

Program Element # 63 Maternal and Child Health LPHA Family Connects Oregon

OHA Program Responsible for Program Element:

Public Health Division/Center for Prevention and Health Promotion, Maternal and Child Health/Family Connects Oregon

1. **Description.** Funds provided under this Agreement may only be used in accordance with, and subject to, the requirements and limitations set forth below to plan, implement and sustain the following activities central to the Family Connects model that was selected for universally offered newborn nurse home visiting:

- a. Community Lead Activities
- b. Newborn Nurse Home Visiting Provider Activities
- c. Reimbursement Gap Funding to assist sites with visits non-reimbursable by insurance resources.
- d. Focused Funding on priorities such as Nursing Workforce or Health Equity

Funds provided through this Program Element support LPHA’s efforts toward ensuring community-wide participation in the delivery of, and assurance of access to, culturally responsive, high-quality, and evidence-based voluntary newborn nurse home visiting services.

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

2. **Definitions Specific to MCH LPHA**

- a. **Community Lead:** An LPHA that is designated by the Oregon Health Authority to serve as the coordinating entity for the newborn nurse home visiting program in a specified community.
- b. **Newborn Nurse Home Visiting Provider (NNHVP) or “Certified Provider”:** A person or LPHA certified by the Oregon Health Authority to provide newborn nurse home visits in accordance with OAR 333-006-0070 and OAR 333-006-0120.

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 [Oregon’s Public Health Modernization Manual](http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public_health_modernization_manual.pdf), 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 promotion | Environmental health | Access to clinical preventive services | Leadership and organizational competencies | Health equity and cultural responsiveness | Community Partnership Development | Assessment and Epidemiology | Policy & Planning | Communications | Emergency Preparedness and Response |

| | | | | Population Health | Direct services | | | | | | | |
|---|--|---|--|-------------------|-----------------|--|---|---|---|---|---|--|
| Asterisk (*) = Primary foundational program that aligns with each component | | | | | | X = Foundational capabilities that align with each component | | | | | | |
| X = Other applicable foundational programs | | | | | | | | | | | | |
| Develop strategic partnerships with shared accountability driving collective impact to support public health goals related to all families with newborns | | * | | * | | X | X | X | | X | X | |
| Identify barriers to access and gaps in services to all families with newborns | | X | | * | | | X | X | X | X | X | |
| Develop and implement strategic plans to address these gaps and barriers to access to all families with newborns | | X | | * | | | X | X | X | X | X | |
| Ensure community access to home visiting services for all families with newborns | | 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 Metric, Health Outcome Measure:

Not applicable.

c. The work in this Program Element helps Oregon’s governmental public health system achieve the following Public Health Accountability Metric, Local Public Health Process Measure:

Not applicable

4. **Procedural and Operational Requirements.** By accepting and using the Financial Assistance awarded under this Agreement and for this Program Element, LPHA agrees to conduct activities in accordance with the following requirements:

a. **General Requirements**

- (1) For each month that this Agreement is effective, LPHA agrees to attend a monthly planning and coordination meeting with OHA’s Maternal and Child Health staff.
- (2) 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:
 - (a) Funding is limited to expenditures for Family Connects Oregon Community Lead activities and Oregon Newborn Nurse Home Visiting Provider services.
 - (b) LPHA must submit local program budget(s) for OHA approval on a format and

schedule to be determined by OHA for each:

- (i) Community Lead Activities,
 - (ii) Newborn Nurse Home Visiting Provider Services, and
 - (iii) Focused Funding.
- (c) Expenditures must be in accordance with the approved local program budget(s), modifications to the budget(s) may only be made with OHA written approval.

b. Family Connects Oregon Services

(1) If designated as a Community Lead, or authorized by OHA to perform Community Alignment Activities,

LPHA must:

- (a) Maintain staffing required by the program which includes the Family Connects Oregon Community Alignment Specialist and Program Administrator.
- (b) Ensure a subcontract and/or Memorandum of Understanding is in place if Family Connects Program is implemented through a cross county collaboration with shared staff across jurisdictions, defining the staffing and supervision agreements.
- (c) Deliver services in accordance with OARs 333-006-0000 through 333-006-0190 and Family Connects Oregon Program Guidance provided by the Maternal and Child Health Section.
- (d) Take all appropriate steps to maintain client confidentiality and obtain any necessary written permissions or agreements for data analysis or disclosure of protected health information, in accordance with HIPAA (Health Insurance Portability and Accountability Act of 1996) regulations.

(2) If designated as a Newborn Nurse Home Visiting Provider,

LPHA must:

- (a) Maintain staffing required by the program which includes but is not limited to Family Connects Oregon Nursing Supervisor or Family Connects Nursing Lead (NNHVP).
- (b) Ensure a subcontract and/or Memorandum of Understanding (MOU) is in place if Family Connects Program is implemented through a cross county collaboration with shared staff across jurisdictions, defining the staffing and supervision agreements.
- (c) Deliver services in accordance with OARs 333-006-0000 through 333-006-0190 and Family Connects Oregon Program Guidance provided by the Maternal and Child Health Section.
- (d) If the LPHA, as a provider of Medicaid services, bills for Newborn Nurse Home Visiting Medical and Targeted Case Management Services, the LPHA must comply with the billing policy and codes in OAR 410-130-0605.
- (e) Take all appropriate steps to maintain client confidentiality and obtain any necessary written permissions or agreements for data analysis or disclosure of protected health information, in accordance with HIPAA (Health Insurance Portability and Accountability Act of 1996) regulations.
- (f) All Public Health Nurses working in the Family Connects Oregon program must adhere to nursing practice standards as defined by the Oregon State Board of

Nursing.

5. **General Revenue and Expense Reporting.** LPHA must complete an “Oregon Health Authority Public Health Division Expenditure and Revenue Report” located in Exhibit C of this Agreement. 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. **Reporting Requirements**

LPHA must provide progress reports to OHA in a format designated by OHA that include the following:

- a. If the LPHA is the Community Lead, they must submit quarterly reports with updates on population reach, staffing and community alignment activities.
- b. For the purposes of program sustainability, if the LPHA is the Community Lead or the NNHVP, they must submit a quarterly summary of funding, revenues, and expenditures for whichever role(s) they play (Community Lead and/or NNHVP).
- c. An end of fourth quarter summary of focused funding activities. For all individuals who receive Family Connects Oregon Home Visiting Services, LPHA must ensure that Supervisors and Home Visitors collect required data on client visits and enter it into the state-designated data system in a timely manner that is aligned with expectations defined by each program and within no more than thirty (30) business days of visiting the client and 45 days of case closure (information shall be obtained from Community Leads and NNHVP).

7. **Performance Measures.**

Not applicable