

**Frequently Asked Questions
Title V Maternal and Child Health State Formula Block Grant Services Survey**

- 1. How often will the Title V program be asked to provide the information requested in this survey?**

This survey is a one-time data collection effort. At this time, there are no plans for future requests of this information.

- 2. Will the information requested in this survey be incorporated into the Title V Annual Report?**

At this time, there are no plans to incorporate the information requested in this survey into the Title V Annual Report.

- 3. Can data reported in the Title V Annual Report be used to complete this survey?**

No. The Title V Annual Report requests data on expenditures and counts of individuals served using federal-state Title V Block Grant Partnership funds. This survey is focused on the use of federal Title V Block Grant funds only.

- 4. Our Title V Program uses federal MCH Formula Block Grant funds to support clinics and local health departments. These clinics use the funds to support program operations and pay for clinical staff who provide direct medical care or support services to infants and children, children with special health care needs, and pregnant women. Should I include these federal funds in the survey? Should I provide the number of infants and children, children with special health care needs, and pregnant women who receive services provided by these staff?**

No. Federal MCH Formula Block Grant funds made to a partner, such as a clinic or local health department, for salary or operations support are not to be considered as reimbursements for services, and the women and children who receive these services should not be counted unless they receive a service reimbursed directly by your program using federal MCH Formula Block Grant funds.

- 5. Is the definition of “service” in this survey the same as “direct services” as defined in the Title V Annual Report guidance?**

No. In the guidance and forms for the Title V Annual Report, direct services are defined as services generally delivered one-on-one between a health professional and a patient in

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an office, clinic, or emergency room. According to that guidance, direct services may also include funding to support a program or clinic that provides direct medical care services—for example, funding for salary support or operations support.

In this survey, services are defined as those medical, allied health, and support services; medical equipment; and supplies typically reimbursed by public or private insurance and that are reimbursed by your program using your federal MCH Formula Block Grant funds. These services would be paid for through a formal process similar to paying a medical billing claim. Examples of services may include primary care or specialty care doctor's visits, emergency department visits, inpatient services, outpatient or inpatient mental health and substance abuse services, prescription drugs, occupational or physical therapy, speech therapy, durable medical equipment and medical supplies, lab services, radiology, medical foods, preventive care screenings, dental care, orthodontia, vision care, case management, and transportation.

It is important to note that the definition of “services” is not the same as that of “direct services” used in the Title V Annual Report. According to the guidance document for the Title V Annual Report, direct services may include salary and operational support to a program or clinic that provides medical services; these funds are excluded from the definition of services used here. Furthermore, services include such services as transportation and case management that the guidance for the annual report categorizes as “enabling services,” but because they can be reimbursed by private or public insurance, they are included in the definition of services used here.

The following is an example of a reimbursed service for purposes of the survey. Your state's CHIP program reimburses for 20 physical therapy sessions for a child. However, the child needed 30 sessions, so the Title V program paid for the extra 10 sessions using the federal portion of Title V MCH Formula Block Grant funds. Therefore, physical therapy is a service as defined for this survey.

6. For this survey, are we to report on data only for children with special health care needs?

No. The survey asks you to report on federal MCH Formula Block Grant funds used to reimburse for services provided to infants less than 1 year of age and children ages 1 through 21 years of age, children with special health care needs, and pregnant women.

7. Questions 2, 3, and 5 ask us to break out data by the recipients' primary source of insurance coverage. What if children and pregnant women have more than one source of insurance coverage?

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For children and pregnant women covered by more than one source of insurance coverage, use their primary source of insurance coverage.

8. We cannot break out data by insurance type as requested for Questions 2 and 5. What should we do?

If you cannot provide the information requested, place “Not Available” in the relevant table cell.

9. Can we provide estimates of federal Block Grant funds used to reimburse for services?

No. In Questions 2 and 5, the amounts of federal Block Grant funds used to reimburse for services must be actual numbers.

10. Is there a difference between uninsured and underinsured?

Yes. Questions 2 and 5 ask you to break out expenditures by the recipients’ primary source of insurance coverage. Column B—Uninsured would capture expenditures for services made on behalf of recipients who have no other source of coverage. Columns C, D, and E would capture expenditures made on behalf of recipients who had a source of insurance coverage but whose insurance (i.e., private insurance, Medicaid, or CHIP) did not cover a particular service or did not cover the quantity of the service needed. These recipients are considered underinsured.

11. We have additional information that we want to convey to help explain data presented in the survey. Where do we add this information?

If you have information that you would like to include in the survey to help explain the information provided, you can add footnotes into the survey.

12. If I have questions about the survey, whom can I contact?

You can contact Melissa Romaine at RTI International. Her e-mail is mromaire@rti.org, and her phone number is 919-541-6894.