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COLLABORATION HEALTH CARE

ALIGNING IDEAS WITH COLLABORATION TO IMPROVE HEALTH CARE TODAY



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Medical Home- A Concept Worth Pursuing

We're ripe for change in our health care system. We're looking for ways to organize care delivery more effectively, use the most appropriate providers, get the best results, and use a payment structure that encourages quality and performance.

The medical home idea is the new buzz-word for reorganizing the way we deliver health care in our country. At first glance, the concept sounds eerily similar to the gatekeeper models of the old HMO days. But, the medical home concept is a little different.

This month we're providing a general overview of the medical home idea as well as some of the challenges that will need to be overcome to make the concept (or some variation of it) a reality.

Making the medical home concept come to life will be a real test of our system's willingness to collaborate and work together to design a system that finally focuses on the patient- and should be less costly and more efficient than the model we have today.

Let's hope we can make it work

Enjoy

Medical Home- A Logical Approach. Can We Make It Work?

Newt Gringrich's Center for Health Transformation has the vision of creating an "Intelligent Health System". This is a system where "the individual is at the center of knowledge, decision-making, and responsibility for their own health. The "knowledge of health and finances are available in the most accurate, least expensive, and most convenient manner possible."

They go on to envision a system where "individuals have accurate, timely, personalized knowledge about their health and treatment options, including information about cost and quality. They have the assurance that their treatment is based on the most up-to-date evidence-based medicine, and there is a focus on preventive care and early intervention. The system encourages and rewards wise healthcare purchasing decisions and offers more choices of higher quality at lower cost."

Sounds reasonable and a far cry from where we are. You would think that the Intelligent Health System would have to be more efficient, coordinated, and less costly than the system we are struggling with today.

The question remains, how do we get there?

When you boil it all down, most of the major challenges we face in health care seem to be directly related to poor communication, how it is organized, and how we pay for care. We have evolved into an extremely fragmented delivery model with a payment structure that encourages providers of care to deliver a high volume of services just to survive. Yes, we've had the pay-for-performance initiatives, prospective payment changes, and other "side-bar" activities that

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Medical Home- The Founding Principles

The medical home concept originated in 1967 and was initially defined largely by the American Academy of Pediatrics. Since then, other provider groups have exhibited interest in replicating the idea resulting in the establishment of the following "joint principles" of a Patient-Centered Medical Home:

American Academy of Family Physicians (AAFP)
American Academy of Pediatrics (AAP)
American College of Physicians (ACP)
American Osteopathic Association (AOA)
Joint Principles of the Patient-Centered Medical Home
March 2007

Introduction

The Patient-Centered Medical Home (PC-MH) is an approach to providing comprehensive primary care for children, youth and adults. The PC-MH is a health care setting that facilitates partnerships between individual patients, and their personal physicians, and when appropriate, the patient's family.

The AAP, AAFP, ACP, and AOA, representing approximately 333,000 physicians, have developed the following joint principles to describe the characteristics of the PC-MH.

Principles

- *Personal Physician is Identified
- *Care is Coordinated Through a Physician-Directed Medical Practice
- *Uses Whole Person Orientation
- *Care is Coordinated and Integrated
- *Quality and Safety Are the Hallmarks of a Medical Home
- *Enhanced Access to Care is Available
- *Payment Appropriately Represents the Added Value Delivered to Patients

We'd love to hear from you. Let us know your thoughts, your feedback, and other ideas.

e-mail us at: info@collaborationhealthcare.com

Can We Make It Work? (con't)

have attempted to address specific issues, but our fundamental system remains the same. Until we address how the system is organized and financed on a broad scale, we are most likely going to continue to struggle with the costs.

The idea of a Patient Centered Medical Home has been around for over 40 years and was initially developed for pediatrics. The concept expanded into other specialty areas over the years and now, the health care system is trying to figure out a way to expand its application to a much, much broader scope than ever before-coordinating primary care delivery. The model being discussed is simply a more organized method of delivering, organizing, and paying for health care services than we have today. The medical home idea has a lot of potential but is going to require collaboration of all of the different stakeholders; consumers, providers, payers, and legislators. The trick is going to be to first get everyone to play together and agree with what it really is and how it's going to work.

What Is a Medical Home?

There are already different variations of Medical Home, Patient Centered Medical Home, Advanced Medical Home, Health Care Home- or whatever you want to call it- floating around in our system today. While some of the details may vary, all are organized under a central theme of delivering primary care services through a "physician-directed practice that provides care that is accessible, continuous, comprehensive, and coordinated and delivered in the context of family and community."

Most of the models include the designation of a single medical provider to organize and coordinate the total health care needs of an individual and to help them navigate the health care system. The idea uses technology extensively to track patients, coordinate referrals and care, monitor results, and aid communication. NCQA has already established a medical home accreditation that is heavily weighted in the use of technology as a determinant of being accredited as a real "medical home".

The medical home idea has some traction. The Centers for Medicare and Medicaid Services (CMS) is implementing a demonstration project on the medical home idea, some health systems have begun to organize care delivery using medical home principles, state governments have enacted legislation including the medical home concept as a focal point of health policy, and health plans have begun individual initiatives to evaluate the use of medical homes as an alternative delivery strategy.

Some Challenges

As with anything in health care, the devil is going to be in the details. Broad-based expansion of the medical home idea across the health care spectrum (which is what we need) is going to require some work. It will require a level of cooperation and collaboration that we haven't seen in this industry to-date. And, success is going to require overcoming many of the challenges currently existing in the fragmented system we've created.

Technology- The medical home idea relies heavily on communication and technology to make it work. We are all well aware of the technological limitations inherent in the system today. A medical home requires streamlined communication and tracking to be able to communicate effectively with other providers, payers, and the individual patient. The June, 07 Evaluators Report on the National Demonstration Project for TransformMed (a medical home demonstration project) provided a clear indication of our status when it stated, "Currently, the technology landscape for medical practices resembles a pile of different jigsaw puzzles all thrown together." While we are making progress, we have a long ways to go.

Definition- As we stated, there are different variations of the medical home idea evolving out in the marketplace. An article in the September 18, 2008 edition of the New England Journal of Medicine cautioned for a need of a "broader consensus on what medical homes reasonably can be expected to accomplish, and how they can best be developed in different practice environments, and supported with altered payment policies". They went on to say medical home initiatives are being established with different focuses; patient-centered for one, "system ness" of care (aided by new technologies or organization structures) for others, and chronic care management for still others. While this approach may help determine the "best" medical home approach to use over time, we need to make sure we don't get distracted from the common intent of what we hope to accomplish in the first place. Ron Parles, Exec. V.P. of Geisinger Health System commented, "If we don't get the consumers into an organized system of care that is focused on the right things, there's no hope."

Don't Lose Sight of the Patient (the Consumer)- Some of the medical home initiatives are including consumers or advocates in their development. But, as we all know, when you get clinicians, academics, and legislators at the same table with 1 or 2 consumers it is very easy to bury what they have to say. The Sept/Oct; 2008 edition of Health Affairs recognized the need for consumer involvement and consideration when it stated, "As the medical home concept is further developed, it will be important to not overemphasize the redesign of (clinical) practices at the expense of patient-centered care".

Collaboration- Our health care system just doesn't collaborate well. There are just simply too many individual agendas to protect with the way we're structured today. Information-sharing and collaboration will be a key to success in any medical home model. We will need a collaborative health care structure that is aligned with strategies and incentives that foster shared accountability among all providers of care for measurability and transparently improving the quality of care and reducing cost.

In its 2001 report, Crossing the Quality Chasm, the Institute of Medicine identified "patient-centered care" as one of the six overlapping domains of clinical care quality along with safety, effectiveness, timeliness, efficiency, and equity. The medical home idea is the first major concept that is being taken seriously to return patient-centered care to our health care system. The idea has significant potential, but also has many challenges to overcome.

Let's hope the system can work together to expand this idea and move closer to an Intelligent Health Care System concept- one that is less costly, and focuses on the needs of the individual

Something To Think About

"Many people fail in life, not for lack of ability or brains or even courage but simply because they have never organized their energies around a goal."

Elbert Hubbard

"The highest genius is willingness and ability to do hard work"

Robert S. MacArthur