

## State at a Glance: Idaho

### 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.<sup>1</sup>

Idaho is working with **Utah**, one of the 10 grantees, in a two-State partnership 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.

### Idaho’s Objectives

Idaho is working to improve quality of care for all children, with particular emphasis on children with special health care needs (CSHCN). Under the demonstration, Idaho 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*

Idaho is implementing a multifaceted health IT strategy aimed at improving quality measurement and enhancing care coordination. As part of the strategy, Idaho will take advantage of Utah’s pilot of HealthInsight’s Practice Analytics—software that extracts and reports quality measures directly from a provider’s electronic health record (EHR). Idaho will also contribute content to 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. Idaho and Utah also will connect their health information exchanges (HIEs) and create interfaces between them and public health information systems leading to better communication and more efficient care.

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<sup>1</sup> 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*

Idaho is working with two pediatric primary care practices and one subspecialty practice 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 participates in learning collaborative sessions and works with a family partner. The shared services model will support care coordination, practice coaching, quality improvement, and family partner coordination. Idaho's medical home model will be implemented after Utah's and will build on the lessons learned from that State's implementation experience.

### *Testing an Approach to Quality Improvement of Idaho's Own Design*

As part of the [National Improvement Partnership Network \(NIPN\)](#), Idaho is working to build a coalition of providers engaged in quality improvement activities. In support of this goal, Idaho will establish an improvement partnership with public and private stakeholders and hold cross-State collaborative meetings with Utah's improvement partnership on several topics, including collecting the initial core set of children's quality measures. Idaho will establish a network of physicians interested in working together to improve quality of care and identify priority areas for quality improvement, such as physical and behavioral health integration, while holding learning sessions to help practices improve in selected areas.

### **Evaluation Questions**

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

- How were cross-State connections developed between the Idaho and Utah HIEs?
- Did the Idaho 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 Idaho'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>.