	\$18,262,900	\$5,455,100	\$12,807,800
<b>Total</b>	<b>\$1,304,486,400</b>	<b>\$389,650,100</b>	<b>\$914,836,300</b>

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

HEALTHY MICHIGAN FUND REPORT



For The Period October 1, 2008 to September 30, 2009

Healthy Michigan Funds are used to support behavioral and public health activities at the community level. Activities and accomplishments are evidence of positive steps being taken to reduce preventable death and disability in Michigan residents. These local activities have a direct impact on many of the 42 Michigan Critical Health Indicators.

This portion of the Healthy Michigan Fund Report presents highlights of FY 2009 accomplishments for all the Healthy Michigan Fund projects, their indicators of success, along with future goals for FY 2010.

# Healthy Michigan Fund – FY 2009 Report

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## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11384  
Alzheimer's Information Network

FY 09 Funds Appropriated  
\$290,000

FY 10 Funds Appropriated  
\$0

**Project Name:** Alzheimer's Information Network

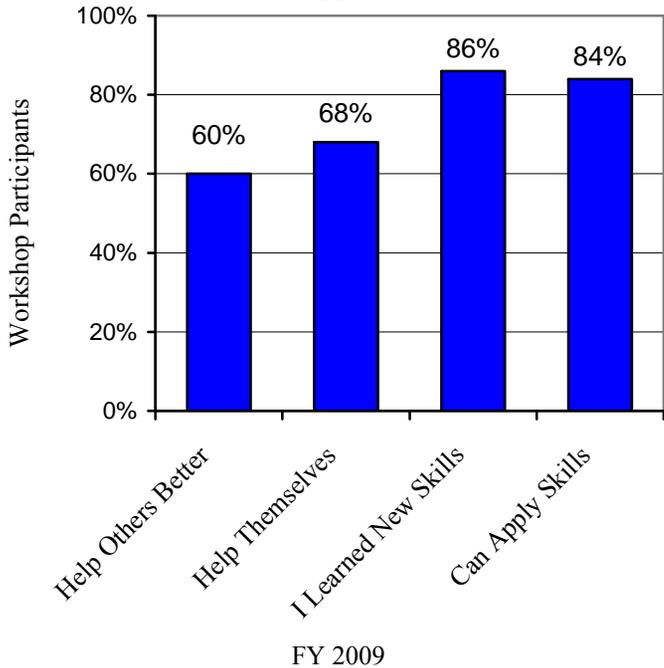
**Target Population:** The 180,000 individuals in Michigan with Alzheimer's disease, primary care physicians, direct care workers, other health professionals who care for people with Alzheimer's disease, and the general public.

**Project Description:** Reduce the high costs of Alzheimer's disease, particularly those incurred for long-term care. The project leverages funding by coordinating, through the Michigan Dementia Coalition, the efforts of public, private and academic partners to support community caregivers and to increase early detection and treatment. Initiatives include: using effective methods of caregiver intervention and support, increasing early detection and best care management practices in primary care, increasing public awareness of early warning signs, the importance of early assessment, and available community resources.

**Project Accomplishments for FY 2009:**

- Reviewed and updated the 2009-2011 Michigan Dementia Plan.
- The Primary Care Initiative posted its directory on the website as a resource to visitors and established a quarterly newsletter.
- Ninety-four "Worried About Memory Loss" posters were printed and distributed to various public sites, including public libraries.
- Maintained the [www.WorriedAboutMemoryLoss.com](http://www.WorriedAboutMemoryLoss.com) website.
- Dementia Education and Training Directory continues to be available through the website.
- Continued dissemination of Research-Based Recommendations for Effective Caregiver Interventions.
- Disseminated information on the Dementia Coalition website [www.dementiacoalition.org](http://www.dementiacoalition.org), which had 338,484 visitors in 2009.
- The Caregiver assessment grid was drafted and disseminated. The grid contains over 20 different tools for caregivers and was placed on the website.
- Caregivers and others made 6,206 calls to dementia help lines for information and assistance.
- 2,157 families or individuals participated in Care Consultation services.
- 1,618 support group meetings provided information, education, and support to 4,854 meeting participants.
- There were 249 dementia education presentations for consumers given to 5,242 participants and 87 dementia education presentations for professionals, given to 1,601 participants. Of 893 family caregivers who completed an evaluation, 86% said they learned something new and 84% said they would be able to apply what they learned to their situation.
- Michigan's Primary Care Dementia Network physicians established community teams for Train the Trainer with four modules, including the Cognition Core. All community teams completed the trainings. GECM (Geriatric Education Center of Michigan) created six pre-packaged elective curriculum for the teams (who will then turn around and teach the same material to their community learners).
- Increased primary care physicians' awareness of and implementation of best practices in detection and management of chronic diseases that cause dementia, including use of community resources.
- Drafted and published an article in Generations Journal highlighting the Michigan Dementia Coalition, entitled "Doing More with Less: The Michigan Dementia Coalition."

Caregiver Rating Their Ability to Help  
Persons with Memory Loss After  
Attending a Workshop on Caregiver  
Support



Source: Alzheimer's Information Network

## Healthy Michigan Fund – FY 2009 Report

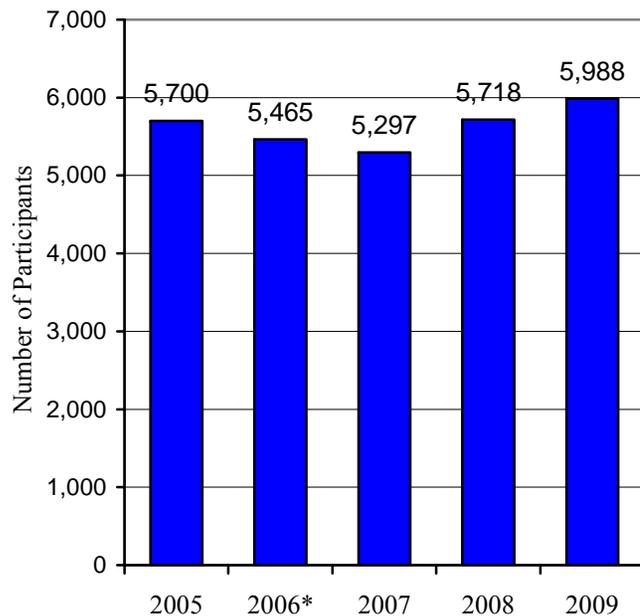
Appropriations # - 11380 Arthritis
FY 09 Funds Appropriated \$50,000
FY 10 Funds Appropriated \$0

**Project Name:** Arthritis

**Target Population:** Adults with arthritis in underserved program areas of the state.

**Project Description:** Through funding to the Arthritis Foundation Michigan Chapter (AFMC), this project is designed to expand the reach of evidence-based programs to people with arthritis. The emphasis continues to be placed on building new partnerships and embedding programs in system delivery models that have the infrastructure and the resources to help the AFMC accomplish its goals of increased reach and program sustainability.

Participants in Arthritis Foundation  
Michigan Chapter Evidence-Based  
Programs



\*No HMF money received.

Source: Arthritis Foundation of Michigan Chapter

**Project Accomplishments for FY 2009:**

- The AFMC received Healthy Michigan and other funds for implementing evidence-based self-management programs, including the AF Self Help Program (AFSHP) and Personal Action Toward Health (PATH), Michigan's name for the Stanford Chronic Disease Self-Management Program.
  - AFMC conducted 28 self-help classes, reaching 328 people with arthritis.
  - AFMC trained 24 new AFSHP leaders and certified 2 new AFSHP trainers.
  - AFMC trained 30 new PATH leaders and certified 4 new PATH trainers.
- The AFMC also received funds under contract with MDCH for implementing evidence-based exercise programs, including the Arthritis Foundation Exercise Program (AFEP) and the Arthritis Foundation Aquatics Program (AFAP).
  - 3,264 people participated in Arthritis Foundation Exercise Program (AFEP) offered at 65 sites, including 1,194 new participants and 20 new sites, and far exceeding the goal of serving 1,000 participants.
  - 2,396 people with arthritis participated in the Arthritis Foundation Aquatics Program (AFAP) at 19 sites.
  - AFMC maintained an active roster of 98 AFEP leaders, 68 AFAP instructors, and 79 AFSHP leaders.
- The AFMC received an award from the National Arthritis Foundation for entering the most participant names into a national database of program participants.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11352  
Cancer Prevention and Control

FY 09 Funds Appropriated  
\$1,728,900

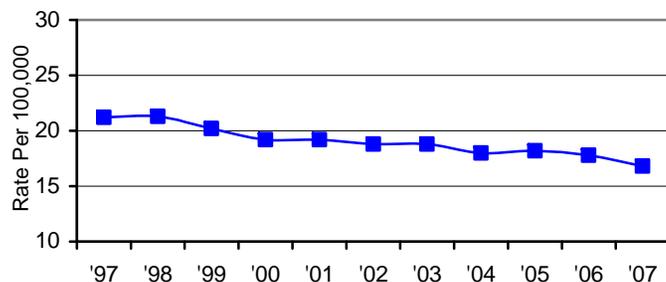
FY 10 Funds Appropriated  
\$ 826,200

**Project Name:** Cancer Prevention and Control

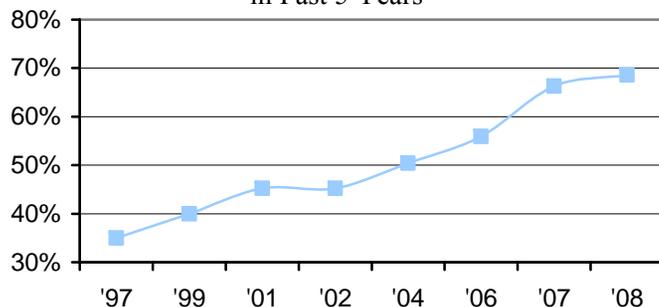
**Target Population:** Adult residents of Michigan.

**Project Description:** Reduce cancer mortality and morbidity in Michigan residents. Three programs receive Federal grant funds plus Healthy Michigan Funds to accomplish this goal: 1) Michigan’s Breast and Cervical Cancer Control Program (BCCCP) provides access to breast and cervical cancer screening and follow-up services. If diagnosed with breast or cervical cancer through the BCCCP, women then qualify for treatment through Medicaid. 2) The WISEWOMAN (WW) Program provides healthy lifestyle interventions to reduce risk of chronic disease for women enrolled in BCCCP. 3) Michigan’s Comprehensive Cancer Control Program is coordinated by MDCH and implemented by the Michigan Cancer Consortium (MCC), a statewide network of 113 public and private organizations, committed to reducing mortality from cancers with the greatest cost and disease burdens for Michigan citizens.

Age-Adjusted Colorectal Cancer  
Mortality Rate



Percent of Adults 50+ Who Had Endoscopy  
in Past 5 Years



**Project Accomplishments for FY 2009:**

- 666 uninsured or underinsured men and women enrolled in the Michigan Colorectal Cancer Screening Program (MCRCSPP), completed a risk assessment, and received education about screening and an invitation to be screened. A combined total of 565 screening and diagnostic tests were completed using fecal occult blood test (FOBT) and/or colonoscopy. Forty-eight of the 103 polyps removed via colonoscopy were pre-cancerous. In-kind contributions from community partners increased again in FY 2009, totaling over \$152,000. The FY 2009 project goal of screening 509 men and women was met and exceeded.
- BCCCP’s assigned caseload was surpassed with 29,216 women age 40 to 64 receiving services; over 11,500 women ages 40 to 49 received screening mammograms funded by Healthy Michigan Fund.
- BCCCP exceeded national standards for promptness in obtaining diagnostic services for women with abnormal screening exams and timeliness of starting cancer treatment.
- In FY 2009, the Michigan WISEWOMAN program provided chronic disease risk factor screening and lifestyle behavior interventions to 3,744 women enrolled in the Michigan Breast and Cervical Cancer Control Program. The program identified 214 women with newly detected high blood pressure, 176 women with newly detected high total cholesterol, and 108 women with newly detected diabetes. For year two of a five-year cooperative agreement from the Centers for Disease Control and Prevention (CDC), WISEWOMAN received \$1.35 million, which was a 12.5% increase over funding from the previous fiscal year.

**Project Goals for FY 2010:**

- Provide colorectal cancer screening and follow up services to 903 uninsured and underinsured women enrolled in the BCCCP, who are age 50-64, asymptomatic and at average risk for colorectal cancer.
- Provide screening mammograms to 11,500 low-income women ages 40 to 49 enrolled in the Breast Cancer & Cervical Cancer Program (BCCCP).
- Screen and provide healthy lifestyle interventions for up to 4,500 low-income women through the WISEWOMAN Program to reduce risks associated with high blood pressure, high cholesterol, diabetes, smoking, obesity, and physical inactivity.

Source: State BRFS  
Time Trend in Colorectal Cancer Screening and Mortality, Michigan 1996-2008

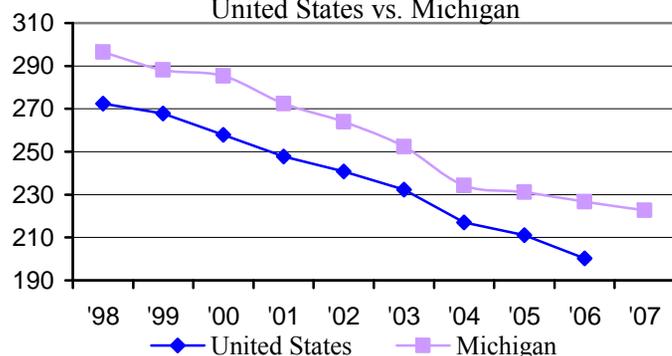
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11380  
Chronic Disease Prevention

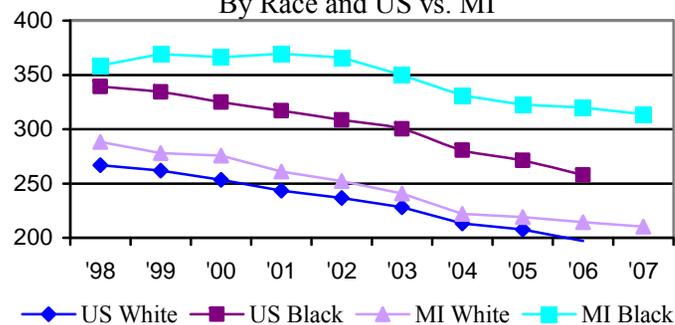
FY 09 Funds Appropriated  
\$1,698,200

FY 10 Funds Appropriated  
\$898,200

Age-Adjusted Heart Disease Death Rate  
United States vs. Michigan



Age-Adjusted Heart Disease Death Rate  
By Race and US vs. MI



Source: DVRHS, MDCH

**Project Name:** Cardiovascular Health

**Target Population:** Michigan adult residents with a special emphasis on high-risk populations.

**Project Description:** To prevent and improve the management of cardiovascular disease risk factors and decrease morbidity, premature mortality, and healthcare costs due to heart disease and stroke. Funds are distributed primarily through a competitive process. State matching funds were used to bring to Michigan an additional \$1.5 million in federal funds.

**Project Accomplishments for FY 2009:**

- **Heart Disease & Stroke Collaborations:** Expanded quality improvement programs working with 37 hospitals to improve response time and appropriate treatment for stroke reaching 7,265 patients. Improved blood pressure treatment and cholesterol control impacting 500 providers and 15,000 patients, including Medicaid patients. Funded 15 cardiac rehabilitation programs to participate in a continuous quality improvement project; and 7 hospitals targeting 1,043 patients to improve the care provided to heart failure patients. Collaborated with community organizations to improve awareness of risk factors and signs and symptoms of heart attack and stroke reaching 1.5 million people, including urban markets with high-risk populations. Implemented educational programs statewide to EMS providers.
- **CVD Education Program reaching African Americans:** A program emphasizing CPR education, AED training and resources along with risk factor education, signs/symptoms of heart attack and stroke, and the need to call 9-1-1 reached 22 African American churches with 10,000 members.
- **Healthy Communities Initiatives:** Provided grants and tools to 23 local health departments for 28 counties implementing changes to support healthy eating and increased physical activity. Over 4 million residents were impacted, including more than 300,000 Medicaid recipients. Local communities leveraged more than \$1.8 million in additional funding to support their work to improve residents' healthy lifestyle.
- **Childhood Obesity Prevention Project:** Grants and technical assistance provided to 800 low-income schools to conduct an assessment and implement changes to improve healthy eating, health education, and physical activity affecting change for over 370,000 students and families. In addition, Healthy Kids, Healthy Michigan achieved multiple childhood obesity prevention policy successes including clarification of Medicaid coverage, complete streets resolution and improvements for health and physical education.

**Project Goals for FY 2010:**

- Fund 37 hospitals to continue implementing a stroke registry expanding data collected on stroke patients with continuous quality improvement programs focused on national clinical performance measures.
- Healthy Kids, Healthy Michigan has prioritized 10 policy areas from the 5-year policy agenda including body mass index surveillance, access to healthy food through community and school gardens, childcare nutrition and physical activity requirements, and state nutrition standards for the schools.
- Provide grants and tools to 12 local health departments working in over 20 communities to implement changes supporting healthy eating and physical activity. Potential impact is 3 million people and over 300,000 Medicaid recipients.
- Collaborate with EMS partners to implement a reassessment of EMS systems. Continue distribution of protocols and tools for EMS providers, facilitate educational programs, and work with 8 emergency preparedness regions to plan for emergency response for stroke and heart attack patients.
- Improve healthy eating and physical activity levels of children in over 300 Michigan schools reaching 150,000 students and families.
- Collaborate with the American Heart Association, churches, community organizations and partners to improve awareness of risk factors, signs and symptoms of heart attack and stroke and the need to call 9-1-1. Will incorporate messages about high blood pressure and high cholesterol control.

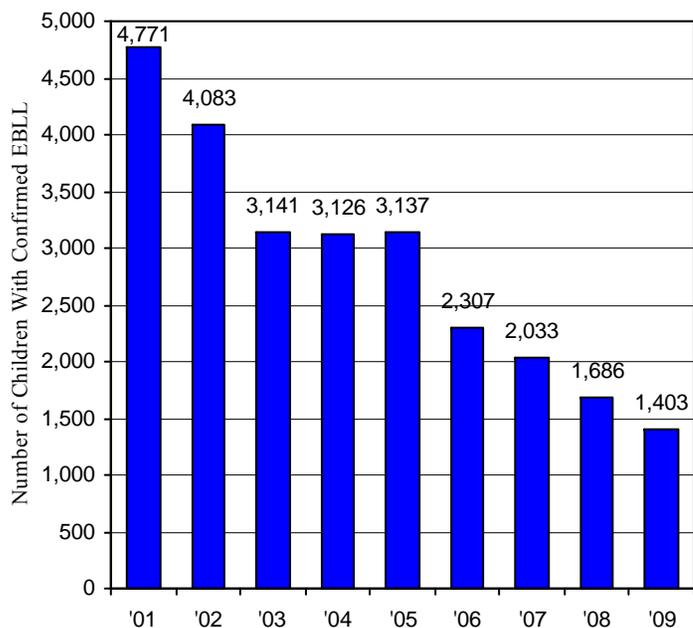
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14254  
Lead Poisoning Prevention

FY 09 Funds Appropriated  
\$1,000,000

FY 10 Funds Appropriated  
\$0

**Childhood Lead Poisoning in Michigan  
Elevated Blood Level (EBLL) Among  
Children Under 6**



Source for Graph: Annual MDCH CLPPP Data Fact Sheet  
Source for Text: Monthly case management reports from the funded LHDs to CLPPP; HHS records for abatements/interim controls; number of EBLL risk assessments reported to HHS

**Project Name:** Childhood Lead Poisoning Prevention

**Target Population:** Children less than six years of age at high risk for lead poisoning—this includes those residing in: one of the 14 target communities; housing built before 1978; enrolled in Medicaid or WIC; pregnant women living in pre-1950 housing; foreign adoptees; immigrants; migrant and refugee children; and foster care children.

**Project Description:** Provide services to reduce the overall incidence of childhood lead poisoning. Services include: case management of children with blood lead levels (BLL)  $\geq$  20 micrograms per deciliter; Lead Safe Home Program housing services which makes homes occupied by children under six years of age lead-safe (primary prevention); grant writing assistance to local high-risk communities to obtain federal funds for lead hazard reduction and community education; financial support of the work and work product of the Lead Poisoning Prevention and Control Commission; a statewide Ombudsmen position; maintenance of the web-based Lead Safe Housing Registry; and maintenance of web-based provider training modules.

**Project Accomplishments for FY 2009:**

- The Childhood Lead Poisoning Prevention and Control Commission met twice. The workgroups in the Commission related to lead testing, sustainable funding, and landlord liability are moving forward with a position paper proposing a fee on paint and a letter to pediatric providers encouraging review of testing practices among their patient population.
- In 2009, public awareness campaign materials continued to be distributed. These materials, developed in 2008 include a public service announcement with a theme of lead poisoning prevention through safe home-renovation techniques and print material detailing two new Michigan lead laws affecting remodeling activities.
- The Lead Safe Housing Registry continues to be populated with current housing data and will expand to track more data.
- 118 homes were addressed through the Lead Safe Home Program (LSHP) in FY 2009; 44 of these homes utilized Healthy Michigan Funds; 118 children under the age of 6 years occupied these homes; and 33 of these children had an elevated blood lead level.
- In calendar year 2009, 154,291 children under 6 years of age tested for lead poisoning. As in past years, there is an increase in the number of children tested and a decrease in the number of children with lead poisoning. In 2009, there was a slight increase in testing and a 17% decrease in the number of children with confirmed elevated blood lead levels.
- Over 340 healthcare providers and lead advocates completed the web-based training modules. The modules increase their knowledge of lead poisoning effects and assist them with clinical decision-making regarding testing and treatment of children with elevated lead levels.
- The Statewide Ombudsmen and other Regional Field Consultants conducting the LSHP leveraged \$423,246 toward LSHP interventions for families.
- Local public health agencies with target communities within their jurisdiction provided case management services to children with elevated lead levels. Comprehensive, family-centered services assure that children with highly elevated levels receive a full complement of nursing and environmental services.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14274  
Dental Health

FY 09 Funds Appropriated  
\$150,000

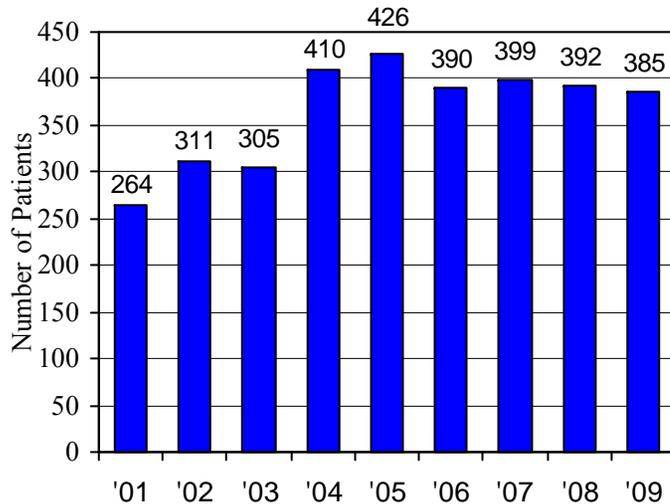
FY 10 Funds Appropriated  
\$0

**Project Name:** Dental Health

**Target Population:** Persons who are physically and/or mentally impaired, persons with sensory impairments, persons who are medically compromised, and elderly persons.

**Project Description:** Eligible patients are referred for comprehensive dental care through a network of volunteer dentists. Dental laboratories participate in the program through the donation of lab work such as dentures, partials, and crown fabrication. Two referral coordinators staff the toll-free phone lines, process applications and match patients with volunteer dentists. The waiting list for services remains at a minimum of two years or longer for most counties in Michigan. The legislation appropriates the Healthy Michigan Fund allocation to the Donated Dental Service Program administered by the Michigan Dental Association.

Number of Patients Receiving Dental Care



**Project Accomplishments for FY 2009:**

- 385 patients' dental care was completed.
- 5,737 dental procedures were provided.
- 865 dentists are on the volunteer list.
- 348 dentists provided direct patient care.
- 202 dental laboratories volunteered services for a total value of \$97,828.
- \$1,059,497 dollars worth of dental services were donated.
- The total value of the donated dental program was \$1,059,497 equaling a return on investment of \$7.06 for every dollar spent.

Source: Oral Health Program, MDCH.

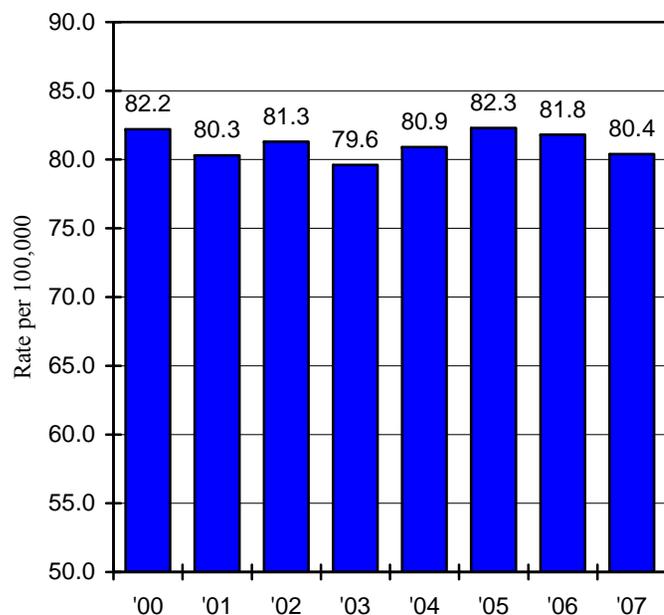
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11363  
Diabetes Program

FY 09 Funds Appropriated  
\$2,315,200

FY 10 Funds Appropriated  
\$805,200

Michigan's Age-Adjusted Diabetes-Related  
Mortality Rate



Source: Vital Records & Health Data Development Section, MDCH.  
\*Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

**Project Name:** Diabetes

**Target Population:** Persons at-risk for or with pre-diabetes, diabetes and/or kidney disease.

**Project Description:** Funds are distributed to agencies and organizations providing educational, consultation, consumer-based and other services intended to prevent the onset of diabetes, reduce mortality/morbidity from diabetes and kidney disease and to improve quality of life for persons with diabetes and/or kidney disease.

**Project Accomplishments for FY 2009:**

- Professional continuing education presentations had an attendance of 3,746. An additional 1,792 web-based independent study modules were completed. Preliminary analysis shows that 77% of participants in professional education offerings reported education improved their practice at least somewhat.
- Three National Kidney Foundation of Michigan (NKFM) programs, Healthy Hair starts with a Healthy Body (HH), Dodge the Punch (DTP) and Healthy Families Start with You (HF), trained 372 lay health educators who reached 5,200 clients in 20 Michigan cities. Ninety-nine percent of clients in HH/DTP are African-American (AA), and 58% of clients in HF are AA. Sixty-four percent of HH and 61% of DTP clients reported adopting healthy behavior. In HF, 63% of parents and 57% of children report adopting a healthy behavior. Forty-three percent of HH and 32% of DTP clients reported seeing their doctor.
- The WISEWOMAN program identifies those women at risk who are either undiagnosed with diabetes or prediabetes. 3,263 WISEWOMAN participants with no diabetes history received screening blood glucose tests; 220 (7%) had glucose values in the prediabetes range and 61 (2%) previously undiagnosed women had values in the diabetes range. One hundred percent of low-income women identified with prediabetes or diabetes in the WISEWOMAN program received education and motivational interviewing counseling.
- There were 89 certified diabetes self-management programs that educated 31,837 persons with diabetes, of which 23,820 (75%) completed all education hours. People who attend these programs are more likely to receive key tests that prevent complications (2 A1c tests, eye exams, foot exams).
- Personal Action Toward Health (PATH), Michigan's name for the evidence-based Stanford Chronic Disease Self-Management Program, reached 1,580 persons in 260 workshops, helping them to build the skills needed for day-to-day management of chronic diseases. Twenty-six percent of these persons indicated they have diabetes. Ninety-four percent of persons completing PATH reported using a learned healthy lifestyle technique and intended to continue to use that technique.

**Project Goals for FY 2010:**

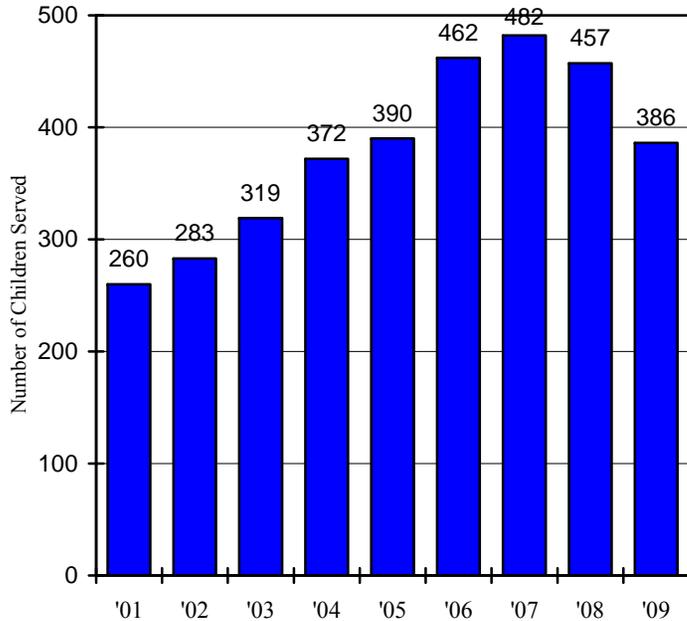
- The number of participants enrolled in NKFM programs will increase from 5,200 in FY 09 to 5,450 in FY 10.
- Sixty percent of NKFM program clients will report adopting healthy behavior.
- The number of participants enrolled in PATH will increase from 1,580 in FY 09 to 1,700 in FY 10.
- Ninety-five percent of persons with diabetes in PATH will report they intend to continue to use healthy lifestyle techniques learned.
- Provide technical assistance to Michigan Native American tribes, especially in the area of PATH. Tribes will offer three PATH classes.
- Hold nine 5-week Diabetes Prevention classes in the Lansing area through the YMCA's, reaching 90 participants.
- Project Individuals with Disabilities Education Act (IDEA) will hold 4 community diabetes screening events, 4 diabetes education sessions and create 2 diabetes support groups.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11393  
 Morris Hood Wayne State University  
 Diabetes Program

FY 09 Funds Appropriated  
 \$400,000  
 FY 10 Funds Appropriated  
 \$0

Number of Children Served With  
 No Other Access to Diabetes Speciality Care



Source: Diabetes Program reports, MDCH

**Project Name:** Diabetes - Morris Hood WSU Diabetes Outreach

**Target Population:** Medically and economically underserved children and adolescents, both those with diabetes and those at risk of developing diabetes.

**Project Description:** The Outstate Outreach program provides team-based clinical and lifestyle guidance to medically and economically underserved children and adolescents with diabetes in clinics around the state. The Obese Minority Children at Risk of Diabetes Program provides screening, follow-up and behavior change interventions to urban minority school children at risk of developing diabetes.

**Project Accomplishments for FY 2009:**

- The Outstate Outreach program held 10 clinics in 4 areas in the state (Marquette, Alpena, Jackson, and Port Huron). The team served 386 children with no access to diabetes speciality care.
- Each child seen at the Outstate Outreach clinics received an assessment of health status and compliance. Problems were identified/diagnosed, and medical guidance was given by the comprehensive team of specialists (Pediatric Endocrinologist, Certified Diabetes Educator, Registered Dietician and Social Worker).
- 303 children with endocrine diseases were seen in the Marquette clinics.
- The Obese Minority Children at Risk of Diabetes program screened 861 children for height, weight (BMI calculated) and blood pressure at 2 elementary schools in Detroit (every child in each school was screened, unless absent during screening week). Of the children screened, 44% were overweight or obese. This year the program developed a program targeting mothers of children at high risk. A Spanish version of the programs was developed, as Spanish was the primary language in the homes of 83% of children screened.
- Funding was stopped for both programs. The Obese Minority Children at Risk of Diabetes program was not able to complete activity in the community with parents of at-risk children. The Outstate Outreach program was closed and no additional clinics were conducted after June 2009.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14281/12273  
Family Planning Local Agreements

FY 09 Funds Appropriated  
\$408,100

FY 10 Funds Appropriated  
\$0

**Project Name:** Family Planning

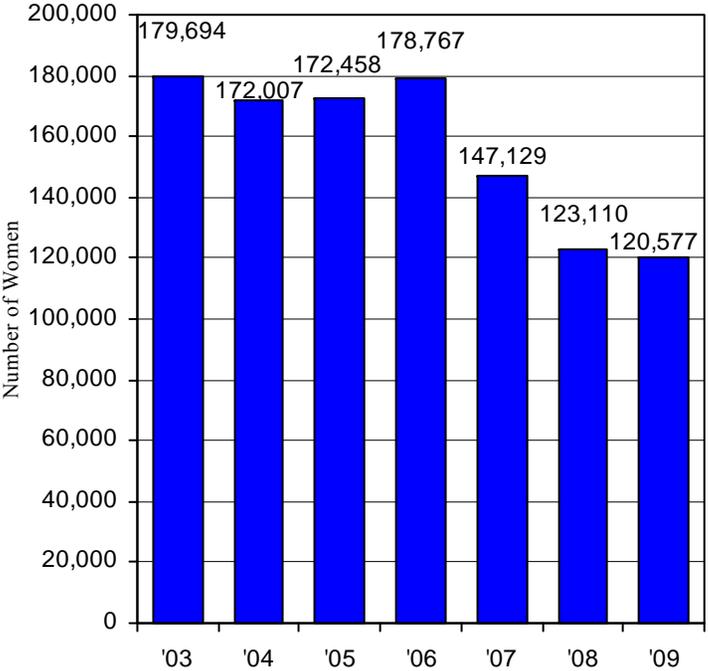
**Target Population:** Low-income females and males at-risk for unintended pregnancy.

**Project Description:** The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children. The Family Planning program provides low-cost, high quality contraceptive services and supplies. Forty-eight family planning agencies operate 137 clinics delivering services and supplies throughout the state.

**Project Accomplishments for FY 2009:**

- Served 124,721 family planning users in the program. Over 96% of those served were living at or below 250% of poverty.
- Served 120,577 women in need of publicly funded family planning services. Due to dramatic increased cost of providing services (especially contraceptive cost), the program did not reach the goal of serving 128,976 women.
- Served 30,909 female teens at-risk for unintended pregnancy. Due to increased cost of providing services (contraceptive cost), program did not reach goal of 38,693 or 30% of females are teens.
- Screened 52,844 female teens and women for cervical cancer.

Number of Women Receiving Pregnancy Prevention Services



Source: Family Planning Annual Report (FPAR) Data

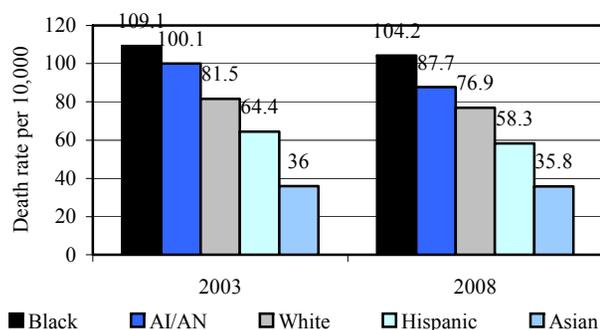
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11268  
 Minority Health Grants and Contracts

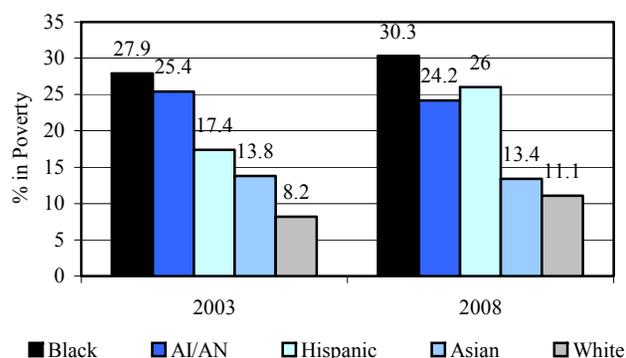
FY 09 Funds Appropriated  
 \$900,000

FY 10 Funds Appropriated  
 \$500,000

Age-Adjusted Michigan Death Rates by Race  
 2003 versus 2008



Michigan Poverty Rates by Race  
 2003 versus 2008



Source: MDCH, Vital Records

**Project Name:** Health Disparities Reduction and Minority Health (HDRMH)

**Target Population:** Identified racial/ethnic populations in Michigan that experience the most significant health disparities. Populations include African American, American Indian/Native American, Arab American/Chaldean, Asian American and Hispanic/Latino.

**Project Description:** The HDRMH Section is committed to eliminating racial and ethnic health disparities by implementing/funding culturally appropriate, evidence-based approaches to achieving health equity for all Michigan citizens.

**Project Accomplishments for FY 2009:**

- **Berrien County Breast & Cervical Cancer Screening Program** – Goal: To decrease system level barriers in an effort to increase the number of Medicaid managed care eligible women who seek breast and cervical cancer screening in Berrien County. From June 1, 2008 through May 31, 2009, 2,264 women were involved in an outreach project to increase breast and cervical cancer screening rates of African-American women aged 19-64 years who reside in Berrien County and are enrolled in a Medicaid managed health plan. 850 women received at least one needed screening. The majority of screenings received were for cervical cancer in women between the ages of 19 and 39 years.
- **SMILE! Michigan Dental Sealant Program** – Goal: To reduce oral health disparities by providing quality dental sealant services to selected Detroit Public School children who lack access to dental care. 4,500 children at 37 Detroit schools received a total of 13,500 dental sealants. Student racial/ethnic demographics include: 83.1% African-American, 10.3% Hispanic, 4.6% other, 1.9% White, .6% Asian and of those 81.6% were on Medicaid and 13.4% were SCHIP. 44.4% of children screened had untreated dental decay and 35.2% had urgent dental needs. Establishment of a dental home for Medicaid eligible children was facilitated via University of Detroit, Mercy Dental School. The estimated return on investment is every dollar spent in prevention saves \$8.75 in dental treatment costs.
- **Healthy Asian American Project** – This project provides colorectal screening services to Asian Americans in SE Michigan at risk for colorectal cancer. The major reasons given for not seeking screening services include the following: “only see a doctor when I’m sick (42.3%), no health insurance, could not afford it (37.5%), very healthy, have no health problem (30%). Among the 272 screened at health fairs, 24% were overweight, 3% obese and 25% had abnormal blood glucose levels. On risk assessments for 237 persons, 92% signed a consent form for screening; 73-78% reported never had a colonoscopy, 89 out of 169 (53%) received a Fecal Occult Blood Test kit, and 2 of the 6 referred for colonoscopy completed it. There were no abnormal findings.
- **Report/Summit** – In September 2009, the HDRMH convened the Health Disparities Summit as part of its effort to develop its white paper - *Roadmap to Achieving Health Equity in Michigan*. The purpose of the summit was to engage stakeholders around the state in identifying key issues and effective strategies to address racial and ethnic health disparities.

**Project Goals for FY 2010:**

- Fund 5-6 Local Public Health Department and Community Based Organizations Demonstration Projects.
- Launch 2010 Minority Health Month in Michigan project – Focus Minority Male Health.
- Complete the *Roadmap to Health Equity in Michigan* report.
- Complete and submit 2009 Minority Health Bill 653 Legislative Report.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # -11268/11380  
Huntington's disease

FY 09 Funds Appropriated  
\$50,000

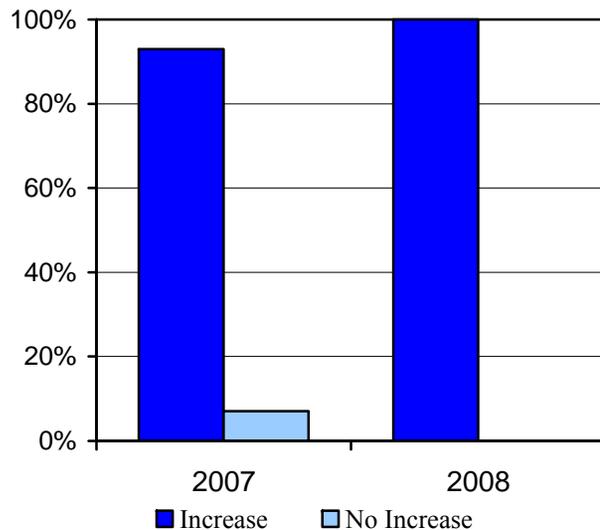
FY 10 Funds Appropriated  
\$0

**Project Name:** Huntington's disease

**Target Population:** Michigan citizens living with Huntington's disease, their families, caregivers, physicians and other healthcare providers.

**Project Description:** Huntington's disease (HD) is a rare genetic disorder caused by degeneration of brain cells in certain areas of the brain. An estimated 1,000 persons in Michigan have HD. The Huntington's Disease Society of America-Michigan Chapter (HDSA-M) is uniquely capable of providing services needed by HD families in the state. HDSA-M maintains a database of community resources and provides individual, telephone and email support to families. The HDSA-M maintains a toll-free helpline for families and professionals. It sponsors support groups in areas where HD is prevalent and provides educational presentations to families.

Increase of Caregiver's Abilities & Effectiveness as a Result of HD Educational Programs



-In 2008, 100% of caregivers report increased abilities and effectiveness because of HD Educational Programs.

Source: HDSA - MI Chapter, Quarterly and Annual Report

**Project Accomplishments for FY 2009:**

- Maintained database of community resources in Michigan.
- 395 incoming calls received and 450 follow-up outgoing calls were made to provide HD information and referrals.
- HDSA sponsored 9 support groups (with 3 new ones pending).
- Started a teleconference support group for those who cannot attend the in-person groups.
- 5,000 quarterly newsletters were mailed.
- Hosted several fundraisers to support HD research and patient services.
- Hosted annual summer camp for HD patients.
- Support for caregivers and their families continue.
- Advocacy on behalf of families and HD patients in nursing homes continues.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 16778/16758  
 Immunization Program Management  
 & Field Support

FY 09 Funds Appropriated  
 \$2,104,900

FY 10 Funds Appropriated  
 \$ 2,104,900

MCIR Historical Perspective of  
 Registered Users and Shots Recorded

Year	Register Users	Doses Entered
1997	137	None
1998	1,327	6.5 million
1999	2,007	5.5 million
2000	2,333	4.4 million
2001	2,815	8.3 million
2002	3,493	5.5 million
2003	4,242	4.8 million
2004	7,459	2.6 million
2005	19,759	2.7 million
2006	23,000	5.3 million
2007	26,638	6.4 million
2008	23,790	7.3 million
2009	29,020	7.9 million

Source: Division of Immunization, MDCH

**Project Name:** Immunization: The Michigan Care Improvement Registry and Administration

**Target Population:** All residents of Michigan.

**Project Description:** The Michigan Care Improvement Registry (MCIR) is a regionally based, statewide immunization registry that contains over 74 million shot records administered to 6 million individuals. The department is currently working through subcontracts with six MCIR regions to enroll and support every immunization provider in the state. Current enrollments include: 5,415 health care providers and pharmacies; 5,699 schools; and 6,169 licensed childcare programs. This represents about 95% of all schools and 90% of all licensed childcare centers. The MCIR system is used routinely by over 20,000 users to access the immunization records of both children and adults to determine their immunization status. In 2009, the MCIR generated over 134,000 recall letters notifying responsible parties whose children had missed shots and encouraged them to visit their immunization providers to receive needed vaccines. In addition over 3 million reports were generated by users of the MCIR system in 2009.

**Project Accomplishments for FY 2009:**

- 9,132 immunization providers and schools submitted over 7.9 million shot records to the MCIR in 2009.
- Continued to improve and complete deployment of the Vaccine Inventory Management module in the MCIR to support better vaccine accountability and management.
- Implemented and ‘All Hazard’ module in the MCIR to track all H1N1 vaccine and publically purchased anti-virals during the 2009/10 influenza pandemic.
- Implemented a scan center and data verification center to rapidly collect immunization data in the MCIR system for H1N1 vaccine.
- Designed and implemented business requirements of the Vaccines For Children (VFC) Program enrollment and E-ordering.
- Implemented immunization assessment enhancements.
- Created a MCIR web service providing for Women Infant and Children (WIC) information integration.
- Completed programming and implemented and interface with the Medicaid system to make available Early Periodic Screening Diagnosis and Treatment Program (EPSDT) data to clinical staff.
- Completed programming and implemented a Newborn Screening (NBS) web service to present Early Hearing Detection and Intervention (EHDI) results and NBS mailer information using the MCIR.
- Promotion, development and implementation of the MCIR as an integrated childcare health system.

**Project Goals for FY 2010:**

- Release of the VFC Program support for management and vaccine ordering in MCIR.
- Release of the Perinatal Hepatitis B tracking module.
- Development of the electronic Vaccine Adverse Event Reporting System (VAERS) via Health Level Seven (HL7) to the Centers for Disease Control and Prevention (CDC).
- Development of HL7 supports allowing for receipt of provider transfer information.
- Release of a module in the MCIR to collect BMI information in the MCIR.
- Creation of a partnership with the Michigan Health Information Network (MIHIN) to become a provider portal involving the statewide Health Information Exchange (HIE).
- Reduce duplicate shot records in the MCIR by 10%.

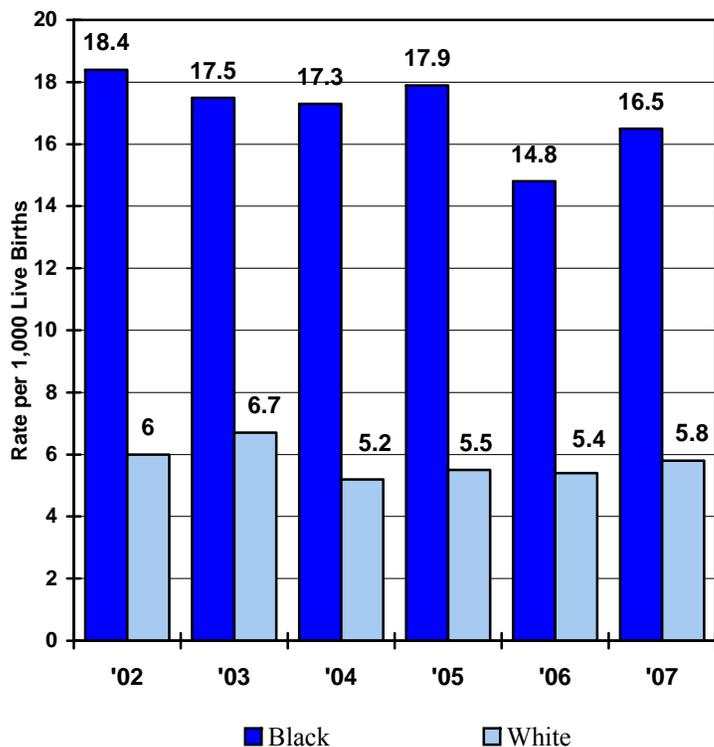
## Healthy Michigan Fund – FY 2009 Report

Appropriations # -14259  
Special Projects

FY 09 Funds Appropriated  
\$1,100,000

FY 10 Funds Appropriated  
\$0

Michigan Infant Mortality Rates By Race<sup>1</sup>



Source: Vital Records & Health Data Development Section, MDCH

**Project Name:** Infant Mortality Special Projects: Infant Mortality Reduction: Interconception Care Project  
Fetal Infant Mortality Review (FIMR)  
Nurse-Family Partnership (NFP)—Kalamazoo County

**Project Name: INFANT MORTALITY REDUCTION: INTERCONCEPTION CARE PROJECT**

**Target Population:** Women who have had one of the following poor birth outcomes: a fetal loss, a preterm birth, a low birth weight infant, or an infant loss under the age of 1, and are planning future pregnancies in 11 targeted communities, Detroit and the following counties: Berrien, Genesee, Ingham, Kalamazoo, Kent, Macomb, Oakland, Saginaw, Washtenaw, and Wayne.

**Project Description:** The Interconception Care Project utilizes registered nurses to intervene with women who have had a fetal loss, a preterm infant, a low birth weight infant, or an infant death. The goal is to improve the outcome of subsequent pregnancies by addressing health issues that may have contributed to the previous poor pregnancy outcome. Goals are that program participants will: lengthen the time between pregnancies to 18 months, plan future pregnancies, deliver full-term infants, and deliver infants with normal birth weights.

**Project Accomplishments for FY 2009:**

- Local contractors served approximately 218 women or 79% of their goal of 275 enrolled women for the three quarters of FY 09 that was funded (10/01/08-06/30/09). The Interconception Care Program was terminated June 30, 2009.

**Project Name: FETAL INFANT MORTALITY REVIEW (FIMR)**

**Target Population:** Women of childbearing age, infants, and families.

**Project Description:** Confidential, de-identified cases of fetal and infant deaths are reviewed by local teams for the purpose of making and implementing recommendations to improve systems of care and services for at-risk families.

**Project Accomplishments for FY 2009:**

- Sixteen local teams reviewed a total of 243 cases and accomplished 98 maternal home interviews.
- Healthy Michigan Funds supported 175 case abstractions in preparation for local review.

**Project Name: NURSE-FAMILY PARTNERSHIP (NFP)—KALAMAZOO COUNTY**

**Target Population:** Low-income women who are pregnant with their first child.

**Project Description:** Nurse-Family Partnership is an evidence-based, nurse home visitation program that aims to improve the health, well-being and self-sufficiency of a first-time, low-income mother and her infant.

**Project Accomplishments for FY 2009:**

- In FY 2009, the Nurse-Family Partnership (NFP) program enrolled and provided services to 129 individuals. State funding was terminated June 30, 2009.

<sup>1</sup> Michigan's white/black infant mortality rate continues to remain disparate with an appropriately three times higher rate for black infants (16.5) than (5.8) white infants for 2007. The disparity in the rate has remained somewhat constant for the last ten years with minor fluctuations in the black and white infant mortality statistics.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14262  
Local Maternal/Child Health Services

FY 09 Funds Appropriated  
\$246,100

FY 10 Funds Appropriated  
\$0

**Project Name:** Local Maternal/Child Health (LMCH) Services

**Target Population:** Prenatal women, mothers, infants, children and adolescents of any income group with a special focus on those who are low income or have special needs.

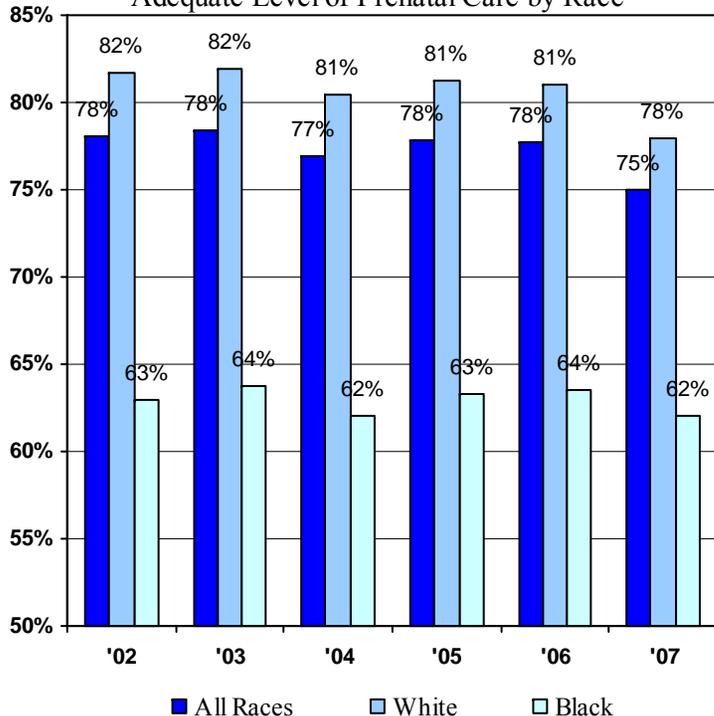
**Project Description:** The project provides support for local communities to address MCH issues that will impact the health status of this target population. There are 18 national and 9 state performance measures/objectives, of which one or more can be addressed, or with justification, a community specific objective for the target population can be selected. The most frequently chosen areas to use the funds are services that address the needs of children with special health care needs, child health, family planning, immunizations, maternal and infant support and locally defined maternal/child programs.

**Project Accomplishments for FY 2009:**

The following, reported for FY 2009, are examples of accomplishments by three of 45 agencies that received funds to address locally identified health needs of women and children in their jurisdiction:

- Allegan County Health Department: LMCH funds along with other program funding provided 455 children with assistance and/or enrollment in the Children’s Special Health Care Services (CSHCS) program. Another 15 children were seen in Lead Clinics that targeted the high-risk preschool population.
- Saginaw County Department of Public Health: LMCH funds helped to support 4,315 clients to receive Family Planning Clinic services, including 1,337 adolescents and 2978 women. Ten Fetal Infant Mortality Review meetings were completed at which 16 infants deaths reviewed.
- Chippewa County Health Department: One hundred and fifty women were provided classes on breast-feeding; 100 women attended prenatal classes with information for new moms on infant care and baby basics; 50 individuals participated in a class that included car seat safety check by local law enforcement; and 2,200 adolescents received education on healthy eating at the school-based health center.

Percentage of Michigan Live Births with Adequate Level of Prenatal Care by Race



Note: The Kessner Index is a classification of prenatal care based on the month of pregnancy in which prenatal care began, the number of prenatal visits and the length of pregnancy (i.e. for shorter pregnancies, fewer prenatal visits constitute adequate care).

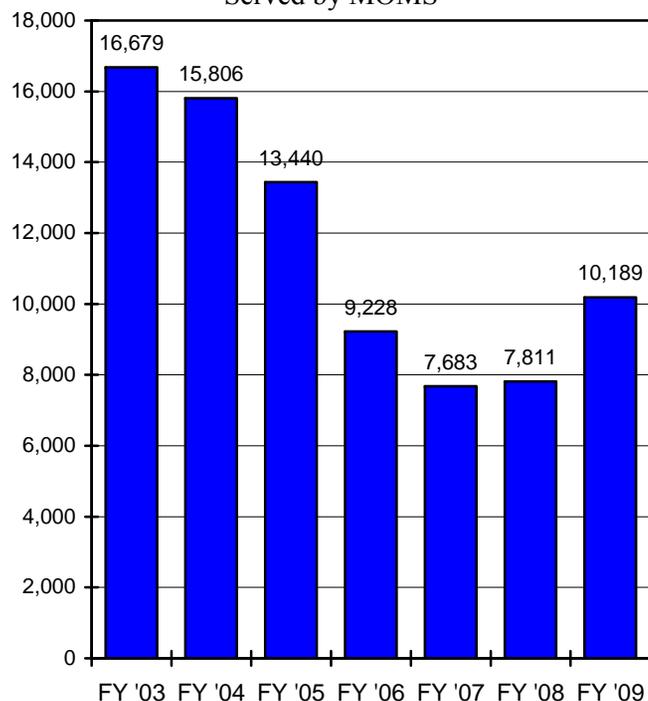
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14262  
Local Maternal/Child Health Services

FY 09 Funds Appropriated  
\$1,575,500

FY 10 Funds Appropriated  
\$1,575,500

Number of Pregnant Women  
Served by MOMS



Source: MOMS Oracle Database

Note: Total funding for MOMS has been reduced which corresponds with the reduction in the number of pregnant women served.

**Project Name:** Maternal Outpatient & Medical Services (MOMS)

**Target Population:** Women who are currently or were recently pregnant (within two calendar months following the month the pregnancy ended), who apply for medical coverage for their pregnancy through a Local Health Department (LHD), Federally Qualified Health Center (FQHC), or through a certified/trained provider utilizing the online application. The applicant must also meet one or more of the following criteria: Pregnant women with income at or below 185% of the Federal Poverty Level who are applying for Medicaid, or pregnant women who are currently enrolled in the Michigan Medicaid Emergency Services (ESO) program.

**Project Description:** Provides medical care for pregnant women. The program allows women to seek early prenatal care while awaiting eligibility determinations for Medicaid. Services covered include prenatal and pregnancy-related care, pharmaceuticals and prescription vitamins, laboratory services, radiology and ultrasound, maternal support services, childbirth education, outpatient hospital care, and inpatient hospital services for labor and delivery, including all professional services. Funding sources utilized for the MOMS program are SCHIP, Healthy Michigan Funds and General Funds.

**Project Accomplishments for FY 2009:**

- In FY 2009, MOMS enrolled 10,189 women. Another 4,782 women applied for Medicaid and were approved for full coverage benefits prior to MOMS enrollment.
- Provided access to early prenatal care for women waiting for their Medicaid application determination.
- Assisted in reducing infant mortality and incidents of pre-term labor.
- Assisted in reducing admissions into neonatal intensive care.
- Assisted in increasing infant birth weights.
- Provided information for Local Health Departments, Federally Qualified Health Centers, and the Department of Human Services (DHS).
- Increased access to MOMS by utilizing an enrollment option to an online application process.

**Project Goals for FY 2010:**

- Identify eligible women using available electronic information.
- Provide access to early prenatal care for women applying for Medicaid.
- Assist in reducing infant mortality and incidents of pre-term labor.
- Assist in reducing admissions into neonatal intensive care settings.
- Assist in increasing infant birth weights.
- Provide information to LHD, FQHC, DHS.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11380  
Chronic Disease Prevention

FY 09 Funds Appropriated  
\$200,000

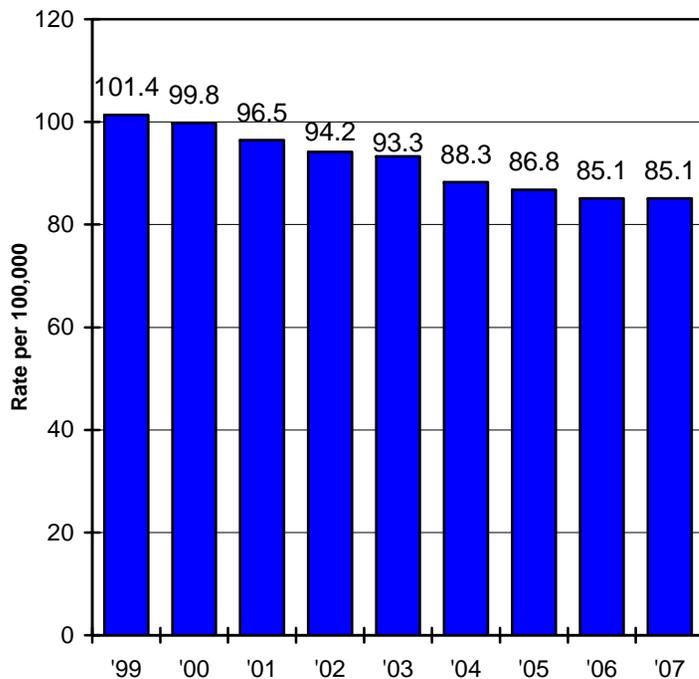
FY 10 Funds Appropriated  
\$0

**Project Name:** Osteoporosis

**Target Population:** Project initiatives target women, at-risk adults, and health providers.

**Project Description:** The primary objectives are prevention, detection, and treatment of osteoporosis and osteopenia to reduce both the prevalence of osteoporosis and the number of osteoporosis-related fractures. Projects include public and professional education, community-based screening and counseling, dissemination and support for voluntary quality assurance standards for health professionals, and program evaluation.

Michigan Age-Adjusted Hip Fracture Rate



**Project Accomplishments for FY 2009:**

- The Osteoporosis Project is administered through the Michigan Public Health Institute, which in turn subcontracts with community and statewide partnership agencies.
- Evidence-based programs: self-management, fall prevention or physical activity programs were offered in over 63 counties reaching an estimated 3,775 older adults who were at risk for osteoporosis. One-hundred and ninety-two workshops were conducted for 1,885 participants enrolled in the Chronic Disease Self-Management Program (called PATH in Michigan). Seventy-five certified instructors taught EnhanceFitness at 42 community sites serving 1,230 older adults.
- Community education, risk assessment and bone mineral density screenings: 844 people participated in osteoporosis community education programs, were assessed to be at risk for osteoporosis, received counseling and bone mineral density screening tests.
- The Michigan Coalition for Bone Health (MCBH): Maintained its membership in 2009; over 100 people attended the annual conference co-hosted with the Michigan Arthritis Collaborative Partnership. Projects addressing the strategic plan vision priorities included: building partnerships through Michigan Partners on the PATH for implementation of evidence-based programs, maintaining coalition involvement through its annual conference, and maintaining web-based communication through [www.michiganosteoporosisconnection.org](http://www.michiganosteoporosisconnection.org).
- Due to loss of funds, no support was available for the Michigan Consortium for Osteoporosis to promote quality standards to providers and bone densitometer operators.

\* Cases were Michigan residents, discharged from a hospital (MI, IN, OH, WI) in 1998- 2005 with a principal diagnosis of hip fracture (ICD-9-CM 820.0-820.9). In-hospital deaths were included. Age-adjusted annual rates were calculated using the U.S. 2000 Standard population.

Source: Michigan Inpatient Database, DVRHS, MDCH

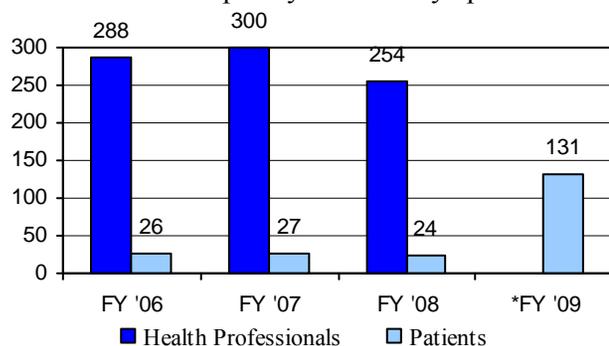
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11387  
Michigan Parkinson's Foundation

FY 09 Funds Appropriated  
\$50,000

FY 10 Funds Appropriated  
\$0

Number of Clients & Health Professionals Served through the Multidisciplinary Clinic & Symposium



\* Health Professionals and Patients Combined

Patient Outcomes as a Result of Clinic or Consultation Visit	
Change in Diagnoses	27%
Added Diagnoses	41%
Changed Medications	87%
Changed time	NA
Other tests	59%
Side Effect Management	NA
PT Referral	82%
OT Referral	Combined with PT
Speech Referral	Combined with PT
Home Program	86%
Other Recommendation	64%

**Project Name:** Parkinson's disease

**Target Population:** Individuals with Parkinson's disease, their families, caregivers, and health providers.

**Project Description:** The Michigan Parkinson's Initiative focuses on increasing access to specialized health care to ensure accurate diagnosis and optimal treatment, increasing awareness about Parkinson's disease, and providing education about care and treatment. Multidisciplinary, "second opinion" clinics staffed by movement disorder specialists evaluate patients who live in areas of the state that lack these specialized services. Education provided to patients and families during the clinic visit and educational forums for health care professionals and consumers increase knowledge about Parkinson's disease and its treatment.

**Project Accomplishments for FY 2009:**

- Regional one-day Multidisciplinary clinics: established clinics in Kalamazoo, and Sault Ste. Marie.
- 22 patients and their families were referred and seen in the clinics by multidisciplinary teams, exceeding the number anticipated. The Kalamazoo clinic was extended a half day.
- A support group was initiated in St. Joseph with the support of Lakeland Regional Health Systems.
- Publicity sent out to 12,000 homes and via announcements to the affiliated support groups and at regional meetings. Media announcements and letters were mailed to area neurologists.
- The foundation has been assisting people in the Upper Peninsula who have lost contact with their neurologists due to physicians moving out of the area. Support includes referrals and following up in a timely manner. A Parkinson's support group will be established in Escanaba.
- Community and Medical Education Programs: Conducted two open forum educational programs reaching 109 people.
- The clinics achieved or exceeded all objectives and outcomes were comparable to those anticipated. Additional resources were needed to manage the increased number of referrals. Overall post clinic ratings by the patients was high (average 9.4 on a 10 point scale). Feedback from referring physicians was very positive as well (average 9.3 on a 10 point scale). Comments included the need to keep clinics going. Patients received increased understanding about the disease and its management. Twenty-seven percent of patients seen had added or changed diagnoses, 41% had additional diagnoses. Of the recommendations made in the clinics, 87% had changed medication regimens, 82% were referred for rehabilitation therapies, 59% were recommended for additional testing, and 86% were recommended for additional care management. The clinic evaluations stimulated needed changes in care and helped many patients cope more effectively with the disease.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11369  
Physical Fitness, Nutrition, and Health

FY 09 Funds Appropriated  
\$700,000

FY 10 Funds Appropriated  
\$0

**Project Name:** Physical Fitness/Governor’s Council on Physical Fitness/MI Fitness Foundation

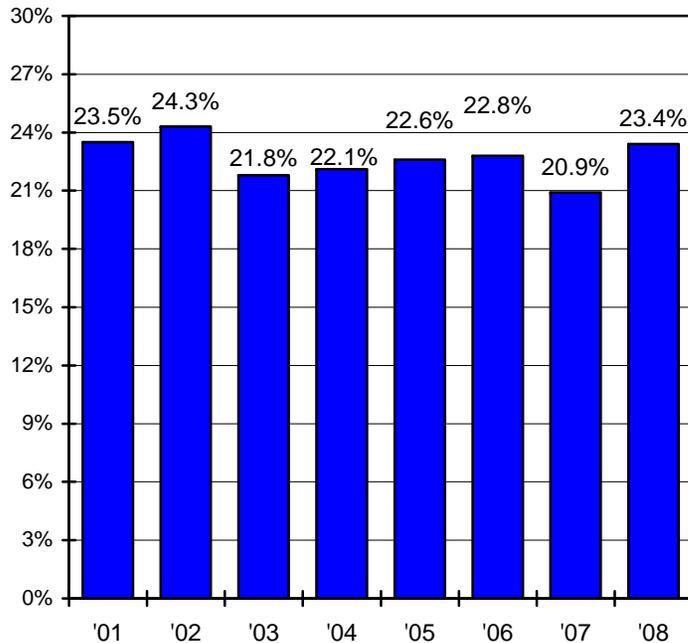
**Target Population:** Children and adult residents of Michigan.

**Project Description:** A physically educated population with the knowledge and skills to enjoy a healthy, vigorous and safe lifestyle in communities designed to support physical activity.

**Project Accomplishments for FY 2009:**

- Collectively, the programs of the Governor’s Council on Physical Fitness served over 1,600,000 Michigan residents.
- 73% of Michigan Counties have one or more schools registered to begin Safe Routes to School initiatives; there are approximately 380 participating schools serving over 150,000 students.
- Walk to School Day took place in October 2008. Schools in 68 counties participated (representing 78% of Michigan counties).
- Exemplary Physical Education Curriculum (EPEC) was improved in over 26 counties. EPEC is a CDC award winner for chronic disease prevention. Research results show that EPEC students are more skilled and knowledgeable, and demonstrate higher levels of physical activity.
- 390 sets of Healthy Communities, Health Schools provided to six teachers each in 65 schools.
- Day-long conference held in October for Physical Education teachers.
- Legislative Education Day held February 25, 2009.

No Leisure-Time Activity\* Michigan Residents



\* Proportion of respondents who reported they did not participate in any physical activities, recreation, or exercise in their leisure time within the past month.

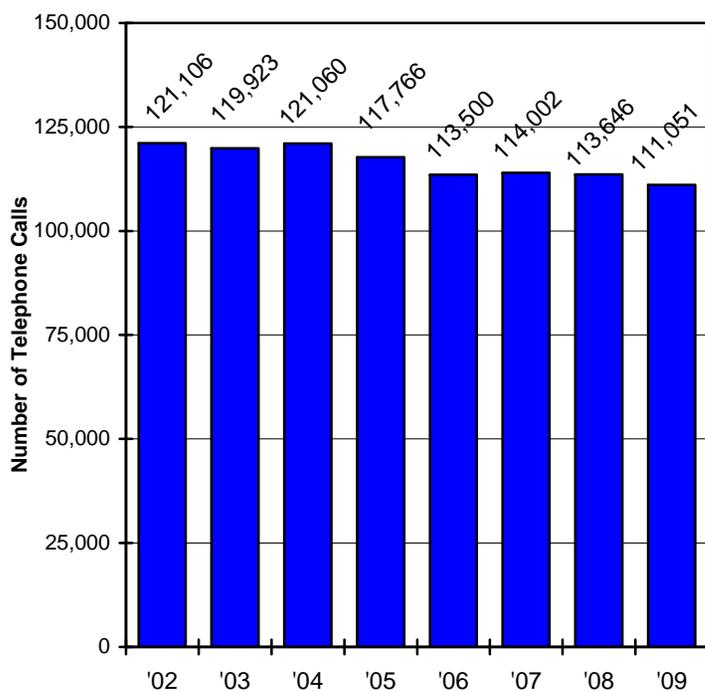
Source: BRFS, MDCH

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 33860  
Special Adjustor Payments  
Special DSH Payments

FY 09 Funds Appropriated  
\$300,000  
FY 10 Funds Appropriated  
\$0

Number of Telephone Triage from Public



Source: Division of Environmental Health, MDCH

**Project Name:** Poison Control

**Target Population:** All residents of Michigan.

**Project Description:** The Michigan Poison Control System consisted of two regional certified poison centers: Children’s Hospital of Michigan Regional Poison Center in Detroit, and the Regional Poison Control Center in Grand Rapids until August 2009, when the two centers were combined into one center at Children’s Hospital of Michigan, serving the entire state. The center continues to provide 24 hour/day, 365 days/year, toll-free telephone access for poison triage and first-aid advice. The Poison Control program utilizes a comprehensive approach to preventing poison exposure through education of the public, and to minimize severity of injury, by education of healthcare professionals in the latest treatment for poisoning.

**Project Accomplishments for FY 2009:**

- Telephone triage from the public (information and advice) is provided 24 hours, 365 days per year. 111,051 calls were received that involved 90,524 human exposures in FY 2009.
- Total number of successful outcomes (i.e. avoided emergency department visits): 64,272/90,524 human exposures = 71% avoided emergency department visits.
- Provided consultative service to healthcare providers.
- Provided consultations by medical toxicologists, including outbreak investigations conducted by MDCH and local health departments.
- Provided public education through health fairs, community presentations, publications, and other venues.
- Provided daily data to MDCH for the purpose of syndromic surveillance, outbreak, and early event detection. This involved the continuous auto uploading of data, occupational and environmental pesticide poisonings, carbon monoxide, mercury and other poisonings, the Hazardous Substances Emergency Events Surveillance system, and review of case reports meeting certain definitions in the “National Poison Data System.”
- Completed the process of closing the poison center in Grand Rapids and consolidating all of its functions at the center in Detroit without any interruption of service to the citizens of Michigan. This was a huge project involving staffing, purchasing of equipment, and technology transfer– a major process that had to be completed within two weeks of notice or service would have been interrupted, and for which no funding was provided.

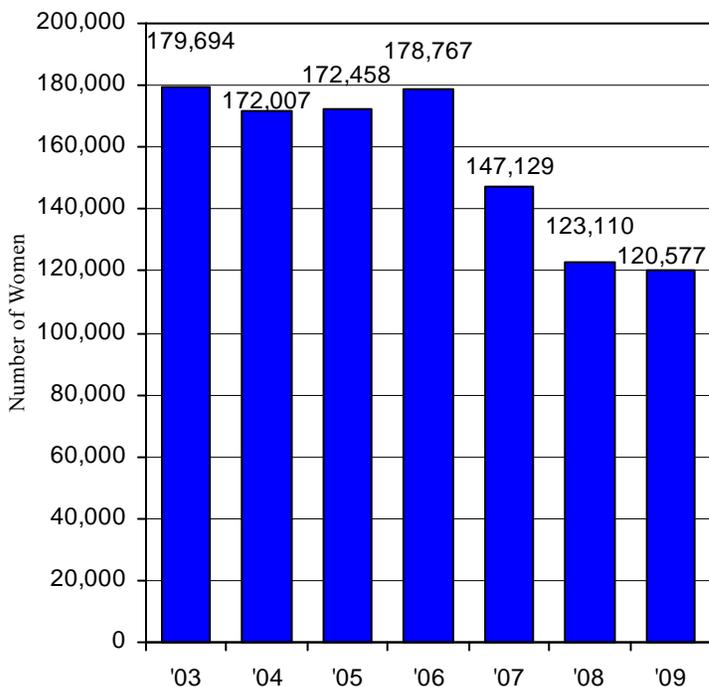
## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14251  
Pregnancy Prevention Program

FY 09 Funds Appropriated  
\$4,633,300

FY 10 Funds Appropriated  
\$1,145,100

Number of Women Receiving Pregnancy  
Prevention Services



Source: Family Planning Annual Report (FPAR) Data

**Project Name:** Pregnancy Prevention: Michigan Abstinence Program / Family Planning Program

### **TEEN PREGNANCY PREVENTION INITIATIVE (TPPI)**

**Target Population:** Youth ages 10-18 and their parents/caregivers as well as parents of middle school youth.

**Project Description:** TPPI is a comprehensive initiative focused on reducing teen pregnancies. TPPI includes comprehensive evidence-based teen pregnancy prevention education for youth in schools and in after-school settings. In addition to youth programming, TPPI provides for Talk Early & Talk Often (TETO), a statewide initiative designed to support parents as the primary abstinence and sexuality educators of their children by helping them gain knowledge and skills to communicate with their children about abstinence and sexuality.

#### **Project Accomplishments for FY 2009:**

- TPPI grantees served 135 youth, of those, 100 (74%) completed at least 14 hours of programming.
- TPPI grantees served at least 100 parents with 2 or more hours of programming.
- TETO served 338 parents in 19 workshops throughout Michigan.
- The statewide teen pregnancy prevention conference reached 250 participants from all across Michigan.

#### **Project Goals for FY 2010:**

**Goal:** To decrease the rate of teen pregnancy in Michigan, as well as increase parents' comfort level in talking with their child about abstinence and sexuality. TPPI will serve at least 900 youth and 400 parents in FY 2010.

1. To teach youth how to decrease risk behaviors, including increased condom and contraceptive use, as well as the relationship between alcohol and other drug use to increased sexual vulnerability;
2. To teach youth the decision-making/refusal skills necessary to reject sexual advances, cope with social pressures and avoid risky situations;
3. To support communities in developing and maintaining social environments that support comprehensive sexuality education;
4. To teach youth the relationship between sexual activity and sexually transmitted infections, including HIV/AIDS;
5. To teach parents/caregivers how to communicate effectively with youth about abstinence and sexuality and equip them with the knowledge and skills needed to communicate about these issues.

### **FAMILY PLANNING PROGRAM**

**Target Population:** Females and males at-risk for unintended pregnancy.

**Project Description:** The Family Planning (FP) program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children. Forty-eight family planning agencies operate 137 clinics providing low-cost, high quality contraceptive services and supplies.

#### **Project Accomplishments for FY 2009:**

- Served 120,577 women in need of publicly funded family planning services. Due to dramatic increased cost of providing services (especially contraceptive cost), the program did not reach the goal of serving 128,976 women.
- Served 30,909 female teens at-risk for unintended pregnancy. Due to increased cost of providing services (contraceptive cost), program did not reach goal of 38,693 or 30% of females are teens.

#### **Project Goals for FY 2010:**

- To assist individuals in the number and spacing of their children.
- To serve 62,250 total users in the Family Planning Program.

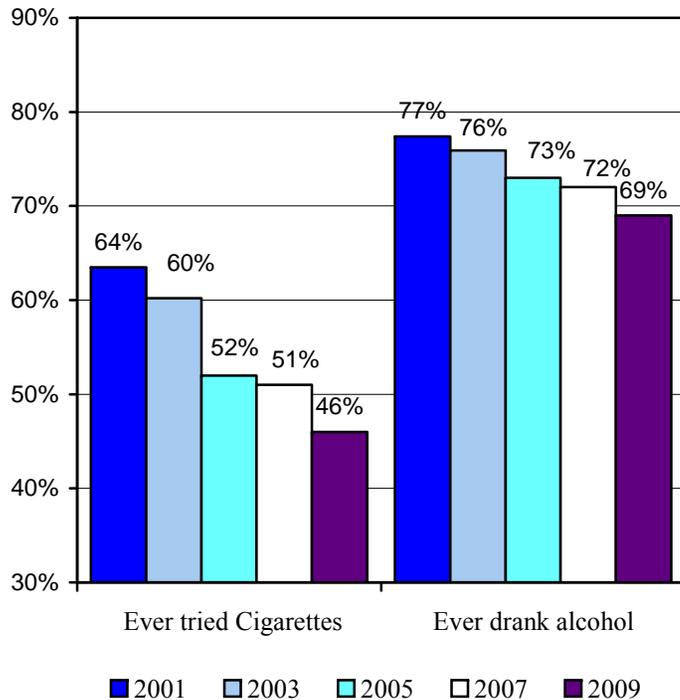
# Healthy Michigan Fund – FY 2009 Report

Appropriations # - 14270  
 School Health and Education Programs

FY 09 Funds Appropriated  
 \$500,000

FY 10 Funds Appropriated  
 \$400,000

Michigan Youth Behavioral Survey Results  
 by Percentage of MI High School Students



Source: Michigan Youth Risk Behavior Survey, 2005 Report

**Project Name:** School Health Education /Michigan Model for Health

**Target Population:** School-aged children throughout Michigan and their families.

**Project Description:** The Michigan Model for Health© curriculum provides comprehensive school health education for Michigan's school-aged children. A parent education component provides information for parents and families of students receiving the curriculum. A network of School Health Coordinators at 25 regional sites across the state provide schools with curriculum training, health related professional development, resources and ongoing technical assistance for public, charter, and nonpublic schools in kindergarten through 12th grade. The 25 School Health Coordinators also address critical issues for schools within their jurisdiction, which impact the health, safety and well-being of Michigan students. The Michigan Model for Health© curriculum is supported and updated through a statewide collaboration providing a research-based approach to health education. The Michigan Model is the primary health education curriculum used in Michigan's schools at the kindergarten through 12th grade levels. The curriculum is aligned with Michigan's health education standards and helps schools meet the new Michigan Merit Curriculum Guidelines for health education.

**Project Accomplishments for FY 2009:**

- Fully updated and revised lessons are available for grades K-6.
- Final data collection for year two is completed and being finalized for release on the longitudinal, multi-year evaluation of the curriculum.
- First year evaluation results have been released and distributed from 4th grade data that showed positive and statistically significant results in the areas of social, emotional, and self-management skills, drug and tobacco refusal skills, as well as knowledge and skills in physical activity and nutrition. The study includes over 2,500 students and 300 teachers in more than 50 school buildings.
- Assessments for revised lessons at grades K-5 are available, 6<sup>th</sup> grade has been developed and is being piloted currently.
- Revised and updated secondary level physical activity and nutrition combined curriculum module was released and trained.
- Emergency preparedness lessons and activities for grades K-12 were developed.
- A National Training of Trainers of the curriculum for secondary grade modules was conducted.
- Correlations to core curriculum have been developed and are available for Social Studies and English/Language Arts at grades K-5, grade 6 and middle school tobacco, nutrition and physical activity module correlations are in development.

**Project Goals for FY 2010:**

- Second year evaluation results will be finalized and released that will provide information on the 5<sup>th</sup> grade data collection.
- Full results of the two-year longitudinal evaluation study will be released.
- Emergency preparedness lessons and activities for grades K-12 will be released and trained
- Assessments for remaining revised curricula will be developed.
- Correlations to core curriculum for 6th grade, middle school tobacco, nutrition and physical activity modules will complete development and become available for release.
- Revision of middle school HIV prevention module will be completed and trained.
- Revision of secondary modules into one new comprehensive package at the high school level that is aligned to and structured by Michigan Merit guidelines and supports teacher instruction based on focus group and survey feedback.

## Healthy Michigan Fund – FY 2009 Report

Appropriations # - 46512  
Senior Nutrition Services

FY 09 Funds Appropriated  
\$167,000

FY 10 Funds Appropriated  
\$0

**Project Name:** Senior Nutrition Services

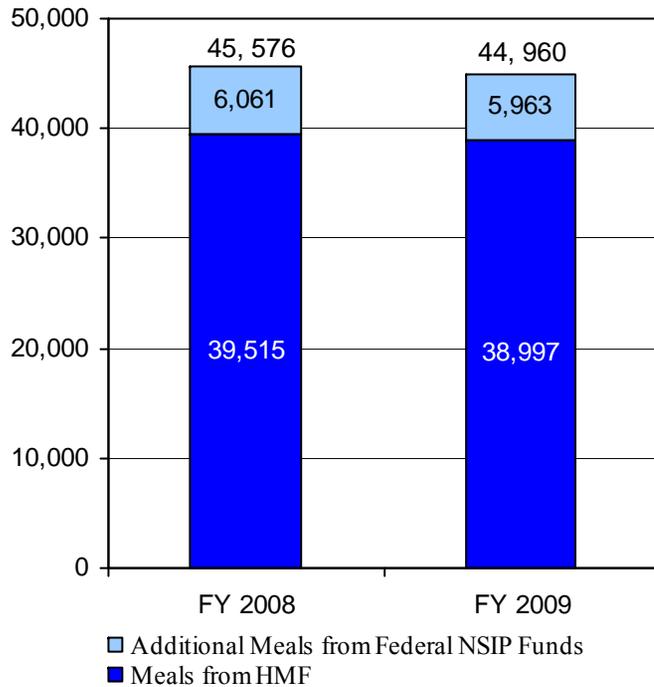
**Target Population:** Homebound senior citizens age 60 and over.

**Project Description:** Home-delivered meals are served to those 60 years of age or older that are homebound and have no other means of meal preparation. Meals served follow the most current “Dietary Guidelines for Americans” and must meet established nutritional requirements, such as 1/3 of the recommended dietary allowance (RDA), and be low in sugar, fat, and sodium. Meals are to be made available at least 5 days per week. The Healthy Michigan Fund (HMF) enables the provision of meals on weekends and holidays, and support special diet meals as appropriate.

**Project Accomplishments for FY 2009:**

- The program provided 8,144,414 meals to 49,744 homebound seniors. The HMF portion equaled 38,997 meals.
- Total funding used for support of the home delivered meals program was \$34,877,479. Federal funds comprised 41.7% of the funding, with the state and local levels contributing 28.5% and 29.8% respectively.
- Program participants contributed an average of \$.72 per meal in donations, which generated an additional \$5,850,000 in funding and expanded the number of meals available.
- The additional 38,997 meals supported by the HMF increased the total number of meals eligible for federal NSIP reimbursement and an additional 5,963 NSIP funding supported meals.
- 61,373 meals were provided to 352 care recipients on behalf of their caregivers through the National Family Caregiver Support Program.

HMF-Related Meals Served



Source: National Aging Program Information System (NAPIS). FY 2008 NAPIS is preliminary until certified by the U.S. Administration on Aging in March 2009.

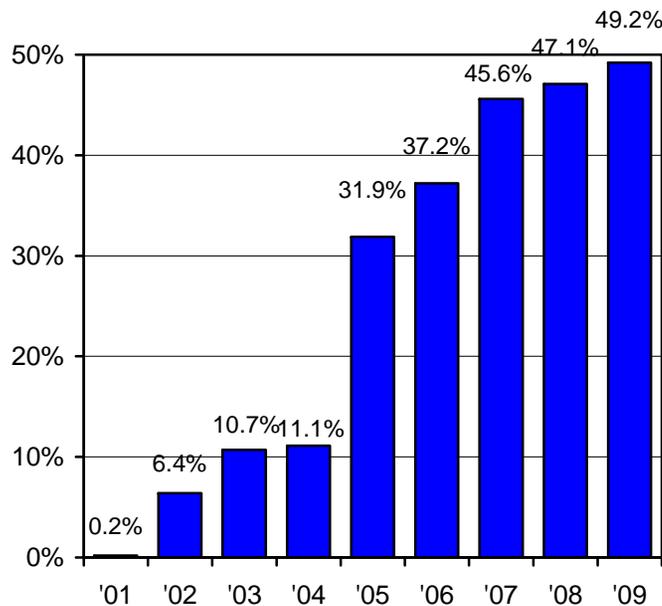
# Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11360  
Smoking Prevention

FY 09 Funds Appropriated  
\$2,788,400

FY 10 Funds Appropriated  
\$2,233,400

Percentage of Michigan Residents Protected  
By Smoke-Free Worksite Regulations Within  
Their Community



Source: MI Youth Tobacco Survey, MI Adult Tobacco Survey, BRFSS, MI Tobacco Quitline reports; HEDIS Survey; Smoke-free Environments Law Project

**Project Name:** Smoking Prevention Program

**Target Population:** All residents of Michigan, especially youth, adults, seniors, communities of color.

**Project Description:** Through statewide and community-based grants, the Michigan Tobacco Control Program funds various programs to reduce both the health and economic burdens of tobacco-related death and disease by increasing the number of smoke-free environments, preventing teens and children from starting to smoke, assisting hard-to-reach populations in quitting smoking and reducing tobacco use among people who are disparately affected by tobacco use and industry marketing. Healthy Michigan Fund money is dispersed through community and statewide contracts through MDCH Requests for Proposals. Proposals are ranked by whether or not the applicant meets prerequisites and other criteria such as clarity of local need, economy of budget, applicant's experience in creating policy and environmental change within the local community, documented support from and collaboration with community partners, and past performance on previous tobacco grant awards.

**Project Accomplishments for FY 2009:**

- A local smoke-free regulation, covering worksites and public places (excluding bars and restaurants), were passed in the following three counties: Muskegon (pop. 170,521); Benzie (pop. 16,113); and Leelanau (pop. 21,262). Currently, local laws that establish smoke-free worksites now cover more than 49.2% of Michigan's population.
- The percentage of school districts with 24/7 tobacco-free school policies increased to 50%, protecting over 800,000 students from the harmful effects of secondhand smoke at all times on school property and at all off-campus school-sponsored events.
- The University of Michigan adopted a smoke-free campus policy for all three campuses in Ann Arbor, Dearborn, and Flint that will take effect in Fall 2011. Three additional community colleges – Alpena Community College, Montcalm Community College and Northwestern Michigan College – adopted smoke-free campus policies. These policies will protect over 70,000 college students from the harmful effects of secondhand smoke.
- Four local Housing Commissions (Algonac, Menominee, Monroe and Charlevoix) adopted smoke-free policies covering approximately 56 apartment buildings/developments (4,158 units).
- One thousand additional restaurants in Michigan now have 100% smoke-free dining policies.
- The Michigan Legislature passed the Smoke-Free Worksite Bill, formally known as the Dr. Ron Davis Law. The law establishes smoke-free environments for all Michigan worksites including restaurants and bars. There are specific exemptions for Detroit casino gaming floors, specified cigar bars and tobacco specialty shops.

**Project Goals for FY 2010:**

- Support smoke-free policies to protect residents from the hazards of secondhand smoke, increase cessation rates and reduce social acceptance.
- Implementation and enforcement of the statewide smoke-free worksites law.
- Prevent tobacco use among Michigan's middle and high school students and provide every student with a 24/7 tobacco-free school campus.
- Prevent tobacco use and decrease smoking rates among young adults, ages 18 to 24; implement smoke-free campus policies at all Michigan public, four-year universities and colleges.
- Increase awareness and usage of the statewide tobacco quitline.
- For evaluation purposes, complete collection of tobacco-related baseline data on Michigan's five major ethnic populations and other population groups disproportionately affected by tobacco use and exposure to secondhand smoke.
- Develop a strategy to expand and stabilize tobacco control infrastructure and funding in Michigan.
- Seek out and engage in public and private partnerships that more effectively address health inequities and eliminate oppression based on racism, poverty, social class, gender, sexual orientation, mental illness or physical disabilities.

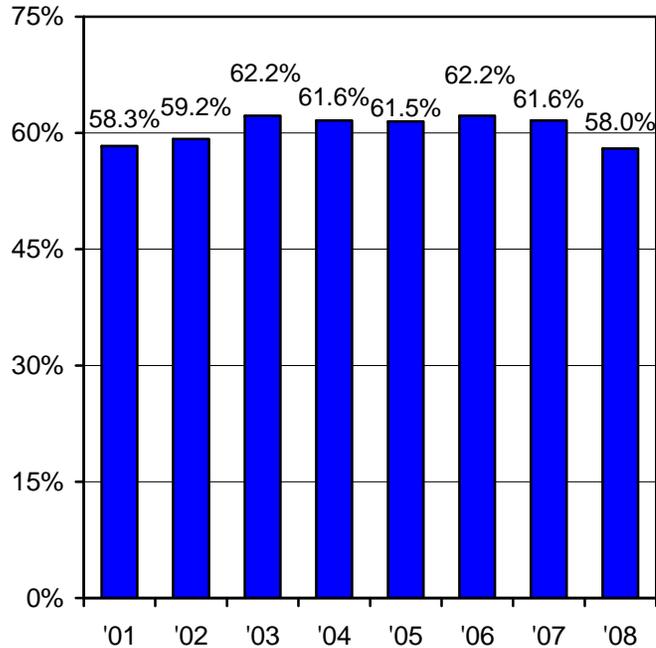
# Healthy Michigan Fund – FY 2009 Report

Appropriations # - 11360  
 Smoking Cessation Quit Kit  
 Nicotine Replacement Therapy Program

FY 09 Funds Appropriated  
 \$900,000

FY 10 Funds Appropriated  
 \$365,000

Percentage of Current Smokers Who Have Stopped Smoking for One Day or Longer Because They Were Trying to Quit



Source: Adult Tobacco Survey, BRFSS, Quitline evaluation data

**Project Name:** Smoking Cessation Quit Kit - Nicotine Replacement Therapy Program (NRT)

**Target Population:** Uninsured Michigan tobacco users.

**Project Description:** The nicotine replacement therapy program (NRT) - a program to provide a supply of nicotine patches or gum--was mandated by the legislature in June 2004. Distributing NRT through the Quitline allows the department to: 1) screen callers for medical conditions that might contraindicate the use of NRT; 2) instruct callers in the proper use of NRT to avoid an under- or overdosing situation; and, 3) screen callers to ensure that medication is not distributed to minors without parental permission and medical supervision. NRT is distributed to the uninsured because they are the most at risk, least likely to be able to afford medication, and are statistically far more likely to be smokers. HMF money was awarded to the vendor distributing NRT under this program by a competitive request for proposals process.

**Project Accomplishments for FY 2009:**

- Since the beginning of the line in 2003, Michigan Cessation Quitline counselors have responded to 51,367 calls from tobacco users requesting either information and/or support to quit tobacco use. Of those calls, 9,059 occurred in this funding cycle.
- The Michigan Tobacco Quitline offered free NRT to all callers regardless of insurance in March 2009 to increase awareness of the quitline. This promotion resulted in over 92,000 calls to the quitline in one month. The demand exceeded the intake capacity of the quitline. Intake was temporarily halted for a few days. Volume for the remainder of the funding year was maintained at a manageable level by offering service to Medicaid, Medicare and uninsured callers only.
- Michigan Quitline coaches have achieved a 26.6% quit rate after 6 months with use of the free NRT patches. This compares favorably to a national average 6-month quit rate (with or without NRT) of between 20-25%.
- More than 4,500 people have received NRT through the Quitline this year. Medicaid, Medicare and uninsured clients represent more than 70% of those using the Quitline to support their success in quitting.
- The Michigan Tobacco Control Program distributed over 100,000 quit kits.
- 95 pregnant smokers called the Michigan Tobacco Quitline.
- The capacity of the Quitline was expanded to provide proactive counseling to 6,147 Michigan callers compared to 5,751 the previous year.

**Project Goals for FY 2010:**

- Increase awareness of the quitline by running radio advertising in late January and March of 2010 and track call volume to evaluate effectiveness of campaign.
- Increase promotion of the quitline to ethnic and other populations disparately affected by tobacco use.
- Release a new quitline vendor competitive request for proposals in May of 2010.

## Healthy Michigan Fund – FY 2009 Report

**Project Name:** Tobacco Tax Collection and Enforcement

**Target Population:** Individuals and businesses who participate in tax evasion through the illegal trafficking of tobacco in the state of Michigan.

**Project Description:** To protect the state of Michigan, its economy, welfare, and vital state sponsored programs through the prevention and suppression of organized smuggling of untaxed tobacco products in the state, through enforcement of the Tobacco Products Tax Act, and other laws pertaining to combating criminal activity. This includes the assistance to federal law enforcement officials with identifying individuals and activities that may be associated with international money laundering and funding for terrorism.

### **Project Accomplishments for FY 2009:**

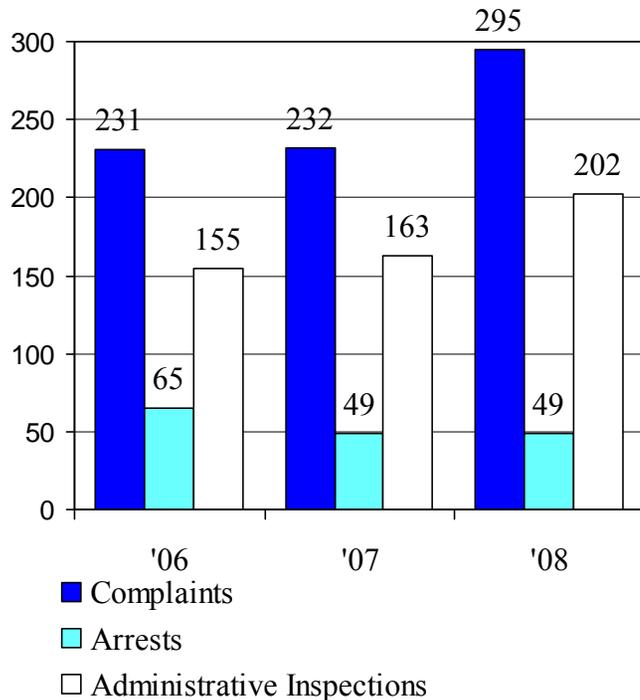
- Law enforcement leader in the state of Michigan for combating illegal smuggling.
- Enforced the Masters Settlement agreement through regulatory inspections.
- Assisted the Detroit-Bureau of Alcohol, Tobacco, & Firearms in conducting a large scale investigation in which 5 people were arrested for federal trafficking of cigarettes.
- Supported state sponsored programs and agencies, such as Medicaid, which is funded by proceeds from tobacco taxes, penalties and fees, through the effective enforcement of tobacco tax laws.
- Supported fair market access to legitimate businesses by aggressive enforcement efforts.
- Continued to investigate criminal operations of untaxed tobacco products, which involved individuals selling cigarettes and other tobacco products illegally to retailers and individuals without the proper tax being remitted to the state of Michigan. This includes one company who owes over \$4 million dollars to the state of Michigan from purchases not reported.
- 52 felony arrests and approximately \$400,000 dollars in forfeiture and restitution back to the state of Michigan.

Appropriations # - 11390  
Tobacco Tax Collection & Enforcement

FY 09 Funds Appropriated  
\$610,000

FY 10 Funds Appropriated  
\$0

Michigan Tobacco Smugglers Arrests,  
Complaints, & Administrative  
Inspections



Source: Tobacco Tax Collection and Enforcement Report, State of Michigan

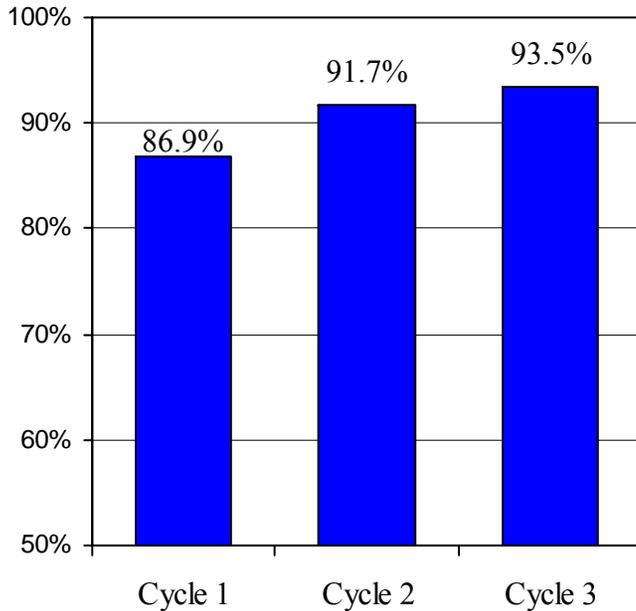
# Healthy Michigan Fund – FY 2009 Report

Appropriations # - 12271  
Local Health Services

FY 09 Funds Appropriated  
\$220,000

FY 10 Funds Appropriated  
\$100,000

Percentage of Essential Indicators Met By Cycle:  
Local Public Health Operations



All 45 Local Health Departments were fully accredited in Cycle 3; only 6.5% of indicators were missed, requiring corrective action plans.

Source: Michigan Local Public Health Accreditation Program

**Project Name:** Training and Evaluation—Local Public Health Operations

**Target Population:** 45 Local Public Health Departments serving 83 Michigan Counties. List available at <http://www.michigan.gov/mdch/0,1607,7-132--96747--,00.html>.

**Project Description:** The mission of Michigan's Local Public Health Accreditation Program is to assure and enhance the quality of local public health by identifying and promoting the implementation of public health standards for local public health departments; it evaluates and accredits local health departments on their ability to meet these standards. The program is a collaborative effort between Michigan's forty-five local health departments (LHDs), the Michigan Departments of Community Health (MDCH), Agriculture (MDA), and Environmental Quality (MDEQ), and the Michigan Public Health Institute (MPHI). Program funding is contracted to MPHI to coordinate and implement the program while MDCH maintains administrative and oversight roles.

### **Accreditation Program Goals**

1. Assist in continuously improving the quality of local public health departments.
2. Establish a uniform set of standards that define public health and service as fair measurement.
3. Ensure local level capacity to address core functions of public health.
4. Provide a mechanism for accountability to demonstrate effective use of financial resources.

### **Project Accomplishments for FY 2009:**

- Commenced the fourth three-year cycle of on-site reviews for Michigan's Local Public Health Accreditation Program.
- Completed 16 week-long onsite reviews at LHDs to assure capacity to provide statutorily required services and ensure established program standards.
- Coordinated and staffed quarterly statewide Accreditation Commissioner Meetings.
- Collaborated with MPHI on the Multi-State Learning Collaborative-3 grant, funded through the Robert Wood Johnson Foundation, focused on using continuous quality improvement tools to improve LHDs organizational capacity and to prepare Michigan for Voluntary National Accreditation.
- Coordinated two accreditation reviewer trainings with an average of 35 attending.
- Enhanced and updated online accreditation reporting module for statewide accreditation reviewers and LHDs.

### **Project Goals for FY 2010:**

- Complete weeklong on-site reviews at 16 LHDs to assure capacity to provide statutorily required services and ensure minimum program requirements.
- Analyze and report results on a possible 192 LHD review evaluation forms spanning 12 programs across three state departments.
- Coordinate and staff quarterly statewide Accreditation Commissioner Meetings.
- Coordinate two accreditation reviewer trainings with up to 50 attending.
- Collaborating with MPHI, complete the third year of a three-year Multi-State Learning Collaborative-3 work plan funded through the Robert Wood Johnson Foundation.