

Background

As the nation seeks answers for improving the quality and efficiency of health care, the health center model has the potential to prove that a coordinated and comprehensive approach to care delivery is a solution. Because of their longstanding experience, 33 Massachusetts community health center sites have partnered with the Executive Office of Health and Human Services in two medical home initiatives that will help develop practice changes for all of the state's primary care providers.

The patient-centered medical home model provides benefits to both patients and caregivers. Patients gain more one-on-one time with their physicians and primary care team members and become better engaged in their long-term health goals and treatment decisions. At the same time, caregivers work more collaboratively in addressing patients' needs and in coordinating and monitoring their care. Ultimately, this approach improves health outcomes, lowers costs and can help address a national and growing primary care physician shortage.

Impact

Community health centers participating in both medical home initiatives are demonstrating improved access for patients through timely appointments for routine and episodic care, and proactively planning care with patients who are identified as having chronic illnesses or other health issues that require active management. These efforts in combination with ongoing health technology development at health centers will have a major impact on patient health outcomes and costs by reducing unnecessary ER visits, hospitalizations and overall utilization of expensive specialty care.

Five Massachusetts health centers have achieved the "gold standard" measure for the medical home model adopted by the National Committee for Quality Assurance (NCQA), a not-for-profit organization dedicated to improving the quality and coordination of care in the health system. After undergoing rigorous evaluation, the five health centers are among a handful of providers in the state to attain this level of recognition.

Issue

The Medical Home Initiative is being developed in parallel with state payment reform proposals that will help determine how providers will be reimbursed based on patient-centered models of care. It is important to remember that community health centers care for disproportionate numbers of lower income and ethnically and culturally diverse patients with chronic and complex medical and social needs. As a result, their patients rely on comprehensive teams of primary care practitioners that include language interpreters, social workers and nurse educators — just to name a few. In addition, health centers have limited access to capital markets, impacting their ability to finance health information technology projects that are critical to monitoring quality and costs.

Solution

Payment reform models must take into consideration the cultural and socioeconomic-based needs of patients served by health centers as well as health centers' limited access to capital financing for technology.