

# Pennsylvania State Health Improvement Plan

**Annual Report**

**Pennsylvania**

**Fiscal Year 2018-2019**



**pennsylvania**  
DEPARTMENT OF HEALTH

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Pennsylvania State Health Improvement Plan  
2018-2019 Annual Report  
February 2020  
Office of Operational Excellence  
Division of Health Plans Development

# Executive Summary

## Introduction

The [State Health Improvement Plan](#) (SHIP) is a multi-year strategic plan developed by the Pennsylvania Department of Health (DOH) in collaboration with a diverse public partnership of stakeholders across the commonwealth. Implementation of the plan began with its release in May 2016.

The three health priorities addressed by the SHIP are obesity, physical inactivity and nutrition; primary care and preventive services; and mental health and substance use. Across these priority areas are five themes that have an impact on health. They are health literacy, the public health system, health equity, social determinants of health, and integration of primary care and mental health.

The SHIP identifies health goals, objectives, strategies and assets to enable the stakeholders of the public health system to coordinate efforts and provide efficient and integrated programs. It can be used for state, regional and local community health improvement planning, as well as regional and local community health assessment, agency strategic planning, and operational planning. Stakeholders can draw on the SHIP as a resource for marketing, grant seeking, and identifying research and innovation opportunities. It can also be used for informing, educating and empowering residents about key health issues.

During the past year, three task forces have been implementing and promoting strategic initiatives to improve population health outcomes in three priority areas. This annual report documents progress toward the goals and the implementation of strategies. Included are examples of successful programs. As the public health environment changes, new opportunities that may impact goals are considered by the task forces. Adjustments to the SHIP strategies are implemented by the task forces.

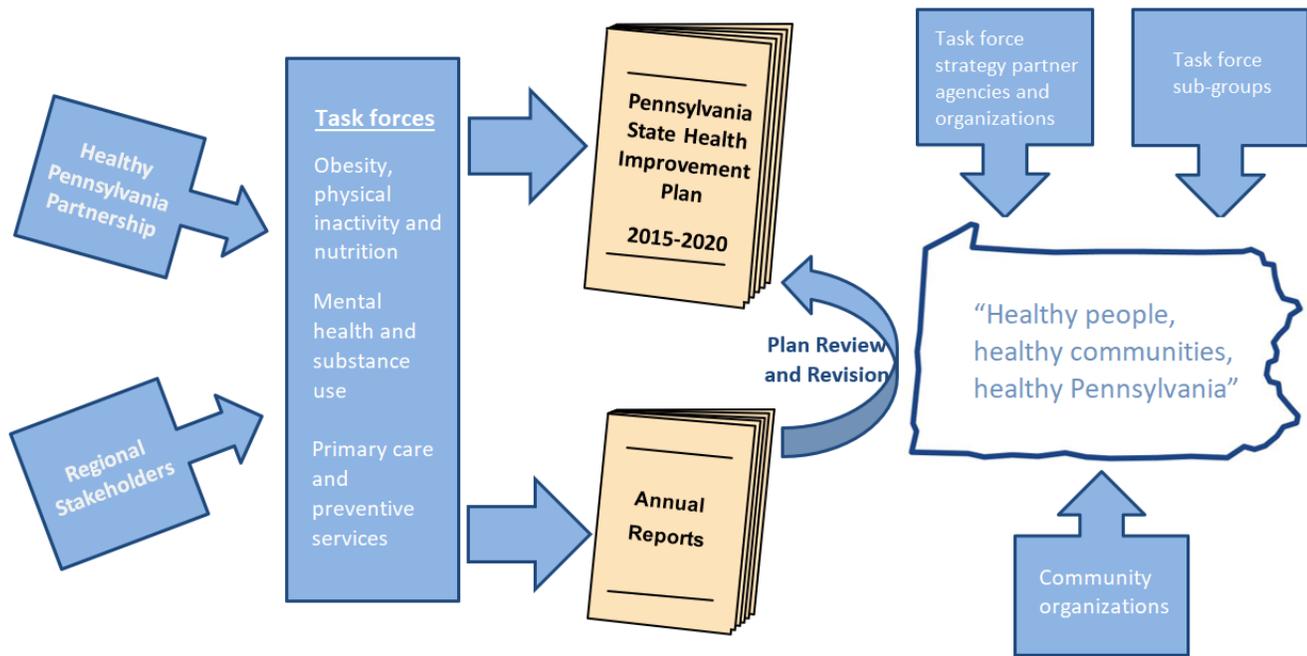
Task forces meet quarterly throughout the year to report on progress in implementing the identified strategies, assess progress and make recommendations for adjustments.

The Healthy Pennsylvania Partnership is comprised of stakeholders and meets twice during the year to review progress toward the SHIP goals. This group advises on the health improvement priorities identified in the SHIP based on their positions in communities and with state and local public health agencies and organizations.

This report provides the health outcome measures identified in the SHIP, implementation and progress made on strategic initiatives, and consideration of current health policy issues affecting Pennsylvania. It is presented to stakeholders and the public, so they may know how the commonwealth is performing on the priority issues and can prioritize policy decisions based on performance results.



Healthy Pennsylvania Partnership is a collaboration for developing the State Health Assessment and State Health Improvement Plan as well as implementing the evidence-based and promising practices to address identified priorities.



## Priority issues, goals and objectives

The SHIP<sup>1</sup> identifies three Pennsylvania health priorities with one or more goals and measurable objectives for each priority. Each goal includes strategies, lead individuals, collaborating organizations and associated timeframes. The SHIP priorities are:

<b>Health Priority 1: Obesity, physical inactivity and nutrition</b>
<b>Health Priority 2: Primary care and preventive services</b>
<b>Health Priority 3: Mental health and substance use</b>

### **Health Priority 1: Obesity, physical inactivity and nutrition (OPIN)**

Obesity, being overweight, poor nutrition and physical inactivity are associated with profound, adverse health conditions. These include high blood pressure, high cholesterol, type 2 diabetes, heart disease, some cancers, and other limiting physical and mental health issues. In Pennsylvania, two out of three adults (6.2 million residents) and one out of three school-age children (500,000) have excess weight. Evidence links obesity, physical inactivity and poor nutrition to shortened lifespan. Today's youth are in danger of dying at younger ages than their parents.

### **Health Priority 2: Primary care and preventive services (PCPS)**

Limited access to quality health care is a growing issue in many communities in Pennsylvania. Limitations relate to the number of primary care practitioners, cultural competency, knowledge, location, affordability, coordination of comprehensive care, reimbursement and technology, among other things. Such limitations prevent many people from obtaining quality preventive and disease management services.

### **Health Priority 3: Mental health and substance use (MHSU)**

Unmet mental health and substance use needs frequently lead to preventable illness and death in individuals, families and communities. The goal is for Pennsylvania residents to have access to the best practices in screening, support, assessment, and treatment for mental health and substance use disorders in order to achieve and maintain optimal health outcomes.

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<sup>1</sup> Pa. Department of Health (2016), State Health Improvement Plan 2015-2020.  
[https://www.health.pa.gov/topics/Documents/SHIP/2015-2020\\_PA\\_SHIP.pdf](https://www.health.pa.gov/topics/Documents/SHIP/2015-2020_PA_SHIP.pdf)



Pennsylvania State Flagship U.S. Brig Niagara<sup>2</sup>

## Goals and Objectives

### SHIP Goals and Objectives:

#### **OPIN Goal 1: Decrease the percentage of adults and children who meet the criteria for overweight and obesity.**

- Objective 1.1: Decrease the percentage of Pennsylvania adults who are obese from 30 percent in 2013 to 27 percent by December 2020.
- Objective 1.2: Decrease the percentage of Pennsylvania youth that are overweight or obese from 33 percent in 2012-13 school year to 30 percent by December 2020.

#### **OPIN Goal 2: Improve the health of Pennsylvania residents already impacted by obesity, poor nutrition and physical inactivity.**

- Objective 2.1: Decrease the percentage of Pennsylvania adults who have obesity who report they have fair or poor general health from 26 percent in 2013 to 23 percent by December 2020.

#### **OPIN Goal 3: Increase opportunities for and engagement in physical activity.**

- Objective 3.1: Decrease the percentage of Pennsylvania adults who engage in no leisure-time physical activity from 26 percent in 2013 to 23 percent by December 2020.
- Objective 3.2: Increase percentage of Pennsylvania adolescents who are physically active daily from 28 percent in 2009 to 31 percent by December 2020.

#### **OPIN Goal 4: Increase opportunities for access to and consumption of healthy foods and healthy beverages.**

Objective 4.1: Increase the percentage of Pennsylvania adults who consume at least five servings of fruits and/or vegetables every day from 8 percent in 2017 to 9 percent by December 2019.

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<sup>2</sup> Wikimedia Commons (2009). Brig Niagara full sail.  
[https://commons.wikimedia.org/wiki/File:Brig\\_Niagara\\_full\\_sail.jpg](https://commons.wikimedia.org/wiki/File:Brig_Niagara_full_sail.jpg)

### **PCPS Goal 1: Improve access to primary care services for Pennsylvanians.**

- Objective 1.1: Reduce the number of federally designated Geographic and Population Health Professional Shortage Areas (HPSA) by 3 percent by December 2020:
  - Primary care: from 45 to 43
  - Dental: from 61 to 59
  - Mental health: from 26 to 25

### **PCPS Goal 2: Increase the number of Pennsylvania residents receiving preventive health care services.**

- Objective 2.1: [This objective has been scheduled for revision by the PCPS task force.]
- Objective 2.2: Reduce the eight-month provisional enrollment period for children to receive all required school immunizations by December 2020.
- Objective 2.3: For youth ages 1 to 20 years old who are enrolled in Medicaid with at least 90 days of continuous eligibility, increase the percentage who have had a preventive dental service in the past year from 42.5 percent in FFY 2014 to 47 percent by December 2020.

### **PCPS Goal 3: Improve health literacy (i.e., the capacity to obtain, process, and understand basic health information and services needed for informed health decision-making) of Pennsylvania residents.**

- Objective 3.1: Establish a method of determining the health literacy of Pennsylvania residents by December 2020.

### **MHSU Goal 1: Pennsylvania residents will have access to the best practices in screening, support, assessment, and treatment for mental health and substance use disorders in order to achieve and maintain optimal health outcomes.**

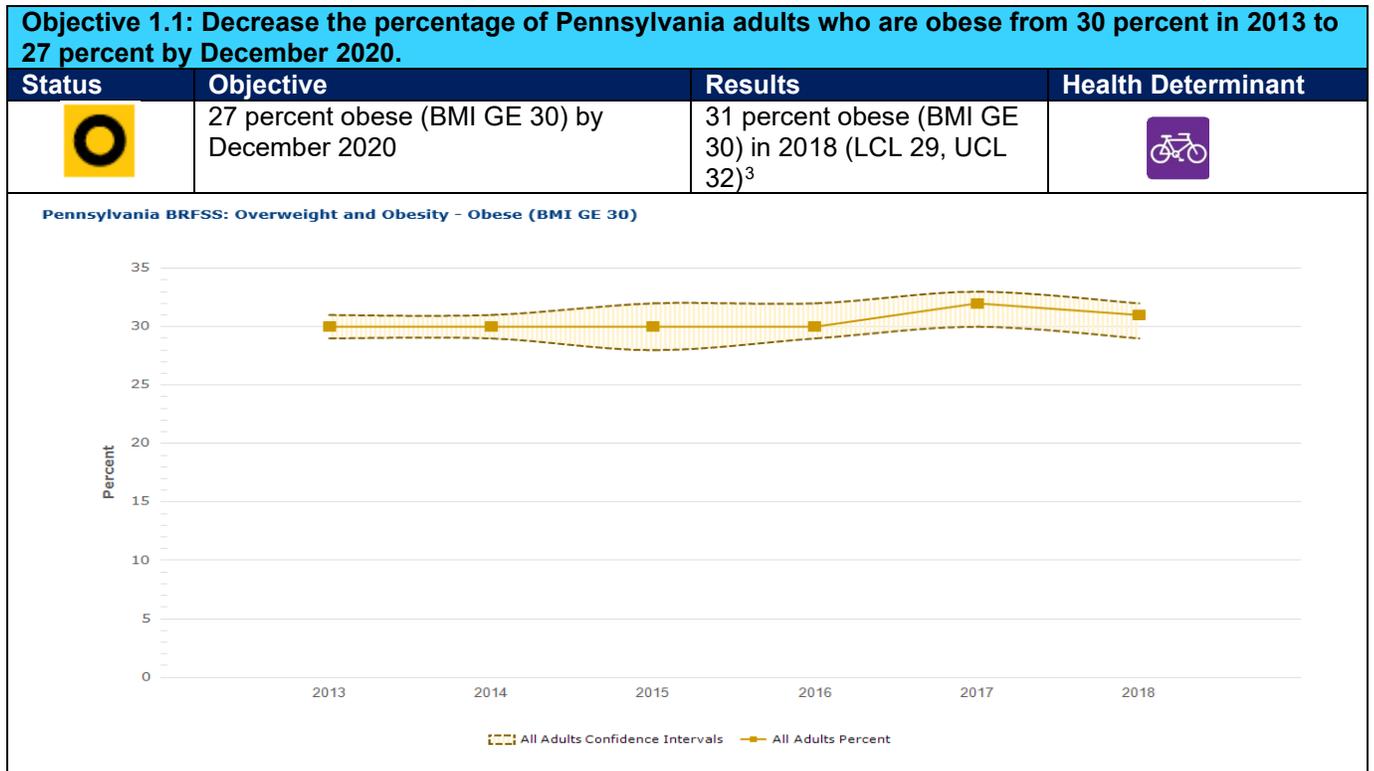
- Objective 1.1: Increase access to quality mental health and substance use services for all Pennsylvania residents by increasing the percent of adults 18 or older with any mental health illness who received treatment or counseling from 46.7 percent in 2009-2013 to 51 percent by December 2020.
- Objective 1.2: By December 2020:
  - Decrease adults who smoke every day from 16 percent in 2013 to 11.3 percent.
  - Decrease adults who smoke some days from 5.7 percent in 2012 to 4.4 percent.
  - Increase adults who are former smokers from 26 percent in 2013 to 31.8 percent.
  - Increase adults who have never smoked from 53 percent in 2013 to 57.6 percent.
- Objective 1.3: For Pennsylvania adults and adolescents, decrease rate of deaths due to substance use from 17.1 per 100,000 in 2012 to 15.4 per 100,000 by December 2020.
- Objective 1.4: Reduce the rate of suicides from 12.1 per 100,000 in 2012 to 10.9 per 100,000 in December 2020.
- Objective 1.5: Increase the comfort level of Pennsylvania residents in discussing mental health and substance use problems with their health care providers, neighbors and community, as measured by an increase in the number of treatments for any mental illness from 46.7 percent in 2009-2013 to 54.7 by December 2020, plus an increase in enrollment in substance use treatment by 20 percent by December 2020, from 57,715 enrollees in 2013 to 69,260.

In this report, these symbols are used to indicate the health determinants that the objectives target and the status indicating if an objective has been achieved, has made progress, has seen no change or has experienced a negative trend. The sector indicators identify where strategies and activities are being implemented.

Health Determinants		Public Health Priority Issues	Sector indicators	
Healthy eating 	Substance-free living 	<b>Overweight/Obesity</b> <b>Health Status</b> <b>Physical Activity</b> <b>Access to Care</b> <b>Preventive Care</b> <b>Health Literacy</b> <b>Behavioral Health</b>	Community 	Health care 
Active living 	Linkages to care 		Education 	Policy 
Status Indicators				
	SHIP objectives that have already been completed are marked in the status column with a check.			
	SHIP objectives making progress are marked in the status column with a plus.			
	SHIP objectives where progress has been level are marked in the status column with a zero.			
	SHIP objectives trending in a negative direction are marked in the status column with a minus sign.			
	SHIP objectives not reported this year are marked in the status column with a gray box.			
<b>New!</b>	Newly added SHIP objectives or strategies are labeled in the status column as new.			

# Obesity, physical inactivity and nutrition

**Goal 1: Decrease the percentage of adults and children who meet the criteria for overweight and obesity.**



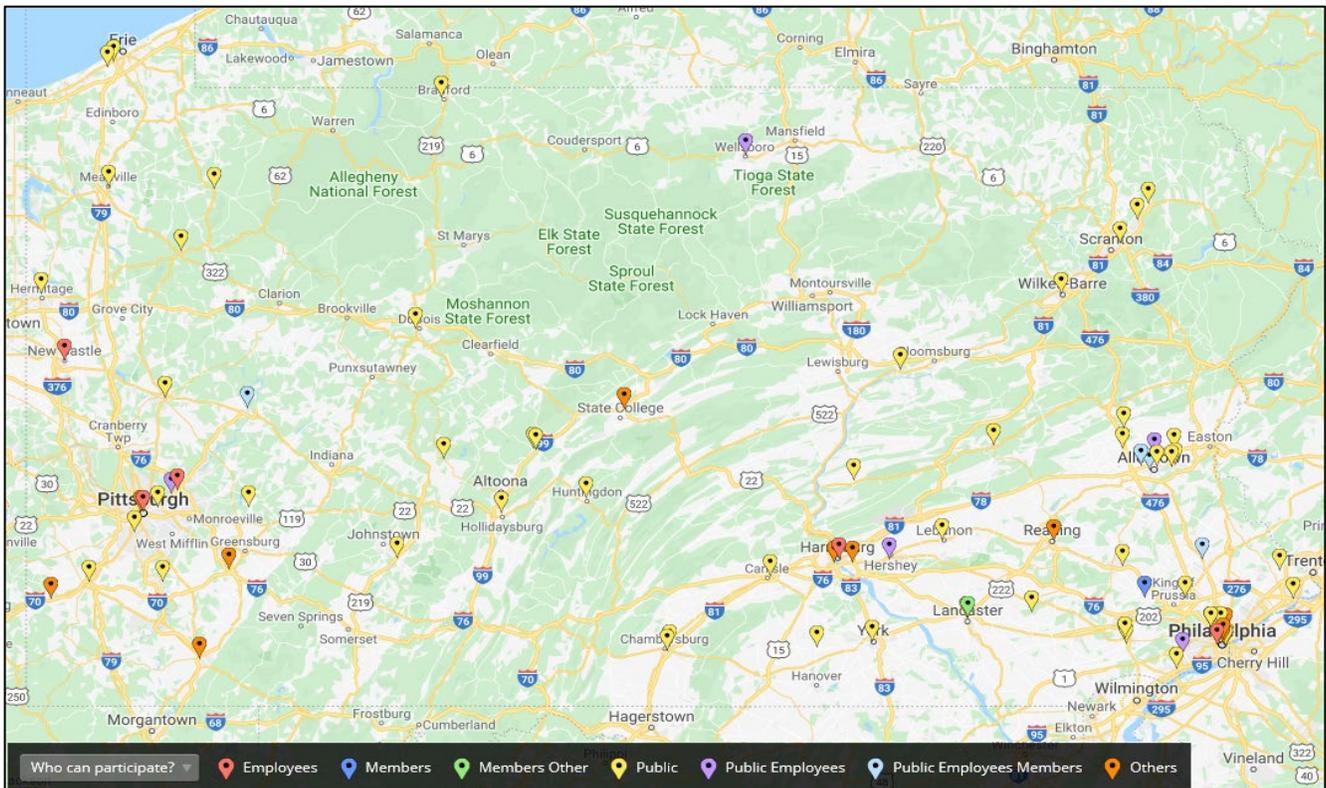
**Strategy 1.1.1 Collaborate with insurance companies to include in insurance plans evidence-based services for wellness and prevention programs (e.g., weight management, nutrition counseling, gym membership and healthy living programs) provided by licensed qualified individuals and organizations.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Division of Nutrition and Physical Activity, Pa. Department of Health	Currently 85 providers are recognized by the National Diabetes Prevention Program and are eligible for reimbursement based on coverage rules issued by the Centers for Medicare and Medicaid Services. <sup>4</sup>	Overweight/obesity	

<sup>3</sup> Pennsylvania Behavioral Risk Factor Surveillance System (BRFSS) <https://www.phaim1.health.pa.gov/EDD/WebForms/BRFSSstate.aspx>

<sup>4</sup> National Diabetes Prevention Program [https://nccd.cdc.gov/DDT\\_DPRP/Registry.aspx](https://nccd.cdc.gov/DDT_DPRP/Registry.aspx)

**Figure 1: Pennsylvania Diabetes Prevention Program Sites, 2019**

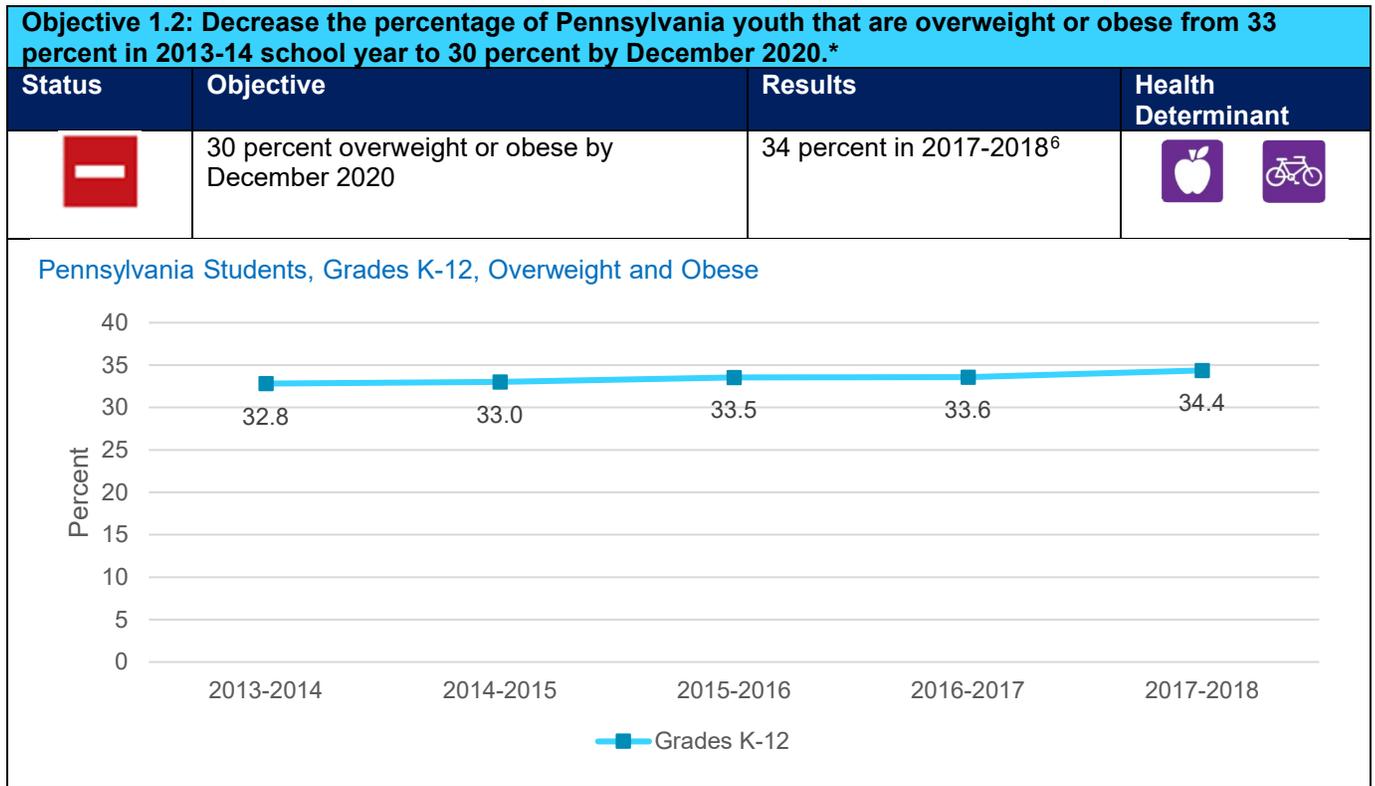


Source: National Diabetes Prevention Program (2019).  
[https://nccd.cdc.gov/DDT\\_DPRP/Registry.aspx](https://nccd.cdc.gov/DDT_DPRP/Registry.aspx)

Utilizing data from the National Diabetes Prevention Program, [Registry of All Recognized Organizations](#), an interactive map of the 85 current Diabetes Prevention Programs sites in Pennsylvania was compiled. Using the [map link](#) allows users to identify program site information by clicking on the map pins.

<b>Strategy 1.1.2 Work with medical providers to educate patients on prevention of chronic disease and weight loss strategies in a linguistically appropriate manner and provide referrals to community resources.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Division of Nutrition and Physical Activity, Pa. Department of Health	No activities specific for obesity and weight loss were observed.	Overweight/obesity	
<b>Strategy 1.1.3 Develop a process for identifying community resources so that providers (e.g., health care, educational, religious) can provide adults and children with individualized referrals to resources for healthy eating and activity choices.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
United Way of Pennsylvania	From July 1, 2018 through June 30, 2019, Pennsylvania 211 reported processing 9,515 calls for food pantries and food assistance, 13 calls for nutrition and health eating, 38 calls for parks and recreation and 2 requests for exercise programs. <sup>5</sup>	Overweight/obesity Physical activity	

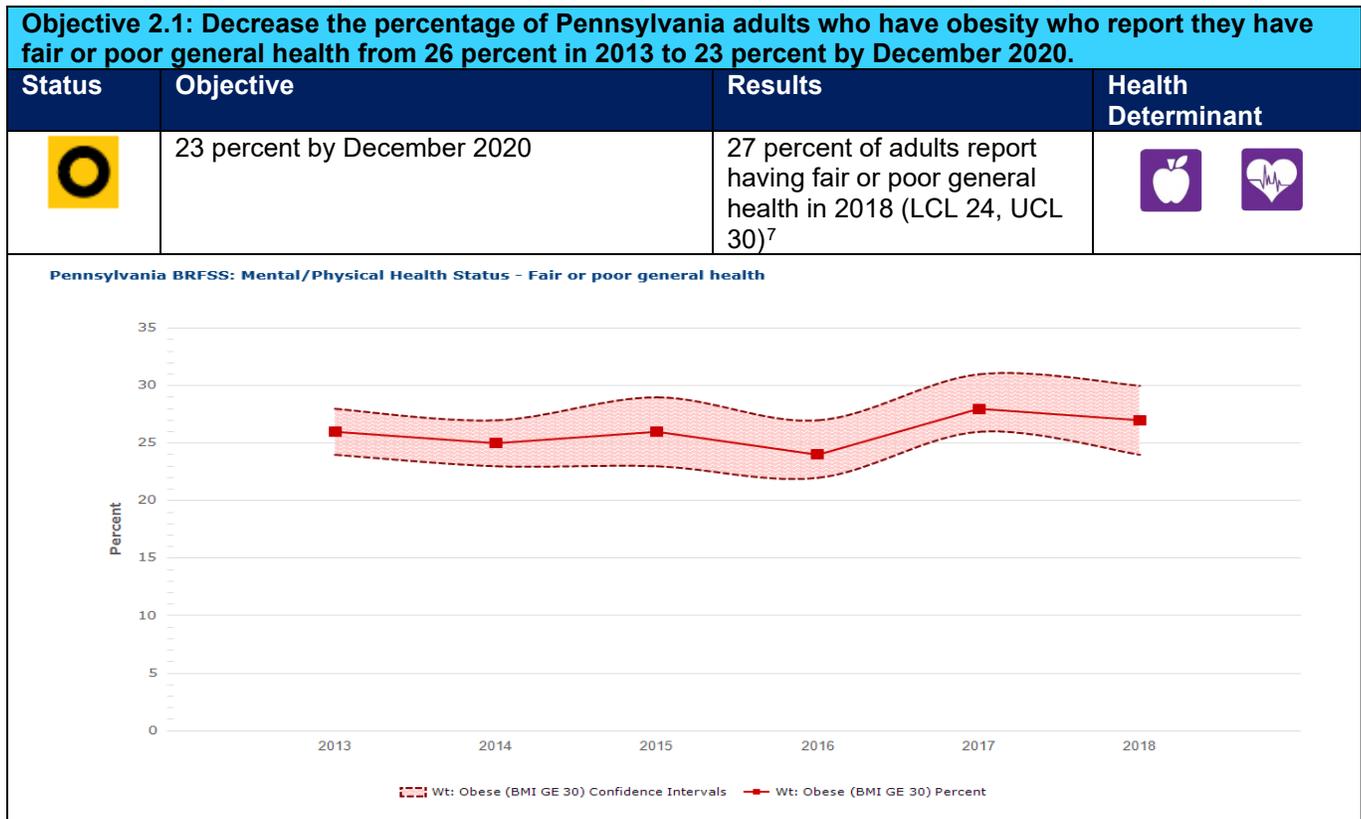
<sup>5</sup> United Way of Pennsylvania, PA 211 Project. Data request, December 26, 2019



<b>Strategy 1.2.1 Implement youth healthy living programs that reach parents to improve the nutrition and physical activity levels of youth at home and in school.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Action for Healthy Kids	65 Every Kid Healthy Week events were registered on the Action for Healthy Kids portal for the state of Pennsylvania during the 18-19 school year.	Overweight/obesity Health status Physical activity	  
<b>Strategy 1.2.2 Increase and strengthen school-based policies around nutrition and physical activity.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Education	The Pa. Department of Education (PDE) provided local school wellness policies (LSWP) template to schools, districts and school food authorities. From July 1, 2018 – June 30, 2019, 306 policies were reviewed and found to be updated.	Overweight/obesity Physical activity	  
<b>Strategy 1.2.3 Work with medical providers to educate patients on prevention of chronic disease, weight loss strategies, and referral to community resources.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Chapter, American Academy of Pediatrics	From July 1, 2018, through June 30, 2019, 25 EPIC® Pediatric Obesity events were held reaching 561 attendees from 81 sites. Programs were presented by 14 physicians and 15 registered dietitians, and 95,000 children ages 0-18 years in 32 counties were impacted.	Overweight/obesity Health status	 

<sup>6</sup> Pennsylvania Department of Health, Bureau of Community Health Systems, Division of School Health, Pa. Department of Health <https://www.health.pa.gov/topics/school/Pages/Statistics.aspx>

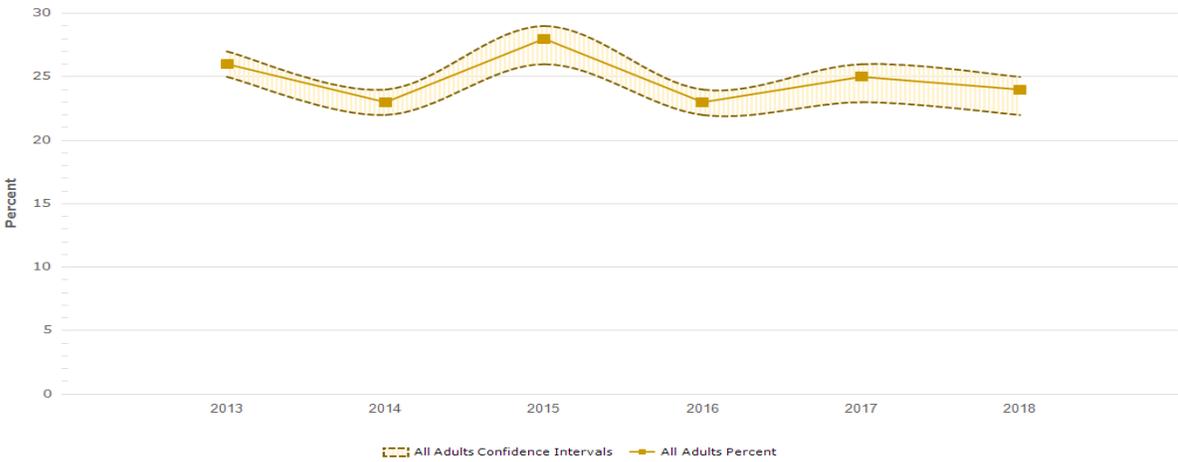
**Goal 2: Improve the health of Pennsylvania residents already impacted by obesity, poor nutrition, and physical inactivity.**



<b>Strategy 2.1.1 Work with primary care providers to increase referrals for those with obesity, poor nutrition or physical inactivity that includes counseling about wellness checks, nutrition, diet and physical activity provided by licensed qualified health care providers.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Chapter, American Academy of Pediatrics	No new activities	Overweight/obesity Physical activity	 
<b>Strategy 2.1.2 Remove barriers to evidence-based medical practices for people with severe obesity.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Obesity Action Coalition	Legislation has been introduced in the Pennsylvania House ( <a href="#">HB 410</a> ) to include anti-obesity drugs approved by the Food and Drug Administration as compensable under medical assistance. Federal legislation has been introduced as the Treat and Reduce Obesity Act (HR 1530 and S 595) to allow Medicare to cover anti-obesity medications and allow for other health care specialists to bill for obesity care management.	Overweight/obesity	

<sup>7</sup> Pennsylvania BRFSS  
<https://www.phaim1.health.pa.gov/EDD/WebForms/BRFSSstate.aspx>

### Goal 3: Increase opportunities for and engagement in physical activity.

Objective 3.1: Decrease the percentage of Pennsylvania adults who engage in no leisure-time physical activity from 26 percent in 2013 to 23 percent by December 2020.																								
Status	Objective	Results	Health Determinant																					
	23 percent by December 2020	24 percent of adults report no leisure-time activity in 2018 (LCL 22, UCL 25). <sup>8</sup>																						
<p><b>Pennsylvania BRFSS: Physical Activity - No leisure time physical activity in the past month</b></p>  <table border="1"> <caption>Data for Pennsylvania BRFSS: Physical Activity - No leisure time physical activity in the past month</caption> <thead> <tr> <th>Year</th> <th>All Adults Percent</th> <th>All Adults Confidence Intervals (LCL, UCL)</th> </tr> </thead> <tbody> <tr> <td>2013</td> <td>26%</td> <td>25%, 27%</td> </tr> <tr> <td>2014</td> <td>23%</td> <td>22%, 24%</td> </tr> <tr> <td>2015</td> <td>28%</td> <td>26%, 30%</td> </tr> <tr> <td>2016</td> <td>23%</td> <td>22%, 24%</td> </tr> <tr> <td>2017</td> <td>25%</td> <td>24%, 26%</td> </tr> <tr> <td>2018</td> <td>24%</td> <td>22%, 25%</td> </tr> </tbody> </table>				Year	All Adults Percent	All Adults Confidence Intervals (LCL, UCL)	2013	26%	25%, 27%	2014	23%	22%, 24%	2015	28%	26%, 30%	2016	23%	22%, 24%	2017	25%	24%, 26%	2018	24%	22%, 25%
Year	All Adults Percent	All Adults Confidence Intervals (LCL, UCL)																						
2013	26%	25%, 27%																						
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2016	23%	22%, 24%																						
2017	25%	24%, 26%																						
2018	24%	22%, 25%																						

Strategy 3.1.1 Provide affordable and accessible opportunities to be physically active, such as parks, trails, fitness events and recreational facilities, particularly in underserved communities.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Conservation and Natural Resources	<p>For the 2020-2024 Pa.'s Statewide Comprehensive Outdoor Recreation Plan, DCNR completed a new assessment with the Trust for Public Land. The new analysis shows:</p> <ul style="list-style-type: none"> <li>• 53 percent of Pennsylvanians have a 10-minute walk access to public recreational lands;</li> <li>• 82 percent of Pennsylvanians live within a 10-minute drive to a trailhead; and</li> <li>• 60 percent of Pennsylvanians live within a 10-minute drive to water access.</li> </ul>	Overweight/obesity Physical activity	

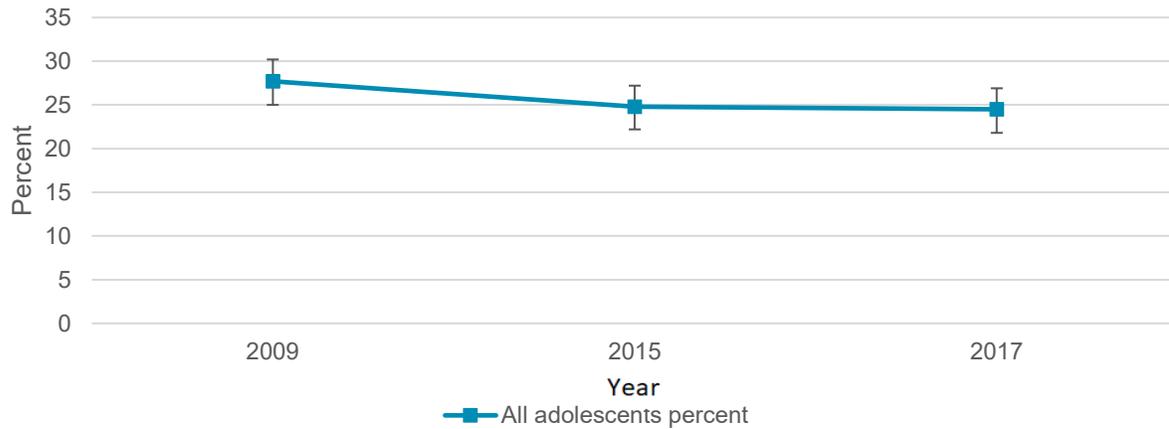
<sup>8</sup> Pennsylvania BRFSS  
<https://www.phaim1.health.pa.gov/EDD/WebForms/BRFSSstate.aspx>

<b>Strategy 3.1.2 Reduce barriers so that every Pennsylvania resident has equal access to local parks, school campuses and facilities, and outdoor recreation opportunities.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pa. Department of Conservation and Natural Resources	<p>DCNR announced 2018-2019 grants in fall 2018, supporting 39 trail projects that:</p> <ul style="list-style-type: none"> <li>• Funded 7 planning and design projects for 32 miles of new trails and address four trail gaps; and</li> <li>• Funded 19 trail projects that will help construct over 24 miles of new trails and address seven trail gaps.</li> </ul> <p>For local parks, DCNR supported 127 park projects to:</p> <ul style="list-style-type: none"> <li>• Rehabilitate 41 existing parks and develop 36 new park and recreation facilities; and</li> <li>• Add 53 accessible walkways/trails in local parks.</li> </ul>	Overweight/obesity Physical activity	 
<b>Strategy 3.1.3 Encourage walking and bicycling for transportation and recreation through improvements in the built environment.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
PennDOT	<p>During 2018-2019, PennDOT and DCNR celebrated the closing of two of Pennsylvania's Top 10 Trail Gaps. The new Mansion House Bridge – a 300-foot bridge across the Lehigh River in Jim Thorpe along the D&amp;L Trail now connects more than 90 miles of open trail. The rehabilitation of the 517-foot long Climax Tunnel on the Redbank Valley Trail, Clarion County, now provides a 40+ mile connected system.</p> <p>PennDOT awarded 25 projects that include active transportation component(s) in FY 2018/19 through the Multimodal Transportation Fund statewide program. Spanish translations of PennDOT's Bicycle Driver's Manual and a number of safety promotion tip cards were distributed for bike and pedestrians.</p> <p>WalkWorks, a DOH-funded program, has funded 10 new municipal entities during 2018-2019 to improve infrastructure for walking, biking and transit connections.</p>	Overweight/obesity Physical activity	 
<b>Strategy 3.1.4 Install up to 15 additional trail counters on trails across Pennsylvania by 2018 to measure progress towards PA's goal of expanding trail use by 5 percent by 2020.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pa. Department of Conservation and Natural Resources	The DCNR trail counter project tracks 30 trail counters. For those counters that have been tracked, trail usage increased from 2,526,103 in 2018 to 3,849,993 users in 2019.	Overweight/obesity Physical activity	 

**Objective 3.2: Increase percentage of Pennsylvania adolescents who are physically active daily from 28 percent in 2009 to 31 percent by December 2020.**

Status	Objective	Results	Health Determinant
	31 percent by December 2020	24.5 percent of adolescents are physically active daily in 2017 (22.1 LCL, 27.2 UCL). <sup>9</sup>	

Pennsylvania YRBSS: All Adolescents Who Are Physically Active Daily



**Strategy 3.2.1 Work with school boards, districts, principals and community partners to integrate physical activity into the culture of schools by offering ABCs (activity breaks for children), physical education and/or recess.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Education	No new activities.	Overweight/obesity Physical activity	

**Strategy 3.2.2 Work with PDE to review the Chapter 23 regulations and update the Pennsylvania State Standards for health, safety and physical education.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Education	Legislation has been introduced (HB 449) to require students in kindergarten through 5th grade to participate in a minimum of 150 minutes of physical education, and in 6th through 8th grade, a minimum of 225 minutes of physical education each school week. The bill has been referred to the House Education committee.	Overweight/obesity Physical activity	

**Strategy 3.2.3 Provide professional development to update physical education curriculum, including physical education for children with disabilities.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Education	No new activities.	Overweight/obesity Physical activity	

<sup>9</sup> Pennsylvania 2017 YRBSS Results  
<https://nccd.cdc.gov/youthonline/App/Results.aspx?LID=PA>

**Goal 4: Increase opportunities for access to and consumption of healthy foods and healthy beverages.**

<b>Objective 4.1: Increase the percentage of Pennsylvania adults who consume at least five servings of fruits and/or vegetables every day from 8 percent in 2017 to 9 percent by December 2019.*</b>			
<b>Status</b>	<b>Objective</b>	<b>Results</b>	<b>Health Determinant</b>
	9% by December 2020		

\*In 2017, the BFRSS fruit and vegetable module was changed. Subsequent reports will use 2017 as the baseline and will not compare to previous years.<sup>10</sup> The target has been updated to reflect the revised data and is for 2019, as this is an odd-year-only question.

<b>Strategy 4.1.1 Ensure low-income Pennsylvanians at risk of hunger have access to fruits and vegetables through programs.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pa. Department of Agriculture	No activities reported	Overweight/obesity Physical activity	
<b>Strategy 4.1.2 Increase access and promote fruits and vegetables and outreach in a variety of settings (e.g., community, home or school gardens, farm stands, urban agriculture, mobile markets, and healthy corner store initiatives).</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Bureau of Health Promotion and Risk Reduction, Pa. Department of Health	From July 1, 2018 through, June 30, 2019, there were 143 policy, environmental and system changes influenced and/or implemented in eight of the 10 county or municipal health departments' jurisdictions (Allegheny County, Allentown City, Bethlehem, Chester County, Erie County, Montgomery County, York City, and Wilkes-Barre City). This included increased access to fruits and vegetables; community, home or school gardens; farm stands; urban agriculture; mobile markets; and healthy corner store initiatives.	Overweight/obesity Physical activity	

<sup>10</sup> Centers for disease Control and Prevention. (2019). Using the New BRFSS Modules. <https://www.cdc.gov/nutrition/data-statistics/using-the-new-BRFSS-modules.html>

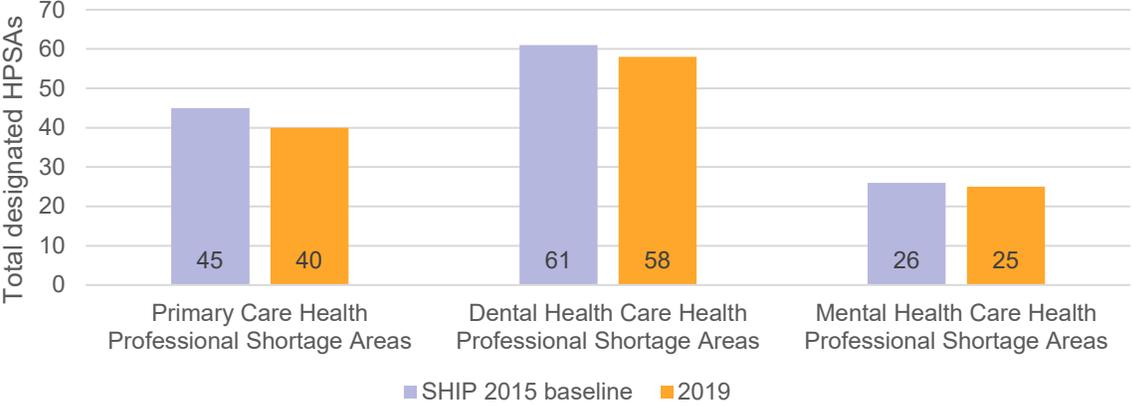
# Primary Care and Preventive Services

## Goal 1: Improve access to primary care services for Pennsylvanians.

**Objective 1.1: Reduce the number of federally designated Geographic and Population Health Professional Shortage Areas (HPSA) by 3 percent by December 2020:**  
**Primary care: from 45 to 43**  
**Dental: from 61 to 59**  
**Mental health: from 26 to 25**

Status	Objective	Results	Health Determinant
	Primary care: 43 Dental care: 59 Mental health: 25	Shortage designations lists <sup>11</sup> Primary care: 40 Dental care: 58 Mental health: 25	

**Pennsylvania HPSAs**



Category	SHIP 2015 baseline	2019
Primary Care Health Professional Shortage Areas	45	40
Dental Health Care Health Professional Shortage Areas	61	58
Mental Health Care Health Professional Shortage Areas	26	25

**Strategy 1.1.1 Increase community-based educational training tracts for primary care and dental health professions students in underserved areas.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Division of Health Professions Development, Pa. Department of Health	Nine primary care residency slots are being supported through a grant with the Pennsylvania Academy of Family Physicians, which is the same as last year.	Access to care Preventive care	

<sup>11</sup> Federally Designated Underserved Areas  
<https://www.health.pa.gov/topics/Health-Planning/Pages/Underserved-Areas.aspx>

Strategy 1.1.2 Expand access to care through primary care safety net facilities.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Bureau of Community Health Systems, Pa. Department of Health	For the 2017-2018 school year, in the most recent three-year school-based health care census, there were 2,055 full-time and 147 part-time certified school nurses (CSN) covering 3962 buildings. <sup>12</sup> Additionally, there were 1,854 supplemental staff, RNs, LPNs and those unlicensed assisting the CSNs covering 2,500 buildings.	Access to care Preventive care	
Strategy 1.1.3 Develop new models and expand on emerging models of health care workforce.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa Academy of Family Physicians	Medical schools with rural/underserved tracks include Lake Erie College of Osteopathic Medicine and Thomas Jefferson University.	Access to care Preventive care	

**Goal 2: Increase the number of Pennsylvania residents receiving preventive health care services.**

Objective 2.1: Under revision			
Status	Objective	Results	Health Determinant
To be determined.			

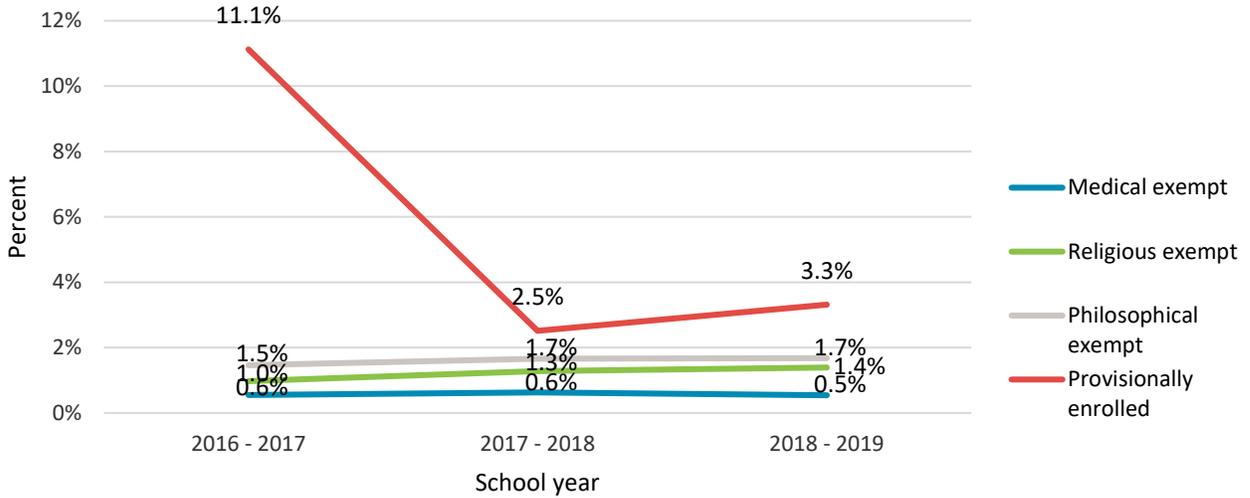
Strategy 2.1.2 Increase the number of providers participating in the Pennsylvania Patient and Provider Network (P3N) through a health information organization (HIO).			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. eHealth Partnership	From July 1, 2018, through June 30 2019, there were 135 new hospitals, physician practices and other providers connected to the P3N through HIOs.	Access to care	

<sup>12</sup> Pennsylvania Department of Health. School Health Annual Reimbursement Request System (SHARRS)

**Objective 2.2: Reduce the eight-month provisional enrollment period for children to receive all required school immunizations by December 2020.<sup>13</sup>**

Status	Objective	Results	Health Determinant
	Implement new regulation	The new regulation for a 5-day provisional enrollment period was implemented beginning Aug. 1, 2017.	

Pennsylvania School Immunizations, Grades K and 7 (Public and Private Schools)



**Strategy 2.2.1 Amend the school immunizations regulations to reduce or eliminate the provisional enrollment period.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Bureau of Communicable Diseases, Pa. Department of Health	The Pennsylvania Code was changed March 3, 2017, to reduce the provisional enrollment period for school students from 8 months to 5 days. This regulation was implemented for the 2017-2018 school year, resulting in a decrease in provisional enrollments but with a slight increase in philosophical and religious exemptions, as shown in the above figure.	Preventive care	 

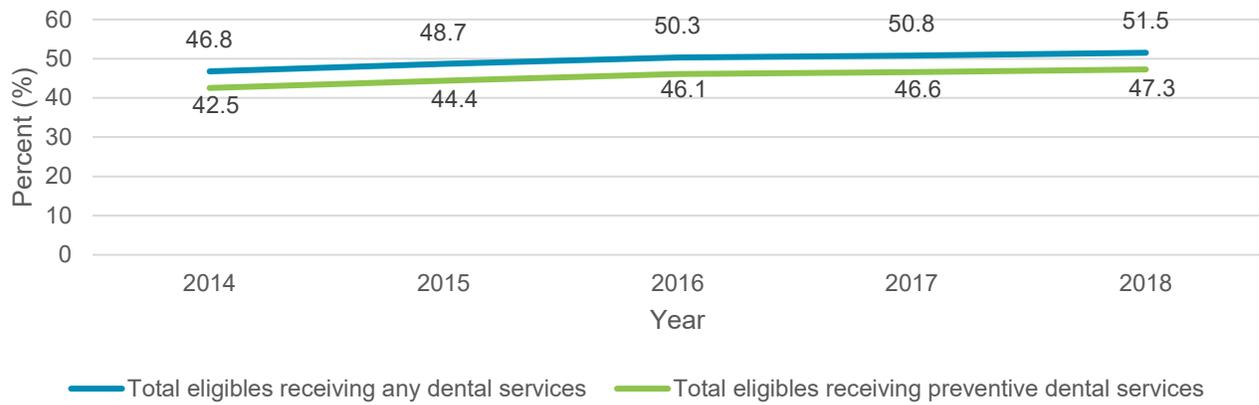
<sup>13</sup> School Immunization Rates, Pennsylvania Department of Health

**Objective 2.3: For youth ages 1 to 20 years old who are enrolled in Medicaid with at least 90 days of continuous eligibility, increase the percentage who have had a preventive dental service in the past year from 42.5 percent in FFY 2014 to 47 percent by December 2020.**

**New!** The PCPS task force has recommended adding an activity to increase any dental services, not just preventive dental services.

Status	Objective	Results	Health Determinant
	47 percent by 2020	47.3 percent in fiscal year 2018 <sup>14</sup>	

Dental visits for Pennsylvania Youth Ages 1 to 20 Years Old, Enrolled in Medicaid With at Least 90 Days of Continuous Eligibility



**Strategy 2.3.1 Increase access, utilization, and education of preventive dental services, through various modalities.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Coalition for Oral Health	Provider organizations are actively working in schools to provide primary oral health services. These include health systems, community organizations and school districts utilizing certified school dental hygienists.	Access to care Preventive care	

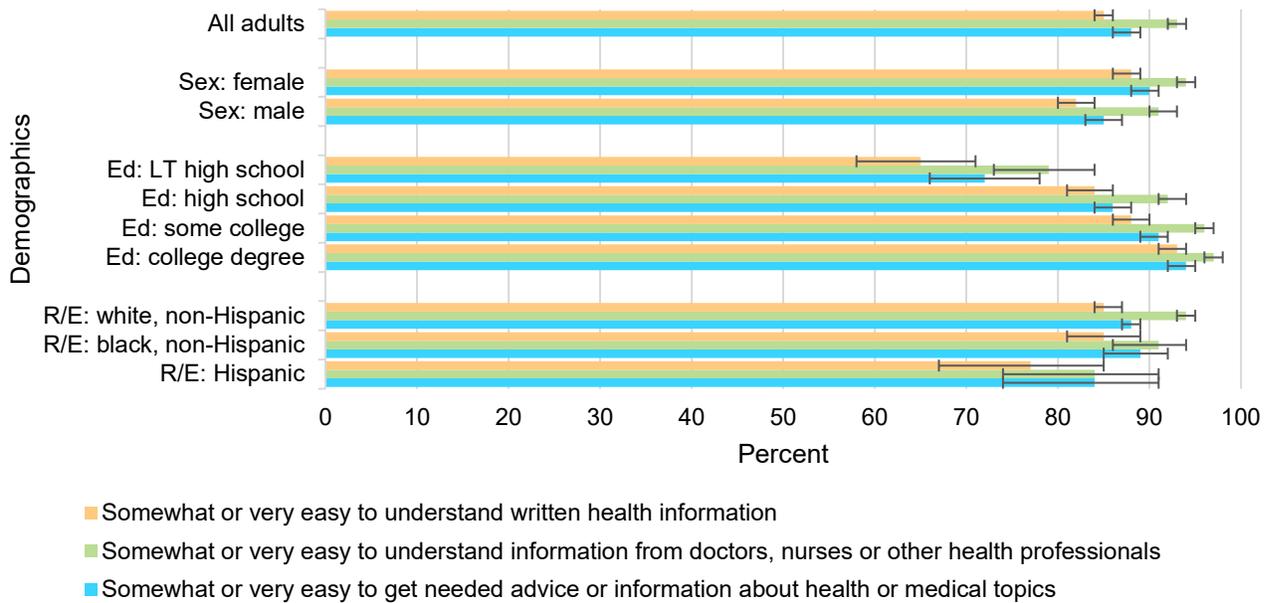
<sup>14</sup> Medicaid Early and Periodic Screening, Diagnostic, and Treatment FY2018 data  
<https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html>

**Goal 3: Improve health literacy (i.e., the capacity to obtain, process, and understand basic health information and services needed for informed health decision-making) of Pennsylvania residents.**

**Objective 3.1: Establish a method of determining the health literacy of Pennsylvania residents by December 2020.**

Status	Objective	Results	Health Determinant
	Establish a method of determining the health literacy of Pennsylvania residents by December 2020. <sup>15</sup>	The BRFSS health literacy module was included in the 2016 survey in Pennsylvania.	

2016 Pennsylvania BRFSS: Health Literacy



**Strategy 3.1.1 Develop a statewide health literacy coalition.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Health Care Improvement Foundation (HCIF)	<p>The Pennsylvania Health Literacy Coalition conference and annual meeting was held in Harrisburg on May 14 and 15, 2019, with 74 registrants. Sessions included:</p> <ul style="list-style-type: none"> <li>Communicating to Connect: Fundamentals of Health Literacy</li> <li>Designing Health Literate Materials</li> <li>Tools for Establishing a Culture of Health Literate Care</li> <li>Keynote presentation: “Promoting Health Literacy in Pennsylvania: 5 Things to Know”</li> <li>Principles of Motivational Interviewing</li> <li>Advancing Language Access and Working with Interpreters</li> </ul>	Health literacy	

<sup>15</sup> Pennsylvania BRFSS  
<https://www.phaim1.health.pa.gov/EDD/WebForms/BRFSSstate.aspx>

<b>Strategy 3.1.2 Increase capacity of organizations in Pennsylvania to address health literacy needs of patients and consumers.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Health Care Improvement Foundation (HCIF)	Sponsored and promoted provider training, serving populations with limited English proficiency, using motivational interviewing, best practices for integrating health literacy into the design and review of written resources and other topics	Health literacy	
<b>Strategy 3.1.3 Increase capacity of health care providers in Pennsylvania to communicate clearly with patients.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Health Care Improvement Foundation (HCIF)	HCIF reached 2,677 providers in Pennsylvania in FY18-19 to promote literacy through their annual meeting, trainings and communications.	Health literacy	
<b>Strategy 3.1.4 Increase capacity of and opportunities for patients and consumers to support and advocate for health literacy.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Health Care Improvement Foundation (HCIF)	A limited project with peer education in senior centers works with consumers and patients in Philadelphia.	Health literacy	
<b>Strategy 3.1.5 Review the initial Pennsylvania Health Access Network consumer literacy survey results for 2017 and determine outcome goals for subsequent years. (Revised Strategy for 2017)</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pennsylvania Health Access Network	No new activity reported	Health literacy	

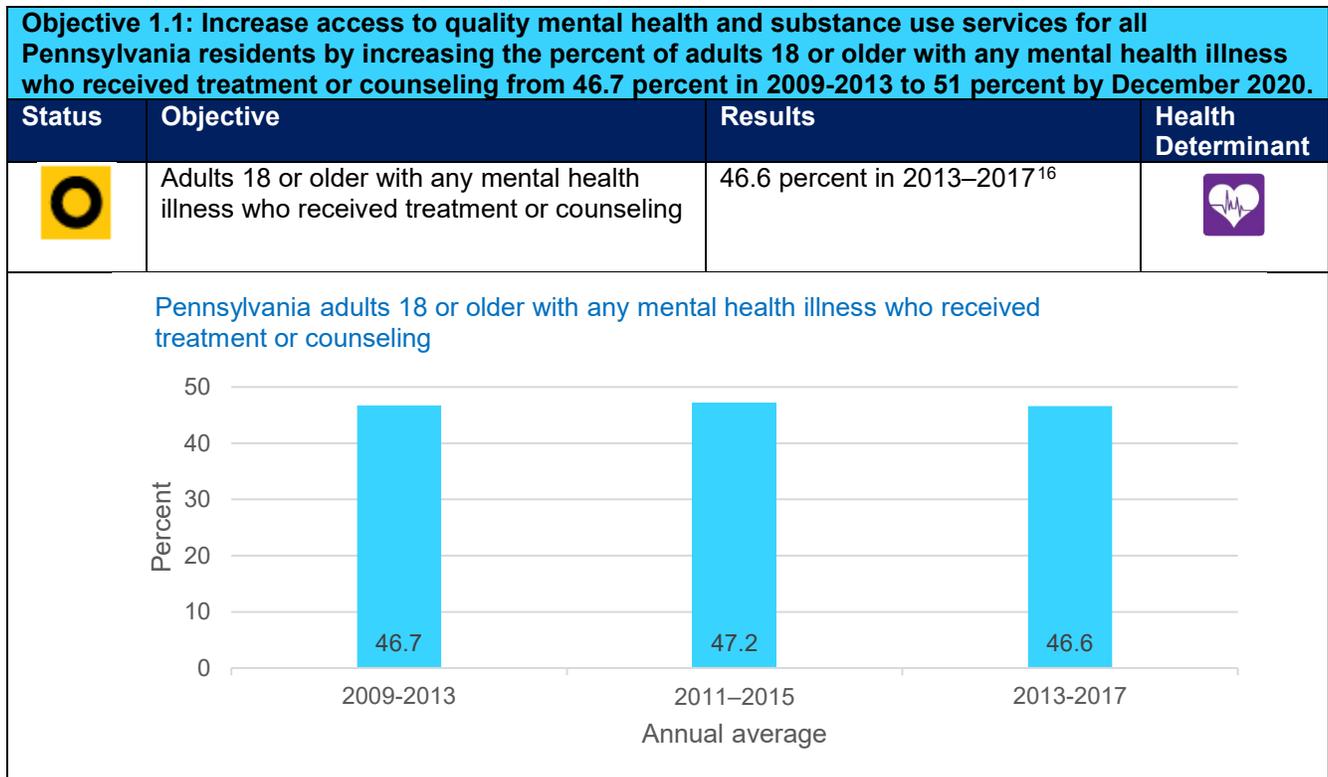
The TRAIN Learning Network had 29 courses related to health literacy available to the health workforce as of 2019. Powered by the Public Health Foundation, the TRAIN Learning Network brings together agencies and organizations in the public health, health care and preparedness sectors to disseminate, track and share trainings for the health workforce on a centralized training platform. The Pennsylvania Department of Health is a TRAIN affiliate.

**Figure 2: TRAIN Health Literacy Courses, 2019**

<b>Health Literacy Topic</b>	<b>Number of courses</b>
<b>Understanding/implementing/communicating</b>	16
<b>Culture/religion</b>	2
<b>Disaster preparedness</b>	1
<b>Behavioral/emotional/mental</b>	3
<b>Asthma</b>	1
<b>Health insurance</b>	3
<b>Financial</b>	1
<b>Deaf/hard of hearing</b>	1
<b>Oral health</b>	1

# Mental Health and Substance Use

**Goal 1: Pennsylvania residents will have access to the best practices in screening, support, assessment and treatment for mental health and substance use disorders in order to achieve and maintain optimal health outcomes.**



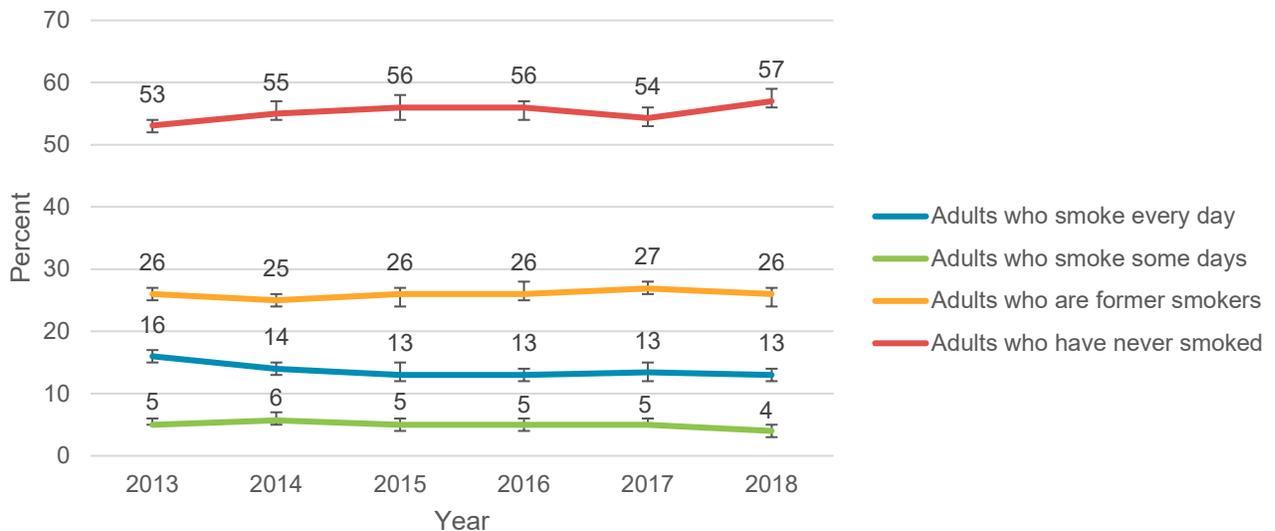
<b>Strategy 1.1.1 Develop appropriate partnerships to activate and leverage existing resources.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Division of Plan Development, Pa. Department of Health	The SHIP Mental Health and Substance Use Task Force had 51 members in 2017-2018 compared to 51 in 2016-2017.	Health status Behavioral health	
<b>Strategy 1.1.2 Promote consumer and system health literacy.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Health Care Improvement Foundation (HCIF)	The Health Literacy Coalition website had 540 website subscribers in 2019 compared to 519 at the end of fiscal year 2018.	Health status Behavioral health	
<b>Strategy 1.1.3 Support adoption of meaningful payment reform to optimize access to quality services.</b>			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Hospital and Healthsystem Association of Pennsylvania	No new activity was reported.	Access to care Behavioral health	

<sup>16</sup> Behavioral Health Barometer Pennsylvania, Volume 5, SAMHSA  
<https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/Pennsylvania-BH-BarometerVolume5.pdf>

Strategy 1.1.4 Adopt proposed Pennsylvania Code Chapter 5200 mental health outpatient clinic regulation changes by 2018.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Rehabilitation and Community Providers Association	No new activity was reported.	Access to care Behavioral health	
Strategy 1.1.5 Promote the use of the sexual orientation and gender identity (SOGI) module option in the 2018 BRFSS survey and determine outcome goals for subsequent years.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Bureau of Informatics and Information Technology, Pa. Department of Health	No new activity was reported.	Health status Behavioral health	

Objective 1.2: By December 2020: Decrease adults who smoke every day from 16.0 percent in 2013 to 11.3 percent. Decrease adults who smoke some days from 5.7 percent in 2013 to 4.4 percent. Increase adults who are former smokers from 26 percent in 2013 to 31.8 percent. Increase adults who have never smoked from 53 percent in 2013 to 57.6 percent.			
Status	Objective	Results	Health Determinant
	Decrease adults who smoke every day from 16% in 2013 to 11.3%.	13% in 2018 LCL 12, UCL 14	
	Decrease adults who smoke some days from 5.7% in 2013 to 4.4%.	4% in 2018 LCL 3, UCL 5	
	Increase adults who are former smokers from 26% in 2013 to 31.8%.	26% in 2018 LCL 24, UCL 27	
	Increase adults who have never smoked from 53% in 2013 to 57.6%.	57% in 2018 LCL 56, UCL 59	

Pennsylvania Adult Smoking



<b>Strategy 1.2.1 Increase access to evidence-based smoking cessation programs.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Division of Tobacco Prevention and Control, Pa. Department of Health	Between July 1, 2018, and June 30, 2019, 31,252 calls were made to 1-800-QUIT-NOW from Pennsylvania phone numbers, and 16,326 users requested services from the PA Free Quitline. Of those, 9,957 tobacco users enrolled in the PA Free Quitline, receiving at least one counseling call. Slightly more than three-fourth of enrollees received nicotine replacement therapy (NRT). Pennsylvania's Free Quitline six-month quit rate reached 31.3 percent. <sup>17</sup> Technical assistance has resulted in 282 new worksites adopting tobacco policy initiatives reaching 97,717 employees. During this timeframe, 70 new multi-unit housing sites adopted smoke free policies protecting 15,914 more residents from secondhand smoke. <sup>18</sup>	Health status Behavioral health	 
<b>Strategy 1.2.2 Establish tobacco cessation resources in eight medical care organizations, including behavioral providers, and begin building baseline data to measure progress in future years.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Division of Tobacco Prevention and Control, Pa. Department of Health	No new activity reported	Health status Behavioral health	 
<b>Strategy 1.2.3 Reduce the use of e-cigarettes or other electronic "vaping" through education programs.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Division of Tobacco Prevention and Control, Pa. Department of Health	From July 2018 to June 2019, Worksite Tobacco and Wellness Policy Index forms were completed by 198 worksites. Of these, 86 percent had improved index scores, and 49 percent of worksites had policies that prohibit the use of e-cigarettes or other "vaping" products. <sup>19</sup>	Health status Behavioral health	 

<sup>17</sup> MPOWER Annual Summary Report State Fiscal year 2018/2019, Pennsylvania Tobacco Prevention and Control Program

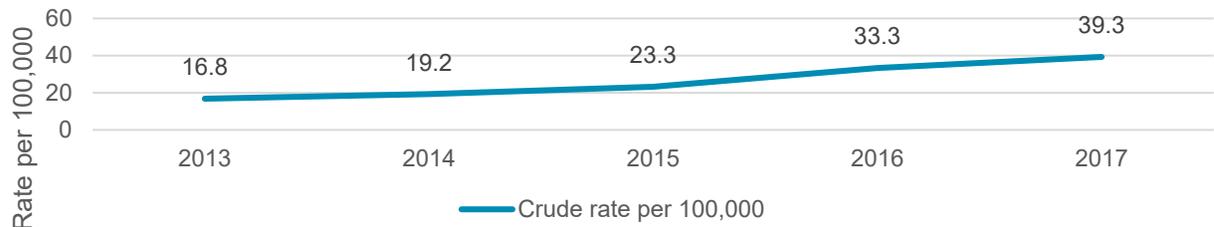
<sup>18</sup> MPOWER Annual Summary Report State Fiscal year 2018/2019, Pennsylvania Tobacco Prevention and Control Program

<sup>19</sup> MPOWER Annual Summary Report State Fiscal year 2018/2019, Pennsylvania Tobacco Prevention and Control Program

**Objective 1.3: For Pennsylvania adults and adolescents, decrease rate of deaths due to substance use from 16.8 per 100,000 in 2013 to 15.4 per 100,000 by December 2020.\***

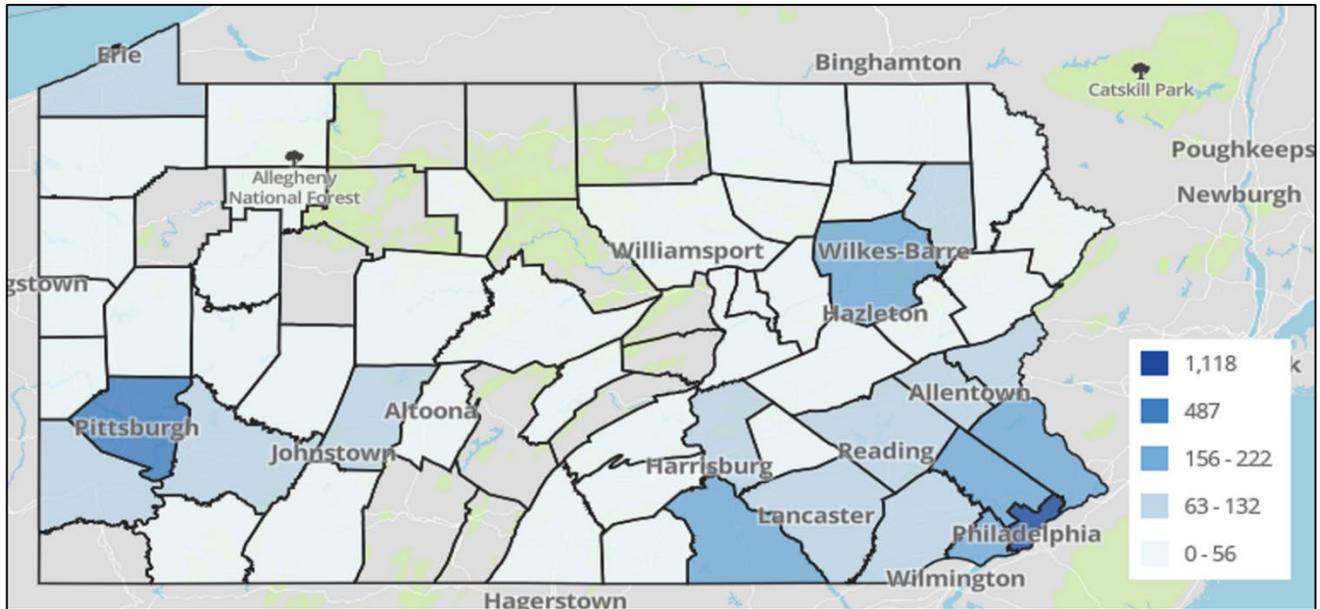
Status	Objective	Results	Health Determinant
	Decrease rate of deaths due to substance use from 16.8 per 100,000 in 2013 to 15.4 per 100,000 deaths	39.3 per 100,000 drug and alcohol poisonings listed as cause of death in 2017 <sup>20</sup>	

Pennsylvania Underlying Cause of Death (UCOD) Accidental Drug Poisoning (UCOD X40-X44) Accidental Poisoning by and Exposure to Alcohol (X45)



\*The measure for this objective was changed in 2017 to use UCOD X-40-X44 and X45 rather than “Accidental poisoning and exposure to noxious substances.” The revised baseline is 16.8 per 100,000 in 2013 crude death rate.

**Figure 4: Estimated Accidental and Undetermined Drug Overdose Deaths, 2017-2018 (any Drug)<sup>21</sup>**



<sup>20</sup> Pa. Office of Administration, Health and Human Services Delivery Center, Statistical Support for the Department of Drug and Alcohol Programs

<sup>21</sup> Commonwealth of Pennsylvania. Open Data.

<https://data.pa.gov/Opioid-Related/Estimated-Accidental-and-Undetermined-Drug-Overdos/apm5-9wfy>

<b>Strategy 1.3.1 Utilize screening, assessment and placement tools to determine emergent care needs (e.g., detoxification, prenatal care, perinatal care, psychiatric care), level of care needs (e.g., residential rehabilitation, outpatient, intensive outpatient) and any other needs an individual may have that might affect placement decisions.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pa. Department of Drug and Alcohol Programs	On July 1, 2018, the Pennsylvania Client Placement Criteria (PCPC) for Adults was phased out and the American Society of Addiction Medicine (ASAM) criteria for determining the most appropriate care for individuals with substance use disorders became mandatory.	Health status Behavioral health	 
<b>Strategy 1.3.2 Ensure the full continuum of care is available for individuals suffering from substance use disorder.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pa. Department of Drug and Alcohol Programs	Calls to the Get Help Now Intake Hotline starting the beginning of the week of 7/2/18 through the week of 6/30/19 averaged 309 calls per week, with 48% resulting in intakes by individuals seeking treatment. <sup>22</sup> The average rate of buprenorphine dispensation filled by pharmacies from July 1, 2018, through June 30, 2019, was 242.25 per 10,000 population. <sup>23</sup>	Health status Behavioral health	 
<b>Strategy 1.3.3 Promote public education and awareness for preventing prescription drug and opioid misuse, abuse and overdose.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Pa. Department of Drug and Alcohol Programs	No new activity	Health status Behavioral health	 
<b>Strategy 1.3.4 Reduce access to prescription drugs for misuse and abuse.</b>			
<b>Lead Organization</b>	<b>2018-2019 Achievements</b>	<b>Priority Issue</b>	<b>Sector</b>
Prescription Drug Monitoring Program	The rate of prescriptions for opioids (all schedules excluding buprenorphine) in Pennsylvania have decreased: 158.1 per 1,000 in 2018 quarter two compared to 181.4 per 1,000 in 2017 quarter two. This is a decrease of 298,990 prescriptions. <sup>24</sup> The Safe and Effective Prescribing Practices Task Force published one new opioid prescribing guideline for a total of 12. <sup>25</sup> The next guidelines to be developed are for opioid use disorder and sickle cell disease.	Health status Behavioral health	 

<sup>22</sup> Drug and Alcohol Treatment Get Help Now Intake Hotline November 2016 - Current Statewide Drug and Alcohol Programs, Open Data Pennsylvania

<https://data.pa.gov/Opioid-Related/Drug-and-Alcohol-Treatment-Get-Help-Now-Intake-Hot/7mj7-q4j6>

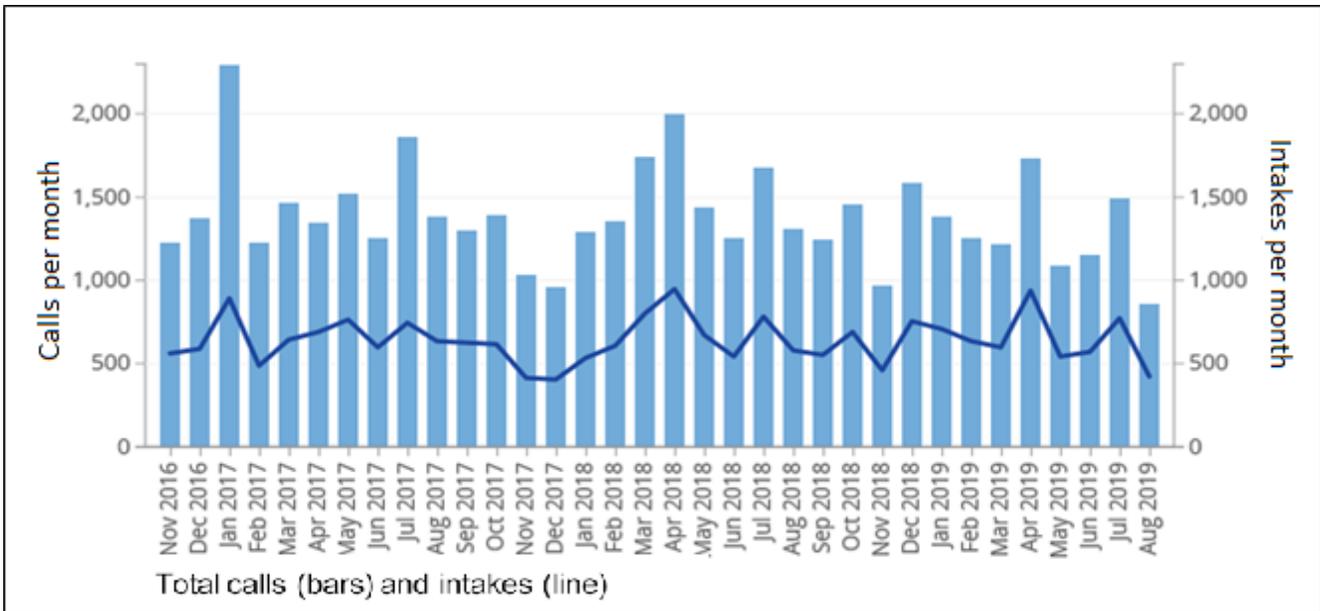
<sup>23</sup> Buprenorphine Dispensation Data Quarter 3 2016 through Current Statewide Health, Open Data Pennsylvania

<https://data.pa.gov/Opioid-Related/Buprenorphine-Dispensation-Data-Quarter-3-2016-Cur/6js5-2mjf/data>

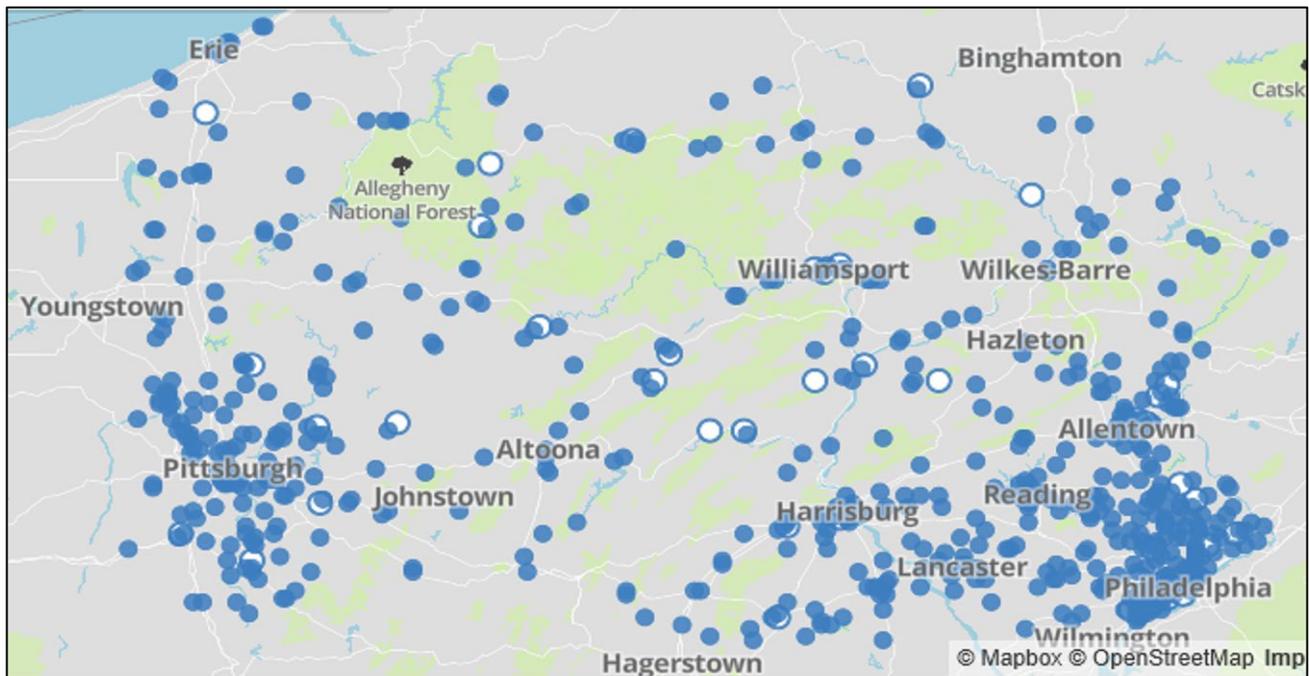
<sup>24</sup> Prescription Drug Monitoring Program Interactive Data Report  
<https://www.health.pa.gov/topics/programs/PDMP/Pages/Data.aspx>

<sup>25</sup> Pa. Department of Health. (2019). Opioid Prescribing Guidelines  
<https://www.health.pa.gov/topics/disease/Opioids/Pages/Prescribing-Guidelines.aspx>

**Figure 5: Get Help Now Hotline Calls and Intakes<sup>26</sup>**



**Figure 6: Prescription Drug Take-Back Box Locations, 2019<sup>27</sup>**



White dots indicate multiple sites.

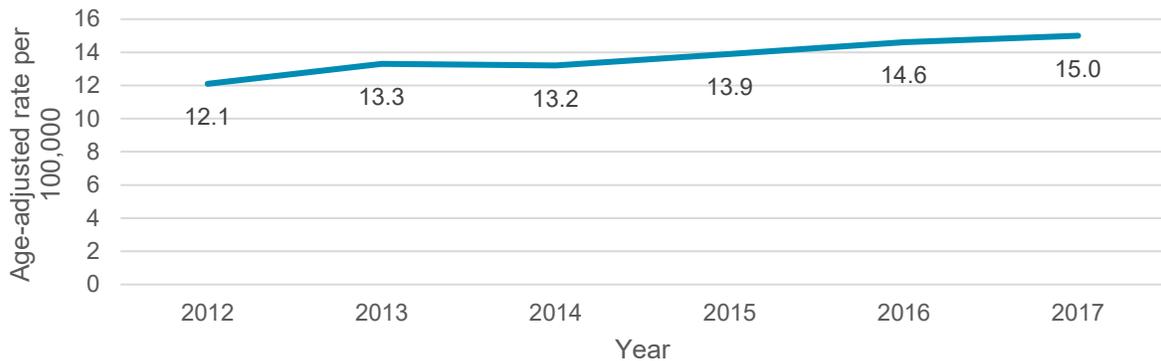
<sup>26</sup> Commonwealth of Pennsylvania. Open Data.  
<https://data.pa.gov/Opioid-Related/Hotline-Calls-and-Intakes/77us-ziyj>

<sup>27</sup> Commonwealth of Pennsylvania. Open Data.  
<https://data.pa.gov/Opioid-Related/Prescription-Drug-Take-Back-Box-Locations-Drug-and/rdfi-f4mf>

**Objective 1.4: Reduce the rate of suicides from 12.1 per 100,000 in 2012 to 10.9 per 100,000 in December 2020.**

Status	Objective	Results	Health Determinant
	10.9 per 100,000 in December 2020	15.0 suicides listed as cause of death per 100,000 deaths in 2017 <sup>28</sup>	

Underlying Cause of Death: Suicide (intentional self-harm)



**Strategy 1.4.1 Increase awareness of psychological distress symptoms and risk factors for suicide among all Pennsylvania residents.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Human Services	No new activity	Health status Behavioral health	 

**Strategy 1.4.2 Increase access to educational programs about suicide risk for all residents.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Human Services	The Erie Suicide Prevention Conference was held in September 2018, the Pa. Higher Education Suicide Prevention Coalition conference was held in March 2019 and the Prevent Suicide PA Conference was held in May 2019. The 2019 annual high school public service announcement contest for youth suicide prevention was held, and four posters, sixteen 60-second and 30-second videos, and three 30-second audios were chosen. Results are posted to the Prevent Suicide PA website. <sup>29</sup> Prevent Suicide PA utilizes social media sites on Facebook, Twitter and Instagram.	Health status Behavioral health	 

**Strategy 1.4.3 Increase the use of evidence-based tools to identify potential mental health and substance use concerns, as well as the influences of social determinants that affect the suicide rate.**

Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Human Services	There are currently 800 Question, Persuade, and Refer (QPR) training instructors in Pa., with 281 of these instructors trained through a grant from the National Network of Libraries of Medicine from July 1, 2018 through June 30, 2019.	Health status Behavioral health	 

<sup>28</sup> Pennsylvania Death Certificate Dataset  
<https://www.phaim1.health.pa.gov/EDD/WebForms/DeathCntySt.aspx>

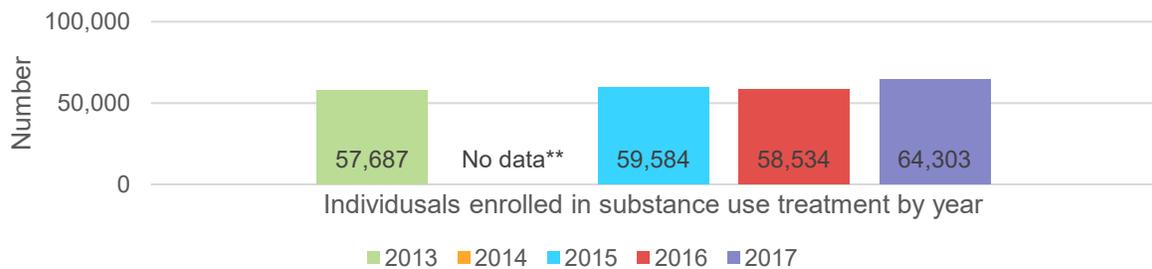
<sup>29</sup> <https://www.preventsuicidepa.org/>

Strategy 1.4.4 Increase access to available quality resources for those at risk for, or impacted by, suicide.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Human Services	No new activity	Health status Behavioral health	

**Objective 1.5: Increase the comfort level of Pennsylvania residents in discussing mental health and substance use problems with their health care providers, neighbors and community, as measured by an increase in the number of treatments for any mental illness from 46.7 percent in 2009-2013 to 54.7 by December 2020, plus a 20 percent increase in enrollment in substance use treatment by December 2020 and an increase from 57,687\* enrollees in 2013 to 69,260.**

Status	Objective	Results	Health Determinant
	Increase the comfort level of Pennsylvania residents in discussing mental health and substance use problems with their health care providers, neighbors and community, as measured by an increase in the number of treatments for any mental illness from 46.7% in 2009-2013 to 54.7% by December 2020, plus a 20% increase in enrollment in substance use treatment by December 2020, and an increase from 57,715 enrollees in 2013 to 69,260.	A single day count of individuals enrolled in substance use treatment in Pennsylvania in 2017 was 64,303, an 11.5 percent increase from 2013 (46.6% of the total population in 2013–2017) <sup>30</sup>	

Pennsylvania Number of Individuals Enrolled in Substance Use Treatment, Single-Day Counts



\*Number updated from most recent SAMHSA figures.

\*\*SAMHSA did not collect data for 2014.

Strategy 1.5.1 Address stigma among human resource professionals through training on mental illness and substance use, including the need to successfully reintegrate individuals affected by these illnesses into the workforce during and after recovery.			
Lead Organization	2018-2019 Achievements	Priority Issue	Sector
Pa. Department of Human Services	No activity reported	Health status Behavioral health	

<sup>30</sup> Behavioral Health Barometer Pennsylvania, Volume 5, SAMHSA  
<https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/Pennsylvania-BH-BarometerVolume5.pdf>

## Appendix A

### 2018-2019 Advisory Committee

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## Appendix B

### 2018-2019 Obesity, Physical Inactivity and Nutrition Task Force

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## Appendix C

### 2018-2019 Primary Care and Preventive Services Task Force

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Cindi Christ, Chief Operations Officer, Pennsylvania Association of Community Health Centers

Martin Ciccocioppo, Executive Director, Pa. eHealth Partnership Authority, Pa. Department of Health

Susan Cosgrove, Project Manager, Health Care Improvement Foundation

Jeanne Elberfeld, Schuylkill County's VISION

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## Appendix D

### 2018-2019 Mental Health and Substance Use Task Force

Lanae Ampersand, Clinical Program Manager, Psychiatry, Milton S. Hershey Medical Center  
Outpatient Psychiatry Clinic

Janet Bargh, Division Director, Division of Health Plans Development, Pa. Department of Health  
Erich Batra, Board of Directors, Prevent Suicide Pa.

Barbara Caboot, Section Chief, Division of Tobacco Prevention and Control, Pa. Department of  
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Shamit Chaki, Director, Crisis Response Center, Einstein Healthcare Network

Lynn Cooper, Assistant Director, Rehabilitation and Community Providers Association

Susan Cosgrove, Project Manager, Health Care Improvement Foundation

Barry L. Denk, Director, The Center for Rural Pa.

David Dinich, Administrator, Pa. Psychiatric Leadership Council

Kathryn Hartman, Tobacco Control Program Manager, Adagio Health

Matthew Hurford, Vice President of Medical Affairs for Community Care, Community Care Behavioral  
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Lisa Kramer, Director of Outpatient Services, Comhar Inc. Mental Health Center

Sharon Larson, Executive Director, Center for Population Health Research, Lankenau Institute for  
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Cyndi Malinen, Violence and Injury Prevention Program Section Chief, Health Promotion and Risk  
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Mark Milliron, Public Health Program Administrator, Division of Health Plans Development, Pa.  
Department of Health

Connell O'Brien, Administrator, Coalition for the CommonHealth

Mae O'Brien, Executive Director, Free Clinic Association of Pennsylvania

Angela Roebuck Health Coordinator Capital Area Head Start

Jared Shinabery, Assistant Director, Prescription Drug Monitoring Program

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