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**State/Territory Name: Idaho**

**State Plan Amendment (SPA) # 25-0003**

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# ID - Submission Package - ID2025MS00020 - (ID-25-0003) - Health Homes

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DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Medicaid & CHIP Operations Group  
601 E. 12th St.  
Room 355  
Kansas City, MO 64106



## Center for Medicaid & CHIP Services

April 22, 2025

Juliet Charron  
Deputy Director, Medicaid & Behavioral Health, Idaho Department of Health  
and Welfare  
Idaho Department of Health and Welfare  
450 West State Street PTC Building  
10th Floor  
Boise, ID 83705

Re: Approval of State Plan Amendment ID-25-0003

Dear Juliet Charron,

On March 31, 2025, the Centers for Medicare and Medicaid Services (CMS) received Idaho State Plan Amendment (SPA) ID-25-0003 for Intellectual Disability/Mental Illness (ID/MI) Health Home to provide assurance that it will report to CMS information to include applicable mandatory Core Set measures submitted by Health Home providers in accordance with all requirements in 42 CFR §§ 437.10 through 437.15.

We approve Idaho State Plan Amendment (SPA) ID-25-0003 with an effective date(s) of January 01, 2025.

If you have any questions regarding this amendment, please contact Courtenay Savage at [courtenay.savage@cms.hhs.gov](mailto:courtenay.savage@cms.hhs.gov)

Sincerely,  
Ruth A. Hughes, on behalf of  
Courtney Miller, MCOG Director  
Center for Medicaid & CHIP Services

# ID - Submission Package - ID2025MS0002O - (ID-25-0003) - Health Homes

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## Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ID2025MS0002O | ID-25-0003 | Intellectual Disability/Mental Illness (ID/MI) Health Home

CMS-10434 OMB 0938-1188

### Package Header

Package ID	ID2025MS0002O	SPA ID	ID-25-0003
Submission Type	Official	Initial Submission Date	3/31/2025
Approval Date	04/22/2025	Effective Date	N/A
Superseded SPA ID	N/A		

### State Information

State/Territory Name:	Idaho	Medicaid Agency Name:	Idaho Department of Health and Welfare
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### Submission Component

- ☒ State Plan Amendment
- ☒ Medicaid
- ☐ CHIP

## Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ID2025MS0002O | ID-25-0003 | Intellectual Disability/Mental Illness (ID/MI) Health Home

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<b>Approval Date</b>	04/22/2025	<b>Effective Date</b>	N/A
<b>Superseded SPA ID</b>	N/A		

### SPA ID and Effective Date

**SPA ID** ID-25-0003

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Monitoring, Quality Measurement and Evaluation	1/1/2025	ID-23-0001

# Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ID2025MS0002O | ID-25-0003 | Intellectual Disability/Mental Illness (ID/MI) Health Home

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<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	3/31/2025
<b>Approval Date</b>	04/22/2025	<b>Effective Date</b>	N/A
<b>Superseded SPA ID</b>	N/A		

## Executive Summary

**Summary Description Including Goals and Objectives** The amendment is to update Core Set Reporting assurance language.

## Federal Budget Impact and Statute/Regulation Citation


### Federal Budget Impact

	Federal Fiscal Year	Amount
First	2025	\$0
Second	2026	\$0

### Federal Statute / Regulation Citation

42 CFR Part 431  
42 CFR Part 437

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
ID-25-0003_CoreSetReportingAssurance_CoverLetter_signed	3/31/2025 8:04 PM EDT	

# Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ID2025MS00020 | ID-25-0003 | Intellectual Disability/Mental Illness (ID/MI) Health Home

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<b>Package ID</b>	ID2025MS00020	<b>SPA ID</b>	ID-25-0003
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<b>Approval Date</b>	04/22/2025	<b>Effective Date</b>	N/A
<b>Superseded SPA ID</b>	N/A		

## Governor's Office Review

- ☒ No comment
- ☐ Comments received
- ☐ No response within 45 days
- ☐ Other

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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## Health Homes Monitoring, Quality Measurement and Evaluation

MEDICAID | Medicaid State Plan | Health Homes | ID2025MS0002O | ID-25-0003 | Intellectual Disability/Mental Illness (ID/MI) Health Home

CMS-10434 OMB 0938-1188

### Package Header

Package ID	ID2025MS0002O	SPA ID	ID-25-0003
Submission Type	Official	Initial Submission Date	3/31/2025
Approval Date	04/22/2025	Effective Date	<u>1/1/2025</u>
Superseded SPA ID	ID-23-0001		
	System-Derived		

### Monitoring

**Describe the state's methodology for calculating cost saving (and report cost savings annually in Quality Measure Report). Include savings that result from improved coordination of care and chronic disease management achieved through the Health Homes Program, including data sources and measurement specifications, as well as any savings associated with dual eligibles, and if Medicare data was available to the state to utilize in arriving at its cost-savings estimates:**

Idaho calculates and monitors cost savings through several mechanisms. For participants with an established Medicaid claim history, cost savings data is calculated by comparing current year Medicaid and general fund dollars spent with historical Medicaid and general fund costs for participants.

For participants without established claims history, the state will determine a projected service utilization using data from participants with similar presentation and symptoms to ascertain the cost avoidance achieved through the Health Home intervention.

In addition, Idaho will include an analysis of participant outcomes to demonstrate the value provided through the Health Homes (employment, housing stability, etc.).

**Describe how the state will use health information technology in providing Health Homes services and to improve service delivery and coordination across the care continuum (including the use of wireless patient technology to improve coordination and management of care and patient adherence to recommendations made by their provider).**

The State Medicaid Agency will require that Health Homes providers (team and partners who have a linkage agreement) use an operational automated client record keeping system to support the delivery of Health Home services. This record will be prescribed by the state and will include all elements of a participant's individualized care plan and service documentation.

The enables real time access to data and data sharing (with appropriate permissions) among the participant, the Health Home team, partner agencies and the state to ensure a comprehensive, whole-person record of support. Additionally, the system will include critical health information including pharmacology to ensure complete integration of physical health, behavioral health and long-term services and supports.

# Health Homes Monitoring, Quality Measurement and Evaluation

MEDICAID | Medicaid State Plan | Health Homes | ID2025MS00020 | ID-25-0003 | Intellectual Disability/Mental Illness (ID/MI) Health Home

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System-Derived			

## Quality Measurement and Evaluation

- ☒ The state provides assurance that all Health Homes providers report to the state on all applicable quality measures as a condition of receiving payment from the state.
- ☒ The state provides assurance that it will identify measureable goals for its Health Homes model and intervention and also identify quality measures related to each goal to measure its success in achieving the goals.
- ☒ The state provides assurance that it will report to CMS information to include applicable mandatory Core Set measures submitted by Health Home providers in accordance with all requirements in 42 CFR §§ 437.10 through 437.15 no later than state reporting on the 2024 Core Sets, which must be submitted and certified by December 31, 2024 to inform evaluations, as well as Reports to Congress as described in Section 2703(b) of the Affordable Care Act and as described by CMS. In subsequent years, states must report annually, by December 31st, on all measures on the applicable mandatory Core Set measures that are identified by the Secretary.
- ☒ The state provides assurance that it will track avoidable hospital readmissions and report annually in the Quality Measures report.

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