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# Spreading Medical Home... and 6 Performance Measures - Achieving and Measuring Success

From the microsystem to the macrosystem and  
back again...

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# ...success for CYSHCN

- Medical home (access & quality)
- Insurance coverage
- Screening and identification
- Family friendly organization of services
- Family and professional partnerships
- Transition to adulthood and adult services

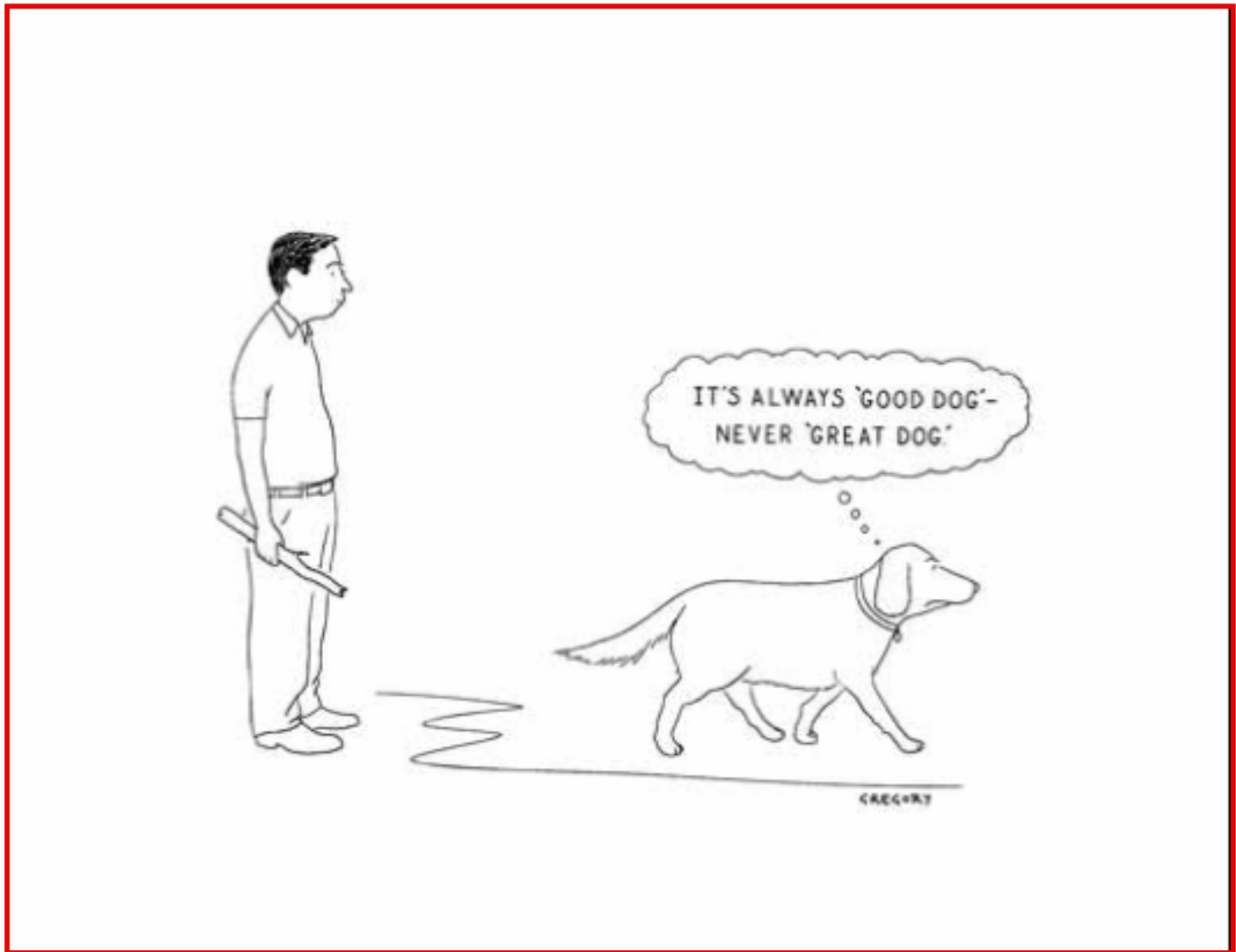


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# Defining medical home...basic, good, better, ... great

- A medical home is a community-based primary care setting which provides and coordinates high quality, planned:
  - family-centered health promotion &
  - chronic condition management

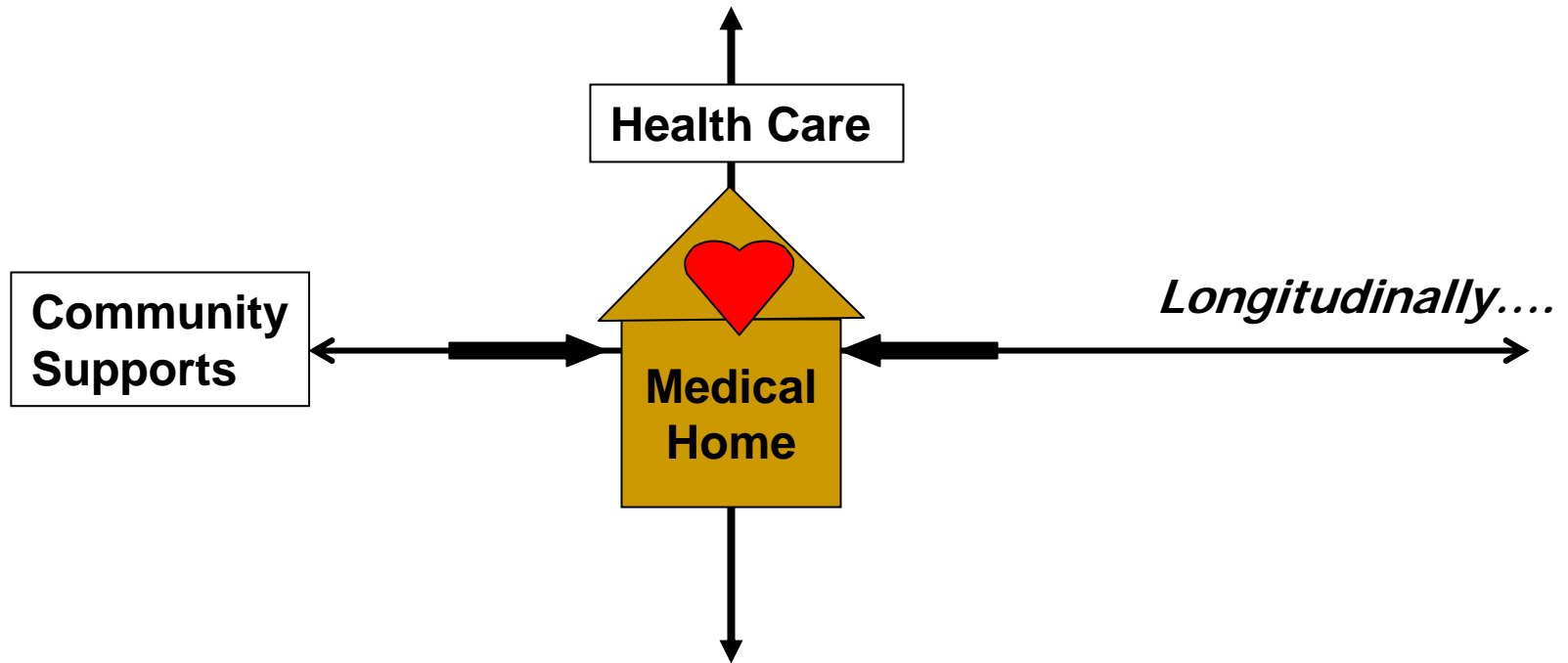




**Towards Medical Home "Greatness"**

# The Patient/Family ♥ & the Community-Based Medical Home – at the crossroads, integrating:

- Vertically – Among health care systems/specialists/PCPs/others
- Horizontally – Among supportive community agencies/schools...



# “Ensuring that all Americans have a medical home is a first step toward creating a patient-centered health system”

- 1) Superb access to care
- 2) Clinical information systems supporting high-quality care, practice-based learning, and quality improvement
- 3) Patient engagement in care
- 4) Integrated, comprehensive team care
- 5) Care coordination
- 6) Routine patient feedback to doctors
- 7) Publicly available information on provider performance





**“You know, Martin, when a primary care physician tells me he’s happy, all my alarm bells go off.”**

# Primary Care – Will It Survive (Highlights)

- Challenges:
  - Low patient satisfaction (against expectations)
  - Broad range of conditions, ages, cultures, languages & recommendations for care
  - Reimbursement for *quantity vs. quality*
  - Devaluation of professional work life
  - Scope of all expectations upon primary care physicians exceed human capability
    - Evidenced based chronic condition & preventive care requires 18°/ day

# Primary Care – Will It Survive (Highlights)

## ■ Conclusions

- Microsystems – primary care needs to improve
- Macro systems – policymakers/payers need to make an investment in primary care
- Urgency



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# Macrosystem – national professional organizations

- Joint Principles of the Patient-Centered Medical Home
  - AAP, AAFP, ACP, and AOA – 330,000 physicians
  - Endorses medical home as defining highest quality primary care
- Advanced Medical Home Model
  - 4 stages of primary care practice
    - Basic, Basic+, Intermediate, Advanced Medical Home
    - Re-imbbursement options increase at higher stages
    - Piloting concept with large health plans (Anthem/Wellpoint and United Healthcare)



# Macrosystem – federal policy makers

- NICHD – NIH new research agenda
- Providing a Medical Home for children following life-threatening illness or injury
  - Continuum of care from medical home to ED to PICU to acute hospital to rehab to home
  - Focus on care coordination and communication between levels of care in the continuum rather than on care within a particular level of care



# Macrosystem – employers

- ERIC – ERISA Industry Committee
  - National organization representing the employee benefits interests of major corporations
  - IBM, Boeing, Intel, etc
  - **Patient-centered Primary Care Collaborative**
    - Coalition of major employers, consumer groups, organizations representing primary care physicians
    - Advancing the patient centered medical home
    - To improve the health of patients and the viability of the health care delivery system.
  - [www.eric.org](http://www.eric.org)
  - Meetings and weekly conference calls





THE ERISA INDUSTRY COMMITTEE

Advocating the Employee Benefit and Compensation Interests of America's Major Employers

We set out forming a collaborative to design and implement a new system – one that focuses on primary care and the medical home.

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Creative Health Benefits Solutions for Today,  
Strong Policy for Tomorrow



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of Family Physicians



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# Legislative initiatives

- Medicare: Demonstrations from H.R. 6111 – “Tax Relief and Health Care Act”; Further Medicare implementation
- Medicaid: NC, MO, LA already planning and implementing; transformation Grants
- S-CHIP: Possible Demonstrations; language to encourage transition to medical home model
- Health IT Legislation: Medical home language, encouragement for physicians to adopt support systems

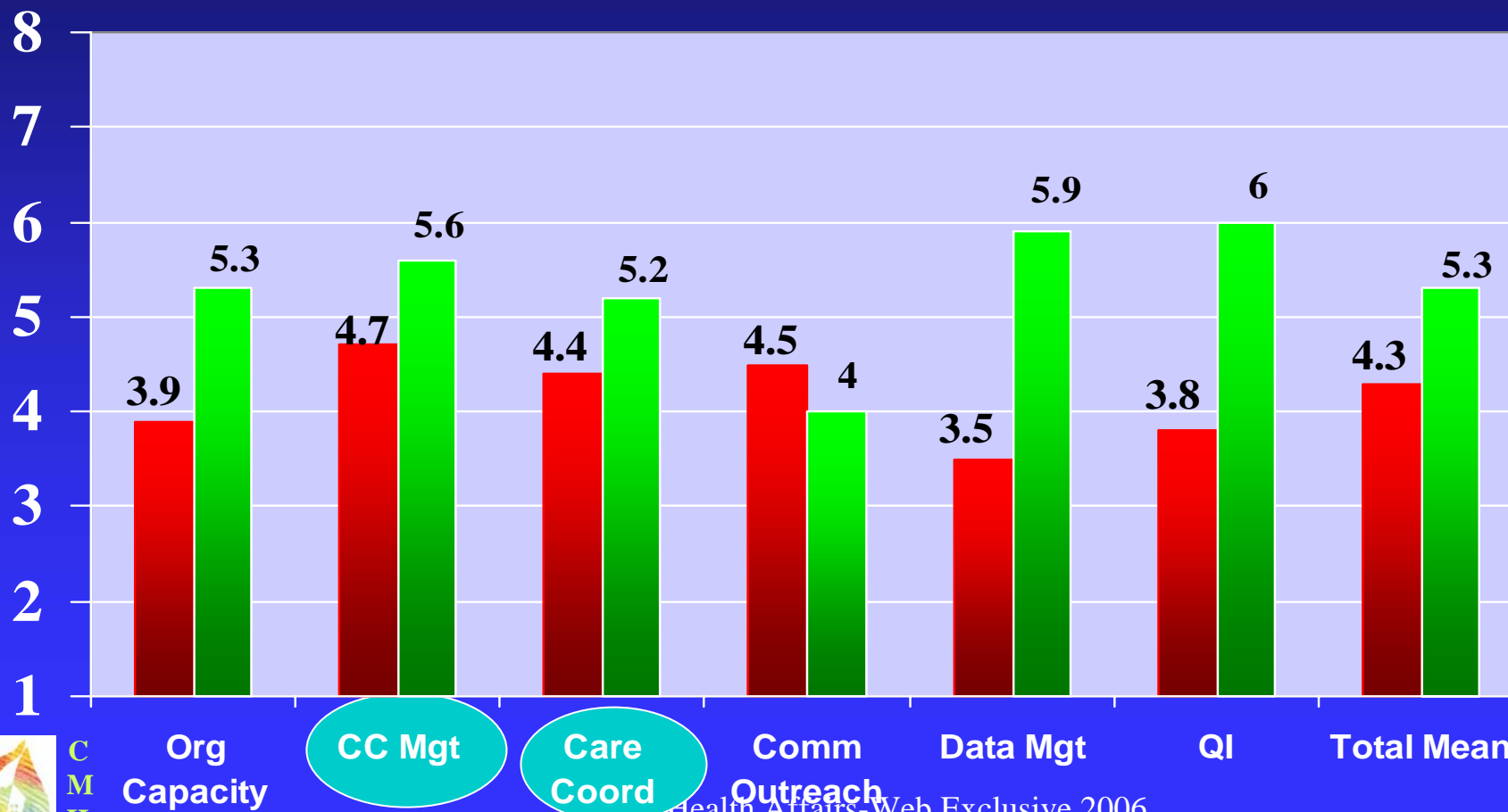
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# Medical Home Outcomes Study

- 35 practices in five states – six health plans
- 5 Medicaid plans – 1 private insurance plan
- Compare Medical Home Index scores with:
  - Utilization data for 6 conditions (CP, autism, DM, Epilepsy, ADHD and asthma) for prior 12 months
  - 30 families surveyed in each practice
- Preliminary results –
  - All utilization trends downward with higher MHI scores
  - Higher Care Coordination and Chronic Condition Management domain scores significantly related to decreased ER use



# Beyond the Medical Home –Medical Home Index Practice Baseline **2004** (fall) and **2007** (spring)



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# Elements of Successful States

- Model for improved primary care – medical home
- Quality of patient care is first priority
- Strong public/private partnership
- Strong consumer involvement
- Strong legislative support
- Strong primary care professional organizations and their engagement
- Involvement of tertiary care/training centers

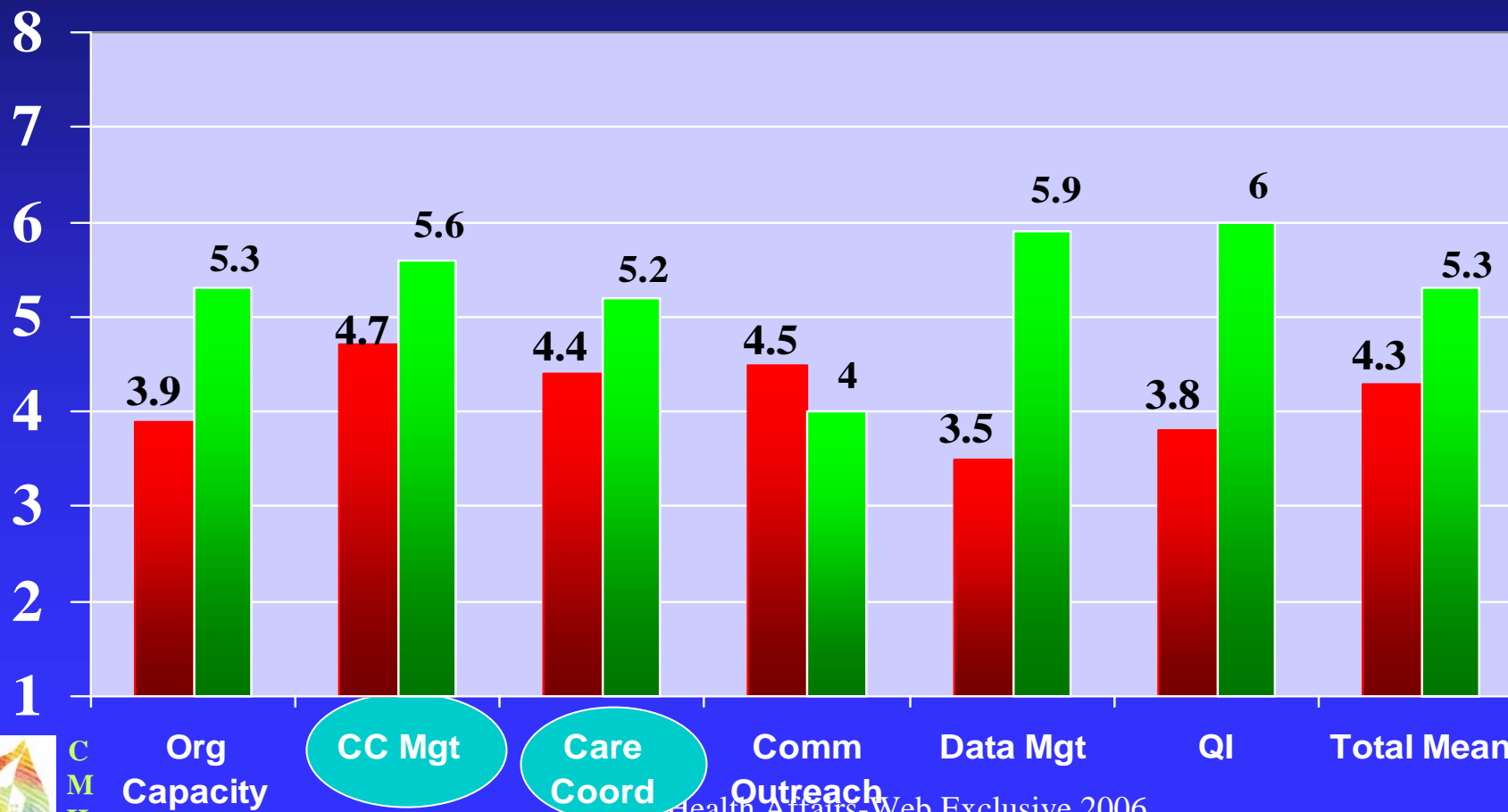


# State – payer organizations

- Anthem – CMHI care plan oversight pilot
  - NH practices meet “medical home” criteria determined by Anthem
  - CSHCN identified using screener
  - Practices develop/document care plan for each CSHCN with at least annual update
  - Anthem activates care plan oversight code
    - Reimburse practice annual prospective payment - \$225.00
  - Track utilization for patients involved



# Beyond the Medical Home –Medical Home Index Practice Baseline **2004** (fall) and **2007** (spring)



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# Microsystem

## Practice Improvement & Family Data

### Family Outcomes

#### Child/Family Outcomes:

- ↑ Family feedback\*
- ↑ Care plans/summary\*
- ↑ Health status\*
- ↓ Parental Worry\*
- ↓ School absences\*
- ↓ ER, hospitalizations, & specialty visits\*

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■ \*statistically significant





Home is the place where  
When you have to go there  
They have to take you in