Sec. 227. The state departments, agencies, and commissions receiving tobacco tax funds and Healthy Michigan fund revenue from part 1 shall report by April 1 of the current fiscal year to the senate and house 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.
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Healthy Michigan Fund
In Fiscal Year (FY) 2018, $35,018,500 of the Healthy Michigan Fund was appropriated as match for Medical Services and leveraged $64,409,382 in Federal Medicaid dollars to provide health care services to Medicaid beneficiaries.

Medicaid Benefits Trust Fund
In FY 2018, $315,288,800 of Medicaid Benefits Trust Fund was appropriated as match for Medical Services and leveraged $579,909,383 in Federal Medicaid dollars to provide health care services to Medicaid beneficiaries.

Health & Safety Welfare Fund
In FY 2018, $5,014,600 of Health and Safety Welfare Fund was appropriated as match for Medical Services and leveraged $9,223,333 in Federal Medicaid dollars to support Disproportionate health care services to cover uncompensated hospital costs.

<table>
<thead>
<tr>
<th>Summary of Medical Services Match Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
</tr>
<tr>
<td>Healthy Michigan Fund</td>
</tr>
<tr>
<td>Medicaid Benefits Trust Fund</td>
</tr>
<tr>
<td>Health &amp; Safety Welfare Fund</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>
Healthy Michigan Funds are used to support 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 28 Michigan Critical Health Indicators.

This portion of the Healthy Michigan Fund Report presents highlights of Fiscal Year (FY) 2018 accomplishments for all the Healthy Michigan Fund projects, their indicators of success, along with future goals for FY 2019.
Project Name: Cardiovascular Health

Target Population: Michigan residents with a special emphasis on populations most impacted by causes of health disparities, including low-income and decreased access to services.

Project Description: To prevent and improve the management of cardiovascular disease and its risk factors with a goal of decreasing morbidity, premature mortality, and healthcare costs due to heart disease, stroke, and obesity. Funds support state staff to lead cardiovascular health, physical activity and nutrition programs.

Project Accomplishments for FY 2018

Heart Disease and Stroke:
- The work in heart disease and stroke is focused on the goals of the Michigan Million Hearts® initiative that includes working with health system interventions and community clinical linkages to prevent and control hypertension that can lead to heart attack and stroke. Continued to reach 180,000 patients through these efforts, including those diagnosed with high blood pressure.
- Over 65,000 heart disease and stroke prevention resources were sent to Michigan primary providers, health systems and the public.
- There were 754 hits to the Michigan Million Hearts® website. This website serves as a platform for resources and a connection for all Stakeholders interested in supporting and implementing Million Hearts® strategies.
- Michigan’s Ongoing Stroke Registry to Accelerate Improvement of Care (MOSAIC) Program increased partners from 36 to nearly 50 hospitals to improve quality of care for stroke patients as part of the state stroke registry and quality improvement program.
- Seventy-five percent of patients continued to receive defect-free stroke care, that includes all the appropriate treatments and education provided in the stroke registry hospitals.

Obesity Prevention:
- The adult obesity rate in Michigan has remained relatively stable over the past years, from 31.1% to 32.3%. Based on Healthy People 2020 target to reduce obesity by 10% in 10 years, Michigan aims to reduce adult obesity rates to 29.2% by 2026.
- Staff provided technical assistance on creating healthier school environments through evidence-based, school-wide initiatives that support children’s health and youth engagement in before/after school and summer programming. These initiatives were implemented in 269 schools.
- Sixty child care centers and homes implemented food service guidelines/nutrition standards and physical activity standards, improved breastfeeding support and reduced barriers to quality child care for high-need children.
- Staff coordinated a recognition program for breastfeeding-friendly businesses to encourage breastfeeding support and recognized 14 businesses for supporting breastfeeding employees in the workplace.
- The Michigan Department of Health and Human Services (MDHHS) continued to provide training, technical assistance and resources to businesses across the state to develop worksite wellness programs. The number of worksites adopting worksite wellness programs, including policies, increased from 106 to 149 reaching over 20,000 employees.
- The number of adults and youth who have access to places for physical activity was increased from 178,518 to 426,201.
Project Name: Cardiovascular Health – continued

Project Goals for FY 2019

Heart Disease and Stroke:
- Continue to increase education, awareness and diagnosis of Heart Disease and Stroke, through the efforts related to our Michigan Million Hearts® initiative, as well as our stroke quality improvement project, which includes promoting knowledge of risk factors and management of high blood pressure.
- Work with health systems through policy change and health information technology, such as electronic health records, and the public through educational resources and earned media, to raise awareness and implementation of updated hypertension guidelines. The 2017 Hypertension Guidelines redefine high blood pressure as 130/80 mm Hg compared to the previous 140/90 mm Hg.
- Continue to collaborate with the Bureau of Emergency, Trauma, and Preparedness, including Emergency Medical Services (EMS), and the Bureau of Epidemiology and Chronic Disease on pre-hospital, in-hospital and post-discharge for stroke patients on implementing a state stroke system of care.

Obesity Prevention:
- Continue to work with businesses, and other public and private partners through interventions, such as policy and environmental change and programming to increase the number of workplaces and schools which support and encourage employees as well as students to eat healthy and be physically active.
- Continue to implement policy and environmental change and programming to increase the number of schools and out of school time programs which support and encourage students to eat healthy and be physically active.
Healthy Michigan Fund – FY 2018 Report

Project Name: Health Disparities Reduction and Minority Health Section (HDRMHS)

Target Population: Michigan’s racial and ethnic minority populations: African American, American Indian/Native American, Arab American/Chaldean, Asian American/Pacific Islander and Hispanic/Latino.

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

Project Accomplishments for FY 2018:

- The Hispanic Infant Mortality Project focused on analyzing data to better understand the increase in infant mortality among Hispanics in Michigan. A comprehensive report including many different analytic methods, from descriptive frequencies to multivariate analyses was completed. The report focuses on disparities between the Hispanic population and other race/ethnicities, risk factors contributing to infant mortality, an overview of Hispanic Infant Mortality in Michigan, and maternal and paternal nativity. The report is currently in publication approval stage.

- The Child Opportunity Index report was modified, and a similar report has already been completed through http://www.diversitydatakids.org/. Instead, a data update to the Michigan Health Equity Status Report (2013) was completed. The update focuses on indicators that affect maternal and child health outcomes. Highlighted indicators include psychosocial determinants of health, socioeconomic positions, basic needs and access to healthcare. The brief had been approved and is in the dissemination stage.

- Completed and submitted the 2017 Health Equity Report. The report recognized the 10th anniversary of Public Act 653 and documented the MDHHS’ efforts over the past 10 years, which included a data brief that displayed a 10 year look at key indicators like poverty, employment, and housing quality that impact health disparities among Michigan’s racial and ethnic minorities.

- Conducted ongoing monitoring for the six organizations funded to increase their capacity to implement minority health and health equity initiatives. A final comprehensive report was submitted to the Preventative Health and Health Services Block grant detailing program outcomes for each of the six funded organizations.

- Intertribal Council of Michigan has completed analyses for the three tribes surveyed for the Native American Behavioral Risk Factor Survey. Results of the surveys have been shared with tribal health directors. Individual tribe results will not be shared with MDHHS. Intertribal Council of Michigan is in the process of completing an aggregate report of all three tribes that will be shared with MDHHS and disseminated broadly.

- Inside Our Mind: Hidden Biases, a workshop pre-requisite of the Equity and Cultural Competency (ECC) Program, was developed in FY 2018 and two will be piloted in FY 2019 with two sets of audiences. Official launch of this workshop will occur in June 2019. A 3-hour presentation of this workshop was also created and delivered to staff and external stakeholders; audience examples include: Medicaid; Office of Workforce Development and Training; Maternal Health Perinatal Collaborative; Public Health Nurses; Capacity Building Grantees; etc.

The American Indian/ Alaska Native non-Hispanic (NH), Black NH, and Hispanic populations all experienced higher rate of mortality due to homicide in 2013-2017 as compared to White NH. For the Black NH population, the rate was almost 15 times that of the White NH population.

Source: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 2013-2017
**Project Name:** Health Disparities Reduction and Minority Health Section (HDRMHS) (continued)

**Project Accomplishments for FY 2018 (continued):**

- The Intergenerational Trauma and Community Violence was convened on 9/20/2018. 200 individuals participated in the full-day summit. Keynotes speakers addressed intergenerational trauma and community violence. The summit also featured eight subject matter experts who discussed issues on violence and education, health, family development, legal system, policy, employment and training.

**Project Goals for FY 2019**

- Conduct analysis of group differences for maternal demographics and pregnancy and infant outcomes for Hispanic/Latino mothers.
- Develop a Michigan child opportunity index report.
- Complete and submit the 2017 PA 653 Report.
- Monitor minority health and health equity initiatives in our six capacity building grant funded communities.
- Work with a tribal epi center to develop Native American Behavior Risk Factor Survey reports.
- Initiate health equity training modules and technical assistance program.
- Convene intergenerational trauma and youth violence summit.
- Continue to provide assistance related to the water crisis in Flint.
- Research establishing a statewide External Advisory Group to inform strategies to improve racial/ethnic minority health.
Healthy Michigan Fund – FY 2018 Report

**MCIR Historical Perspective of Registered Users and Shots Recorded**

<table>
<thead>
<tr>
<th>Year</th>
<th>Register Users</th>
<th>Doses Entered</th>
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<tbody>
<tr>
<td>1997</td>
<td>137</td>
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</tr>
<tr>
<td>1998</td>
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<tr>
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<tr>
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<td>26,638</td>
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</tr>
<tr>
<td>2008</td>
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</tr>
<tr>
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<tr>
<td>2011</td>
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<tr>
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<tr>
<td>2016</td>
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<tr>
<td>2017</td>
<td>30,208</td>
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</tr>
<tr>
<td>2018</td>
<td>31,784</td>
<td>9.1 million</td>
</tr>
</tbody>
</table>

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

**Target Population:** All residents of Michigan

**Project Description:** MCIR is a regionally based, statewide web-based program that contains over 131 million shot records of over 10 million people, primarily children under the age of 20 years. The MDHHS is currently working, through subcontracts, with six MCIR regions to enroll and support every immunization provider in the state. Currently there are 6,275 immunization providers/healthcare organizations enrolled in MCIR, 4,183 schools and 3,844 childcare programs. MCIR processes over 1 million queries monthly from provider Electronic Health Records (EHR) systems to supply patient immunization history and forecast information directly to their EHRs. Approximately 70% of vaccine submissions are sent to MCIR directly from EHRs using Health Level Seven International Standard (HL7) messaging. Use of HL7 messaging is the contributing factor for the improvement of adult immunization administration information in MCIR. Over 7,500 users log into the MCIR Web Application daily and access immunization records to determine if they need additional vaccines (the forecast) or to view other information made available on MCIR [Blood Lead, Newborn Screening, Early Periodic Screening Diagnostic Test (EPSDT), etc.].

**Project Accomplishments for FY 2018:**
- Continue bi-directional data exchange (Query) between MCIR and providers EHR systems that averaged over 1 million hits monthly, or about 22,000 hits daily. Most query participants were non-immunizing providers (e.g. specialists).
- Implemented a Medicaid beneficiary (consumer) access to MCIR record using Query via Medicaid's myHealthButton/myHealthPortal system and assist Medicaid with alert notifications to beneficiaries on vaccines due or overdue.
- Improved internal tracking of MCIR system issues, defects and enhancement request tracking.
- Continued to partner the statewide Health Information Exchange (HIE) stakeholders and providers. Health information Exchange HL7 messaging indicates that 70% of all vaccine administrations are reported. The pace of growth is likely to decrease as larger practices and those with technology capability are already participating in HIE.

**Project Goals for FY 2019:**
- Continue to enroll immunizing providers to become interoperable using HL7 messaging.
- Continue to recruit, onboard and support Query provider and pharmacy EHR systems.
- Expand consumer access to MCIR record using Query via existing Health Plan Patient Portals, School Parent Portals, or citizen access capability via the MILogin Citizen portal as this capability is developed.
- Ongoing evaluation of timeliness, completeness, and quality of electronic immunization data being reported to MCIR.
- Complete development of the Hearing/Vision, and Sickle Cell module in MCIR.
- Develop and implement programmatic changes to MCIR for pandemic planning.
- Implement the Perinatal Hepatitis B case tracking module.
- Implement a standardized vaccine forecasting tool within the MCIR system.
- Implement enhancements to the continuous quality improvement reports to meet the national standards.
- Develop and implement the receipt of certified death data from Vital Records via the Master Person Index.

**Health and Wellness Initiatives**

<table>
<thead>
<tr>
<th>FY 2018 Funds Appropriated: $2,103,300</th>
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<table>
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<tr>
<th>FY 2019 Funds Appropriated: $2,103,300</th>
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</thead>
</table>
**Project Name: Nurse Family Partnership**

**Target Population:** First-time, low-income mothers and their infants in nine communities: the cities of Detroit and Pontiac and the counties of Berrien, Calhoun, Genesee, Ingham, Kalamazoo, Kent and Saginaw.

**Project Description:** Infant mortality is a major public health issue in the state of Michigan. Keeping babies alive was one of MDHHS’ priorities; the Michigan infant mortality reduction plan outlines eight key strategies. Strategy 5 in the state’s plan focuses on expanding home visiting programs to support vulnerable women and infants www.michigan.gov/documents/mdch/MichiganIMReductionPlan_393783_7.pdf.

Nurse-Family Partnership (NFP), one of several home-visiting programs in the state, 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. www.nursefamilypartnership.org.

In FY 2018, $50,000 was used to assure continuation of NFP services in Genesee County.

**Project Accomplishments for FY 2018:**
- During FY18, Hurley Medical Center served 267 women and 227 children while continuing to implement NFP with fidelity and to comply with all requirements of the Michigan Home Visiting Initiative (MHVI) and PA 291 of 2012.
- The Hurley team was successful in increasing breastfeeding initiation rates for women enrolled in the program from 64.6% to 82.8%.
- Premature births decreased from 55.9% to 41.5%.
- One hundred percent of Hurley NFP babies were up-to-date with immunizations at 18 and 24 months.
- Smoking among clients at 36 weeks gestation decreased from 17.3% to 6.7%.
- The families enrolled in Hurley NFP increased over 30% from 2017 to 2018.

**Project Goals for FY 2019:**
- Hurley Medical Center will continue to support families in Genesee County by maintaining a high quality and diverse team of nurses.
- Hurley NFP will continue to participate in the state Home Visiting Learning Collaborative, using Quality Improvement strategies to improve their implementation. This team is working as part of a learning collaborative focused on improving family engagement and retention.
- Hurley will continue to reach out to various community partners to strengthen relationships to help clients connect to resources and to support outreach activities. Already efforts have assisted in increasing relationships with community resources that will benefit families such as Women, Infants, and Children (WIC) and other Early Childhood Programs.
- Hurley will continue to provide services to approximately 200 families through the end of FY 2019.
Project Name: Lactation Consultant

Target Population: Pregnant women, families and their support systems in Genesee County. Physicians and community groups in Genesee County that support pregnant and breastfeeding women.

Project Description: Infant and maternal mortality is a significant public health issue in the state of Michigan and one of MDHHS’ priorities. Research has shown significant reductions in maternal morbidity and infant morbidity and mortality with increases in the amount and duration of breastfeeding rates. Families need support to reach their breastfeeding goals. This project has two objectives: 1) to increase the number of pregnant women who have received education on evidence-based maternity care practices (such as skin to skin and rooming in) before entering the hospital, and 2) to increase support for breastfeeding women from physician’s and community groups. FY 2018 funds were provided to Genesee County Health Department (GCHD) to educate physicians; provide connections between prenatal, hospital and postnatal education and support; and educate and support women on evidence-based maternity care prenatal practices and postnatal breastfeeding issues. The FY 2019 funds will support similar GCHD activities in addition to funding Michigan Public Health Institute to develop a survey on key factors influencing breastfeeding.

Project Accomplishments for FY 2018:
- GCHD provided breastfeeding tools and resources to five clinics.
- GCHD provided breastfeeding education to ten clinics and educated a total of 57 clinical staff using the WHY Breastfeeding curriculum.
- GCHD signed 187 women up for WIC, provided breastfeeding support to 23 women, held 24 support groups, and one-one prenatal education to 44 women.
Project Name: Pregnancy Prevention

Target Population: Adolescents and their parents/guardians and low-income women and men of childbearing age.

Project Description: Taking Pride in Prevention (TPIP) is a comprehensive pregnancy prevention program designed to educate adolescents on both abstinence and contraception to prevent pregnancy and sexually transmitted infections (STIs), including HIV/AIDS, and incorporates the following three adulthood preparation subjects: 1) healthy relationships; 2) adolescent development; and 3) parent-child communication. The goal of TPIP is to reduce the rates of teen pregnancy, STIs, and HIV by delaying the initiation of sex among sexually inexperienced young people and increasing condom/contraceptive use among sexually active young people. This will be achieved by programming that is strengths-based, promotes positive youth development, builds skills for dealing with peer pressure, and empowers young people to make informed decisions related to sexual health and pregnancy prevention.

The Michigan Family Planning program assists individuals and couples in planning and spacing births, preventing unintended pregnancy, and seeking preventive health screenings. The program’s strong educational and counseling component helps reduce health risks and promote healthy behaviors. Family Planning prioritizes serving low-income men and women. The Michigan Family Planning program serves as a safety net with service providers who have been a reliable and trusted source of care, and in many cases the only regular source of health care for individuals. Referrals to other health providers, mental health, and social services are provided to clients on an as needed basis. No one is denied services based on inability to pay.

Project Accomplishments for FY 2018:
Healthy Michigan Funds were used to supplement TPIP funding in the following ways:
- Supported evidence-based teen pregnancy prevention programming in 13 cohorts at 7 sites.
- Provided 285 young people with evidence-based teen pregnancy prevention programming.
- Provided 68 parents/guardians/trusted adults with programming focused on improving parent-child communication around abstinence and sexual health.

Healthy Michigan Funds were used to supplement Title X funding in the following ways:
- Supported high-quality family planning services for 30 sub-recipients in 93 clinics across the state.
- Enabled 44,145 individuals living ≤150% of the federal poverty level to receive reproductive health services.
- Afforded 39,308 women with highly effective reversible and moderately effective contraception.
- Trained 10 providers on the male clinical exam and supported a Male Outreach Initiative with five sub-recipients increasing the number of males served from 19 at baseline to 167 at endpoint.
Project Name: Pregnancy Prevention – (continued)

Project Goals for FY 2019:

- Provide technical assistance and support to programs throughout the state around pregnancy prevention.
- Increase number of youths served with evidence-based teen pregnancy prevention programming.
- Increase number of parents/guardians/trusted adults served with programming that improves parent-child communication.
- Decrease the rate of teen pregnancy among youth 15-19 years of age.
- Prioritize high-quality family planning services to low-income individuals.
- Support sub-recipient provision of contraception by offering at least one clinical practicum on long-acting reversible contraception.
- Assist sub-recipients with male outreach by replicating Family Planning’s Male Outreach Initiative.
Project Name: Smoking Prevention Program

Target Population: All residents of Michigan, highest priority focused on populations disparately affected by tobacco use [youth, adults, seniors, people living with HIV, lesbian, gay, bisexual, and Queer (LGBTQ), and communities of color].

Project Description: Through statewide and community-based grants, the Michigan Tobacco Control Program (TCP) funds various agencies to reduce the health and economic burdens of tobacco-related death and disease. The focus areas are 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.

Project Accomplishments for FY 2018:

- Although Michigan made great progress in reducing the adult smoking rate from 23.3% in 2011 to 19.3% in 2017, the rate remained higher than the US median of 17%.
- After years of monitoring Michigan’s Smoke Free Air Law (Public Act 188 of 2009), compliance for food establishments is very high as violations/citations continued to decrease from 1,233 in FY 2011 (first year) to 204 in FY 2018.
- The TCP continues to oversee the annual review/renewal of cigar bar and tobacco specialty retail store exemption and monitor compliance with the law.
- Over 88.2% of school districts have policies stronger than the Michigan Tobacco Free Schools Act. Over 71.2% of school districts adopted comprehensive 24/7 tobacco-free policies for on-campus and off-campus school sponsored events.
- Michigan continues to work on increasing the number of smoke-free multi-unit housing properties. In August 2018, the U.S. Department of Housing and Urban Development (HUD) required all public housing commissions nationwide to implement a smoke-free multi-unit housing policy with the HUD Smoke-free Public Housing Rule. Throughout FY 2018, the TCP, local contractors, and the University of Michigan Smoke-Free Environments Law Project (SFELP) provided technical assistance to public housing commissions in Michigan to assist them with policy adoption, implementation, enforcement issues, Michigan Tobacco Quitline (Quitline), and provide resources to staff and residents interested in quitting smoking. All PHCs in Michigan are now smoke-free. MDHSS, local contractors, and SFELP continue to provide support to the PHCs and support other affordable and market rate multi-unit housing properties with policy adoption.
- Michigan’s Tobacco Quitline continues to provide ongoing training and outreach to health clinics and health care providers. In FY 2018, 108 pregnant smokers have called the Quitline and 5,444 enrolled in Quitline. The twelve-month overall abstinence rate with the Quitline is 26%.
- Fifty-nine (59) tobacco-free and/or smoke-free parks or beach policies are implemented by local jurisdictions in Michigan, and 26 local jurisdictions have adopted park and/or beach policies with smoke-free or tobacco-free designated areas.
Project Name: Smoking Prevention Program – continued

Project Goals for FY 2019:

- Continue to provide technical assistance for the development and implementation of policies that will increase cessation rates and reduce tobacco’s impact on communities that are disparately affected by tobacco.
- The tobacco program is collaborating with Substance Abuse Disorder prevention, school health and Youth Access to Tobacco Workgroup (“YATTW”) and interdepartmentally with the Michigan Department of Education and Michigan Department of Licensing and Regulatory Affairs in addition to the Local Health Departments to prevent and stop the epidemic of electronic nicotine delivery system (ENDS) use among our youth.
- Continue to monitor and enforce the statewide Smoke-Free Air Law.
- Educate health professionals and those disparately affected by tobacco use through media to increase awareness and usage of the statewide Quitline.
- Provide continued support and technical assistance to PHCs in their efforts to comply with the new HUD Smoke-Free Public Housing Rule.
- Provide education to residents and staff of PHCs regarding services available through the Quitline.
- Continue to work with behavioral health and substance abuse disorder agencies and other healthcare providers and systems to expand utilization of clinical best practices for tobacco dependence treatment.
- Continue to engage new partners to more effectively address health equities and eliminate disparities based on race, socio-economic status, gender, sexual orientation, mental illness, or disability.
- Continue to provide technical assistance and support to local jurisdictions with adoption and implementation of smoke-free and tobacco-free outdoor area policies.
**Project Name:** Family, Maternal and Child Health

**Target Population:** All Michigan residents with focus on infants, pregnant women, women of childbearing age, communities of color, adolescent parents and their parents/guardians, and low-income women and men.

**Project Description:** Maternal and infant mortality rates are key indicators of the health and wellbeing of families, mothers, and children. Healthy babies were one of MDHHS’ key public health priorities. Michigan infant mortality data highlights three areas of concern: higher rates than the national average; alarming disparities existing between racial and ethnic groups; and disproportionate poor prenatal outcomes in low income populations. To reduce maternal and infant mortality rates and disparity, a comprehensive, targeted, data-driven approach is being utilized. The approach includes readily available contraception and reproductive health services, and a comprehensive program designed to address the needs of pregnant and parenting adolescents.

**Project Accomplishments for FY 2018:**
- Supported client-centered contraception and reproductive health services for 30 sub-recipients in 93 clinics across the state and served 54,981 women and 7,726 men.
- Performed cervical cancer screenings based on national clinical standards of care on 7,473 women with over 1,232 women referred for further care due to abnormal screening.
- Performed 35,346 chlamydia tests, 39,001 gonorrhea tests, and 16,005 HIV tests.
- Provided case management or support services through the Michigan Adolescent Pregnancy and Parenting Program (MI-APPP) to 251 pregnant and parenting teens.
- Provided support services by MI-APPP to improve familial connection and communication to 150 parents/guardians of teen parents.

**Project Goals for FY 2019:**
- Ensure that addressing disparities in birth outcomes is at the forefront of all maternal and infant mortality reduction efforts with the implementation of the Mother Infant Health and Equity Improvement Plan (MIHEIP). For latest version of the MIHEIP, see: [https://www.michigan.gov/documents/mdhhs/MIHEIP_Final_Draft_Approved_2_25_19_647304_7.pdf](https://www.michigan.gov/documents/mdhhs/MIHEIP_Final_Draft_Approved_2_25_19_647304_7.pdf).
- Expand network of reproductive health providers to address service gaps in rural and urban counties.
- Provide reproductive health services based on national standards of care and clinical best practices.
- Assess all reproductive health clients’ pregnancy intentions and desire for (more) children.
- Decrease the rate of repeat births among youth 15-19 years of age.
- Increase number of youths served with case management and supplemental support programming.
Project Name: Healthy Homes – Lead Safe Home Program (LSHP)

Target Population: Child occupied facilities, families who reside in a target area and have a child under the age of six or pregnant female residing in the home, or families with a child that has an elevated blood lead level (EBL). Families served through this program live primarily in Flint.

Project Description: This program provides lead inspections and EBL investigations for families with children that have elevated blood levels. Services covered include lead inspections, lead abatement, relocation of the family and follow-up as well as educational material. Other funding sources utilized for the Lead Safe Home program are HUD, General Funds and Medicaid Children's Health Insurance Program (CHIP). Outcomes for these additional funding sources are not reflected below.

Project Accomplishments for FY 2018 (Flint Supplemental funding only):
- 7,565 families contacted for program enrollment through partnership with Genesee Health System
- 320 EBL investigations and Lead Inspection Risk Assessments performed.
- 320 homes sampled for lead in water.
- 91 homes abated and completed through the LSHP.
- Units made lead-safe for 156 residing children and 114 adults
- 136 homes in progress for lead hazard control work

Project Goals for FY 2019:
- Continue providing environmental lead investigations to the families residing in the City of Flint, as well as families in our target areas, or families with children with elevated blood lead levels.
- Continue providing lead abatement services and plumbing repairs to families in Flint, as well as other areas of the state.
- Continued workforce development for lead abatement industry in Flint, as well as other areas of the state.
- Provide Flint Supplemental funding for local Flint partners including the Genesee County Land Bank to increase volume at which lead hazard control work is being provided.
**Project Name:** Michigan Department of Education (MDE) Backpack to Better Nutrition Program

**Target Population:** Nearly 5,000 children from ages 5 to 10 in the City of Flint

**Project Description:** The program provides students facing hunger over the weekend with a backpack filled with nutritious and easy to prepare items. The contents of the backpacks exceeded the United States Department of Agriculture’s daily requirements and was not only enough for the weekend, but enough for the child and younger siblings to share throughout the week. The funding source utilized was Healthy Michigan Funds within the Flint supplemental.

**Project Accomplishments for FY 2018:**
- The Food Bank provided two breakfasts, lunches, and dinners and several healthy snacks to 5,000 elementary age children.
- School staff reported a noticeable impact on the children with food insecurity related behaviors such as being tired on Monday mornings, rushing to food lines, etc.
- There was also a reported increase in attendance.
**Project Name:** Long Term Care Services (LTC)

**Target Population:** Medicaid eligible population that meet the nursing home level of care need.

**Project Description:** This program provides services to many of the state’s most vulnerable citizens. Medicaid, as the primary payer for beneficiaries who reside in nursing homes and county owned medical care facilities, adheres to all state and Federal regulations that govern care provided in these facilities. There are eligibility factors used to determine who qualifies for this service. Eligibility depends on age or disability, income, the value of certain assets owned, and the amount of long term care expenses.

**Project Accomplishments for FY 2018:** In FY 2018 there were approximately 24,000 Michigan residents that benefitted from these services.

**Project Goals for FY 2019:** The long-term goal of this Program is to improve the quality of care and quality of life for over 100,000 individuals who live in Michigan’s nursing homes, adult foster care homes, or homes for the aged.
Project Name: Pathways to Potential: Flint Schools Expansion

Target Population: Over 5,000 students attending a total of 11 elementary, middle and high schools and three Early Childhood Centers in the City of Flint.

Project Description: The MDHHS’ Pathways to Potential program began in 2012 as a unique approach to the delivery of human services. The Pathways approach targets five outcome areas: attendance, education, health, safety and self-sufficiency. The program also relies on community support networks and partnerships to wrap around children and families to help them succeed. This program stations MDHHS caseworkers, called success coaches, in local schools. The success coaches serve the entire school as they work with students and families currently receiving assistance through MDHHS as well as those that are not. The success coaches work closely with school principals, social workers, attendance agents and teachers to monitor attendance and address barriers to attending school when they arise. Barriers can be as simple as a lack of a school uniform or an alarm clock, or as complex as a caregiver suffering from severe mental health issues and facing imminent homelessness.

Project Accomplishments for FY 2018:

- The total number of students in the 11 elementary, middle and high school in the 2017-2018 school year was 5,141 and Pathways to Potential Success Coaches had 2,972 contacts to address barriers with 1,868 students during that same time period. Pathways to Potential Success Coaches made 4,236 contacts with 1,113 parents or caregivers during FY18 to address barriers. (Note: The student count data at the three early childhood centers is not reported.)
- The number one purpose for Pathways to Potential contacts in these Flint schools was to address student or parent basic needs in 2,302 cases, the next most common purpose is addressing attendance issues in 1,093 cases, and in 902 cases the purpose of the contact was to address health and safety issues.
- The outcome in 2,126 contacts was providing parents and students with basic needs like hygiene products, utility assistance, clothing, housing, or schools supplies. In 2,476 contacts the Pathways to Potential Success Coaches provided parents and students with information and referrals to community resources.
- Three of the 11 schools reduced chronic absenteeism in the 2017-2018 school year compared to the 2016-2017 school year.
**Project name:** Vapor Intrusion

**Target Population:** Residents, workers and visitors to the State of Michigan who may be entering buildings impacted by vapor intrusion.

**Project Description:** The Toxicology and Response Section’s Vapor Intrusion Unit works with partner agencies, the Michigan Department of Environmental Quality and the United States Environmental Protection Agency, to evaluate and make recommendations related to vapor intrusion in occupied buildings. The Vapor Intrusion Unit works closely with the local public health departments throughout the state to provide technical expertise in evaluating exposures including providing recommendations for relocation while the exposures are being mitigated.

**Project Accomplishments of FY 2018:**

- Staff reviewed an additional 99 sites to bring the total number of sites evaluated to 215.
- Staff actively began working on an additional 46 sites bringing the total number of active sites to 102.
- Staff participated in national vapor intrusion workgroups, led by the United States Environmental Protection Agency, collaborating to identify new methods to protect the public and keep residents in their homes and business open during mitigation system installation.
- Staff provided toxicological reviews to establish additional vapor intrusion screening levels for newly identified chemicals of concern.
- Staff worked on sites with 30 different health departments in 34 counties to provide recommendations for reducing exposures to the public from vapor intrusion.
- Staff continued work on a vapor intrusion protocol using best available science.
- Staff investigated 3 daycares located in former dry cleaners. All sites required a mitigation system to be installed to protect the children and employees from breathing in harmful levels of contaminants.
  - Staff also initiated a Geographic Information Services (GIS) mapping project to identify other licensed daycares that are located near former dry cleaners. Dry cleaning chemicals are frequently a contaminant of concern at sites with vapor intrusion.
- Staff are conducting cancer incident reviews at sites of contamination and reviewing epidemiological literature to identify population-level health risks related to the contaminants of concern.
**Project name:** Administration structural and reorganization changes in Population Health

**Target Population:** All staff impacted by program areas named below.

**Project Description:** The purpose of these administrative funds was to reorganize the structure of Population Health in order to address statewide Population Health needs.

**Project Accomplishments of FY 2018:**

- An outcome of the response to the Flint Water Crisis, resulted in the merger of two bureaus and a reorganization of divisions to improve effectiveness and efficiencies between programs, resulting in the reassignment of the Division of Family and Community Health to the Bureau of Epidemiology.

- Upon further assessment, the Division of Family and Community Health and the Epidemiology programs have been challenged in fulfilling their obligations to respond to the environmental exposures in Flint and addressing new emerging environmental threats while continuing to meet the other urgent health needs of vulnerable woman, infants and children.

- The funding request provides staffing resources to establish the Bureau of Family Health Services with a primary focus on the integration of prevention programs targeting woman, infants and children. This new Bureau will merge the existing maternal, child and infant health programs with WIC and the Immunization Divisions to better integrate service delivery to these populations. This change requires resources to establish a new Bureau Director.

- The current Division of Family and Community Health Services (staffed by approximately 100 employees) will be divided into two more manageable divisions; one focused on maternal and infant health to prioritize the Governor’s initiative of reducing infant mortality and one focused on children and adolescent health to respond to the unique needs of these age groups. This change requires resources to establish a new Division Director.

- Per the FWATF recommendations, the Childhood Lead Poisoning Prevention Program (CLPPP) will remain within the Environmental Health Division in the Bureau of Epidemiology and Population Health and continue its primary focus on environmental exposures to lead.