

Maryland Patient Centered Medical Home Pilot is Underway

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Early in the Spring of 2010, I had the pleasure of being one of MAFP's representatives to a Maryland Patient Centered Medical Home Pilot Physician Outreach Strategies Meeting held at the University of Maryland School of Medicine Department of Family and Community Medicine (UMDFCM). The purpose of the meeting was to discuss the recent enactment of HB 929/SB 855, the Patient Centered Medical Home (PCMH) Program and its aftermath... the development of Maryland's PCMH Pilot Program for primary care physician practices.

The meeting was hosted by the Maryland Department of Health & Mental Hygiene and facilitated by the Maryland Health Care Commission. Other entities represented were the UMDFCM and the Johns Hopkins University School of Medicine. MAFP then-President Dr. Yvette L. Rooks, Public Health Committee Chair Dr. Niharika Khanna and Southern District Director Dr. Ramona Seidel also attended for MAFP and for their professional entities. Each has been actively involved in PCMH initiatives nationally and in Maryland.

At the meeting we learned about the history and major elements of the enacted legislation. Prior to enactment, the Maryland Health Quality and Cost Council (the Council; appointed by Maryland's Governor in 2008) planned to launch a PCMH pilot program in the Summer/Fall of 2010. Since enactment, the MHCC is the organization which will oversee the PCMH Pilot. Currently in the planning stage to line-up participating practices, it is projected that the PCMH Pilot Project will officially launch in January, 2011. We hope that several MAFP-member practices will choose to participate. At this writing, the intent is to identify 50 practices statewide for the 3-year PCMH pilot program.

PCMH is a *model of practice* where a team of health professionals, guided by a family/primary care physician, provides continuous, comprehensive and coordinated care throughout a patient's lifetime. The PCMH provides for all of a patient's health care needs, also collaborating with other qualified professionals as needed, to provide patient-centered care through evidence-based medicine, expanded access and communication, care coordination and integration, and care quality and safety.

How does patient centered care differ from care provided by family doctors traditionally? This is an often asked, fair question. Unfortunately, the PCMH moniker is not descriptive or distinguishing and many times does cause confusion. The term refers to primary care practices (as opposed to individuals) of any size, each having the potential to transform to PCMHs (solo, small group, large...). Please go to our Chapter website at www.mdafp.org and click on the PCMH logo (the little house) where informational documents are available for viewing/downloading. If you wish these documents mailed or faxed to you, please contact me at 410-747-1980, ebarr@mdafp.org.

MAFP, along with the AMA, ACP, ACP and AOA, have endorsed the PCMH as a model that enhances the role of a primary care physician while providing high quality, lower cost patient care. The Primary Care Patient-Centered Collaborative, a national consortium of purchasers, payers, providers and consumers formed to advance primary health care, serves as an organizing entity for raising awareness and bringing together organizations that are implementing the PCMH. MAFP joined PCPCC this year.

The 100+ member PCMH Workgroup, appointed by the Council, included Dr. Khanna (UMDFCM) and Dr. Seidel (Bay Crossing Family Medicine). The Workgroup presented its recommendations to the Council on October 1st. The Council adopted 12 recommendations that has moved the pilot toward reality in 2010. A key recommendation was that any adult primary care and pediatric practice that endorses the PCMH Joint Principles and can attain NCQA Level 1 PPC-PCMH should be eligible to participate in the pilot; however, the Maryland Health Care Commission will select fifty practices for participation.

The Council also adopted a recommendation encouraging major insurance plans (private and governmental) to participate. The new law requires all of Maryland's major private insurers to participate. Practices that join the pilot will test a new care, delivery and reimbursement model. Reimbursement to participants will be based on fee-for-service, care coordination payments, per member per month fees and performance bonuses. Over time, the Council hopes the PCMH will demonstrate improved quality for patients, increased physician satisfaction and cost savings to the system through avoided emergency room visits and reduced hospital stays. The Council plans to launch the pilot with an outreach and awareness program for physicians and clinical staffs in June and July of this year.

To learn more about the PCMH legislation, PCMH, NCQA Level 1 certification and/or participation in the Maryland PCMH Pilot Program contact:

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Informational Websites for PCMH, the Maryland PCMH Pilot and NCQA recognition:

Maryland Academy of Family Physicians	www.mdafp.org
Patient Centered Primary Care Collaborative	www.pcpc.net
Maryland Health Care Commission	www.mhcc.gov
Maryland Health Quality and Cost Council	www.dhmf.state.md.us/mhqcc
NCQA	www.ncqa.org

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