



Maternal Child Health Services Program (MCH) Overview
Title V MCH Unit, Section for Women's Health
Division of Community and Public Health
Missouri Department of Health & Senior Services
Pertaining to FFY2022-2026 (October 1, 2021-September 30, 2026)

Eligibility

Any LPHA is eligible to participate in the Maternal Child Health (MCH) Services Contract after completion and approval of a proposal hereinafter referred to as the FFY2022-2026 contract work plan and completion and approval of an annual contract budget.

The FFY2022-2026 contract work plan shall be for the five-year period of October 1, 2021 through September 30, 2026.

Purpose

To support a leadership role for LPHAs at the local level to: build community-based systems and expand the resources those systems can use to respond to priority maternal child health issues; provide and assure mothers and children (in particular those with low income or with limited availability of health services) access to quality MCH services; reduce health disparities for women, infants, and children, including those with special health care needs; promote the health of mothers and infants by assuring prenatal, delivery, and postpartum care for low income, at-risk pregnant women; and promote the health of children by providing preventive and primary care services for low income children.

The Contractor's efforts to fulfill the purpose of the MCH Services contract will include activities and services that address the needs of children and youth with special health care needs (CYSHCN).

Funding

Funding for this contract is provided by federal grant dollars from the Maternal and Child Health Services Title V Block Grant issued to the State of Missouri from the United States (U.S.) Health Resources and Services Administration (HRSA) and the U.S. Department of Health and Human Services (HHS).

Funding for this contract is awarded annually for a one-year funding period only.

Funding for this contract shall be expended during the applicable contract period.



Funding for this contract shall be used to expand or enhance activities that improve the health of the maternal and child health population, and to address local maternal and child health issues.

Funding for this contract shall be expended as follows:

- a. A minimum of **60%** of contract funding MUST be spent on implementing the approved FFY2022-2026 contract work plan to address the selected priority health issue(s); and
- b. A maximum of **40%** of contract funding may be spent to expand or enhance other specific MCH initiatives/activities that improve the health of the maternal and child health population and address local maternal and child health issues

Invoicing and Payment

The Contractor shall indicate the invoice number for each invoice submitted to the Department for payment in the following format: MCHmmyy. For example, an invoice submitted to the Department for the month of October 2022 should have the following invoice number: MCH1022.

The Contractor shall submit a Vendor Request for Payment Form and the Invoicing Tool for Calculating Indirect monthly. The Vendor Request for Payment Form and the Invoicing Tool for Calculating Indirect shall be due by the fifteenth (15th) day of the month following the month in which the Contractor provided services under the contract. The Contractor shall perform the services prior to invoicing the Department.

The Contractor shall submit the Vendor Request for Payment Form as follows:

Via email to:

mchservicesProgram@health.mo.gov

Deliverables and Outcomes

The Contractor shall address at least one priority health issue(s) derived from the state's Title V Maternal and Child Health Services Block Grant priorities. The Contractor's selected Priority Health Issue(s) shall be identified in the FFY2022-2026 contract work plan.

The Contractor shall work with the local community to maintain, develop, and enhance a community-based system to address the priority maternal child health issue(s) identified in the FFY2022-2026 contract work plan.



The Contractor shall address risk and protective factors that influence health disparities within families and communities through the Life Course Perspective.

The Contractor shall develop a proposed budget for the next contract period for using contract funds to accomplish the proposed work plan. The proposed annual contract budget shall be submitted no later than July 31st via an electronic e-mail attachment.

The Contractor shall identify, track and monitor targeted national, state, and local outcome measure(s) and any additional performance indicator data/measures and analyze FFY2022-2026 contract work plan performance trends.

Reports

The Contractor shall submit reports using the forms and/or formats provided by the MCH Services Program when available. Reports shall be submitted to the MCH Services Program District Nurse Consultant (DNC) via an electronic email attachment.

The Contractor shall complete and submit the Progress Report no later than February 15th of each contract period.

The Contractor shall complete and submit the Year-End Report no later than October 31st in the first, second, third, and fourth contract periods.

The Contractor shall complete and submit the Contract Outcomes Report no later than October 31st of the fifth contract period.

The Contractor shall submit a Subrecipient Annual Financial Report. For a contract period of twelve months or less, the Contractor shall submit this report at the time the final invoice is due. For a contract period over twelve months, the Contractor shall submit this report annually and at the time the final invoice is due.

Monitoring

The Department reserves the right to monitor the Contractor through on-site visits during the contract period at a minimum of once per year to ensure contractual compliance. The focus of the on-site visit is consultation and technical assistance to assist the Contractor in acquiring the resources and expertise necessary to meet the contract deliverables and outcomes and implement the FFY 2022-2026 MCH Services contract work plan.

The on-site visit will include:

- a. Monitoring the Contractor's compliance with the terms of the contract;
- b. Verifying the Contractor's progress toward meeting the contract deliverables and outcomes and accomplishing the work plan activities and system outcomes;



- c. Monitoring the Contractor's Evaluation Plan, including the ongoing identification, tracking and monitoring of targeted national, state, and local outcome measure(s) and other performance indicator data/measures and analysis of FFY2022-2026 contract work plan performance trends; and
- d. Assessing local capacity to provide maternal, child and family foundational public health services.

Document Retention

The Contractor shall retain all books, records, and other documents relevant to this contract for a period of three (3) years after final payment or the completion of an audit, whichever is later, or as otherwise designated by the federal funding agency and stated in the contract.



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Fax (same for all staff)

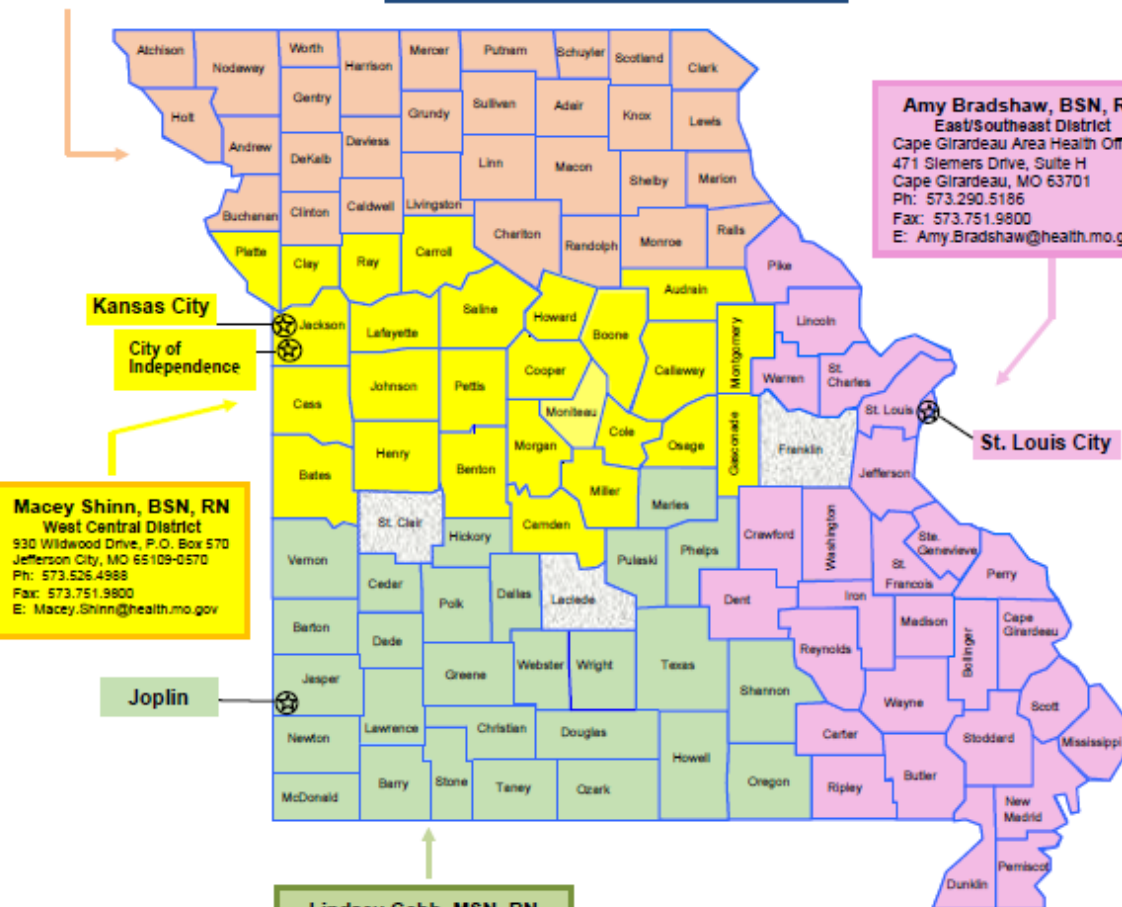
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