AAAHC’s Medical Home

The Essential Principles of a Successful Medical Home

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A Brief History of the Medical Home

- 1967: American Academy of Pediatrics introduces concept
Identify the Promise of the Medical Home

• Consistent with the basic principles of medical ethics:
  – doing good for the patient (beneficence)
  – do no harm (Non-maleficence)
  – autonomy (being informed—patients participate in their care)
  – Justice (providing access & availability)

• These are Hippocratic principles - not processes (why we’re in Medicine)
So what are the *principles* of an AAAHC Medical Home?

1. Focus on physician/patient relationship
2. Make the patient the center of care
3. Provide accessible, **comprehensive**, continuous and quality care
4. Emphasize data that are meaningful to the patient
5. Give it time
Principle #1: Relationships

• Patient agrees to fully participate with Medical Home team in health care decision making (a partner)

• Medical Home provider and team members understand their responsibilities to the Medical Home patient (or guardian when appropriate)

• Medical Home team understands the full scope of a patient’s life: physical, emotional, stressors, lifestyle choices (comprehensive care)
Principle #2: Patient-centeredness

Make the patient the center of care:

- The patient is focus of the care we provide--not the disease or the diagnosis--not the payer
- Patient is part of team that decides which interventions are likely to succeed (a partner)
- Provider knows and considers the patient’s history, needs, preferences, and life goals
- Medical Home provides services with patients, not “to” or “for” them.
Principle #3: Accessibility, Comprehensiveness and Continuity

– Wellness; disease prevention; healthy lifestyle guidance; acute & chronic disease care; and end-of-life counseling/support
– Transitions of care from infancy to old age—Inpatient to Medical Home (outpatient), etc, are coordinated and managed
– All care is documented in a comprehensive patient centered health record
Principle #4: Data/Information that is Meaningful to the Patient

Create, use and emphasize meaningful data that is understood by the patient

- Patients not interested in an organization’s HbA1C therapeutic ranges or HEDIS data
- Patients want personal data they understand
  - What do my test results mean?
  - Am I getting better?
- Incorporate the patient’s goals and life hopes into the treatment plan
- Provide/support reimbursement incentives based on individual patient progress
Principle #5: Give it Time

• Practice transformation does not occur overnight, but implementation and help is available from experienced surveyors and AAAHC.

• Many involved have differences in personal abilities/motivations to embrace change—educational experience, skeptics, diehards, generational, economic, etc.

• The Patient is a partner in the transformation process & must learn/agree to new behaviors and responsibilities.
Benefits of the Medical Home

Cost effectiveness

– 10-15% decrease in hospitalization
– 20% fewer emergency room visits
– Savings between $200 and $600 per patient per year for case management – low-hanging fruit
– The closer the doctor/patient relationship, the greater the savings--
– The more the investment by the PCP and the patient in the relationship, the greater the savings
– 30% reduction in annual health care costs ($10,000 reduced to $7,000 per year)
AAAHC Medical Home Programs: Accreditation or On-Site Certification

Accreditation Including Chapter 25 is the Medical Home:
• Comprehensive review of all services offered by the organization, including Chapter 25 and the principles we have reviewed and how each relates to other core and adjunct chapters and standards

On-Site Certification:
• Comprehensive review of the Medical Home
  8 Chapters covering the 5 principles of the Medical Home, i.e., Relationship, Accessibility, Comprehensive Care, Continuity, and Quality.