

Frequently Asked Questions

What is the patient-centered medical home? A Patient-Centered Medical Home is a team-based model of care led by a personal physician who provides continuous and coordinated care throughout a patient's lifetime to maximize health outcomes. The PCMH practice is responsible for providing for all of a patient's health care needs or appropriately arranging care with other qualified professionals. This includes the provision of preventive services, treatment of acute and chronic illness, and assistance with end-of-life issues. It is a model of practice in which a team of health professionals, coordinated by a personal physician, works collaboratively to provide high levels of care, access and communication, care coordination and integration, and care quality and safety. (source: *American College of Physicians*)

What is the family-centered medical home? A family-centered medical home is not a building, house, hospital, or home healthcare service, but rather an approach to providing comprehensive primary care. In a family-centered medical home, the pediatric care team works in partnership with a child and a child's family to assure that all of the medical and non-medical needs of the patient are met. Through this partnership, the pediatric care team can help the family/patient access, coordinate, and understand specialty care, educational services, out-of-home care, family support, and other public and private community services that are important for the overall health of the child and family. The American Academy of Pediatrics (AAP) developed the medical home model for delivering primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective to all children and youth, including those with special health care needs. (source: *National Center for Medical Home Implementation*)

Where can I find a medical home for my child? The AAP and the NCMHI do not make referrals to families for a medical home, nor does the AAP recognize, certify, or accredit practices as medical homes. The NCMHI does, however, track information on projects and initiatives related to medical home that occur in states. This information can be found on the [State Pages](#) section of the NCMHI Web site. For information on practices that have successfully completed a recognition or accreditation program, visit the program that offers recognition/accreditation programs Web site. The NCQA hosts a Web page that allows visitors to [search for practices](#) by state that have completed their Patient Centered Medical Home recognition program. Remember that these practices have been recognized by the NCQA program, which the NCMHI is not affiliated with and does not formally endorse. The NCMHI Web site provides information about the various programs that are currently available or are under development on the [Medical Home Recognition and Accreditation Programs](#) page. (source: *National Center for Medical Home Implementation*)

I wouldn't say that my child's doctor qualifies as a medical home, but we really like him and his staff and don't want to change doctors. How can we get more of the "medical home" type of services and support through my child's doctor? You can start by sharing this toolkit with your physician and beginning a discussion about the reasons you believe your child would benefit from having a medical home. You can also share some of the research that shows how to create a medical home, financial considerations for medical homes, etc. Here's what the National Conference of State Legislatures has to say: Research shows that in countries where patients are connected to a medical home — and primary care physicians are the foundation of that home — people live longer, populations are healthier, patients are more satisfied with their care and health care costs are lower. When PCPs are able to provide care beyond brief face-to-face encounters, they are able to perform more screenings and immunizations, provide better preventive care for chronic conditions, and their patients experience fewer complications and fewer hospitalizations for preventable conditions. (source: <http://www.ncsl.org/IssuesResearch/Health/TheMedicalHomeGetsUpdatedImprovingOutcome/tabid/14154/Default.aspx>)

Are there any Medical Homes in Texas? Here is some information from a Texas Medical Home pilot you can share with your/your child's physician: Medical Clinic of North Texas (MCNT) & CIGNA North Texas Collaborative, Accountable, Coordinated Patient Centered Medical Home Pilot reports [that] "...although very preliminary, after 6 months of data measurement (started 1-1-10), the results are encouraging and directionally positive including: improved medical trend relative to the market, decreased ER utilization, decreased admissions, decreased use of ancillary outpatient services, improved use of generic pharmaceuticals, improved physician and patient satisfaction." Additionally, your/your child's doctor will find a wealth of extremely valuable information on the following websites: (1)Patient-Centered Primary Care Collaborative (<http://www.pcpcc.net/>), (2)National Center for Medical Home Implementation (<http://medicalhomeinfo.org>), (3)American Academy of Pediatrics (<http://aap.org/>), and (4)American College of Physicians (<http://www.acponline.org/>).