Program Element #155: Non-Governmental Oregon MothersCare (OMC) Services

OHA Program Responsible for Program Element:

Public Health Division/Center for Health Prevention & Health Promotion/ Family and Child Health Section

1. Description.

Funds provided under this Agreement for this Program Element may only be used in accordance with, and subject to, the requirements and limitations set forth below, to deliver the Oregon MothersCare (OMC) Services.

If funds awarded for OMC Services, in the Financial Assistance Award located in Exhibit C to this Agreement, are restricted to OMC, those funds shall only be used by Non-Government Agency (Grantee) to support delivery of those specific services. All performance by Grantee under this Program Element, including but not limited to reporting obligations, shall be to the satisfaction of OHA.

This Program Element and all changes to this Program Element are effective the first day of the month noted in the Issue Date of Exhibit C Financial Assistance Award unless otherwise noted in Comments and Footnotes of Exhibit C of the Financial Assistance Award.

2. Definitions Specific to OMC Services:

OMC Services: Referral services to prenatal care and related services provided to pregnant people as early as possible in their pregnancies, with the goal of improving access to early prenatal care services in Oregon. OMC Services shall include an ongoing outreach campaign, utilization of the statewide toll- free 211 Info telephone hotline system, and local access sites to assist women to obtain prenatal care services.

3. Alignment with Modernization Foundational Programs and Foundational Capabilities.

The activities and services that the LPHA has agreed to deliver under this Program Element align with Foundational Programs and Foundational Capabilities and the public health accountability metrics (if applicable), as follows (see Public Health Modernization Manual at: (http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public_health_modernization_manual.pdf):

a. Foundational Programs and Capabilities (As specified in Public Health Modernization Manual)

Program Components	Foundational Program				Foundational Capabilities						
	CD Control	Prevention and health	Environmental health	Access to clinical preventive services	Leadership and organizational competencies	Health equity and cultural responsiveness	Community Partnership Development	Assessment and	Policy &	Communication	Emergency Preparedne

				Population	Direct services							
Asterisk (*) = Primary foundational program that aligns with each component *X = Other applicable foundational programs*						*X = Foundational capabilities that align with each component*						
Oregon MothersCare Services		*		X	X		X	X	X		X	

b. **The work in this Program Element helps Oregon's governmental public health system achieve the following Public Health Accountability Metrics, Health Outcome Indicators:**

Not Applicable

c. **The work in this Program Element helps Oregon's governmental public health system achieve the following Public Health Accountability Metrics, Public Health Process Measures:**

Not Applicable

4. **Procedural and Operational Requirements.**

By accepting and using the Financial Assistance awarded under this Agreement and for this Program Element, Grantee agrees to conduct activities in accordance with the following requirements:

a. **General Requirements**

(1) Data Collection: Grantee must collect and submit client encounter data quarterly using the Web-based Interface Tracking System (WTI) on individuals who receive OMC Services supported in whole or in part with funding provided under this Agreement. Grantee must ensure that their quarterly data is entered into WTI, cleaned and available for analysis to OHA on a quarterly basis. Sites may use the OMC client tracking forms approved by OHA prior to entering their data into WTI.

(2) Grantee must provide OMC client data, in accordance with Title V, Section 506 of the Social Security Act (Maternal and Child Health Services Block Grant, Reports and Audits section found at 42 USC 706) and further defined by federal guidance.

(3) OMC Services must be implemented with a commitment to racial equity as demonstrated by the use of policies, procedures and tools for racial equity and cultural responsiveness.

(4) Funding Limitations. Funds awarded under this Agreement for this Program

Element and listed in the Exhibit C, Financial Assistance Award must be used for services or activities described in this Program Element according to the following limitations:

MCAH Oregon MothersCare Title V(PE155):

(a) Funds are designated for services for women, infants, children, and adolescents less than 21 years of age (Title V, Section 505, "Application for block grant funds", of the Social Security Act [42 USC 705(a)(3)(A)]).

(b) Title V funds shall not be used as match for any federal funding source.

(c) Title V funds must be used for services that support federal or state-identified Title V MCAH priorities as outlined in Section 505.

(d) Grantee shall not use more than 10% of the Title V funds awarded for a particular MCAH Service on indirect costs. For purposes of this Program Element, indirect costs are defined as "costs incurred by an organization that are not readily identifiable but are nevertheless necessary to the operation of the organization and the performance of its programs." These costs include, but are not limited to, "costs of operating and maintaining facilities, for administrative salaries, equipment, depreciation, etc." in accordance with Title V, Section 504 of the Social Security Act [42 USC 704(d)].

b. Procedural and Operational Requirements:

OMC Services Procedural and Operational Requirements. All OMC Services supported in whole or in part with funds provided under this Agreement must be delivered in accordance with the following procedural and operational requirements:

(1) Grantee must designate a staff member as its OMC Coordinator to work with OHA on developing a local delivery system for OMC Services. Grantee's OMC Coordinator must work closely with OHA to promote consistency around the state in the delivery of OMC Services.

(2) Grantee must follow the OMC Protocols, as described in OHA's Oregon MothersCare Manual provided to Grantee and its locations at which OMC Services are available, when providing OMC Services such as outreach and public education about the need for and availability of first trimester prenatal care, home visiting, prenatal care (including dental care), and other services as needed by pregnant people.

(3) As part of its OMC Services, Grantee must develop and maintain an outreach and referral system and partnerships for local prenatal care and related services.

(4) Grantee must assist all people seeking OMC Services in accessing prenatal

services as follows:

(a) Provide follow up services to clients and people who walk in or are referred to the OMC Site by the 211 Info and other referral sources; inform these individuals of the link to the local prenatal care provider system; and provide advocacy and support to individuals in accessing prenatal and related services.

(b) Provide facilitated and coordinated intake services and referral to the following services: Clinical Prenatal Care (CPC) Services, including pregnancy testing, counseling, Oregon Health Plan (OHP) application assistance, first prenatal care appointment; MCH Home Visiting Services; WIC Services; screening for health risks such as Intimate Partner Violence, Smoking, Alcohol and other Drug use; other pregnancy support programs; and other prenatal services as needed.

(5) Grantee must make available OMC Services to all pregnant people within the county. Special outreach shall be directed to low-income people and people who are members of racial and ethnic minorities or who receive assistance in finding and initiating CPC. Outreach includes activities such as talks at meetings of local minority groups, exhibits at community functions to inform the target populations, and public health education with a focus on the target minorities. Low-income is defined as having an annual household income which is 190% or less of the federal poverty level ("FPL") for an individual or family.

(6) Grantee must designate a representative who shall attend OMC site meetings conducted by OHA.

5. General Expense Reporting.

Grantee must complete an "Oregon Health Authority Public Health Division Expenditure Report" located at: https://www.oregon.gov/oha/ph/providerpartnerresources/localhealthdepartmentresources/pages/index.aspx. A separate report must be filed for each applicable Program Element and any sub-elements. These reports must be submitted to OHA each quarter on the following schedule:

Fiscal Quarter	Due Date
First: July 1 – September 30	October 30
Second: October 1 – December 31	January 30
Third: January 1 – March 31	April 30
Fourth: April 1 – June 30	August 20

6. Program Reporting Requirements.

Not applicable

7. Performance Measures.

Not applicable