Implement a quality improvement initiative to standardize Operations Procedures (written processes). Design a Microsoft Excel tool to simplify the planning process. Despite spending more per capita on health care, the Patient panel of 19,000, ages birth to 21 years, in Utilize a real time planning summary score to facilitate the planning process. Develop a planning matrix to facilitate and track the completion of tasks required to advance to level 2.

Background

- Health care expenditures for pediatric patients in the United States totaled $117.6 billion in 2011.
- Despite spending more per capita on health care, the United States falls behind 10 other industrialized countries on many significant outcome measures.
- Several of these measures are specifically addressed by the PCMH model, including improved access to primary care, care coordination to improve effectiveness and efficiency, and consideration of patient preferences.
- The term medical home first appeared in the literature in 1967. It has evolved to become a philosophy regarding the way in which care is delivered.
- The Patient Protection and Affordable Care Act (PPACA), signed into law by President Obama in 2010, places a strong emphasis on strengthening the nation’s primary care system, with adoption of the PCMH being an essential component.
- A substantial body of research indicates the PCMH model is associated with improved clinical outcomes, decreased health care expenditures, and improved patient and family satisfaction.

Comprehensive Childcare Associates (CCA)

- Four physician primary care pediatric practice located in Sarasota, FL.
- Patient panel of 19,000, ages birth to 21 years, in Sarasota and Manatee county area.
- Obtained level 1 NCQA PCMH recognition April 2015 under 2011 standards.

Problem Statement

- NCQA standards changed significantly from 2011 to 2014, complicating advancement to a higher level of recognition.
- The 2011 level 1 recognition score decreased under the new standards, resulting in a steeper climb to level 2.

Solution

- Design a Microsoft Excel tool to simplify the planning process and facilitate completion of the 2011/2014 crosswalk/gap analysis.
- Capture each PCMH standard on a separate worksheet, along with its associated elements and factors.
- Automatically compute a planning score for each standard as elements and factors are selected for inclusion.
- Utilize a real time planning summary score to facilitate the planning process.
- Develop a planning matrix to facilitate and track the completion of tasks required to advance to level 2.

Framework

Donabedian model

- The structure is a pediatric practice.
- The process is the way care is delivered within the structure.
- Outcome is strongly linked to quality of delivered care, as well as to the structure facilitating its delivery.

- Outcome measures are clinical outcomes, health care expenditures, and improved patient and family satisfaction.

Results

- The 2011 NCQA PCMH standards included a total of 151 factors.
- After the 2014 program redesign, the number of factors increased to 177.
- In obtaining 2011 level 1 recognition, CCA met 74 factors and was awarded a total of 56 points.

Method

NCQA Model

- Consists of six standards.
- Collectively, the standards contain 27 elements.
- Each element is scored based on points for factors which are met.

Implementation

- Comprehensive Childcare Associates is postured to obtain NCQA PCMH level 2 recognition.
- Planning score of 73/100 achieved.

Discussion

Barriers to PCMH Implementation and Recognition Obtained

- Required time, increased costs, and lack of reimbursement.

Planning Team

- Donated 428.5 hours towards implementation of this initiative.
- Without this assistance, additional staff salaries would have been required.

CCA Costs

- $2,280 in application fees to NCQA.
- Salary for 1.5 full-time equivalent (FTE) registered nurse (RN) care coordinators to support the additional care provided under the PCMH model.

CCA Benefits

- Increased reimbursement rate for PCMH recognition from only one insurance company.
- Savings
- Savings realized under the PCMH model accrue to payers and patients.

The Future

- With the goal of continuing to increase implementation of the PCMH model, it will be necessary for savings to be shared with clinicians such that the increased costs associated with providing care under a PCMH model are feasible.

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References

- See available handout for references.