

Patient Centered Medical Home Initiative with ProHealth



NCQA MEDICAL HOME ALIGNMENT

Major Components of the Model

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- Improved Access and Communication
- Patient Tracking and Registry Functions
- Care Management and Coordination
- Patient Self-Management Support
- Electronic Prescribing
- Test Tracking
- Referral Tracking
- Performance Reporting and Improvement
- Advanced Electronic Communications

The first and most important step is the adoption of coordinated care model core principles

How Does the Model Work?

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- ▶ Care is delivered by multi-disciplinary personal **care teams** that are led by a primary care physician
- ▶ The team is responsible for providing care within the practice and for **coordinating care** required outside of the practice
- ▶ **Access to care** is expanded through open scheduling, extended practice hours and centers, and via multiple methods of communication (web visits, group visits, email)
- ▶ The delivery of appropriate care is facilitated through the effective use of **health information technology** (EHR, e-prescribing, information exchange)
- ▶ **Patient participation and engagement** in self-management activities are enhanced
- ▶ **Performance monitoring and improvement** is facilitated by patient registries, reports, and formalized care plans

Timing

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By Year-End 2010:

- Board has approved and shareholders have ratified plan
- Practices are educated, trained, and culturally prepared to implement the following elements of the model:
 - Scheduling and access standards
 - Patient tracking and registry functions
 - Care management and coordination
 - Patient self-management
 - Test and referral tracking
 - Performance reporting and improvement
- Policies and procedures are developed
- Workflow modifications are complete
- EHR modifications are implemented and providers trained
- Incremental staff to support these elements is in place

Implementation

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- ▶ Remainder of 2010: Stakeholders (State, other employers, health plans, ProHealth) determine enhancements and evaluation procedures
- ▶ January-March 2011: 90-day measurement period (required by NCQA)
- ▶ April-May 2011: data collection and reporting for all 74 sites
- ▶ June 2011: prepare and organize application materials and submit application to NCQA for official designation