

Healthy Michigan Fund and Tobacco Tax Funds Report

(FY2025 Appropriation Act - Public Act 121 of 2024)

April 1, 2025

Sec. 227. If the department receives tobacco tax funds and Healthy Michigan fund revenue from part 1, not later than April 1 of the current fiscal year, the department shall submit, to the standard report recipients, a report on both of the following activities during the previous fiscal year:

- (a) Tobacco tax revenue appropriations in the Medicaid program.***
- (b) Information for each project implemented with revenue under this section, including all of the following:***
 - (i) The project's name.***
 - (ii) The appropriation line item and amount.***
 - (iii) The project's target population.***
 - (iv) A description of the project.***
 - (v) The outcomes or accomplishments of the project.***



MICHIGAN DEPARTMENT OF HEALTH & HUMAN SERVICES
HEALTHY MICHIGAN FUND and TOBACCO TAX FUNDS REPORT



For the Period October 1, 2023, to September 30, 2024

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.

This portion of the Healthy Michigan Fund Report presents highlights of Fiscal Year (FY) 2024 accomplishments for all the Healthy Michigan Fund projects and their indicators of success, along with future goals for FY 2025.

Table of Contents

Summary: Medical Services Match Revenue.....	3
Cardiovascular Health.....	4
Office of Equity and Minority Health.....	7
Immunization: The Michigan Care Improvement Registry and Administration.....	12
Nurse-Family Partnership.....	13
Pregnancy Prevention.....	14
Smoking Prevention Program.....	15
Family, Maternal and Child Health.....	18
Long Term Care Services (LTC).....	19

**MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
FY 2024 Medical Services Program Tobacco Tax Report**

FY 2024 Tobacco Tax Revenue Appropriations in the Medicaid Program			
Revenue	Total	Tobacco Tax	Federal
Healthy Michigan Fund	\$47,406,372	\$16,442,900	\$30,963,472
Medicaid Benefits Trust Fund	\$742,902,010	\$257,675,562	\$485,226,448
Health & Safety Welfare Fund	\$13,334,294	\$4,625,000	\$8,709,294
Total	\$803,642,676	\$278,743,462	\$524,899,214

Healthy Michigan Fund and Tobacco Tax Funds Report – FY 2024

Chronic Disease and Injury Control
Appropriation # - 35800
FY 2024 Funds Appropriated: \$216,900

Chronic Disease and Injury Control
Appropriation # - 35800
FY 2025 Funds Appropriated: \$216,900

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.

Heart Disease and Stroke Prevention:

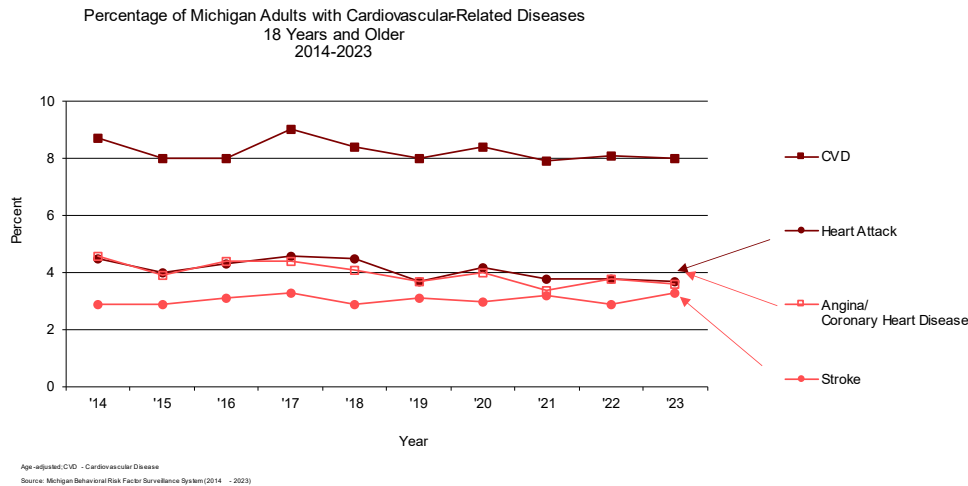
Cardiovascular Disease (CVD) was the number one cause of death among Michigan residents in 2023 and stroke was the fourth leading cause of death among Michigan residents.

The estimated percentage of Michigan adults who reported having CVD was 8.7% in 2014 and 8.0% in 2023 (age-adjusted).

In 2023, approximately 364,600 Michigan adults reported having a heart attack, 372,500 reported having angina or coronary heart disease, and 309,100 reported having a stroke some point in the past.

The work in heart disease and stroke prevention is focused on two major project areas:

- Advancing the national Million Hearts® goal of preventing 1 million heart attacks and strokes between 2022–2026 through building healthy communities, optimizing care, and focusing on health equity.
- Building stroke systems of care to improve outcomes for stroke patients through quality improvement initiatives, including linking stroke data across pre-hospital, EMS, in-hospital, and post-discharge transition of care settings.



Outcomes:

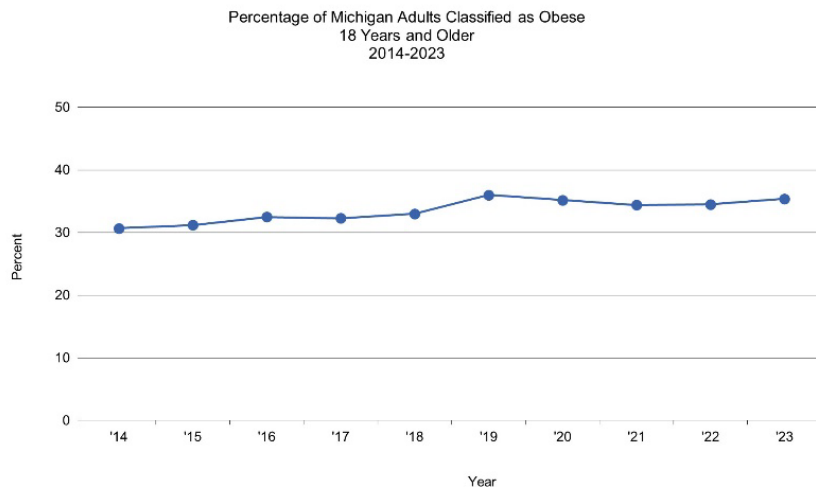
- Over 35,385 heart disease and stroke prevention education resources were sent to Michigan primary providers, health systems, and the public during FY24, bringing the total distributed number of educational resources to more than 336,423 between 2012-2024.

As part of the national Million Hearts® Initiative, the Heart Disease & Stroke Prevention (HDSP) Unit is committed to promoting community and clinical strategies to increase the use of electronic health records, data, community health workers, and team-based care.

Project Name: Cardiovascular Health – continued

HDSP has a distinct role in the Million Hearts® initiative due to its statewide perspective, expertise in evidence-based practices, and access to data and information. MDHHS' role is to foster cross-sector, cross-community learning and coordination.

- The Michigan Improving Cardiovascular Health (MICH) Learning Collaborative (LC), functions as a structured, purposeful partnership between a team of partners in public health, healthcare, and community to facilitate communication and the exchange of ideas toward improving blood pressure control and cardiovascular health (CVH) outcomes related to hypertension, high cholesterol, and stroke, through optimizing care and influencing policy, system, and environmental change. This statewide LC hosts quarterly learning sessions on broad topics toward improving cardiovascular health and hypertension for a wide audience. In FY24, the MICH LC hosted two learning sessions.
- The Michigan Stroke Program maintained partnerships with 59 hospitals and 15 Medical Control Authorities to improve quality of care for stroke patients as part of the state stroke registry and quality improvement program.
- Within stroke registry participating hospitals, 82% of patients received defect-free stroke care, that includes all the appropriate treatments and education.



Note: BMI, body mass index, is defined as weight (in kilograms) divided by height (in meters) squared [weight (kg)/height² (meters)²]. Weight and height were self-reported. Pregnant women were excluded. BMI was greater than or equal to 30.0 kg/m².
Source: Michigan Behavioral Risk Factor Surveillance System (2014-2023).

Obesity Prevention:

The estimated adult obesity prevalence in Michigan was 30.7% in 2014 and 35.4% in 2023. The prevalence in 2023 was comparable to the prevalence in 2022 (34.5%). Based on Healthy People 2030 target, Michigan aims to reduce adult obesity to 33.5% by 2030.

The work in physical activity and nutrition is to implement strategic public health initiatives aimed to increase policy, systems, and environmental interventions to support physical activity and healthful eating. These efforts aim to enhance access and use of environments to support healthful eating and physical activity and increase the number of social and behavioral approaches that complement policy and environmental strategies to promote healthful eating and physical activity.

Outcomes:

- Staff supported breastfeeding continuity of care by providing technical assistance to local partners to continue building a warm referral network and increase breastfeeding training and resources. In 2024, 12 local organizations participated in a warm referral network, which facilitated 532 referrals. Additionally, over 5,000 breastfeeding supporters were reached through social media and newsletters, 1,778 breastfeeding supporters statewide received educational training webinars, and three workplaces received the Breastfeeding-Friendly Workplace Award.

Project Name: Cardiovascular Health – continued

- Staff coordinated a recognition program for Michigan businesses to encourage implementation of worksite wellness best practices. In 2024, 14 new worksites registered for the Designing Healthy Environments at Work (DHEW) assessment reaching more than 3,347 employees across the state. In 2024, the DHEW awards recognized five businesses for implementing new work environment policies, practices, and programs with a Gold-level award, two businesses with a Silver-level award, and three businesses with a Bronze-level award. Additionally, 12 businesses were recognized with an honorable mention award for activating their improvement process by taking the assessment.
- Staff provided contract monitoring to Leaders Advancing and Helping Communities (LAHC) for obesity prevention and substance abuse prevention programs that empower children and families with the skills to make healthy and educated food choices. In 2024, the obesity prevention program served 1,822 students and 1,380 parents and family members with direct and indirect programming. Evaluation results show at least 70% increase in physical activity and healthy eating behaviors among students.
- In collaboration with Michigan Department of Transportation (MDOT), planning of the Michigan Walkability Action Institute (WAI) Transportation Alternatives Program (TAP) pilot began in FY 24. The Michigan WAI TAP pilot is an initiative focused on supporting communities in improving the walkability, movability and design of their communities to better support physical activity and active transportation. The project launches in Spring 2025 and has the potential to reach over 58,000 Michigan residents.
- In FY24 the Detroit Food Policy Council (DFPC) expanded the Great Grocer Program (GGP) to Flint and Grand Rapids. The GGP partners community-based organizations with independent grocery stores to improve the stores' retail environments to sale more healthy food items and to improve the stores' relationships with their local communities to increase the customer base. The program also includes a rating system that rewards stores who have successfully implemented changes that can improve healthy eating.

NOTE: Healthy Michigan Funds were used internally to provide support for programming described above. Funds were also allocated to support programming for Michigan Public Health Institute affiliates.

Minority Health Grants and Contracts
Appropriation # - 54850
FY 2024 Funds Appropriated: \$228,400

Minority Health Grants and Contracts
Appropriation # - 54850
FY 2025 Funds Appropriated: \$234,900

MDHHS Race and Ethnicity Community Conversation

Asian, Native Hawaiian and Pacific Islander

Join the Office of Equity and Minority Health for a community conversation around new data collection standards for race and ethnicity data.

January

MDHHS 种族和族裔社区对话

亚裔、夏威夷原住民和太平洋岛民

加入公平与少数族裔健康办公室，围绕新的种族和族裔数据收集标准开展社区对话。请在此线上会议期间提供反馈。

1月16日 | 下午 5:30 — 7:30

请点击此处注册



Project Name: Michigan Office of Equity and Minority Health (OEMH)

Target Population: Michigan's racial and ethnic minority populations: American Indian/Alaska Native, Middle Eastern and North African, Asian American/Pacific Islander, Black/African American, and Hispanic/Latino.

Project Description: The Michigan OEMH 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 residents.

Project Accomplishments for FY 2024:

- The OEMH, in partnership with the Bureau of Epidemiology and Population Health and the Data Governance Team, developed the Michigan Department of Health and Human Services (MDHHS) Race and Ethnicity Data Collection Standards to establish a statewide standard for collecting and reporting race and ethnicity data. These standards align with federal guidelines while ensuring data accurately reflects Michigan's diverse population. OEMH **conducted all community engagement activities, analyzed qualitative and quantitative data**, and prepared the **final report and standards**. With the finalization of the MDHHS Race and Ethnicity Data Collection Standards, the next phase focuses on the following: developing public-facing materials to educate communities on the importance and methodology of collecting and reporting race and ethnicity data, and ensuring MDHHS standards remain aligned with federal guidelines while addressing Michigan-specific demographic considerations.

Collaborative Partners

- The Public Health Administration's (PHA) Bureau of Epidemiology and Population Health, who provided feedback on narrative development, public comment form design, and final reporting,
- PHA Bureau of Environmental Health who facilitated public meetings via Zoom and supported
- data analysis using Qualtrics, and
- Data Governance Team who collected and analyzed current race variable data from various MDHHS programs to understand existing collection practices.

Public Feedback Collection

- Over 200 public comments were reviewed and synthesized.
- 13 group presentations were conducted to gather stakeholder insights.
- 6 community conversations were held with diverse populations.
- A Public Comment Form was launched to collect quantitative feedback on proposed changes from the 1997 Statistical and Policy Directive 15 (SPD 15).

Project Name: Office of Equity and Minority Health – continued

This initiative represents a **significant advancement in data standardization** for Michigan. By implementing **clear, consistent, and inclusive race and ethnicity data collection practices**, MDHHS strengthens its ability to address **health disparities and promote equity** across the state.

- The primary objectives for the OEMH **Epidemiologists** are to provide technical assistance including statewide surveillance, epidemiologic study design and planning, statistical analysis, policy and program development, program evaluation, and technical expertise and training. Primary goals were to add a data report to the Public Act 653/Health Equity report, develop a Bi-Annual Minority Specific Behavioral Risk Factor Survey, and develop the Health Equity Data Project.

Achievements:

- Updated the health equity data project tables ([updated 2024 report](#)).
- Created a report summarizing findings from an Asian and Pacific Islander Behavioral Risk Factor Survey.
- Updated health equity data project tables available [here](#).

Initiatives:

- Updated health equity data project tables and continued projects from 2023, including community feedback on proposed standards and the Asian and Pacific Islander Behavioral Risk Factor Survey.

Goals and Objectives of Initiatives:

- The Michigan Health Equity Project produces reports comparing population health outcomes and tracking equity progress over time.

Collaborations and Partnerships:

- Data sources included Vital Records, Michigan Care Improvement Registry, US Census data, and others for health equity data tables.

- OEMH's **Equity Training and Technical Assistance (ETT)** Unit provided comprehensive training programs to State of Michigan employees and community partners, enhancing services across the state. The program's primary objective was to develop employees' and partners' understanding of social structures, cultural dynamics, and community engagement, leading to improved perceptions, knowledge, skills, and available resources.

Training Initiatives and Impact:

ETT training sessions focused on capacity building, workforce development, and community engagement.

- Equity Impact Assessment: A session titled "Employing an Equity Impact Assessment in Decision-Making" was delivered to the Association of State and Territorial Health Officials' Public Health Infrastructure Grant, attended by 45 public/community participants.
- Cultural Awareness of the Latino/a/x/é Diaspora in the U.S.: Six sessions on this subject were delivered to general State of Michigan staff and MI Works; the first two sessions attended by an average of 47 staff each, and the latter four sessions by an average of 20 staff each.
- Implicit Bias in Reproductive Health: training designed, developed, and launched at the 2024 Michigan Family Planning Conference, attended by 46 MDHHS staff and public/community partners.
- Equity and History 101: led the design, development, and piloting of this training session in collaboration with the Equity Development Division, attended by 35 MDHHS staff.
- Race-The Power of an Illusion: facilitated 3 professional development sessions (part 1-3) with an average of 15 MDHHS staff and public participants

Project Name: Office of Equity and Minority Health – continued

The rigorous MDHHS Facilitator Endorsement Process included:

- 24 mock training presentations (9 between October and December 2023).
- 15 coaching sessions.
- Peer-to-peer reviews and senior trainer coaching.
- Although initially daunting, participants reported increased confidence and proficiency in their roles as facilitators and trainers.

Peer-to-Peer Facilitator Endorsement Process:

Between July and November 2023, the endorsement process included

- 10 administrative information sessions.
- 29 technical assistance sessions.
- 15 coaching train-the-trainer sessions. This totaled 62 hours and 45 minutes of training, resulting in the successful endorsement of three new facilitators.

Training Reach & Outcomes

Throughout 2024, the ETT Unit trained a total of 1,092 participants.

- 467 state employees.
- 111 community members in dedicated training sessions.
- 514 state and community members in joint training sessions.

Participant Feedback & Success Stories

The impact of ETT training sessions was evident in participant feedback and testimonials.

Cultural Linguistic Competence Training: “We can use these tools to recognize and challenge our own internal belief systems to provide more equitable services.”

- Implicit Bias in Media and Healthcare Training: “This training helps me be mindful of biases and discriminatory practices in my workplace and beyond.”
- Unnatural Causes in Sickness and Wealth Workshop: “Environmental and societal determinants greatly impact individual decision-making regarding health outcomes.”
- Implicit Bias in the Media and Healthcare Training: “Monitoring my own biases and pausing to reflect before projecting them onto my patients.”

OEMH’s commitment to workforce development, equity training, and community engagement significantly enhanced service delivery across Michigan. Through expanded team capacity, impactful training programs, and strong partnerships, the Office remains a vital force in fostering equity, inclusion, and professional growth for state employees and community organizations.

- In 2024, the OEMH took significant strides in addressing health disparities through the CDC COVID-19 **Vaccination Grant**. This initiative aimed to increase vaccine confidence, reduce misinformation, and improve accessibility for populations disproportionately affected by COVID-19, particularly racial and ethnic minority communities. By leveraging community-driven strategies, culturally competent outreach, and partnerships with trusted organizations, OEMH ensured that vaccination efforts were inclusive and impactful. Through supplemental funding, organizations were empowered to expand their health equity programming, engage local communities, and implement tailored vaccination strategies.

Project Name: Office of Equity and Minority Health – continued

Achievements and Impact

The grant-funded projects resulted in major milestones, significantly enhancing public health engagement and increasing vaccination rates:

- Community Engagement & Education
 - 340 community conversations, listening sessions, and focus groups reached 6,526 individuals.
 - 96 town halls, forums, and health education sessions engaged 11,356 participants.
 - 67 trained COVID-19 Ambassadors & Promotoras de Salud educated.
 - 26,779 people on vaccine safety and public health measures.
 - 912 culturally competent and linguistically appropriate communication materials were developed, reaching 562,052 people through social media/radio and 31,119 households through print media.
- Vaccination Clinics & Accessibility
 - 236 community-based vaccination clinics provided 2,046 doses of the COVID-19 vaccine.
 - Innovative outreach methods, including mobile clinics and pop-up sites, helped break barriers to access in underserved areas.

These data points demonstrate the widespread impact of the program in fostering vaccine trust and accessibility.

Key Initiatives & Partnerships

To tailor interventions to the unique needs of diverse populations, OEMH partnered with community-based organizations to implement targeted programs:

- Healthy Flint Research Coordinating Center
 - Addressed maternal and infant health disparities in Flint/Genesee County.
 - Hosted discussions on patient-physician trust, access to credible health information, and community health literacy.
 - Supported expectant mothers in Black and Brown communities with evidence-based strategies to navigate evolving medical guidelines.
- Labor and Economic Opportunity (LEO) - Freedom House
 - Delivered four communication and education sessions on respiratory illness prevention, including COVID-19 and flu awareness.
 - Focused on residents in congregate housing, providing them with culturally competent health education and prevention strategies.
- Detroit Hispanic Development Corporation
 - Designed bilingual, culturally relevant programming to engage Latinx communities.
 - Used trusted community messengers, targeted social media campaigns, and local events to encourage vaccine uptake.
 - Integrated vaccination efforts with other health services to maximize outreach and participation.

OEMH also collaborated with the LEO Office of Global Michigan to enhance communication efforts for immigrant and refugee populations, ensuring accessibility to linguistically appropriate vaccine information.

- In 2024 OEMH completed the **Minority Health Community Capacity Building (MHCCB) Training Cohort**, with an overall goal to build organizational capacity for local community-based entities to identify and successfully respond to funding opportunities that increase the knowledge of and improve access to financial resources that support development, implementation, and evaluation of targeted community-level strategies that address and improve minority health. Eligibility to participate in the training cohort was open to statewide, 501(c)(3) Status Grass-Roots Organizations, Community- and Faith-based Organizations, Tribal Councils, Community Health Centers, and other entities with well-established connections to one or more of Michigan's five racial and ethnic minority populations and a maximum operating budget of \$250,000. Participants were selected utilizing an objective review panel comprised of Health Equity Subject Matter experts from across MDHHS.

Project Name: Office of Equity and Minority Health – continued

Participants of the training cohort engaged in focused training topics that included but were not limited to:

- Conducting A Needs Assessment
- Grant Application Development
- Program Monitoring/Oversight
- Project Management
- Data Collection/Analysis
- Fiscal Management/Oversight
- Budget/Spending Plan Development
- Outreach/Engagement
- Developing Sustainable Partnerships
- Progress Reporting Development
- Staff Recruitment/Retention
- Program Evaluation
- Understanding Systemic Racism/HE/SDOH
- Technology
- Identification of Funding Opportunities
- Identifying Best Practices/Evidence Based Models
- Dissemination of Project Results/Findings

Eleven of thirteen applicants were selected and provided a stipend of \$12,500 to support participation in the year-long hybrid training model (virtual/in-person). Additionally, participants received collective and individualized feedback and support in development of their finalized Request for Proposal (RFP) applications for selection in the full 3-year MHCCB implementation phase.

Following completion of the training cohort, OEMH successfully awarded five of the eleven applicants for the implementation phase of the program. The following applicants will receive 3-year continuation funding beginning in FY25 to support implementation of strategies that support culturally and linguistically appropriate community-level projects that build capacity to identify and implement programs, policies, and applied research to address social determinants of health that contribute to health inequities for racial and ethnic minority populations in Michigan.

- Asher Legacy Group
- Capital Area Health Alliance (CAHA)
- Strangers No Longer
- Western Michigan Asian American Association (WMAAA)
- Positive Impact for Life

Healthy Michigan Fund and Tobacco Tax Funds Report – FY 2024

Immunization Program
Appropriation # - 48700A
FY 2024 Funds Appropriated: \$2,180,300

Immunization Program
Appropriation # - 48700A
FY 2025 Funds Appropriated: \$2,180,300

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

Target Population: All residents of Michigan

Project Description: MCIR is a statewide web-based program that contains over 203.6 million shot records of over 13.4 million people across the lifespan. MDHHS continues to enroll and support every immunization provider in the state with their state reporting requirements. Currently there are 7,552 immunization providers/healthcare organizations enrolled in MCIR, 4,044 schools and 3,866 childcare programs. New person records added for 2024 was 387,770 compared to 2023 which was 345,410. MCIR continues to add new records through births and people moving into the state.

Project Accomplishments for FY 2024:

- Continued supporting the COVID-19 pandemic via both adult and child updated vaccination schedules.
- Continued enhancements on the Consumer Immunization Portal to allow the public greater access to their immunization records directly.
- Increased epidemiologist access to the MCIR data structure, allowing faster data pulls and dashboard creation.
- Continued development on non-medical waiver forms within the MCIR, increasing waiver data quality and decreasing the burden of printing waivers at the local health department level.
- Added CDC Immunization Gateway bidirectional data exchange with the Florida and Utah Immunization Information Systems. Also, added exchange with the Electronic Disease Notification (EDN) system for refugee health information.
- Reestablished bidirectional data exchange with the state of Wisconsin.
- Enhanced MCIR support for race and ethnicity data collection, including HL7 messaging.
- Change management process and system improvements were made, allowing more efficient testing of software changes and faster changes upon the adoption of new rules and regulations.
- Prepared data structure and documentation to support modernization and migration efforts. This included deduplication of person and vaccine records via automated and manual methods.
- Improved incoming new birth records via provider interactions.

Year	Registered Users	Doses Entered
2002	3493	5.5 million
2003	4242	4.8 million
2004	7459	2.6 million
2005	19759	2.7 million
2006	23000	5.3 million
2007	26638	6.4 million
2008	23790	7.3 million
2009	29020	7.9 million
2010	28445	8.4 million
2011	29073	7.2 million
2012	30070	7.3 million
2013	30779	7.6 million
2014	26140	7.8 million
2015	27264	8.4 million
2016	28308	8.2 million
2017	30208	8.6 million
2018	31983	9.1 million
2019	33085	9.7 million
2020	31983	8.3 million
2021	41572	21.5 million
2022	55319	13.4 million
2023	52182	10.5 million
2024	40975	10.5 million

MCIR Historical Perspective of Registered
Users and Shots Recorded

Prenatal Care Outreach & Service Delivery Support

Appropriation # - 58900

FY 2024 Funds Appropriated: \$50,000

Prenatal Care Outreach & Service Delivery Support

Appropriation # - 58900

FY 2025 Funds Appropriated: \$50,000

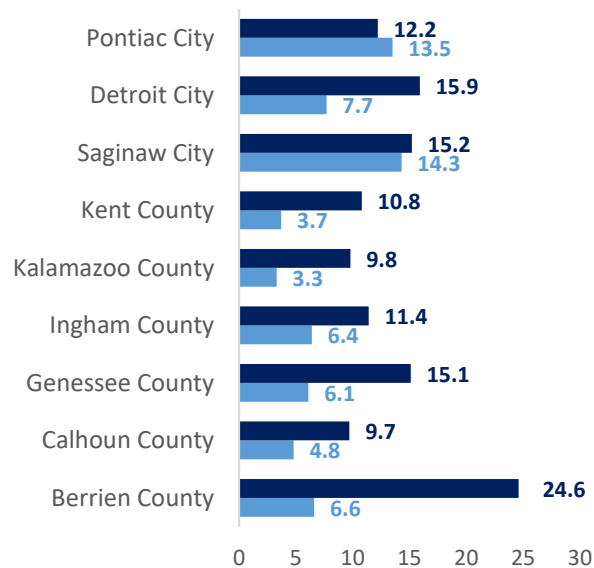
3-Year Average Infant Deaths per
1,000 Live Births

by Maternal Race/Ethnicity and
County/City

2021-2023

■ Black Non-Hispanic

■ White Non-Hispanic



Project Name: Nurse Family Partnership Project (NFP)

Target Population: First-time, pregnant people with low income and their infants in ten communities: Wayne, Oakland, Berrien, Calhoun, Genesee, Ingham, Macomb, Kalamazoo, Kent, and Saginaw counties.

Project Description: The disparity in infant and maternal mortality is a major public health issue in the state of Michigan. Improving Maternal and Infant health is one of MDHHS' priorities and the Mother Infant Health Equity Improvement Plan recognizes home visiting as a key strategy to improve maternal and infant health.

NFP, one of eight home-visiting models 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, pregnant person with low-income and their infant. www.nursefamilypartnership.org.

In FY 2024, \$50,000 was used to assure continuation of NFP services in Genesee County.

Project Accomplishments for FY2024:

- During FY 2024, Hurley Nurse-Family Partnership served 224 pregnant and parenting people while continuing to implement NFP with fidelity and to comply with all requirements of the Michigan Home Visiting Initiative and PA 291 of 2012.
- 84% of Hurley Nurse-Family Partnership postpartum women initiated breastfeeding compared to 77.9% of breastfeeding initiation in Genesee County.
- 32% of Hurley NFP babies were breast fed at 6 months vs 30% in Genesee County and 18% were breast fed at 12 months vs 4.2% in Genesee County.
- The percentage of preterm births was 10.3% vs 12.9% in Genesee County.
- 94% of enrolled families received a screening for substance use.
- 100% of enrolled families who used tobacco were referred to tobacco cessation services.

Pregnancy Prevention Program
Appropriations # - 58850
FY 2024 Funds Appropriated \$695,800

Pregnancy Prevention Program
Appropriation # - 58850
FY 2025 Funds Appropriated: \$695,800

Project Name: Pregnancy Prevention

Focus Population: Expectant and parenting youth up to age 21 years old, including fathers and their families, postpartum individuals, and infants up to one year of age, and individuals with low income of childbearing age.

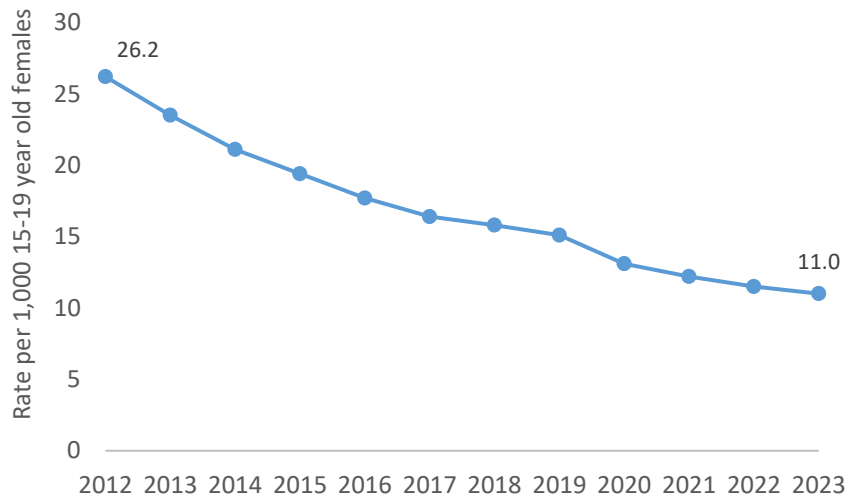
Project Description: The Michigan Adolescent Pregnancy and Parenting Program (MI-APPP) creates an integrated system of care, including linkages to support services, for expectant and parenting adolescents, including fathers, and their families. MI-APPP grantees implement an evidence-informed case management curriculum designed to elicit strengths, address various risk behaviors and the impact of trauma, and provide a connection to community services and resources. Funded agencies engage communities through locally driven steering committees, a comprehensive needs assessment, and creation of support services to ensure MI-APPP is responsive to the needs of expectant and parenting youth.

Project Accomplishments:

Healthy Michigan Funds were used to supplement the MI-APPP by supporting grantee programming that contributed in the following ways:

- Provided case management and support services to 129 expectant and parenting youth, including outreach and recruitment.
- Delivered support services to 22 supportive adults, parents and/or guardians of young parents to improve familial connection and communication.

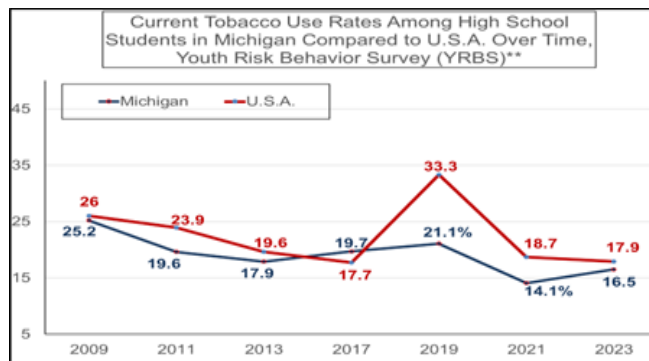
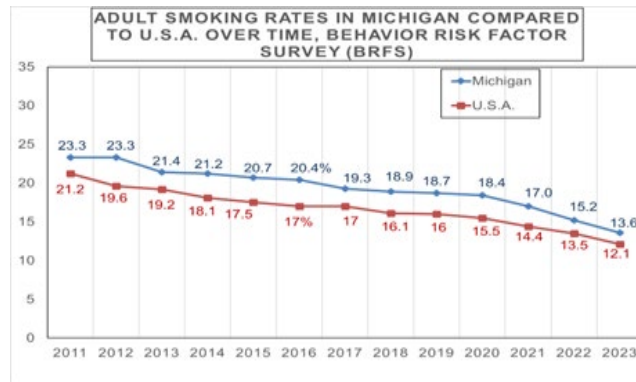
Live Birth Rate Among 15-19 Year Old
Michigan Females, 2012-2023



Data source: 2012-2023 Michigan Resident Live Birth Files, Division of Vital Records & Health Statistics, Michigan Department of Health and Human Services

Smoking Prevention Program
Appropriation # - 64400
FY2024 Funds Appropriated: \$1,646,800

Smoking Prevention Program
Appropriation # - 64400
FY2024 Funds Appropriated: \$1,661,900



Sources: 2021 MiBRFSS*, 2021 Youth Risk Behavior Survey**, MI Tobacco Quitline reports; Sortable Risk Factors and Health Indicators-CDC; Smoke-free Environments Law Project, MDHHS-Evaluation Studies.

Project Name: Smoking Prevention Program

Target Population: All residents of Michigan, highest priority focused on populations disproportionately impacted by tobacco use (youth, adults, seniors, people living with HIV, LGBTQ, and communities of color).

Pro 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 of our work are increasing the number of smoke-free environments, preventing teens and children from starting to smoke and use e-cigarettes, assisting hard-to-reach populations in quitting smoking, and reducing tobacco use among people who are disproportionately impacted by tobacco use and industry marketing.

Project Outcomes for FY 2024:

Preventing Youth Tobacco Initiation:

High school students in Michigan used tobacco at 16.5% in 2023 compared to 17.9% for the USA average. To address this rate of youth tobacco use including the youth e-cigarette epidemic, the TCP engaged in the following work:

- ✓ Worked with schools on commercial tobacco-free policies. Over 95 percent of school districts have policies stronger than the minimum requirements under Michigan statute. More than 87 percent of school districts adopted comprehensive 24/7 commercial tobacco-free policies on-campus and off-campus school-sponsored events. This fiscal year, staff identified 290 K-12 public school districts that made improvements to their policies.
- ✓ Continued a statewide, bi-monthly e-cigarette workgroup call to update partners across the state on various e-cigarette related activities in Michigan, by providing updates, education, presentations, new resources, and partner sharing.
- ✓ TCP staff and community partners provided education and training on vaping, the impact of vaping on youth, preventing youth initiation, vaping products, and cessation programs for youth.
- ✓ Worked with partners and schools to educate school staff, principles and students on the impact of vaping and alternatives to suspension programs and policies. Educated parents to understand the safety and addiction risks of vaping.
- ✓ Partners engaged their youth groups and coalitions to provide peer education on vaping and support for cessation programs.
- ✓ Increased the number of partners, including schools, who have staff trained in alternatives to suspension, health, and vaping education programs.
- ✓ Collaboratively with partners, increased resources for youth, parents, and school staff including updating the Michigan **Model for School Health**™ curriculum's Tobacco lessons, and creating vaping toolkits, education factsheets, and peer developed education campaigns and materials.

Project Name: Smoking Prevention Program – continued

- ✓ Attended National Youth Coordinators' Collaborative meetings to enhance Michigan youth prevention strategies.
- ✓ The TCP created and disseminated a list of example/suggested social media posts around tobacco control topics and at least one example post each month promoted youth vaping prevention and/or vaping cessation resources.
- ✓ Worked with communities disparately affected by tobacco use to utilize social media platforms to post messages on youth tobacco use and messaging in community newsletters and newspapers specific to their populations. These messages aimed to educate youth and parents, prevent youth from initiating use of tobacco products, and assist youth using tobacco products, including e-cigarettes, with quitting.
- ✓ Provided educational campaigns to raise awareness of the impact of vaping on youth and cessation resources.

Smoke Free Air Outcomes:

- ✓ Continued to oversee the annual review/renewal of cigar bar and tobacco specialty retail store exemptions, in addition to monitoring compliance with the law to reduce negative health outcomes from secondhand smoke.
- ✓ The Michigan State Police and TCP collaboration for 2024 resulted in 24 citations, 80 violations, and fines totaling \$36,000.
- ✓ The TCP and local contractors continued to provide technical assistance and support to public and private smoke-free housing. They provided resources to housing staff including smoke-free model policies, brochures, and resources to educate housing staff and residents about Michigan's Tobacco Quitlink services.
- ✓ Continued work on increasing the number of smoke-free multi-unit housing to prevent second and thirdhand smoke, including hosting quarterly Smoke-Free Housing Exchange meetings, developing new resources, and responding to more than a dozen technical assistance requests.
- ✓ The TCP and local partners continued work to increase commercial tobacco-free outdoor policies to reduce the impact of secondhand smoke and aerosol on Michigan residents. This work has resulted in 116 commercial tobacco-free and/or smoke-free parks or beach policies implemented by local jurisdictions in Michigan and 48 local jurisdictions adopting park and/or beach policies with smoke-free or commercial tobacco-free designated areas.
- ✓ Presentations about smoke-free housing were given to TCP contractors, Tobacco Free Michigan conference, and a coalition in West Michigan to promote policies to reduce second and thirdhand smoke exposure to Michigan residents.
- ✓ Local contractors provided education about the benefits of smoke-free casino policies.

Tobacco Cessation Outcomes:

- ✓ Michigan's Tobacco Quitlink continued to provide ongoing training and outreach to health clinics and health care providers to increase the number of Michigan residents who use tobacco products to engage in cessation.
- ✓ Thirty pregnant smokers called the Quitlink to quit tobacco use; there were 6,383 calls to the Michigan Tobacco Quitlink; of those, 3,047 opted to enroll in coaching services.
- ✓ The youth Michigan Quitline service called My Life My Quit offers free and confidential coaching services to assist youth 17 years, and under who use tobacco products, including e-cigarettes, to stop. This program can be offered by school districts as an alternative to suspension to address youth addicted to tobacco products including e-cigarettes while maintaining academic success of these students. In FY24, 121 youth enrolled in My Life My Quit.
- ✓ Monthly social media posts were shared with partners and the MDHHS Communications office. At least one sample social media post each month promotes cessation and the Michigan Tobacco Quitlink.
- ✓ The TCP ran Quitlink promotional ads. The goal of the ads was to educate Michigan residents on the resources and free services available through the Michigan Tobacco Quitlink for those that are trying to quit using tobacco.

Project Name: Smoking Prevention Program – continued

- ✓ The TCP sends monthly newsletters to stakeholders throughout Michigan. A minimum of two newsletters each year contain articles educating stakeholders on the unique services that the Quitlink offers. In FY24, this included articles on the American Indian Commercial Tobacco Quitline, the Asian Smokers Quitline, and customized web referrals for clinics.
- ✓ The TCP ran an ad campaign targeted to youth 13-17. This campaign educated youth on the dangers of e-cigarette use and offered help through the My Life My Quit program. The campaign achieved 6,790,674 video/audio completions, resulting in 96% of the total “What Finally Worked” exploratory engagements and 69% of total impressions.

Healthy Michigan Fund and Tobacco Tax Funds Report – FY 2024

Family, Maternal and Child Health
Appropriations # - 43000
FY 2024 Funds Appropriated: \$ 324,400

Family, Maternal and Child Health
Appropriations # - 43000
FY 2025 Funds Appropriated: \$324,400

Project Name: Family, Maternal and Child Health

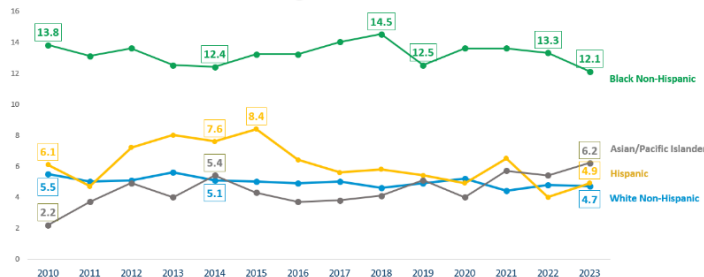
Focus Population: Infants; pregnant and postpartum individuals; individuals of childbearing age; Black, Indigenous and people of color; and individuals with low household incomes.

Project Description: Maternal, infant, and family outcomes are key indicators of the health and wellbeing of families in Michigan. The *Healthy Moms Healthy Babies* initiative is a priority of Governor Whitmer's administration to advance the health of moms and babies. Michigan's infant mortality data highlights three areas of concern: infant mortality rates higher than the national average; alarming disparities between racial and ethnic groups; and disproportionately poor outcomes for families with low-income. To improve maternal and infant health outcomes, community responsive and regionally tailored approaches are occurring.

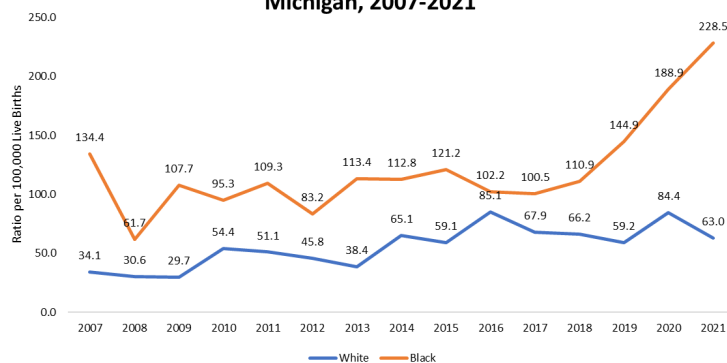
Project Accomplishments for FY 2024:

- Trained over 15,000 professionals on the basics for safe sleep and over 1,200 on how to support families through infant safe sleep online courses and other virtual and in-person trainings.
- Created and rolled out the online training for hospitals *Infant Safe Sleep: The Basics and Beyond*.
- Trained over 870 Emergency Medical Services (EMS) personnel and firefighters through the EMS and fire professional infant safe sleep certification training. Eighteen agencies/departments have been certified and at least 208 infants have been reached to date.
- Conducted focus groups with families to update safe sleep materials. The new design will be rolled out in FY 25.

Infant Deaths per 1,000 Live Births
by Maternal Race/Ethnicity
Michigan, 2010-2023



Pregnancy-Associated (Total) Maternal Mortality by Race,
Michigan, 2007-2021



Pregnancy-Associated (total) maternal mortality includes pregnancy-related deaths (directly related to or aggravated by the pregnancy), pregnancy-associated not related deaths (unrelated to pregnancy) and deaths where pregnancy-relatedness was unable to be determined that occur during pregnancy or within one year of the end of pregnancy per 100,000 live births

Data Source: Michigan Maternal Mortality Surveillance System, 2007-2021

Long Term Care Services
Appropriation # - 51950
FY 2024 Funds Appropriated: \$16,442,900

Long Term Care Services
Appropriation # - 51950
FY 2025 Funds Appropriated: \$15,842,900

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 2024: In FY 2024, there were approximately 40,942 Michigan residents that benefitted from these services.