

#### Primary Care Medical Home

Accreditation and Certification in One

- Single on-site survey for both
- Accreditation from a name that patients recognize and trust
- Exceptional customer service

# Joint Commission's Primary Care Medical Home Certification Option

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National Health for the Homeless Conference May 7, 2015 Washington, DC

ACHIEVING PCMH CERTIFICATION PANEL



#### Joint Commission's Vision & Mission

#### Vision:

All people always experience the safest, highest quality, best-value health care across all settings.

#### Mission:

To <u>continuously improve</u> health care for the **public**, in collaboration with other stakeholders, by **evaluating** health care organizations and <u>inspiring them to excel</u> in providing safe and effective care of the highest quality and value.



## Background on Joint Commission

- Private, non-profit created & governed by health care professionals and consumers
- Accredits/certifies over 20,000 total organizations (hospitals, labs, behavioral health, home care, long term care, ambulatory care)
- Accrediting over 2,100 Ambulatory Care organizations since 1975 covering 7,600 sites of care, including:
  - Single and Multi-Specialty Group Practices
  - Community Health Centers/FQHCs
- Primary Care Medical Home (PCMH) Certification since 2011









#### **TERMINOLOGY**



- Patient-Centered Medical Home (NCQA)
- Patient Aligned Care Teams (VHA)
- Health Care Home (several states)
- Advanced Primary Care Practice (CMS)
- Community Health Care Home (Sweden)
- Community Based Medical Home (Army)
- Medical Home Port (Navy)

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**Ambulatory Care** 

- Primary Care Medical Home (Joint Commission Ambulatory & Hospital)
- Behavioral Health Home (Joint Commission Behavioral Health Care)

### Primary Care Medical Home Initiative Timeline

- July, 2011: Launch certification for Ambulatory Care accredited organizations; data (as of May 1, 2015):
  - 140 organizations & 1,287 sites of care have PCMH
    - 29 Centers w/ HCH (330h) funding have PCMH
       (62 Accredited Health Centers with HCH \$)
- Z011 2015: Work with public/private payers in demonstration pilots around reimbursement issues
- Feb 2013: Launch PCMH certification for accredited Hospital-based ambulatory care practices
- Jan 2014: Launch Behavioral Health Home certification option
- July 2014: Revise standards for Ambulatory PCMH certification option

# HEALTH CENTERS WITH PCMH CERTIFICATION

www.jointcommission.org/accreditation/pchi.aspx





#### **Joint Commission**

Accreditation + Primary Care Medical Home (PCMH) or Behavioral Health Home (BHH) Certification

> PCMH/BHH Certification Requirements

- √ Patient-Centered
- √ Superb Access
- ✓ Comprehensive Care
- ✓ Coordinated Care
- √ Systems Approach to Quality/Safety

Accreditation Requirements for:

Ambulatory Care - Hospital –

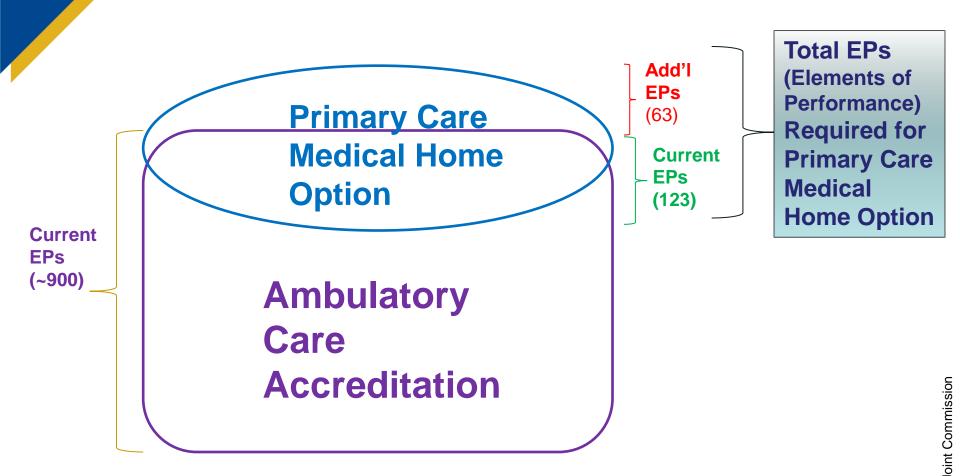
Critical Access Hospital – Behavioral Health

- √ Infection Prevention/Control
- √ Environment of Care
- ✓ Medication Management
- √ Emergency Management
- √ Human Resources
- √ Waived Testing
- ✓ Record of Care
- √ Information Management
- ✓ Leadership
- ✓ Provision of Care
- √ Rights of Patients
- √ Performance Improvement

Single integrated, on-site survey evaluating both accreditation and PCMH/BHH requirements



# Primary Care Medical Home Certification Overlap with Ambulatory Care Accreditation





#### PCMH Certification - Distinguishing Features for Free-standing Ambulatory Care Organizations

- Voluntary/optional certification requiring Joint Commission <u>ambulatory care accreditation</u>
- On-site survey to evaluate compliance with both accreditation and additional PCMH requirements
- Timing of survey, conducted either:
  - with regular on-site triennial accreditation survey
  - separately as "PCMH extension" survey



#### ...PCMH - Distinguishing Features cont.

- No special application or document submission requirement
- Modest add-on fee = \$900 spread over three years of certification period (as of 1/1/14)
- Organization-wide certification for 3 yrs (includes any applicable PCMH sites)
- Primary Care Medical Home certification publicly available on <a href=Quality Check</a>





# HEALTH CENTERS WITH PCMH CERTIFICATION

www.qualitycheck.org/Consumer/SearchQCR.aspx





# Growing List of Payors' Accepting Joint Commission PCMH

#### Public

- Medicaid programs in Iowa, Louisiana,
   South Carolina, Nebraska, Montana, Ohio
- Federal Off. of Personnel Management
- HRSA/BPHC (5 year contract through '17)

#### Private

**Ambulatory Care** 

- FL, SC, NC Blue Cross Blue Shields
- Humana Health Plan, LA Health Care Plan,
   Amerigroup of Florida, Meritus/AZ
- No preferences: Aetna; UnitedHealthcare

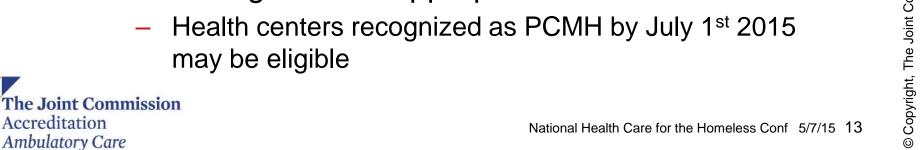
#### **BPHC/ HRSA Health Center Quality Awards**

#### PCMH Recognition Award – Late FY 14

- Health centers recognized as PCMHs by July 1<sup>st</sup> 2014 were eligible
- Annual award added to base adjustment for health centers that maintain PCMH recognition (\$25,000 if at least one site PCMH certified/recognized, plus another \$5,000 per PCMH site)

#### PCMH Recognition Award - Late FY 15

Pending Federal appropriations



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# PCMH "Eligible Care Delivery Site"

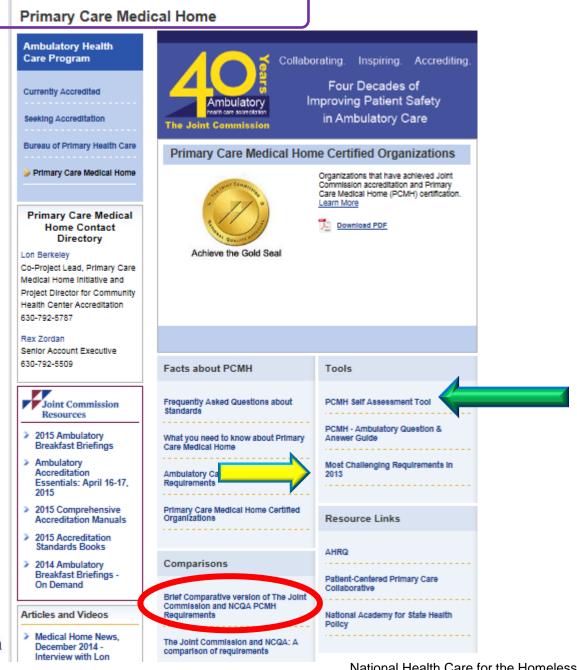
#### Definition

- A location where <u>on-going established relationships exist</u> <u>between a primary care clinician and a panel of patients.</u>
- Site needs to provide on-going and continuous primary care to a majority of its patients, irrespective of the location of the site or the population of patients being served.

#### Examples of sites not PCMH eligible include:

- administrative offices, dental-only practices
- lab/phlebotomy-only, physical therapy services-only
- opioid treatment programs, podiatric services-only,
- mental health services-only, and,
- sites that <u>primarily</u> provide episodic or urgent medical care rather than on-going and continuous primary care.





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# Primary Care Medical Home Requirements

- There are 5 Operational Characteristics (AHRQ)
  - 1. Patient-Centeredness
  - 2. Comprehensive Care
  - 3. Coordinated Care
  - 4. Superb Access to Care
  - 5. System-Based Approach to Quality and Safety
- PCMH video by Community Health Center, Inc, in Middletown, CT

https://vimeo.com/62339743.



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#### MOST CHALLENGING PRIMARY CARE MEDICAL HOME REQUIREMENTS

Joint Commission PCMH Requirements Generating FINDINGS in 10%+ Organizations Surveyed (2011 - 2014)

(Note: Requirements updated to reflect July 2014 wording)

#### SELF-MANAGEMENT GOALS

- Patient <u>self-management goals</u> are identified, agreed upon with the patient, and incorporated into the patient's treatment plan. (PC.01.03.01/EP 44)
- The primary care clinician and the interdisciplinary team educate the patient on self-management goals and techniques based on the patient's individual needs. (PC.02.03.01/EP 28)

#### HEALTH LITERACY

The interdisciplinary team identifies the patient's <u>health literacy needs</u>. (PC.02.02.01/EP 24)

#### TRACKING REFERRALS

- When a patient is referred to an external organization, the interdisciplinary team <u>reviews</u> and tracks the care provided to the patient. (PC.02.04.05/EP 6)
- Members of the interdisciplinary team provide comprehensive and coordinated care, and maintain continuity of care. (PC.02.04.05/EP 2)

#### PERFORMANCE IMPROVEMENT

- The organization <u>collects data</u> on (PI.01.01.01/EP 42):
  - Patient experience and satisfaction related to access to care and communication, and
  - Patient perception of the comprehensiveness, coordination and continuity of care.
- The organization collects data on patient <u>access to care within time frames</u> established by the organization. (PI.01.01.01/EP 41)

#### PATIENT COMMUNICATION

The clinical record contains the <u>patient's communication needs</u>, including preferred language for discussing health care. (RC.02.01.01/EP 29)

#### ACCESS TO CARE

- The organization <u>provides patients with the ability to do</u> the following 24/7: (PC.02.04.01/EP 1)
  - Contact the PCMH to obtain a same or next day appointment
  - Request prescription renewal
  - Obtain clinical advice for urgent health needs.

#### INFORMATION TO PATIENT/FAMILY ABOUT PMCH

- The organization provides information to the patient about <u>how the PMCH functions</u>, including the following: (RI.01.04.03/EP 3)
  - Selection of a primary care clinician
  - Involvement in his or her own treatment plan
  - Management of referrals
  - Coordination of care
  - Collaboration with patient-selected clinicians who provide specialty care or second opinions
  - Communication with the primary care medical home about health care concerns/other information.
- ➤ The organization provides patients <u>information about the mission, vision, and goals</u> of the primary care medical home. (RI.01.04.03/EP 1)



## What Does a Survey Look Like?

#### The On-site Event:

- Patient and Customer-Centric Focused
  - Patient observations and discussions with patient permission
  - Minimal interruption
- Educational and Informative
  - Shared observations
  - Leaders/managers/staff encouraged to participate

#### Surveyors

- Clinical & administrative professionals experienced in ambulatory arena
- Collaborative and courteous



## PCMH On-Site Survey Process...

- On-site survey
  - No change to current survey sessions
- Trace patient experience (patient tracers)
- Conduct patient interviews about:
  - Selection of primary care clinician
  - Information received by patient about how to access clinic to meet their care needs
  - Consideration of language, cultural needs & preferences

## ...On-Site Survey Process (cont'd)

#### Clinical record review

- Patient self-management goals
- Follow-up on care recommendations, test results
- Discussions with leaders & staff
  - Scope of services available: acute, chronic, behavioral?
  - Determining composition of interdisciplinary teams

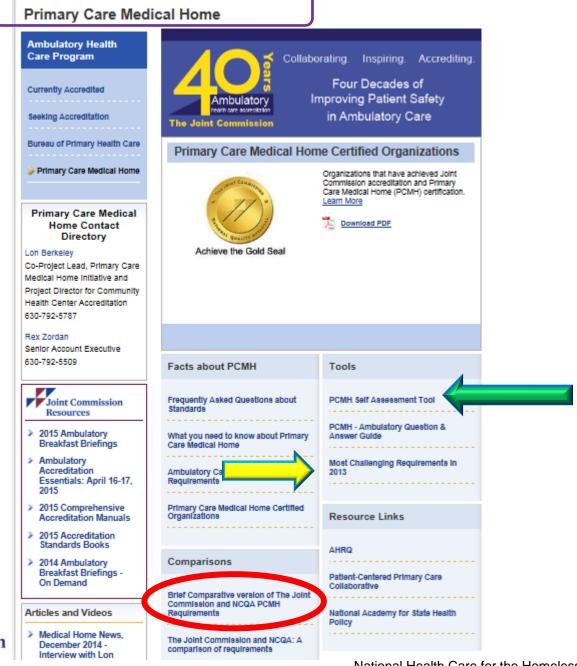
### ...On-Site Survey Process (cont'd)

- Infrastructure: clinical decision support tools, use of HIT, e-prescribing, referral tracking
- HR file review
  - Primary care clinician working within scope of practice
- Review of performance improvement data
  - Patient perception of access, comprehensiveness, and care coordination



## **Post-Survey Process for PCMH**

- Follow-up to "Requirements for Improvement"
  - Evidence of Standards Compliance for both PCMH and other ambulatory care standards
- Acceptance of Evidence of Standards Compliance
  - Special Certification Letter & Award
  - Posting on Quality Check
- 3-year Accreditation and Certification period
- "Focused Standards Assessment"
  - Annual self-assessment of PCMH and ambulatory care standards



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## Primary Care Medical Home Comparisons

- HRSA/BPHC's "National Quality Recognition Initiatives Resources: Comparison Chart"
- Urban Institute's "Comparison of Ten Patient-Centered Medical Home Recognition Tools"
- Medical Group Management Association Report's "Patient Centered Medical Home Guidelines - A Tool to Compare National Programs"
- The <u>American College of Physicians</u> updated "Medical Home Builder"



## Comparison to NCQA PCMH Recognition





#### NCQA Level 3 PCMH Recognition Requirements Compared to 2011 Joint Commission Standards and EPs

FEATURE	THE JOINT COMMISSION	NCQA	
Name	Primary Care Medical Home	Patient-Centered Medical Home	
Award Label	Certification	Recognition	
Accreditation of organization also required?	YES	YES NO	
Levels of Achievement?	NO	YES: Levels 1, 2, 3	
Need to submit documentation?	NO	YES	
On-site survey process for all organizations to	YES	NO	
evaluate compliance?		(Conducted through on-line submission of documentation)	
On-site consultation regarding approaches to standards compliance?	YES	NO	
Copy of preliminary report available on site?	YES	NO	
Scope of Evaluation	Entire organization	Delivery site specific	
Length of award	3 years	3 years	

www.jointcommission.org/accreditation/pchi.aspx



# Comparability of Joint Commission to NCQA "Levels" (based on 2011 requirements)

THE JOINT COMMISSION	COMPARES TO	NATIONAL COMMITTEE ON QUALITY ASSURANCE
Ambulatory Care Accreditation		Level One - Patient-Centered Medical Home recognition
Primary Care Medical Home Certification option plus Ambulatory Care Accreditation		Level Three - Patient- Centered Medical Home recognition



#### Joint Commission PCMH vs. NCQA

#### **Easier in 5 Ways**

- 1. Single organization for both PCMH and accreditation (including lab & behavioral health, if applicable).
- 2. Single site visit integrates evaluation of both ("2 for 1").
- 3. PCMH Certification applies to the entire organization (not just a single site).
- 4. Surveyors provide on-site tools, tips, and suggestions for compliance.
- 5. Continuing assistance throughout the post-survey follow-up period.

#### Harder in 4 Ways

- **1. More requirements** must be in compliance.
- 2. On-site surveys are unannounced (unless seeking first time accreditation).
- 3. Annual self-assessment is required ("Intra-cycle Monitoring") during nonsurveyed years.
- 4. Concerns about safety/quality from patients, staff, and community can be **submitted** to The Joint Commission.

# **PCMH** Resources for Free-standing Ambulatory Care Practices/Organizations

Joint Commission PCMH website

http://www.jointcommission.org/PCMH

- PCMH requirements & Self-assessment Tool
- News, articles and links to other resources!
- Comparisons to other evaluative models





Linda M Jordan BSRN.

Field Representative

Ambulatory Care

The Joint Commission uses the federal Agency for Healthcare Research and Quality's definition:

The degree to which an individual has the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

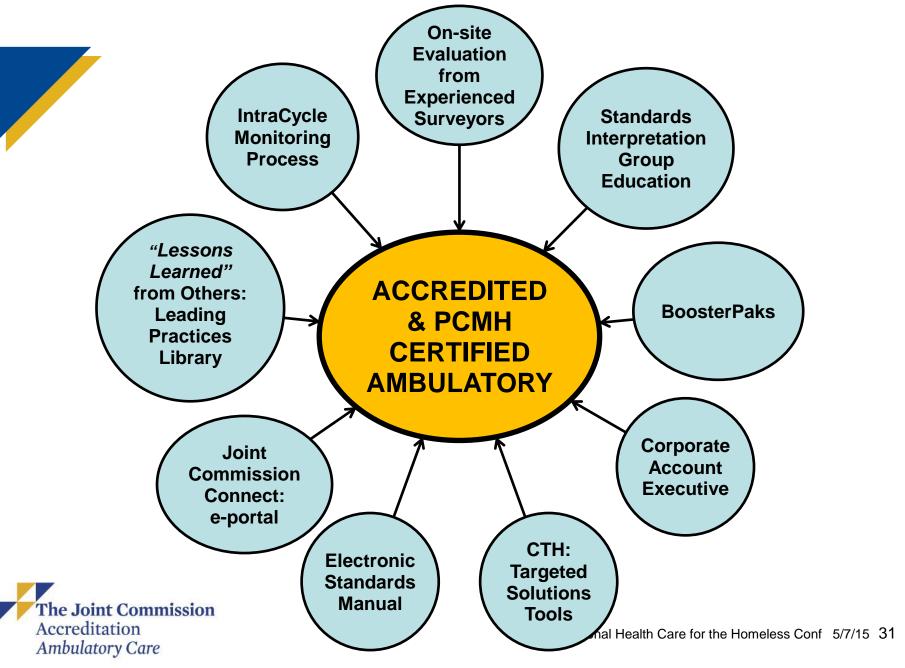
Not simply the ability to read.

Requires a complex group of reading, listening, analytical and the ability to annly these skills to decision-making skills and the ability to apply these skills to Affected by illness, age, stress, tiredness, mood and diagnosis

# Self-Management Goals Made Simple

(excerpts from 2014 PCMH Pre-conference)

#### **Diverse Services to Support Customers**



#### You are not alone! Be in touch!

For standards questions: 630-792-5900

#### "Standards Interpretation Group"

Ginny McCollum, or Kathleen Richmond



Use our web site: <a href="https://www.jointcommission.org">www.jointcommission.org</a>

### For BPHC-specific accreditation info:

 Rex Zordan, Account Executive 630-792-5509 (rzordan@jointcommission.org)

- Delia Constanzo, BPHC specialist 630-792-5011
   (dconstanzo@jointcommission.org)
- Kristen Kaszynski, Business Dev Specialist 630-792-5292 (KKaszynski@jointcommission.org)
  - Lon Berkeley, Proj Dir, & Co-PCMH Project Lead 630-792-5787 (<a href="mailto:lberkeley@jointcommission.org">lberkeley@jointcommission.org</a>)

#### Questions?



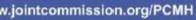


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#### ADDITIONAL MATERIAL

- PCMH Standards (including new in 2014)
- List of Health Centers with HCH 330h funding that are Joint Commission accredited and PCMH certified



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# Ambulatory Care Accreditation Standards already address:

- Ethics, Rights, & Responsibilities (RI)
- Provision of Care, Treatment, & Services (PC)
- Waived Testing (WT)
- Medication Management (MM)
- Surveillance, Prevention, & Infection Control (IC)



## Patient-Centered Requirements:

- Patient-selected primary care clinician (can be an MD/DO, NP, or PA)
- Provide information to patient about PCMH\*
- Identify, educate, and use patient selfmanagement goals\*
- Meet patient communication needs\*
- Assessment of health literacy\*

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**Ambulatory Care** 

- Clinical record contains patient's: Gender, race, and ethnicity; Family history; Work history; Blood pressure (for ages 3+); Smoking status (for ages 13+)
- Involvement in performance improvement
- \* Most Challenging Standard; Red = new as of July, 2014

## Comprehensive Care Requirements:

- Roles/responsibilities of the primary care clinician and interdisciplinary team
- Provide or facilitate patient access to:
  - Acute care /chronic Care needs
- Oral Health Behavioral health
- Rehabilitative services/equip
- Urgent and emergent care
- Substance abuse treatment
- Age/gender-specific preventive care Optical/Eye health
- Provide disease/chronic care management, including end-of-life care
- ✓ Use interdisciplinary teams (include MD/DO)
- Provide population-based care
- Care provided for a panel of patient



Red = new as of July, 2014

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### Coordinated Care Requirements

- Provide coordinated care & promote continuity of care among providers
- Referral tracking and follow-up\*
- Certified electronic health record to:
  - Document and track care and create reports
  - Appointment reminders
  - Disease management, preventive care
  - Support performance improvement
- Track patient progress towards treatment goals\*
- \* Most Challenging Standard; Red = new as of July, 2014



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## Access to Care Requirements:

- Ability for 24/7 access to\*:
  - Same day or next day appointment
  - Request prescription renewal
  - Obtain clinical advice for urgent health needs
- Flexible scheduling (e.g. open scheduling, same day appointments, arrangements with other organizations)
- 24/7 process for *responding* to patient's urgent care needs
- Online access to test/lab results, summary lists, medication lists (within 4 business days after available to the PCC/team)
- \* Most Challenging Standard; Red = new as of July, 2014

### Quality & Safety Requirements:

- ▼ Electronic prescribing for 50% of allowable scripts
- Computerized order entry labs, meds, imaging
- Use clinical decision support tools
- Collect data on\*:
  - Disease management outcomes
  - Patient perceptions of access to care within PCMH established time frames
  - Patient experience and satisfaction
- Use of data to improve performance

\* Most Challenging Standard; Red = new as of July, 2014



# Health Centers with Homeless Funding (HCH – 330h) that are Joint Commission Accredited & PCMC certified



Birmingham Health Care Franklin Primary Health Center El Rio Community Health Center Clinica Sierra Vista Community Health Centers of the Central Coast Family Health Centers of San Diego Northeast Valley Health Corp **Community Medical Centers** Optimus Health Care, Inc. Southwest Community Health Center Community Health Center, Inc. Cornell Scott Hill Health Corporation Agape Community Health Center/Duval County HIth Dept **VNA Health Care** Aunt Martha's Youth Service Center Crusader Clinic HealthNet Community Health Centers Family Health Centers Health Care for the Homeless Hamilton Community Health Network West Side Community Health Services Lincoln Community Health Center Charles Drew Health Center La Familia Medical Center Mt Vernon Neighborhood Health Center Ironton-Lawrence/ dba CAO Family Medical Centers Morton Comprehensive Health Services Multnomah County Health Department El Centro del Barrio (dba CentroMed)

