

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
Women/Maternal Health					
<p>Increase percent of women accessing prenatal and well-woman health care</p>	<p>By September 2025, increase the number of women who are linked to routine well-woman care, including prenatal care during the first trimester.</p>	<p>Through collaboration with the Family Planning Program, increase pre- and inter-conception education and referrals to prenatal care and well-woman care using One Key Question® (OKQ).</p> <p>Provide funding to the Family Planning Program to support reproductive health services and provision of contraception.</p>	<p>ESM WWV.1 - Percentage of women assessed for pregnancy intention using One Key Question</p>	<p>NPM - Percent of women, ages 18 through 44, with a preventive medical visit in the past year (Well-Woman Visit, Formerly NPM 1) - WWV</p>	<p>NOM - Rate of severe maternal morbidity per 10,000 delivery hospitalizations (Severe Maternal Morbidity, Formerly NOM 2) - SMM</p> <p>NOM - Maternal mortality rate per 100,000 live births (Maternal Mortality, Formerly NOM 3) - MM</p> <p>NOM - Percent of low birth weight deliveries (<2,500 grams) (Low Birth Weight, Formerly NOM 4) - LBW</p> <p>NOM - Percent of preterm births (<37 weeks) (Preterm Birth, Formerly NOM 5) - PTB</p> <p>NOM - Percent of early term births (37, 38 weeks) (Early Term Birth, Formerly NOM 6) - ETB</p> <p>NOM - Perinatal mortality rate per 1,000 live births plus fetal deaths (Perinatal Mortality, Formerly NOM 8) - PNM</p> <p>NOM - Infant mortality rate per 1,000 live births (Infant Mortality, Formerly NOM 9.1) - IM</p>

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					<p>NOM - Neonatal mortality rate per 1,000 live births (Neonatal Mortality, Formerly NOM 9.2) - IM-Neonatal</p> <p>NOM - Post neonatal mortality rate per 1,000 live births (Postneonatal Mortality, Formerly NOM 9.3) - IM-Postneonatal</p> <p>NOM - Preterm-related mortality rate per 100,000 live births (Preterm-Related Mortality, Formerly NOM 9.4) - IM-Preterm Related</p> <p>NOM - Percent of women who drink alcohol in the last 3 months of pregnancy (Drinking during Pregnancy, Formerly NOM 10) - DP</p> <p>NOM - Rate of neonatal abstinence syndrome per 1,000 birth hospitalizations (Neonatal Abstinence Syndrome, Formerly NOM 11) - NAS</p> <p>NOM - Teen birth rate, ages 15 through 19, per 1,000 females (Teen Births, Formerly NOM 23) - TB</p> <p>NOM - Percent of women who experience postpartum depressive symptoms following a recent live birth (Postpartum Depression,</p>

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<p>Support services, programs, and activities that promote safe and healthy family functioning</p>	<p>By September 2025, annually implement the legislatively required MMRC to review maternal deaths in Idaho and offer recommendations for prevention.</p>	<p>Lead implementation, operation, and facilitation of Idaho’s Maternal Mortality Review Committee (MMRC) with the goal of advancing maternal health and eliminating preventable causes of maternal mortality and morbidity.</p>	<p>ESM WWW.1 - Percentage of women assessed for pregnancy intention using One Key Question</p>	<p>NPM - Percent of women, ages 18 through 44, with a preventive medical visit in the past year (Well-Woman Visit, Formerly NPM 1) - WWW</p>	<p>Formerly NOM 24) - PPD</p> <p>NOM - Rate of severe maternal morbidity per 10,000 delivery hospitalizations (Severe Maternal Morbidity, Formerly NOM 2) - SMM</p> <p>NOM - Maternal mortality rate per 100,000 live births (Maternal Mortality, Formerly NOM 3) - MM</p> <p>NOM - Percent of low birth weight deliveries (<2,500 grams) (Low Birth Weight, Formerly NOM 4) - LBW</p> <p>NOM - Percent of preterm births (<37 weeks) (Preterm Birth, Formerly NOM 5) - PTB</p> <p>NOM - Percent of early term births (37, 38 weeks) (Early Term Birth, Formerly NOM 6) - ETB</p> <p>NOM - Perinatal mortality rate per 1,000 live births plus fetal deaths (Perinatal Mortality, Formerly NOM 8) - PNM</p> <p>NOM - Infant mortality rate per 1,000 live births (Infant Mortality, Formerly NOM 9.1) - IM</p> <p>NOM - Neonatal mortality rate per 1,000 live births (Neonatal Mortality, Formerly NOM 9.2) - IM-Neonatal</p>

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					<p>NOM - Post neonatal mortality rate per 1,000 live births (Postneonatal Mortality, Formerly NOM 9.3) - IM-Postneonatal</p> <p>NOM - Preterm-related mortality rate per 100,000 live births (Preterm-Related Mortality, Formerly NOM 9.4) - IM-Preterm Related</p> <p>NOM - Percent of women who drink alcohol in the last 3 months of pregnancy (Drinking during Pregnancy, Formerly NOM 10) - DP</p> <p>NOM - Rate of neonatal abstinence syndrome per 1,000 birth hospitalizations (Neonatal Abstinence Syndrome, Formerly NOM 11) - NAS</p> <p>NOM - Teen birth rate, ages 15 through 19, per 1,000 females (Teen Births, Formerly NOM 23) - TB</p> <p>NOM - Percent of women who experience postpartum depressive symptoms following a recent live birth (Postpartum Depression, Formerly NOM 24) - PPD</p>
Decrease substance abuse among maternal and child health	By September 2025, increase the percentage of pregnant women, postpartum women or their household members who have quit smoking or decreased the number	<p>In collaboration with the Idaho Tobacco Prevention and Control Program, increase referrals to smoking cessation services for pregnancy women and women of reproductive age.</p> <p>In collaboration with the Idaho Tobacco Prevention and Control Program,</p>	ESM SMK-Pregnancy.1 - Percentage of pregnant women, postpartum women,	NPM - Percent of women who smoke during pregnancy (Smoking - Pregnancy, Formerly NPM 14.1) - SMK-Pregnancy	NOM - Rate of severe maternal morbidity per 10,000 delivery hospitalizations (Severe Maternal Morbidity, Formerly NOM 2) - SMM

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populations	of cigarettes smoked in the past 12 months.	<p>promote the use of Nicotine-Replacement Therapy (NRT) for women of reproductive age enrolled in cessation services.</p> <p>In collaboration with the Idaho Tobacco Prevention and Control Program, implement an evidence-based, incentive-driven smoking cessation program for pregnant and postpartum women across the state.</p>	and their partners who quit smoking through participation in an incentive-based smoking cessation program		<p>NOM - Maternal mortality rate per 100,000 live births (Maternal Mortality, Formerly NOM 3) - MM</p> <p>NOM - Percent of low birth weight deliveries (<2,500 grams) (Low Birth Weight, Formerly NOM 4) - LBW</p> <p>NOM - Percent of preterm births (<37 weeks) (Preterm Birth, Formerly NOM 5) - PTB</p> <p>NOM - Percent of early term births (37, 38 weeks) (Early Term Birth, Formerly NOM 6) - ETB</p> <p>NOM - Perinatal mortality rate per 1,000 live births plus fetal deaths (Perinatal Mortality, Formerly NOM 8) - PNM</p> <p>NOM - Infant mortality rate per 1,000 live births (Infant Mortality, Formerly NOM 9.1) - IM</p> <p>NOM - Neonatal mortality rate per 1,000 live births (Neonatal Mortality, Formerly NOM 9.2) - IM-Neonatal</p> <p>NOM - Post neonatal mortality rate per 1,000 live births (Postneonatal Mortality, Formerly NOM 9.3) - IM-Postneonatal</p> <p>NOM - Preterm-related mortality</p>

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					<p>rate per 100,000 live births (Preterm-Related Mortality, Formerly NOM 9.4) - IM-Preterm Related</p> <p>NOM - Sudden Unexpected Infant Death (SUID) rate per 100,000 live births (SUID Mortality, Formerly NOM 9.5) - IM-SUID</p> <p>NOM - Percent of children, ages 0 through 17, in excellent or very good health (Children's Health Status, Formerly NOM 19) - CHS</p>
	By 2030, increase the percent of women who attend a postpartum checkup within 12 weeks after giving birth.	In Year 1, determine evidence-based or informed strategy and ESM with partners.	No ESMs were created by the State. ESMs were optional for this measure in the 2025 application/2023 annual report.	NPM - A) Percent of women who attended a postpartum checkup within 12 weeks after giving birth (Postpartum Visit) B) Percent of women who attended a postpartum checkup and received recommended care components (Postpartum Visit) - PPV	This NPM was newly added in the 2025 application/2023 annual report. The list of associated NOMs will be displayed in the 2026 application/2024 annual report.
Perinatal/Infant Health					
Improve breastfeeding rates	By September 2025, increase the percentage of infants breastfeeding at 6 months of age.	Support the Idaho Breastfeeding Coalition's Annual Breastfeeding Summit for lactation consultants, health care providers, and public health professionals.	ESM BF.1 - Number of professionals and parents who attend annual Idaho Breastfeeding Summit.	NPM - A) Percent of infants who are ever breastfed (Breastfeeding, Formerly NPM 4A) B) Percent of infants breastfed exclusively through 6 months (Breastfeeding, Formerly NPM 4B) - BF	<p>NOM - Infant mortality rate per 1,000 live births (Infant Mortality, Formerly NOM 9.1) - IM</p> <p>NOM - Post neonatal mortality rate per 1,000 live births (Postneonatal Mortality, Formerly NOM 9.3) - IM-Postneonatal</p> <p>NOM - Sudden Unexpected Infant Death (SUID) rate per 100,000 live</p>

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					births (SUID Mortality, Formerly NOM 9.5) - IM-SUID
Support services, programs, and activities that promote safe and healthy family functioning	By September 2025, reduce infant sleep-related deaths by improving safe sleep practices.	<p>Through collaboration with community partners, increase safe sleep practices by caretakers through the provision of sleep sacks and safe sleep education using a family-centered approach, including a focus on risk reduction education.</p> <p>Participate in the Child Fatality Review Team to review child deaths and offer recommendations for prevention and education, including Sudden Unexpected Infant Death (SUID) cases.</p> <p>Train MIECHV home visitors to conduct safe sleep surface assessments, provide safe sleep education to families, and provide cribs and sleep sacks to families in need.</p> <p>Implement an Idaho-specific safe sleep education media campaign.</p>	ESM SS.1 - Number of individuals who participated in safe sleep training	<p>NPM - A) Percent of infants placed to sleep on their backs (Safe Sleep, Formerly NPM 5A) B) Percent of infants placed to sleep on a separate approved sleep surface (Safe Sleep, Formerly NPM 5B) C) Percent of infants placed to sleep without soft objects or loose bedding (Safe Sleep, Formerly NPM 5C) D) Percent of infants room-sharing with an adult during sleep (Safe Sleep) - SS</p>	<p>NOM - Infant mortality rate per 1,000 live births (Infant Mortality, Formerly NOM 9.1) - IM</p> <p>NOM - Post neonatal mortality rate per 1,000 live births (Postneonatal Mortality, Formerly NOM 9.3) - IM-Postneonatal</p> <p>NOM - Sudden Unexpected Infant Death (SUID) rate per 100,000 live births (SUID Mortality, Formerly NOM 9.5) - IM-SUID</p>
Support services, programs, and activities that promote safe and healthy family functioning	By September 2025, fund injury and disease prevention activities to reduce morbidity and mortality rates among pregnant women and young children.	<p>Fund the Idaho Poison Control Center to provide statewide consultation on poison exposure, maintain the poison control hotline, and provide community education about poisoning prevention.</p> <p>Fund the Idaho Bureau of Epidemiology to support communicable disease surveillance capacity for MCH populations.</p> <p>In accordance with State law, provide congenital cytomegalovirus education to pregnant women, women of reproductive age, child care workers, schools, health care providers, and faith-based organizations.</p> <p>Support the Idaho Newborn Screening Program to detect certain genetic, endocrine, metabolic, and cardiac disorders in newborns.</p>		SPM 1: Injury Prevention: Unintentional death rate to children under 5 years of age	

Child Health

Decrease the prevalence of childhood overweight	By September 2025, help fund and support existing programs and initiatives to expand education and activities focused on physical	Through collaboration with the Idaho Physical Activity and Nutrition Program, increase the number of child care providers trained on healthy behaviors for children.	ESM PA-Child.1 - Number of child care professionals trained on healthy behaviors	NPM - Percent of children, ages 6 through 11, who are physically active at least 60 minutes per day (Physical	NOM - Percent of children, ages 0 through 17, in excellent or very good health (Children's Health Status, Formerly NOM 19) - CHS
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and obesity	activity and nutrition for children.		for young children and creating healthy environments with focus on nutrition and physical activity.	Activity, Formerly NPM 8.1) - PA-Child	NOM - Percent of children, ages 2 through 4, and adolescents, ages 10 through 17, who are obese (BMI at or above the 95th percentile) (Obesity, Formerly NOM 20) - OBS
Improve childhood immunization rates	By September 2025, increase vaccination education and vaccine uptake among MCH populations.	<p>Through collaboration with the Idaho Immunization Program, support the purchase and distribution of vaccines for insured children through the Vaccine Assessment Fund.</p> <p>Through collaboration with the Idaho Immunization Program, provide health care provider education about addressing vaccine hesitancy and improving clinic-level immunization rates.</p> <p>Through collaboration with the Idaho Immunization Program, provide public education about the importance of vaccinations.</p>		SPM 2: Immunizations: Percent of children at kindergarten enrollment who meet state immunization requirements	
Improve maternal and child health population access to medical and dental homes	By September 2025, increase the percentage of school-aged children who receive preventive dental care.	Fund the Oral Health Program to provide dental sealants, apply fluoride varnish, offer oral health education, and refer elementary school students to dental homes.	ESM PDV-Child.1 - Percentage of 3rd grade students that had dental sealants on at least one tooth recommended for sealants	NPM - Percent of children, ages 1 through 17, who had a preventive dental visit in the past year (Preventive Dental Visit - Child, Formerly NPM 13.2) - PDV-Child	<p>NOM - Percent of children, ages 1 through 17, who have decayed teeth or cavities in the past year (Tooth decay or cavities, Formerly NOM 14) - TDC</p> <p>NOM - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system (CSHCN Systems of Care, Formerly NOM 17.2) - SOC</p> <p>NOM - Percent of children, ages 0 through 17, in excellent or very good health (Children's Health Status, Formerly NOM 19) - CHS</p>
	By 2030, increase percent of children with and without special health care needs, ages 0 through 17, who have a medical home.	In Year 1, determine evidence-based or informed strategy and ESM with partners.	No ESMs were created by the State. ESMs were optional for this measure in the 2025 application/2023	NPM - Percent of children with and without special health care needs, ages 0 through 17, who have a medical home (Medical	This NPM was newly added in the 2025 application/2023 annual report. The list of associated NOMs will be displayed in the 2026 application/2024 annual report.

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			annual report.	Home, Formerly NPM 11) - MH	
Adolescent Health					
Support services, programs, and activities that promote safe and healthy family functioning	<p>By September 2025, collaborate with the Idaho Suicide Prevention Program to enhance suicide prevention activities for adolescents.</p> <p>By September 2025, implement a plan to increase the public health system's capacity to address adolescent health issues with recommendations for strengthening and coordinating systems for adolescent health.</p>	<p>Through collaboration with the Suicide Prevention Program, expand the number of schools where evidence-based suicide prevention programs (EBSPP) are implemented and increase the number of adult advisors who receive training on how to help adolescents experiencing a mental health challenge or crisis.</p> <p>Through collaboration with the Adolescent Pregnancy Prevention Program, develop an adolescent health working group comprised of public health professionals to collaborate on adolescent health issues and implement a positive youth development programming approach.</p> <p>Through collaboration with the Adolescent Pregnancy Prevention Program, assess public health's capacity for addressing youth mental health by conducting an environmental scan and gap analysis to inform future strategies.</p>	ESM BLY.1 - Number of adult advisors who received evidence-based suicide prevention training	NPM - Percent of adolescents, with and without special health care needs, ages 12 through 17, who are bullied or who bully others (Bullying, Formerly NPM 9) - BLY	<p>NOM - Adolescent mortality rate ages 10 through 19, per 100,000 (Adolescent Mortality, Formerly NOM 16.1) - AM</p> <p>NOM - Adolescent suicide rate, ages 15 through 19, per 100,000 (Adolescent Suicide, Formerly NOM 16.3) - AM-Suicide</p>
Children with Special Health Care Needs					
Promote smooth transition through the life course for CSHCN	By September 2025, increase the number of families who receive support or services focused on improving transition to adulthood for CSHCN.	<p>Partner with Idaho Parents Unlimited - IPUL (State's Family to Family Resource Center) to increase family engagement, provide caregiver/parent education, assist with family navigation, provide Title V program consultation.</p> <p>Partner with IPUL to develop digital resources that empower teens and young adults to take an active role in their transition into adulthood.</p> <p>Support the Idaho Children's Special Health Program to provide financial support to uninsured CSHCN for payment of eligible medical claims.</p> <p>Participate on the state's Emergency Medical Services for Children (EMS-C) Advisory Board to represent the CSHCN population.</p>	ESM TR.1 - Number of families who received support or services from the Family to Family Resource Center	NPM - Percent of adolescents with and without special health care needs, ages 12 through 17, who received services to prepare for the transition to adult health care (Transition, Formerly NPM 12) - TR	NOM - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system (CSHCN Systems of Care, Formerly NOM 17.2) - SOC
Improve access to medical	By September 2025, fund and support services, programs, and activities focused on screening,	<p>Fund pediatric specialty clinics across the state.</p> <p>Support the Idaho Newborn Screening Program to detect certain genetic,</p>		SPM 3: Medical Specialist Access: Percent of children with special health	

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specialists for children and youth with special health care needs	referral, and access to medical specialists.	endocrine, metabolic, immunologic, and cardiac disorders that can affect a child's long-term health and survival, and link children to appropriate specialist care.		care needs who needed or received specialist care in the past 12 months, and experienced some problem accessing care.	
	By 2030, increase the percent of children with and without special health care needs, ages 0 through 17, who have a medical home.	In Year 1, determine evidence-based or informed strategy and ESM with partners.	No ESMs were created by the State. ESMs were optional for this measure in the 2025 application/2023 annual report.	NPM - Percent of children with and without special health care needs, ages 0 through 17, who have a medical home (Medical Home, Formerly NPM 11) - MH	This NPM was newly added in the 2025 application/2023 annual report. The list of associated NOMs will be displayed in the 2026 application/2024 annual report.
Cross-Cutting/Systems Building					
Improve social determinants of health and promote health equity for maternal and child health populations	By September 2025, increase MCH workforce capacity by increasing the number of health care providers and other professionals who participate in topical learning collaboratives.	<p>Support topical statewide learning collaboratives for health care professionals focused on quality and practice improvement for MCH populations.</p> <p>Support implementation of the Get Healthy Idaho initiative as a community-led, place-based model to improve social determinants of health and health equity.</p> <p>(Years 1-2) Support implementation of the Project ECHO model or similar models with the goal of increasing knowledge and capacity of Idaho health care professionals to provide best-practice specialty care to MCH populations.</p>		SPM 4: MCH Workforce Development: Number of health care providers and other professionals who serve MCH populations that receive training with the goal of improving delivery and quality of care	