

Health Care Homes: The Choice for Primary Care

A BUSINESS CASE FOR EMPLOYERS

Benefits of Certified Health Care Homes Clinics

Health Care Homes (HCH) certified primary care clinics provide high-quality care based on individual needs and preferences. Individuals who select a HCH certified clinic will be part of a team of professionals, including their primary provider, working together to ensure optimum health and well-being. HCH help patients navigate the health care system and coordinates their care. Proven to have higher patient satisfaction, better health outcomes and lower costs of care¹, certified clinics are found across Minnesota and not tied to any one health system.

Minnesota Department of Health's HCH program endorses the following shared principles of the Primary Care Collaborative (thepcc.org), which are core components of HCH certification:

Accessible: Access to high-quality primary care can help people live longer, feel better and avoid disability.

Patient-centered: HCH are focused on the whole person - their physical, emotional, psychological and spiritual well-being, as well as cultural, linguistic and social needs. There are opportunities for individuals and their families to shape the design, operation, and evaluation of care delivery.

Team-based: Interdisciplinary teams, including individuals and families, work collaboratively and dynamically toward a common goal.

Coordinated: Patients in a HCH clinic have help coordinating their care so that everybody who is part of their care – including specialists and community services – inside and outside the clinic – is on the same page and working together.

Relationships: Trusted and enduring relationships between individuals, families and their clinical team members are hallmarks of certified HCH. There is continuity in relationships and in knowledge of the individual and their family/care partners that provides perspective and context throughout all stages of life, including end of life care.

High-Value: HCH achieve excellent, equitable outcomes for individuals and families by using health care resources wisely. HCH consider costs to patients, payers and the system. Primary care practices employ a systematic approach to measuring, reporting and improving population health, quality, safety and health equity, including partnering with individuals, families and community groups. Primary care practices deliver exceptionally positive experiences for individuals, families, staff and clinicians.

¹ Primary Care Collaborative, Shared Principles of Primary Care, 2024, <https://thepcc.org/about/shared-principles/>

Outcomes

Patient Centered Medical Home (PCMH) Model

In a report to the National Committee for Quality Assurance², authors noted the PCMH model:

- Increased utilization of primary care.
- Improved quality, effectiveness of care, and patient outcomes.
- Increased revenue.
- Demonstrated readiness to be successful in value-based contracts.

Minnesota's HCH Model: 5-Year Evaluation

A comprehensive evaluation of the HCH program³ by an independent evaluator found:

- HCH clinics were associated with higher quality of care for diabetes, vascular disease, asthma, depression and colorectal cancer screening than non-HCH clinics.
- For Medicaid enrollees, in-patient hospitalization rates were lower, as were emergency department visits.

Clinical Improvement in Diabetes Care

While diabetes prevalence and cost continue to increase, a study conducted by Rachel Cahoon, Research Scientist with MDH Health Economics⁴, found:

- HCHs had significantly better performance in Optimal Diabetes Care when compared to uncertified clinics, which were due to improved statin rates and higher tobacco free rates.

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To obtain this information in a different format, call: 651-201-5421.

² Patient-Centered Medical Home; Developing the business case from a practice perspective (PDF),

(https://www.ncqa.org/wp-content/uploads/2019/06/06142019_WhitePaper_Milliman_BusinessCasePCMH_Final.pdf)

³ Minnesota Department of Health (MDH), Evaluation of the State of Minnesota Health Care Homes Initiative – Evaluation Report for Years 2010-2014 (PDF),

(<https://www.health.state.mn.us/facilities/hchomes/legreport/docs/hch2016report.pdf>)

⁴ Minnesota Department of Health (MDH), Comparing Diabetes Care at Health Care Homes and non-Health Care Home clinics (PDF)

(<https://www.health.state.mn.us/facilities/hchomes/collaborative/documents/ld2019cahooon.pdf>)