

State at a Glance: Maine

Overview

In February 2010, the [Centers for Medicare & Medicaid Services \(CMS\)](#) awarded grants to 10 States under a 5-year, \$100 million effort to improve health care quality and delivery systems for children enrolled in Medicaid and the Children's Health Insurance Program (CHIP). Funded by the [Children's Health Insurance Program Reauthorization Act of 2009 \(CHIPRA\)](#), the [Quality Demonstration Grant Program](#) aims to identify effective, replicable strategies for enhancing quality of care for children. Because some grantee States are partnering with other States, the grants will support the implementation and evaluation of quality improvement strategies for children in a total of 18 States under five broad categories.¹

As one of the 10 grantees, Maine is working with **Vermont** in a two-State partnership to implement projects in three of the five grant categories:

- Showing how a core set of children's quality measures can be used to improve quality of care for children.
- Promoting the use of health information technology (IT) to enhance service quality and care coordination.
- Implementing a more comprehensive provider-based model of service delivery.

Maine's Objectives

Maine's improvements on the reporting and use of the initial core set of children quality measures will build on its continuing efforts to integrate early and periodic screening, diagnosis, and treatment (EPSDT) data into pediatric electronic health records (EHRs). Its health IT project involves implementing an electronic comprehensive health assessment (CHA) for children in the State's foster care system. Maine will also extend current statewide efforts to promote medical homes by enhancing access to child-specific learning collaboratives for selected pediatric and child-serving practices.

Working with the Initial Core Set of Children's Quality Measures

Maine's goal is to enhance the State's current quality performance measurement and incentive payment systems to include children's quality measures, with the goals of: reducing unnecessary variation in pediatric care, aligning payment and financial incentives with these measures, and improving child health. This process will integrate [EPSDT Bright Futures](#) reporting to produce clinical measures not available through claims or registry data.

¹ The five categories are projects that (1) show how a core set of children's quality measures can be used to improve quality of care for children, (2) promote the use of health information technology to enhance service quality and care coordination, (3) implement new or more comprehensive provider-based models of service delivery, (4) demonstrate the impact of a model electronic health record format for children, and (5) test an approach to quality improvement of a State's own design.

Using Health IT to Improve Child Health Care Quality

Maine is promoting health IT usage with two approaches. The first involves collecting and reporting EPSDT/Bright Futures preventive measures from electronic clinical records and linking data systems within [Maine's Department of Health and Human Services](#) to child-serving practices and health systems. The State is developing infrastructure to receive clinical data from health systems and to pilot e-measure specifications to ultimately enhance data collection alignment, coordination, and planning.

Second, Maine will design, implement, and evaluate a CHA for children in Maine's foster care system. Through this automated system, information will be available to key health and social service providers with secure access regarding preparation and availability of the CHA. To assist in this effort, Maine has assembled a work group consisting of multiple stakeholders.

Assessing a Provider-Based Model of Care

Maine is building on the State's ongoing Patient-Centered Medical Home (PCMH) pilot program that began prior to the CHIPRA award. It involves 22 adult and four pediatric practices, all of which are participating in medical home-focused learning collaboratives. The CHIPRA grant award provides additional support for pediatric-specific learning sessions, automating Bright Futures in pediatric practices' EHRs, and developing a standardized list of quality measures. The four PCMH pediatric practices have volunteered to (1) track selected measures, (2) pilot Bright Futures in EHRs, and (3) participate in the learning sessions.

Evaluation Questions

The national evaluation team will gather information from Maine to address a wide range of questions about the implementation and outcomes of their efforts including:

- How has standardizing pediatric quality measures affected provider operations and performance?
- How did Maine integrate data on EPSDT services into pediatric EHRs?
- To what extent were Maine's efforts to enhance the child focus of its ongoing medical home project successful in improving the quality of health care for children?
- What are the key lessons from Maine's experience that would be useful for other States?

Learn More

This information is current as of March 2012, slightly more than 2 years after the grant award. To learn more about the projects that Maine is implementing under the CHIPRA Quality Demonstration Grant Program, please contact:

Joanie Klayman, LCSW, CHIPRA Project Director
Cutler Institute for Health and Social Policy
Muskie School of Public Service, University of Southern Maine
P.O. Box 9300, Portland, Maine 04104-9300
207-780-4202
jklayman@usm.maine.edu

To learn more about the national evaluation of the CHIPRA Quality Demonstration Grant Program, visit the evaluation's Web page at <http://www.ahrq.gov/chipra/demoeval> or send an email to CHIPRADemoEval@ahrq.hhs.gov.