State at a Glance: Utah

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, Utah is working with its partner Idaho to implement projects in three of the five grant categories:

- 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.
- Testing an approach to quality improvement of a State’s own design.

Utah’s Objectives

Utah is working to improve quality of care for all children, with particular emphasis on children with special health care needs (CSHCN). Under the demonstration, Utah will: (1) implement a strategy to improve the child health IT infrastructure in the State, (2) help practices transform into medical homes, and (3) foster collaboration among child-serving practices engaged in quality improvement activities.

Using Health IT to Improve Child Health Care Quality

Utah is implementing a multifaceted health IT strategy aimed at improving quality measurement and enhancing care coordination. As part of the strategy, Utah will pilot HealthInsight’s Practice Analytics, software that extracts and reports quality measures directly from a provider’s electronic health record (EHR); develop and pilot the Pediatric Patient Summary, a secure, Web-based application that summarizes information available in the State health information exchange (HIE) for a given child with complex conditions that can be updated, as appropriate, by providers and families; and improve the Medical Home Portal, an online resource that providers and family members may use to gain information on care for chronic conditions and to identify community resources and services for CSHCN. Utah and Idaho also will connect their HIEs and create interfaces between them and public health information systems, including the Utah Statewide Immunization Information System (USIIS) and Newborn Screening Program database. In addition, Utah will help practices participating in their medical home project access the EHR at the region’s sole pediatric tertiary facility and the EHR’s secure communication tool, the “Message Log.”

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.
Assessing a Provider-Based Model of Care

Utah is working with nine pediatric primary care practices and three subspecialty practices to support them in becoming effective medical home teams and in providing high quality and coordinated care in partnership with patients and families and with particular attention to CSHCN. Participating practices have a part-time medical home coordinator employed by the State and embedded in their practice, who will participate in learning collaborative sessions and work with a family partner. The shared services model will support care coordination, practice coaching, quality improvement, and family partner coordination.

Testing an Approach to Quality improvement of Utah’s Own Design

As part of the National Improvement Partnership Network (NIPN), Utah is building a coalition of providers engaged in quality improvement. Utah will offer learning collaboratives on various topics, such as physical and behavioral health integration, to engage physician practices in improving quality of care and will develop a curriculum for pediatric residents focused on the medical home and continuous quality improvement. Utah also will hold cross-State collaborative meetings with Idaho’s improvement partnership on several topics, including resolving the challenges of collecting the core set of children’s quality measures.

Evaluation Questions

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

- How were cross-State connections developed between the Utah and Idaho HIEs?
- Did the Utah medical home project enhance quality of care for children?
- To what extent did the cross-State Utah and Idaho improvement partnerships enhance quality of care for the region’s children?
- What are the key lessons from Utah’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 grant award. To learn more about the projects that are being implemented in Utah under the CHIPRA Quality Demonstration Grant Program, please contact:

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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.