Minnesota

Maternal and Child Health Block Grant 2024

The Maternal and Child Health Services Block Grant, Title V of the Social Security Act, is the only federal program devoted to improving the health of all women, children, and families. In Fiscal Year 2022, 93% of all pregnant women, 99% of infants, and 61% of children nationwide benefitted from a Title V-supported service. To learn more about Title V, visit [www.amchp.org](http://www.amchp.org).

<table>
<thead>
<tr>
<th>MCH Block Grant Funds to Minnesota</th>
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<tbody>
<tr>
<td>FY 2020</td>
<td>$9,108,261</td>
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<tr>
<td>FY 2021</td>
<td>$9,146,460</td>
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<tr>
<td>FY 2022</td>
<td>$9,255,161</td>
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*States must provide a $3 match for every four Federal dollars allocated.

Minnesota Expenditures Funding by Source in FY 2022

- Federal Allocation (19.08%)
- State MCH Funds (14.31%)
- Local MCH Funds & Program Income (6.39%)
- Other Funds (60.14%)

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<tr>
<th>Percentage Served by the Minnesota MCH Program*</th>
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<tr>
<td>34.9%  Pregnant women</td>
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<tr>
<td>100.0% Infants under one</td>
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<tr>
<td>40.2%  Children and adolescents</td>
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<tr>
<td>100.0% Children with special health care needs</td>
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<td>1.2%   Others</td>
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*2022 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau
State spotlight: Minnesota Maternal Mortality Review Committee

The Minnesota Maternal Mortality Review Committee (MMRC) works to improve the health of childbearing people by reviewing deaths of people who die in pregnancy, labor, and up to one year postpartum. The committee develops recommendations aimed at preventing future morbidity and mortality through improved policies and practices. The statewide committee includes members who represent the communities most impacted by disparities in maternal health outcomes, working alongside a broad range of healthcare professionals. Minnesota’s first report on maternal mortality was released in August 2022, disseminating data for the 48 pregnancy-associated deaths in 2017-2018. This report was updated in January 2024 to include data from 2019 for a total of 75 pregnancy-associated deaths across the three reporting years. The most critical insights uncovered through these reviews were that the leading cause of death was injury, substance use was a cause or contributing factor in nearly one-third of cases, and 100 percent of the pregnancy-related deaths were determined to be preventable.

Current Special Projects of Regional and National Significance (SPRANS)

Special Projects of Regional and National Significance (SPRANS) funding complements the formula funding each state receives and helps ensure the success of state Title V, Medicaid, and CHIP programs by driving innovation, responding to emerging and entrenched issues, and building capacity for integrated systems of care for women, children, and families.

Adolescent Health Training Program
Regents of the University of Minnesota, Minneapolis, MN (MN-05)

Leadership Education in Maternal and Child Public Health
Regents of the University of Minnesota, Minneapolis, MN (MN-05)

State Systems Development Initiative
Minnesota Department of Health, St. Paul, MN (MN-02)

Public Health Nutrition Training
Regents of the University of Minnesota, Minneapolis, MN (MN-05)

State Maternal Health Innovation Program
Minnesota Department of Health, St. Paul, MN (MN-02)

Additional links and ways to contact AMCHP:

Minnesota’s Child and Family Health Division within the Department of Health uses Title V funds to protect and improve the health of Minnesota’s women, children, and families.

For additional information about the Title V MCH Block Grant in your state, visit https://mchb.tvisdata.hrsa.gov/.

For additional information about AMCHP, visit www.amchp.org or contact Sherie Lou Santos, AMCHP Chief Government Affairs Officer, ssantos@amchp.org.

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