



Iowa Department of Public Health  
**Million Hearts  
Action Plan**



2015



### What is the Million Hearts® Initiative?

Heart disease and stroke are the first and fourth leading causes of death in the United States and also in Iowa. Heart disease is responsible for 1 of every four deaths in the country.

Million Hearts® is a national Initiative that has set an ambitious goal to prevent one million heart attacks and strokes by 2017. The impact will be even greater over time. Million Hearts® aims to prevent heart disease and stroke by:

- Improving access to effective care.
- Improving the quality of care for the ABCS.
- Focusing clinical attention on the prevention of heart attack and stroke.
- Activating the public to lead a heart-healthy lifestyle.
- Improving the prescription and adherence to appropriate medications for the ABCS.



The Million Hearts® Initiative focuses, coordinates, and enhances cardiovascular disease prevention activities across the public and private sectors in an unprecedented effort to prevent one million heart attacks and strokes by 2017 and demonstrate to the American people that improving the health system can save lives. Million Hearts® will scale-up proven clinical and community strategies to prevent heart disease and stroke across the nation.

Million Hearts® brings together existing efforts and new programs to improve health across communities and help Americans live longer, healthier, more productive lives. The Centers for Disease Control and Prevention and Centers for Medicare and Medicaid Services are the co-leaders of Million Hearts® within the U.S. Department of Health and Human Services, working alongside other federal agencies including the Administration for Community Living, National Institutes of Health, the Agency for Healthcare Research and Quality, the Food and Drug Administration, the Health Resources and Services Administration, the Substance Abuse and Mental Health Services Administration, the Office of the National Coordinator, and the U.S. Department of Veterans Affairs. Key private-sector partners include the American Heart Association, and the YMCA, among many others. Explore [Innovations & Progress Notes-http://millionhearts.hhs.gov/aboutmh/innovations.html](http://millionhearts.hhs.gov/aboutmh/innovations.html) to stay up to date with Million Hearts® and partner efforts to prevent one million heart attacks and strokes.

In 2012, the Initiative's first year, Million Hearts® built strong partnerships to ensure steady progress toward preventing one million heart attacks and strokes by 2017. Check out just a few examples of how partners worked to improve heart health—a focus on the ABCS, using health information technology, and working in teams: [Million Hearts® 2012: Building Strong Partnerships for Progress-http://millionhearts.hhs.gov/Docs/MH\\_YearinReview\\_2012.pdf](http://millionhearts.hhs.gov/Docs/MH_YearinReview_2012.pdf).

On September 16, 2014, a CDC Public Health Grand Rounds featured a further update on Million Hearts® progress: **“Preventing A Million Heart Attacks and Strokes: A Turning Point for Impact.”** A video and presentation slides are available at: <http://www.cdc.gov/cdcgrandrounds/archives/2014/september2014.htm>.

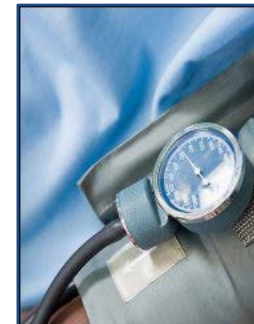
**Resources:**

The Million Hearts® website is comprehensive and changing everyday: <http://www.millionhearts.hhs.gov/index.html>.

### Background Regarding Iowa Million Hearts® Participation

A small original group of Iowa key partners (American College of Cardiologists (ACC)-Iowa Chapter , American Heart Association (AHA)-Midwest Affiliate, Iowa Department of Public Health (IDPH), Iowa Healthcare Collaborative (IHC), and Telligen) had been promoting awareness of the Million Hearts® Initiative since its inception in late 2011. The key partners had worked separately and collaboratively to promote Million Hearts®.

Initially, the key partners worked to spread awareness of Million Hearts® through programmatic newsletters, presentations, health fairs, provider conferences, etc. Individual, provider and organizational pledges to the Initiative were encouraged. Once the national Initiative became more defined, work concentrated more around publicizing the **ABCS**--**A**spirin Use when Appropriate, **B**lood Pressure Control, **C**holesterol Management and **S**moking Cessation. These were evidenced-based strategies that could, when successfully implemented by healthcare providers, move the needle towards fewer deaths. Since the beginning, the national Initiative has concentrated most of its recommendations and resources around on Blood Pressure Control—increased use of EHR and Registries that would lead to population health analysis within clinics or health systems; team care/care coordination models with an emphasis on providers working collaboratively with pharmacists to control high blood pressure; the advancement of a specific protocol in each health system or practice to be utilized by the care team when a diagnosis of high blood pressure is made; utilization of patient self-measured blood pressure (SMBP) with clinical support and monitoring; and resources developed and aligned with each of these topics which are available on the national Million Hearts® website.



IDPH, with assistance from its key partners, applied for and was awarded technical assistance support from the National Association of Chronic Disease Directors (NACDD) that would allow them to expand Iowa-specific Million Hearts® efforts. IDPH had applied to NACDD for technical assistance to organize a stakeholder meeting that would be the first step in creating an Iowa Action Plan for further promotion of Million Hearts® and the implementation of key strategies that would increase alignment and support for Million Hearts® recommendations through 2017.

On April 15, 2014, the IDPH, along with the other key partners hosted a Million Hearts® Stakeholders Workshop. Participants included staff from the key partner organizations along with stakeholders representing other organizations, such as the YMCA, individual Iowa health systems, local public health and healthcare organizations, educational institutions, pharmacists, the Iowa Pharmacy Association, and the Iowa Medical Society. A total of 25 individuals were in attendance. The meeting was facilitated by two consultants from NACDD, Margaret Casey and Miriam Patanian. This meeting was the first in various activities to improve understanding of the Million Hearts® Initiative in the public sector and the healthcare provider/health system sector. Since that time, the key partners along with a work group of interested workshop attendees have met to develop the Iowa Million Hearts® Action Plan. The key partner group has steadily grown to incorporate Iowa Medicaid Enterprise (IME), The University of Iowa (U of I), The VA Central Iowa Health System (VA-CI), Iowa Pharmacy Association (IPA), Iowa Primary Care Association (IPCA) and the YMCAs in Greater Des Moines Association.



Jose Belardo, Region VII DHHS, presents on Million Hearts®



Workshop Presenters



Ice-Breaker Exercise



Representatives from original Primary Partner Agencies along with NACDD

What follows is the Iowa Million Hearts® Action Plan. It is intended that this action plan will remain dynamic, and that additional goals and objectives may be added, as national Million Hearts® Initiative recommendations and resources continue to expand and become available, or as new partners join the Iowa effort. This Action Plan's duration will extend through the conclusion of the national Initiative, currently targeted through June of 2017.

## The Iowa Million Hearts® Action Plan

### Goal 1: Increase Public Awareness of the Million Hearts® Initiative and the ABCS

Objective	Comments	Responsible Agency(ies)
1.1: Work with Des Moines Register health reporters to have at least one annual statewide article that covers the Million Hearts® Initiative and/or hypertension control through 6-2017.		IDPH, AHA
1.2: Work to participate in as many health fairs or other public events that would enable the promotion of Million Hearts® public awareness. Distribute educational materials regarding ABCS (risk factors, screening, treatment, control, etc.). Allow for Million Hearts® pledging, as possible. Provide screening opportunities and referrals through 6-2017.		IDPH, AHA, IPA, IHC, YMCA-Healthy Living Center
1.3: Promote the role of pharmacists in Million Hearts® in all current and future health care models through publications both in print and on social media each year during American Pharmacists Month (October) through 6-2017.		IPA
1.4: Inform, educate and demonstrate to the public about the expertise and value of pharmacy professionals through community outreach events through 6-2017. This would include events such as health fairs coordinated by Colleges of Pharmacy, IPA's Legislative Day, and outreach on the Register's Annual Great Bicycle Ride Across Iowa (RAGBRAI).		IPA
1.5: In coordination with activities around American Heart Month each year, provide consistent information about Million Hearts® and the ABCS and track all events across the state on the AHA Calendar of events, through 6-2017.		AHA, IDPH, YMCA-Healthy Living Center
1.6: Advocate for and recruit companies in Iowa to become "fit friendly" which includes awareness of Million Hearts® and/or hypertension control, through 6-2017.		AHA
1.7: Post information on Million Hearts® and the ABCS through AHA social media sites and blogs that are viewed by many staff, companies and volunteers across the state through 6-2017.		AHA
1.8: Promote Medicare beneficiary/family engagement and self-management focused on ABCS through 7-2019.		Telligen
1.9: Collaborate with Cardiac LAN partners and stakeholders to improve the ABCS in patients through 7-2019.		Telligen

Objective	Comments	Responsible Agency(ies)
1.10: Create and sustain an Iowa Million Hearts® social media presence, through the creation of a Million Hearts® Facebook page or documented inclusion of Million Hearts® material and sharing through established social media outlets of primary partners by 12-2014.	Part of IHC existing Facebook page, to begin with—perhaps to transition independently at a later date.	IHC, IDPH, AHA, Telligen
1.11: Work with private and public payers to include Million Hearts® information and materials in consumer/member-facing communications and resource outlets. Inclusion of information can be accomplished in collaboration with Choosing Wisely communications planning through 6-2017.		IHC
1.12: Create and maintain Iowa Million Hearts® webpage to promote the Initiative and activities, including the developed Action Plan and links to Million Hearts® consumer resources, through 6-2017.		IHC, other partners
1.13: Inform, educate and demonstrate heart healthy behaviors and promote healthy lifestyles, to include the Million Hearts® Initiative activities, to the community through an on-going educational series held in collaboration with community health partners through 6-2017.	Heart Healthy You program and Better Choices, Better Health workshops.	YMCA Healthy Living Center
1.14: Utilize existing relationships with the Iowa Public Health Association to inform their members about the Million Hearts® Initiative and activities in their counties through 6-2017.		IDPH
1.15: Utilize existing relationships with local public health agencies throughout the state to inform their staff about Million Hearts®; and encourage them to tell their patients and other residents about the Initiative and activities in their counties through 6-2017.		IDPH

Goal 2: Increase Healthcare System Awareness of Million Hearts® Initiative and the ABCS		
Objective	Comments	Responsible Agency(ies)
2.1: Publish monthly e-bulletin, <i>Chronic Disease Connections</i> , through 6-2017, which includes Million Hearts® and ABCS articles and resource links, to the Collaborative Healthcare Provider Network (CHPN). Continue working to increase the size of the CHPN by 10% each year.	This e-bulletin has been published monthly since 9/2013. [Prior to that, there had been another e-bulletin, <i>Heart to Heart</i> , published 2009-2013.] FY 2013 CHPN readership = 133 clinics/health organization representatives. FY 2014 CHPN readership = 198 clinics/health organization representatives.	IDPH
2.2: Send e-BLASTS to CHPN health systems, practices and providers regarding Million Hearts® webinars, other webinars regarding hypertension control, health system transformation, etc. and other important communications through 6-2017.		IDPH
2.3: Communicate best practices of Million Hearts® collaborations among pharmacists and other healthcare providers through utilization of live meetings and webinars that utilize CE and non-CE platforms through 6-2017.		IPA
2.4: Publish results from pharmacy-based research opportunities to advance the practice of pharmacy and Million Hearts/ABCS in Iowa through 6-2017.		IPA
2.5: Ensure all AHA healthcare system sponsors, staff and volunteers understand the Million Hearts® Initiative and the ABCS and are prepared to share that information with their staff and patients, through 6-2017.		AHA
2.6: Share Million Hearts® information via e-newsletters to Iowa clinical providers, through 7-2019.		Telligen
2.7: Collect baseline and quarterly ABCS data from participating Cardiac LAN providers through 12- 2018; implement relevant quality improvement actions for cardiac health.		Telligen
2.8: Collaborate with partners and stakeholders to improve the ABCS through 7-2019.		Telligen
2.9: Continue to update and maintain the Million Hearts® webpage available through IHC's website through 6-2017. Content to emphasize available resources for patients and providers along with information related to the Iowa Action Plan and activities.		IHC
2.10: Engage provider professional organizations, prioritizing primary providers, to disseminate Million Hearts® and ABCS articles and resources links through 6-2017.	IHC engages these organizations currently as part of coordinated and outside projects.	IHC



Objective	Comments	Responsible Agency(ies)
2.11: Continue to include hypertension as one of the specific conditions targeted by the Iowa Medicaid Enterprise’s health home emphasis by health system providers—including encouragement for care coordination, care management, health coaching, and pay for performance bonuses for hypertension control through 6-2017.		Iowa Medicaid Enterprise
2.12: Continue collaborations with the IDPH Office of Healthcare Transformation to assure aligning of programs with similar goals and objectives and to assure that Million Hearts® is part of all developed strategies.		IDPH

<b>Goal 3: Increase Implementation of Team Care/Care Coordination in Primary Practice to Address Hypertension</b>		
<b>Objective</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
3.1: Continue contracting with the Iowa Healthcare Collaborative to conduct Care Coordination Learning Community sessions through conference calls, webinars and conference tracks through 6-2017.	FY14 Attendance: 90 attendees with free registration.	IDPH, IHC
3.2: Provide advanced level care coordinator training based upon needs assessment conducted with health system leadership through 6-2017.		IDPH, IHC
3.3 The IDPH Bureau of Oral and Health Delivery Systems will continue support for the ongoing Iowa effort to train and encourage dental practices to screen for high blood pressure and smoking among patients through 2018, dependent upon HRSA continuation funding. Those individuals that are screened positively will be referred to their primary care physician and/or the Iowa Quitline.	The IDPH HDSP Project funded the creation of the project, training curriculum and pilots in 5 dental practices. The IDPH CTG Project impacted dental practices in Y1=6 counties; Y2=10 counties; and currently in Y3=11 counties. CTG funding ended in Sept. 2014.	IDPH, U of I College of Dentistry, Local Public Health Agencies, I-SMILE Regional Program Coordinators, local dental practices
3.4: Conduct multi-disciplinary educational programs for health care professionals and students through events coordinated through universities with healthcare degree programs, including: Des Moines area education collaborative, University of Iowa, and IPA's Midwest Pharmacy Expo through 6-2017.		IPA, Colleges of Pharmacy
3.5: Conduct an Iowa Medication Safety Strategy in collaboration with health provider organizations that improves medication use and patient safety through 6-2017.		IPA, IHC, IPCA, Telligen
3.6: Align Million Hearts® with efforts of the Iowa Board of Pharmacy to provide for new pharmacy practice models, including: collaborative practice agreements and Tech-check-Tech through 6-2017.		IPA
3.7: Promote Team Care/Care Coordination to all AHA sponsors, staff and volunteers to help increase the amount of participation through committee and board meetings, events at facilities and trainings through 6-2017.		AHA
3.8: Spread the implementation of evidence-based practices that promote the ABCS through 6-2017. Provide assistance to promote and facilitate team-based care through resource sharing.		Telligen, IHC, IDPH

Objective	Comments	Responsible Agency(ies)
<p>3.9: The Iowa Primary Care Association (Iowa PCA) will continue to work with Iowa Federal Qualified Health Center (FQHC) Dental Clinics to implement and maintain the Iowa PCA Blood Pressure and Tobacco Use Screening Project through 6-2017. This project's goal is to increase the number of dental patients 18+ years that have a BP screening and tobacco use assessment during comprehensive or periodic dental exam; reinforce compliance with drug therapy for dental patients with hypertension; increase the number of dental patients that know their BP; provide pre-hypertension training with patients; and encourage patients that use tobacco product to quit and educate/refer these patients to Iowa Quit.</p>	<p>6 of 14 FQHCs are currently participating. Data for Jan. 1 2014-June 30, 2014:</p> <ul style="list-style-type: none"> <li>• 4,319 patients had periodic or comprehensive dental exams.</li> <li>• 128 patients were referred due to screening for hypertension.</li> <li>• 85 patients completed a referral to have blood pressure evaluated.</li> <li>• 1,083 patients reported that they used tobacco.</li> <li>• 194 indicated that they wanted to quit and were given Iowa Quit Line information.</li> <li>• 7 patients completed the quit line referral.</li> </ul>	<p>Iowa Primary Care Association</p>
<p>3.10: Work with the Department of Human Services (DHS) on the State Innovation Model (SIM) grant partners to include hypertension control through care coordination, use of protocols and EHR utilization.</p>		<p>IDPH, DHS, IME, IHC</p>
<p>3.11: Utilize CDC 1305 Enhanced Supplemental funding to fund clinical innovations by health systems that will increase hypertension control through care coordination, use of protocols, and EHR utilization.</p>		<p>IDPH</p>

<b>Goal 4: Increase Implementation of Provider-Pharmacist Teams to Address Hypertension</b>		
<b>Objective</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
4.1: Continue contracting with the U of I College of Pharmacy to originate new provider-pharmacist teams throughout Iowa through 6-2017, prioritizing at least 5 new teams each year of the HPCDC Partnership grant. Monitor closely to determine how many of these teams are able to sustain their relationship after the TA has concluded.	This contractual relationship began in FY13, under the HDSP and continues under the HPCDCP.	IDPH, U of I College of Pharmacy, participating health systems and pharmacies.
4.2: Engage provider and pharmacist professional organizations to promote provider-pharmacist team model approaches and provide relevant and valuable resources and materials through 6-2017.		IPA
4.3: Promote the Provider-Pharmacist Team approach to hypertension control with all pharmacists and practices AHA works with to increase implementation of collaborative practice agreements through 6-2017.		AHA, IPA
4.4: Work with at least one pharmacist as part of the cardiac health improvement activities through 7-2019.		Telligen
4.5: Engage key health system partners and major pharmacy networks to increase collaboration and resource sharing and promote provider-pharmacist team model approaches as part of continuing care coordination and team-based care initiatives and provide relevant and valuable resources and materials, through 6-2017.		IHC, IDPH, IPA and Telligen
4.6: Increase awareness of and expand the role of pharmacist-provided Medication Therapy Management (MTM) services for hypertension management through 6-2017.		VA Central Iowa Health Systeme

<b>Goal 5: Increase Implementation of Hypertension Protocols in the Primary Care Setting</b>		
<b>Objective</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
5.1: Facilitate practice change opportunities in collaboration with the Iowa Board of Pharmacy, and educate pharmacy professionals on these opportunities to initiate or expand their hypertension management services through 6-2017.		IPA
5.2: Provide education programs and foster collaboration among pharmacy practitioners through consulting services and new website capabilities to share Million Hearts® best practices through 6-2017.		IPA
5.3: Promote protocol implementation with recruited Cardiac LAN providers/clinics through 7-2019.		Telligen
5.4: Disseminate and assist Cardiac LAN providers to utilize best practices through 7-2019.		Telligen
5.5: Include sample hypertension protocols for the primary care setting, including those available through Million Hearts® Champions, as part of the Million Hearts® Iowa webpage (or establish links to the Million Hearts® website through 6-2017.		IHC
5.6: Encourage Iowa clinical practices/health systems to become Million Hearts® Champions or publicize their success stories through Million Hearts® Challenges through 6-2017.		IDPH, IHC, Telligen, AHA, IPA
5.7: Disseminate sample collaborative practice agreements and Million Hearts® materials on IPA webpage through 6-2017.		IPA
5.8: Disseminate/update Million Hearts® web links on ACC-Iowa Chapter website.		ACC-Iowa Chapter

<b>Goal 6: Increase Utilization of Patient Self-Measured Blood Pressure (SMBP) with Clinical Monitoring</b>		
<b>Objective</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
6.1: Facilitate practice change opportunities for pharmacy professionals to participate in patient care services, such as hypertension management, by educating patient to properly self-monitor their blood pressure through 6-2017.		IPA
6.2: Promote pharmacist-provided Medication Therapy Management (MTM) services focused on hypertension management through successes observed through the Community Transformation Grant (CTG) through 6-2017.	CTG provided funding to encourage self-insured employer plans to cover MTM at two employer sites.	IPA
6.3: Engage with key health system partners, including Cardiac LAN practices, to increase collaboration and resource sharing to promote evidence-based SMBP approaches as part of ongoing patient engagement, care coordination and chronic disease care initiatives and provide relevant and valuable resources and materials, through 6-2017.		Telligen, IHC, IDPH
6.4: Discuss and determine coverage option priorities for related patient SMBP materials and equipment (BP measurement cuff/automated monitors, self-monitoring patient education) with both private and public payers through 6-2017.		IDPH, IHC, IPA, Telligen, AHA
6.5: Complete needs assessment primary care practices to determine education needed, existing barriers, and additional opportunities for increased utilization of patient SMBP with clinical monitoring by 6-2015.		IDPH, IHC, AHA
6.6: Include patient SMBP education and materials as part of patient/public and provider awareness engagement content.		IDPH, IHC, Telligen
6.7: Incorporate BP screening into physical therapy best practice at the YMCA promoting ongoing patient engagement and management of their blood pressure. Provide relevant correspondence back to referring physician for care coordination through 6-2017.		YMCA Healthy Living Center
6.8: Conduct monthly BP screenings at YMCAs in the Greater Des Moines Association to improve public awareness about the importance of blood pressure control and cardiovascular disease prevention according to the Million Hearts® Initiative. Provide a report card that participants can take to physicians for appropriate care coordination through 6-2017.	YMCAs in Greater Des Moines Association include South Suburban YMCA, Grubb YMCA, Riverfront YMCA, Indianola YMCA, Walnut Creek YMCA, Waukee YMCA, YMCA Healthy Living Center, Northwest YMCA, Ankeny YMCA, YMCA Supportive Housing, and Boone YMCA.	YMCAs in Greater Des Moines Association

<b>Goal 7: Increase Health System Awareness of, and Referral to Available Community Resources for Lifestyle Improvement Education</b>		
<b>Objective</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
7.1: Publish monthly e-bulletin, <i>Chronic Disease Connections</i> , using it to disseminate information regarding available community resources such as the Chronic Disease Self-Management peer support program.		IDPH
7.2: Collaborate with the Iowa Board of Pharmacy and other key pharmacy stakeholders to promote programs, such as Tech-Check-Tech, MTM services within ACOs, and the Iowa Medication Safety Strategy, that educate pharmacists on how to improve patient safety with appropriate hypertension medication through 6-2017.		IPA
7.3: Disseminate information such as the Chronic Disease Self-Management (CDSMP) peer support program through electronic updates, newsletters and through materials at events throughout the state with all AHA staff and volunteers in all capacities in Iowa, through 6-2017.		AHA
7.4: Post community resources for Lifestyle Improvement Education through the AHA social media sites and blogs that are viewed by many staff and volunteers across the state who work for/with health systems through 6-2017.		AHA
7.5: Identify and implement appropriate community-level interventions that improve the coordination of care for Medicare beneficiaries and their families across provider settings.		Telligen
7.6: Develop and implement a care coordination model that promotes the integration of a health care delivery system with a community-based health and wellness organization to treat heart disease through 6-2017.	Primary Care physicians can refer into YMCA Heart Healthy programs in a wellness environment and in turn receive individualized patient reports from initial intake and every 12 weeks that their patient participates in the program. This information can become part of the patient record, monitoring progress and goal achievements.	YMCA Healthy Living Center
7.7: Maintain and update resources for dissemination to members regarding Million Hearts® recommendations and National ACC Guidelines for chronic disease management, risk factor modification for HTN, and hyperlipidemia.		ACC-Iowa Chapter
7.8: Reach out to the Iowa Primary Care Association (IPCA) to integrate Million Hearts® with their funded Safety Net Community Care Teams through 6-2017.		IDPH

<b>Goal 8: Increase and Enhance Health Information Technology (EHR/Registry Use) in Managing Patients with Hypertension</b>		
<b>Objectives</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
8.1: Continue contracting with the Iowa Healthcare Collaborative to conduct EHR Utilization Quality Improvement Learning Community sessions through conference calls, webinars and conference tracks, through 6-2017.	FY14 Attendance: 25	IDPH, IHC
8.2: Coordinate with Iowa e-Health demonstration pilot projects to integrate pharmacies and pharmacy data into the Iowa Health Information Network (IHIN) through 7-2016.		IPA
8.3: Work to improve the use of EHR for effective and timely data capture, standardization of BP, and electronic reporting. Leverage EHR functionality including clinical decision support, registry functions and Medicare beneficiary reminders/alerts within the Cardiac LAN, through 7-2019.		Telligen
8.4: Work with Home Health Agencies to register for and enter data for ABCS in Home Health Quality Improvement (HHQI) cardiovascular registry through 7-2019.		Telligen
8.5: Using EHRs, collect baseline and quarterly data on Cardiac Learning and Action Network (LAN) for Medicare patients whose blood pressure was adequately controlled, through 12/2018.		Telligen
8.6: Collaborate with other key stakeholders and health systems to publish progress on CDC prescribed Domain 3 and Domain 4 performance measures related to high blood pressure control and diabetes management in the State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health program, through 6-2017.	A performance measure data set matrix will be developed to collect this data from health systems within Iowa.	IDPH, IHC and other key health system stakeholders



<b>Goal 9: Decrease Disparities in Hypertension Care and Control</b>		
<b>Objectives</b>	<b>Comments</b>	<b>Responsible Agency(ies)</b>
9.1: Ensure that all Medicaid and Iowa Wellness Plan patients are aware of the United States Preventive Services Task Force (USPTF) preventive services recommendations that can help with the prevention of Heart Disease/hypertension risk factors through AHA public education campaigns, through 6-2017.		AHA
9.2: Partner with multicultural organizations in Iowa on preventing heart disease risk factors such as obesity by providing more safe routes to school and increasing the number of schools open for community use through 6-2017.		AHA
9.3: Continue outreach to women across the state through the Go Red for Women movement through lunches, survivors, Go Red Committees and Circle of Red committees through 6-2017.		AHA, YMCA-Healthy Living Center
9.4: Provide hypertension care information through a variety of events, such as the AHA Power Sundays and other multicultural events in the state through 6-2017.		AHA
9.5: Focus on disparate populations and providers who serve them to improve on the ABCS using evidence-based practices through 7-2019. Utilize appropriate interventions to maximize improvement in cardiac health disparities.		Telligen
9.6: Confirm that Cardiac LAN patient-education materials account for health literacy levels and are linguistically and culturally appropriate for Medicare beneficiaries through 7-2019.	Might involve input from IDPH Office of Multicultural and Minority Health?	Telligen
9.7: Incorporate BP screens into Healthy Kids Assessment objectives, therefore reaching a high risk population of children and families who demonstrate an unhealthy weight, sedentary lifestyles, poor nutrition habits, and possibly demonstrating early signs of chronic diseases through 6-2017.		YMCA Healthy Living Center
9.8: Provide disease management and health coaching programs targeting hypertension for Medicaid members in-house and through Meridian to improve control of their blood pressure through 6-2017.		Iowa Medicaid Enterprises
9.9: Communicate USPTF updates to health systems through Chronic Disease Connections e-Bulletin and e-BLASTS, including any articles or research findings in regards to evidence-based cardiovascular disease treatment models among disparate populations.		IDPH
9.10: Work collaboratively with the IDPH Office of Minority and Multicultural Health to educate partners regarding Million Hearts®.		IDPH
9.11: Work closely with the WISEWOMAN program (a federally funded cardiovascular		IDPH

screening program for women ages 40-64 who are uninsured/underinsured) to assure that all grantees are familiar with and utilizing Million Hearts® resources and tools through 6-2017.		

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