MEDICAL HOME DEMONSTRATION

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CMS
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LEGISLATIVE MANDATE
Section 204 – Tax Relief & Health Care Act of 2000

- Redesign the Health Care Delivery System

- Provide Targeted, Accessible, Continuous, Coordinated, Family-Centered Care

- Provide Care Management Fees

- Provide Incentive Payments

LEGISLATIVE MANDATE
Section 204 – Tax Relief & Health Care Act of 2000

- High-Need Population

   Individuals with multiple chronic illnesses that require regular medical monitoring, advising, or treatment.

HIGH-NEED POPULATION

- **83% of Medicare Beneficiaries Have at Least One Chronic Condition**

- **23% of Medicare Beneficiaries Have Five or More Chronic Conditions**
  - See 13 physicians on average per year
  - Fill an average of 50 prescriptions per year
  - Most likely to have a preventable hospitalization
  - Have highest out-of-pocket spending

DEMONSTRATION

- 3-Year Period

- No More that 8 States

- Practices with fewer that 3 FTE physicians

- Physicians in larger practices
  Particularly in rural and underserved areas

- Specialist and Sub-Specialist Practices

MEDICAL HOME DEFINITION

- Medical Home Means:
  - Physician practice
  - Providing safe and secure technology
  - Promote patient access to personal health information
  - Using health assessment tool
  - Providing patients with enhanced and convenient access to health care

QUALIFYING AS A MEDICAL HOME

- Participation will be voluntary

- Practices will agree to become medical homes

- All practices will meet standards

- Practices will agree to maintain medical home status

DESIGN

- Pay a monthly fee for a "personal physician"
- Personal physician coordinates all patient care within and outside of their practice
- Ensures patient access to care and health information
- Encourages patient involvement in their own care

EXPECTATIONS

- Improved coordination will lead to improved outcomes
- Improved outcomes will lead to less cost
- Cost savings can be used for additional incentives
- Patients do better and practices do better