State at a Glance: Vermont

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]

Vermont is working with **Maine**, 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.

Vermont's Objectives

Using Health IT to Improve Child Health Care Quality

Vermont's health IT initiatives are tightly integrated with, and designed to support, its provider-based model improvement project. The State's goal is to improve the collection and use of child health quality information by expanding the **Vermont Blueprint for Health** IT infrastructure to support guideline-based care, performance measurement, population management, and coordination with community-based services for the child population. The demonstration involves expanding the State's Web-based, central clinical registry to include "visit planners," reflecting the current care guidelines for preventive services, asthma, attention-deficit/hyperactivity disorder (ADHD), and obesity and collecting performance measures in these four areas. A Visit Planner is a summary of all needed services for a given patient used by the physician at the point of care.

Assessing a Provider-Based Model of Care

Vermont is extending the *Blueprint for Health* advanced primary care practice model and evaluating its impact in child-serving primary care practices. As of 2011, 11 pediatric and 4 family practices have undergone the **National Committee for Quality Assurance (NCQA)** Patient-centered Medical Home (PCMH) assessments. To support the practices and their involvement in *Blueprint* activities and quality

[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.

improvement efforts, Vermont has assigned practice facilitators to: (1) assist practices in obtaining NCQA recognition; (2) facilitate conversations among providers, *Blueprint* leaders, and community health teams (CHT) in order to identify and address needs in the child population; (3) support adoption of electronic health records (EHRs) and connectivity to the central registry; and (4) identify topics for ongoing quality improvement.

Testing an Approach to Quality Improvement of Vermont's Own Design

Vermont aims to support 20 States, including Maine, in development of a sustainable State Improvement Partnership (IP) and to evaluate the IP model as a replicable, sustainable vehicle to effect measureable improvements in the quality of children's health care. The proposed IP model and national network of IP States, the **National Improvement Partnership Network (NIPN)**, are designed to support within and cross-State collaboration, respectively; accelerate translation of evidence-based strategies to children's health care delivery; and provide an innovative approach to test, share, and learn about strategies to reduce redundancies and costs in the Medicaid program while improving the quality of health care for children.

Evaluation Questions

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

- How did Vermont expand its State data infrastructure to incorporate more data on children?
- To what extent did Vermont's efforts to build on its existing *Blueprint* succeed in improving the quality of health care for children?
- Have Improvement Partnerships (IPs) made measurable improvements in the quality of children's health care?
- What are the key lessons from Vermont'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 being implemented in Vermont 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**.