

# Joint Commission's Primary Care Medical Home Certification Option



The screenshot shows the Joint Commission website. At the top, there is a navigation bar with links for "Log In | Request Guest Access" and "Forgot password? | Log In Help". Below this is a search bar. The main navigation menu includes "Accreditation", "Certification", "Standards", "Measurement", "Topics", and "A". The breadcrumb trail reads: "Home > Accreditation > Ambulatory Health Care > Primary Care Medical Home". The page title is "Primary Care Medical Home". On the left sidebar, under "Ambulatory Health Care Program", there are links for "Currently Accredited", "Seeking Accreditation", "Bureau of Primary Health Care", and "Primary Care Medical Home". The main content area features a headline: "Joint Commission Awards First Primary Care Medical Home Option to AltaMed", dated "Friday August 19, 2011". Below the headline is a photo of three people in a meeting. To the right of the photo, the text states: "AltaMed Health Services Corporation in Los Angeles is the first organization in the country to earn the new Primary Care Medical Home (PCMH) certification for Joint Commission accredited ambulatory care organizations. [Learn More](#)".

**Lon Berkeley**  
Project Co-lead, PCMH Initiative  
The Joint Commission



# Background: Joint Commission Vision & Mission Statements

## ■ Vision:

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

## ■ Mission:

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

# Background: Joint Commission Overview

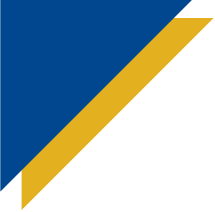
## General customer base:

- Accredits or certifies nearly 20,000 total organizations (hospitals/critical access hospitals, labs, behavioral health, home care, long term care, ambulatory care)


## Accrediting Ambulatory Care **since 1975:**

- Ambulatory Care program accredits **over 2,025 organizations** with 6,400 sites of care
- Wide variety of ambulatory settings, including:
  - Single and Multi-specialty Group Practices
  - Community Health Centers (FQHCs)

# Why Joint Commission Is Involved

- 
- Response to new model of primary care delivery being implemented nationally
    - Opportunity to provide: better access to care; greater patient engagement; more team-based care, etc.
  - Part of health care reform & cost-reduction options
  - Request from accredited ambulatory care organizations to receive a Joint Commission evaluation of their PCMH and benefit from a “2-for-1” on-site survey.

# Primary Care Medical Home Initiative Timeline

- 
- July, 2011: Launch certification for Ambulatory Care accredited organizations (**47 certified as of 3/1/13**)
  - 2011 - 2012: Work with public/private payers in demonstration pilots around reimbursement issues
  - Fall, 2012: Develop standards and pilot test PCMH survey process for Hospitals
  - Feb 2013: Launch PCMH certification for accredited **Hospital-based** ambulatory care practices
  - Early 2014: PCMH certification option for accredited **Behavioral Health** organizations & update standards Ambulatory Care (“PCMH 2.0”)

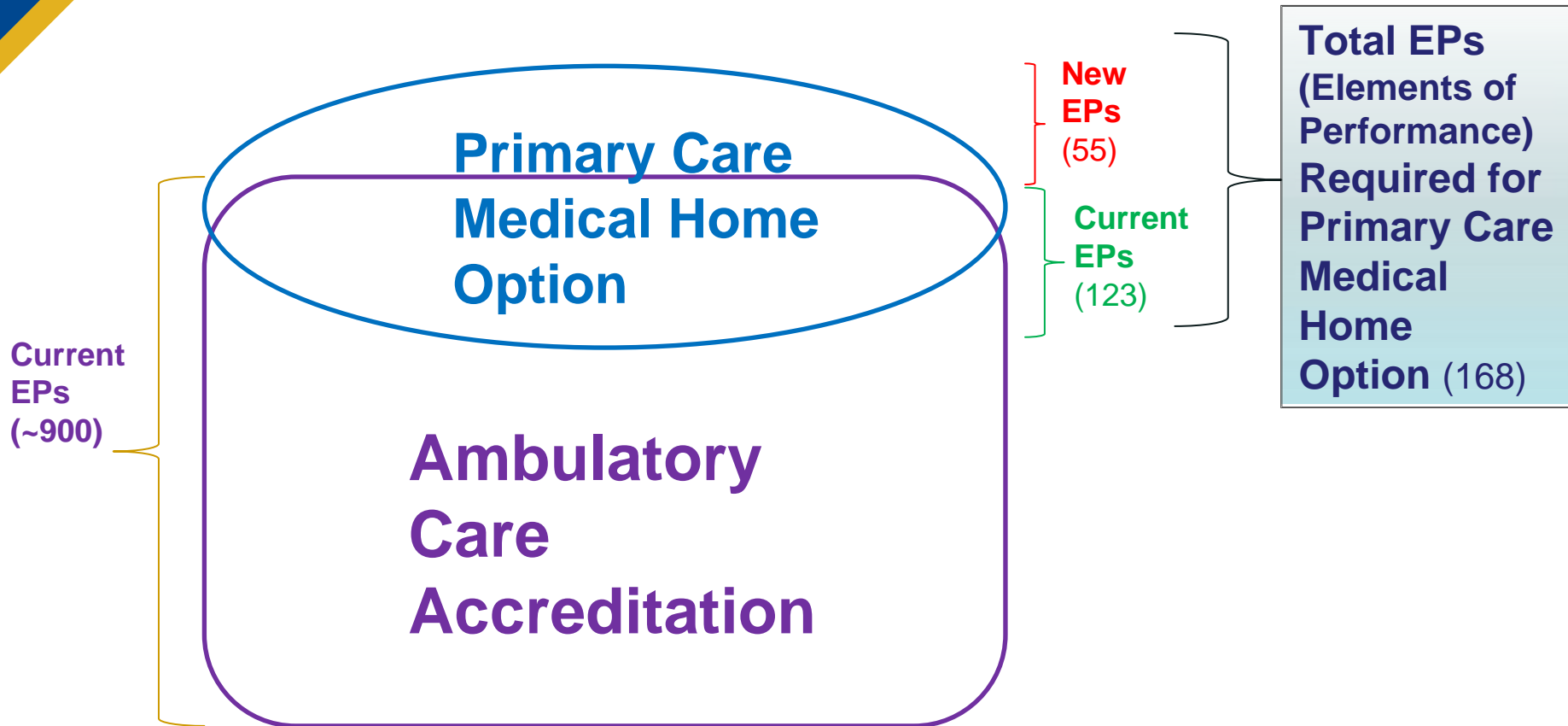
# AHRQ Model for Medical Home



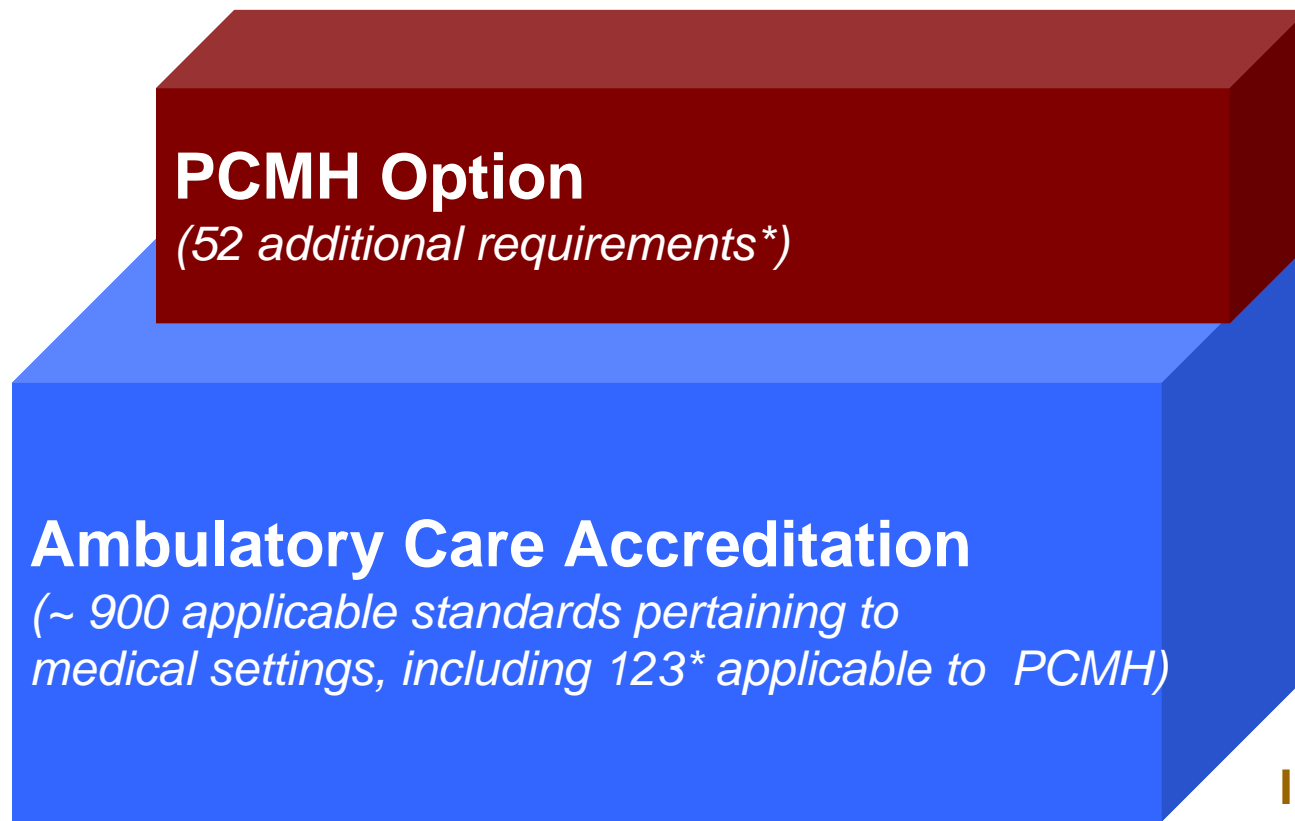
## I The Medical Home

- A medical home not simply a place but a model of primary care that delivers the care that is:
  - *Patient-Centered*
  - *Comprehensive*
  - *Coordinated*
  - *Accessible, and*
  - *Continuously improved through a systems-based approach to quality and safety*
- AHRQ believes that **Health IT, workforce development, and payment reform** are critical to achieving the potential of the medical home.

# Primary Care Medical Home Option Overlap with Ambulatory Care Accreditation



# Joint Commission Ambulatory Care Accreditation Plus Primary Care Medical Home Option

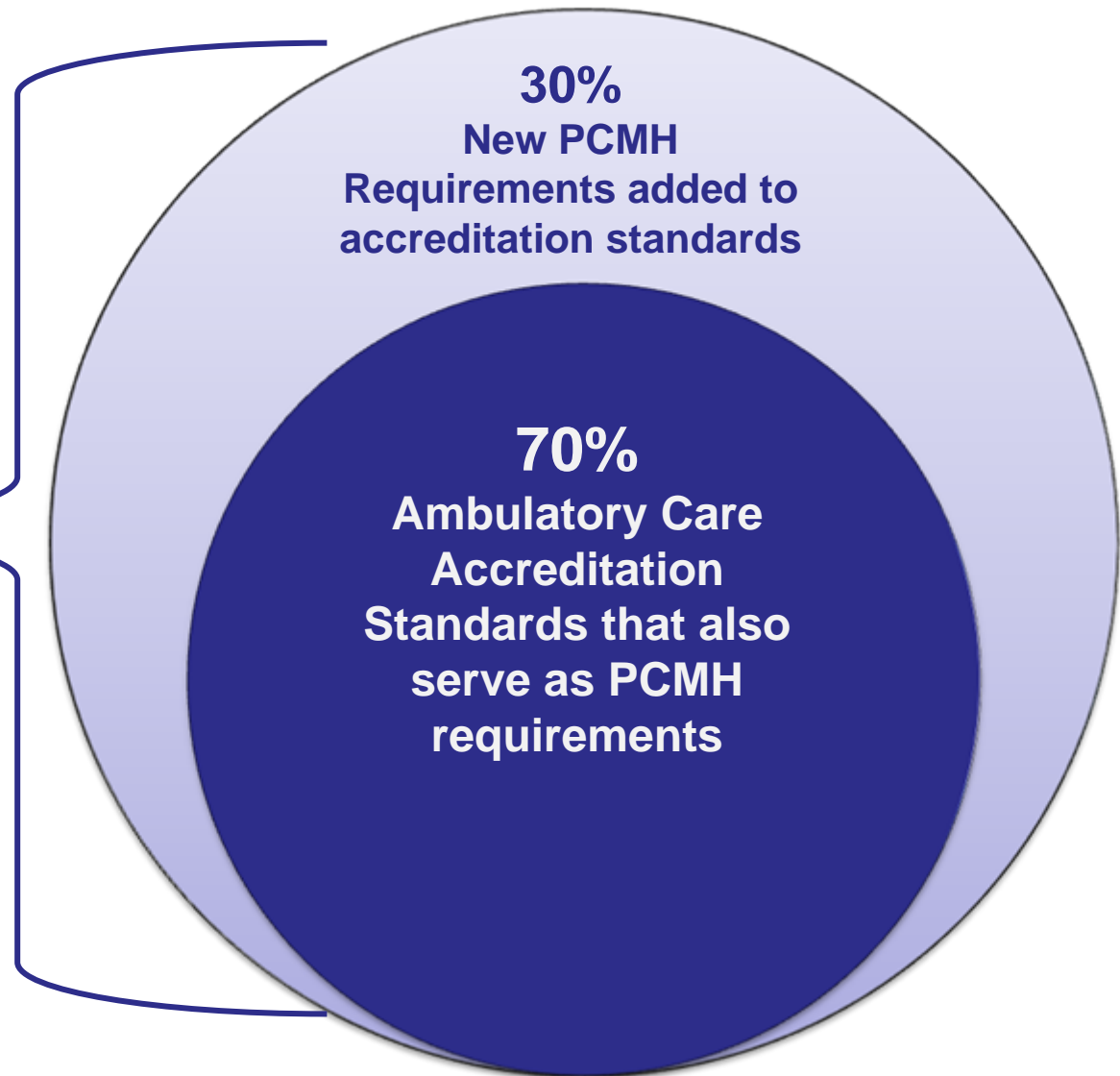


**Increasing  
Patient-Centeredness,  
Comprehensiveness,  
Access, Coordination**



# Joint Commission Primary Care Medical Home Option Overlap with Ambulatory Care Accreditation

Composition of  
Requirements for  
Primary Care Medical  
Home Option



# Joint Commission Hospital and Critical Access Hospital (CAH) Accreditation

Plus

## Primary Care Medical Home Option

**PCMH Optional  
Certification**

*(~47 additional requirements)*

**Hospital Accreditation**

*( accreditation standards )*

**PCMH Optional  
Certification**

*(~57 additional requirements)*

**Critical Access Hospital  
Accreditation**

*( accreditation standards )*

**Increasing  
Patient-Centeredness,  
Comprehensiveness,  
Access, Coordination**

## As a Primary Care Home, we...



# With Joint Commission ACCREDITATION of our ambulatory care organization, we...



# PCMH - Distinguishing Features

## Free-standing Ambulatory Care

- ▶ Voluntary/optional, add-on certification requiring Joint Commission ambulatory care accreditation
- ▶ On-site survey process to evaluate compliance with **both** existing accreditation standards & additional PCMH requirements (*no additional fee*)
  - Can also occur separately as “PCMH extension” survey. (*add’l fee*)
- ▶ No special application requirements
- ▶ Organization-wide designation for 3 years
- ▶ Primary Care Medical Home certification publicly available on Quality Check



# PCMH Certification – Hospitals/CAHs

- Voluntary/optional, add-on certification requiring Joint Commission hospital or CAH accreditation.
  - Site or practice specific setting providing primary care
  - Adds at least one additional day to the survey
  - Fee-based option.
- On-site survey to evaluate compliance with both accreditation and new PCMH requirements.
  - Survey will be conducted unannounced.
- Timing of survey, conducted either:
  - in coordination with regular on-site triennial accreditation survey
  - separately as “PCMH extension” survey.
- PCMH certification publicly available on [Quality Check](#)

# Acceptance of Joint Commission PCMH



## Public

- Medicaid programs in Iowa, Louisiana
- HRSA/BPHC contract
- CMS/Medicare solicited input

## Private

- Florida Blue Cross Blue Shield
- Health Plan of Michigan
- No preferences: Aetna; UnitedHealthcare



# Primary Care Medical Home Requirements

■ There are **5 Operational Characteristics**

1. Patient-Centeredness
2. Comprehensive Care
3. Coordinated Care
4. Superb Access to Care
5. System-Based Approach to Quality and Safety



# Additional PCMH Patient-Centeredness Requirements Address

- Patient-selected ***primary care clinician***  
(can be an MD/DO, NP, or PA)
- Provide information to patient about PCMH
- Patient involvement in treatment plan
- Work in partnership with patient to achieve planned outcomes
- Assessment of health literacy
- Support for self-management
- Involvement in performance improvement

# Add'l PCMH Comprehensive Care Requirements Address

- Roles/responsibilities of the primary care clinician and the interdisciplinary team
- Provide or facilitate patient access to:
  - Acute care
  - Behavioral health needs
  - Urgent and emergent care
  - Preventive services that are age and gender-specific
  - Management of chronic care
  - Oral health care
  - Substance abuse treatment
- Disease and chronic care management services
- Assessment for health risk behaviors
- Designated group (or panel) of patients

# Additional PCMH Coordinated Care Requirements Address

- Provide comprehensive and coordinated care, and maintain continuity of care
- Referral tracking and follow-up
- Population-based care
- Use of health information technology to:
  - Document and track care
  - Support disease management, preventive care
  - Facilitate information exchange
  - Support performance improvement
- Track patient care/progress towards treatment goals

# Add'l PCMH Superb Access to Care Requirements Address


- 24 hours a day, 7 days a week access to:
  - Appointment availability/scheduling
  - Requests for prescription renewal
  - Test results
  - Clinical advice for urgent health needs

*(Methods include: telephone, use of flexible hours, and computer websites)*
- Flexible scheduling to accommodate patient care needs *(Methods include: open scheduling, same day appointments, expanded hours, and arrangements with other organizations)*
- Addressing patient's urgent care needs 24/7


# Add'l Systems-Based Approach to **Quality & Safety** Requirements Address

- Use of an electronic prescribing process
- Use of clinical decision support tools to guide decision making
- The collection of data on:
  - Disease management outcomes
  - Patient perceptions of access to care
  - Patient experience and satisfaction
  - Patient perception of the comprehensiveness, coordination, and continuity of care
- Use of collected data to improve performance

# PCMH On-Site Survey Process

- 
- On-site survey
    - No change to current survey sessions
  - Trace patient experience (patient tracers)
  - Conduct patient interviews via:
    - Selection of primary care clinician
    - Information received about how to access clinic to meet their care needs
    - Consideration of language, cultural needs & preferences
  - Clinical Record review
    - Patient self-management goals
    - Follow-up on care recommendations, test results

# On-Site Survey Process (cont'd)

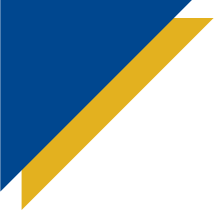
- 
- Discussions with organization leaders & staff
    - Scope of services available- acute, chronic, behavioral?
    - Determining the composition of interdisciplinary teams
  - Infrastructure-clinical decision support tools, use of HIT, e-prescribing, referral tracking
  - HR file review
    - Primary care clinician qualified for the role, working within scope of practice, and in accordance with law & regulation
  - Review of performance improvement data
    - Patient perception of access , comprehensiveness, and care coordination

# The Accreditation Process for PCMH: After the Survey

- Follow-up to findings (“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 Designation period
- “Focused Standards Assessment” as of 1/1/13 (formerly Periodic Performance Review)
  - Annual self-assessment of PCMH and ambulatory care standards



# Decision & Scoring Impacts

- 
- ❖ Failure to comply with all PCMH “RFIs” will not jeopardize accreditation status
  - ❖ Scoring for PCMH requirements during a resurvey is similar to expectations for an initial survey, minimally:
    - Implement in at least one location, for at least one population
    - Have supporting written policies/procedures
    - Plan to implement organization-wide prior to next triennial survey (18-36 months)

# Relationship of Joint Commission's PCMH to HIT/Meaningful Use Reporting Requirements


## Direct Overlap (8 of 15):

- E-prescribing
- Records patient demographics
- Maintains an up-to-date problem list of current and active diagnoses
- Maintains active medication list
- Maintains active medication allergy list
- At least one clinical decision support rule
- Exchanges key clinical information among providers
- Protects electronic health information

## Potential Overlap:

- Implements drug to drug and drug allergy interaction checks
- Records and charts changes in vital signs
- Records smoking status for patients 13+
- Reports ambulatory clinical quality measures
- Provides patients with an electronic copy of their health information
- Provides clinical summaries to patients for each office visit
- Uses CPOE for medication orders

# PCMH 2.0 Proposed Changes: Jan '14\*

- 
- Align Meaningful Use Requirements – Potential Standards Affected:
    - Medication Management Related
      - Electronic prescribing for min 50% prescriptions
      - Use computerized order entry system to enter at least 60% medication orders
    - Lab Related: Use computerized order entry system to enter min 30% labs
    - X-ray Related: Use computerized order entry system to enter min 30% X-rays

*\*pending Field Review & Board approval*

# PCMH 2.0 Proposed Changes: Jan '14\*



## ■ Align Meaningful Use Requirements

### — Access Related:

- Provide patients online access to their health information (test/lab results, summary lists, medication lists) within 4 business days
- Use a certified EHR to provide appointment reminders

*\*pending Field Review & Board approval*

# PCMH 2.0 Proposed Changes: Jan '14\*



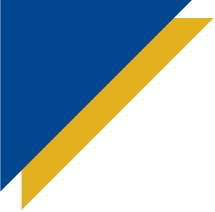
## ■ Align Meaningful Use Requirements

### — Record of Care Related:

- The clinical record contains patient's
  - ✓ Gender, race, and ethnicity
  - ✓ Family history
  - ✓ Work history
  - ✓ Blood pressure
  - ✓ Smoking status

*\*pending Field Review & Board approval*

# PCMH 2.0 Proposed Changes: Jan '14\*

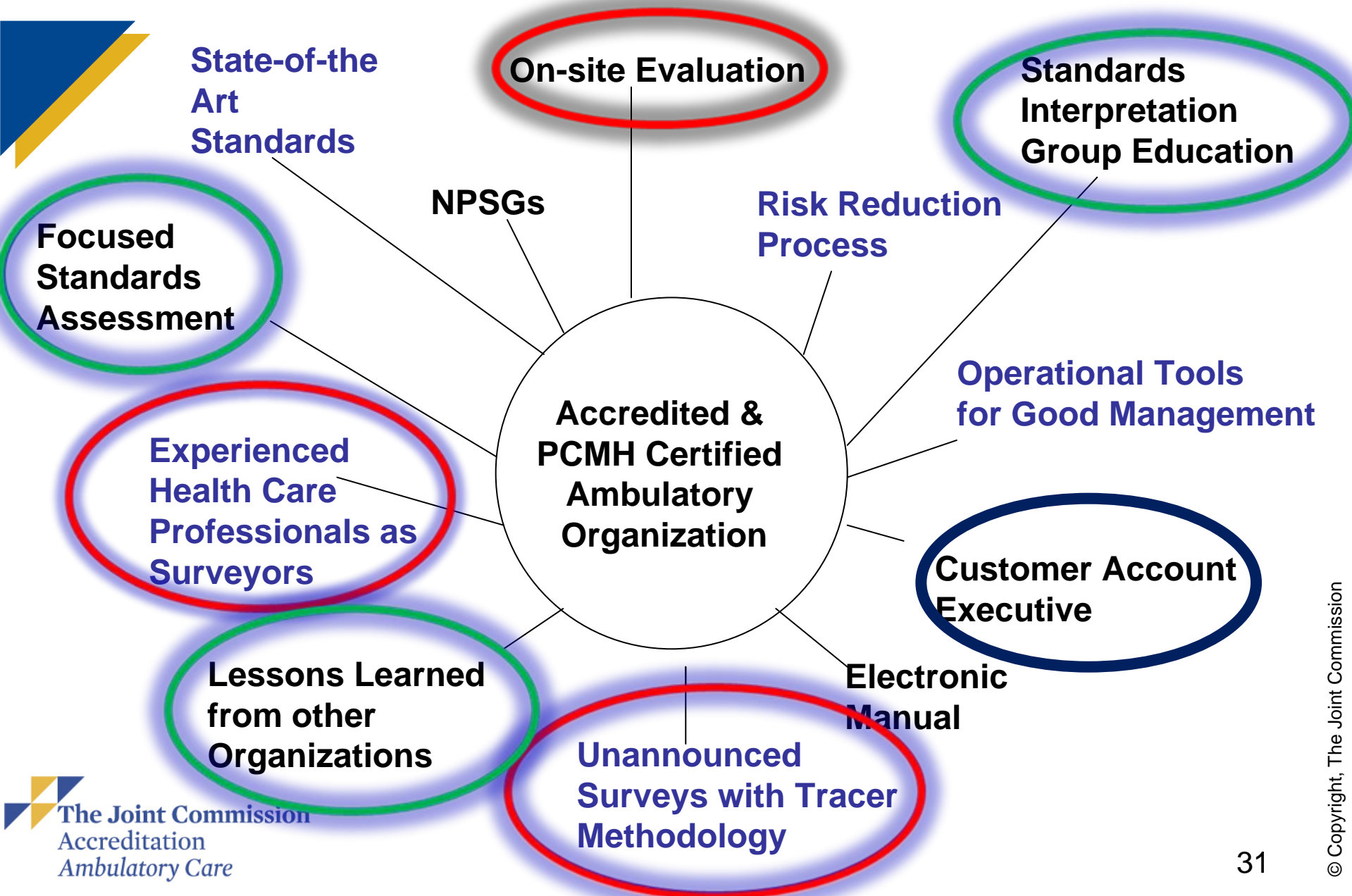
- 
- Align Meaningful Use Requirements
    - Provision of Care Related:

The organization uses a certified EHR to...

      - ...Create and submit reports to external providers, including public health agencies, registries....
      - ... Identify and provide patient-specific education resources

*\*pending Field Review & Board approval*

# Features of Joint Commission Accreditation



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

## Joint Commission PCMH website

<http://www.jointcommission.org/PCMH>

- PCMH requirements & Self-assessment Tool (see sample next slide)
- News, articles and links to other resources!
- Comparisons to other evaluative models





## ✚ FOR ORGANIZATIONS THAT ELECT THE JOINT COMMISSION'S PRIMARY CARE MEDICAL HOME (PCMH) OPTION

*Directions: This Self-Assessment Tool includes only the requirements for the PCMH option that are in addition to those required for ambulatory care accreditation. They are categorized by operational characteristic and focus area. **Please indicate if your organization is in compliance with the requirement: a) at all delivery sites of care, some sites (specify which ones), or not at all; and b) in some cases, provide a description.** Any clarifications, explanations, and/or additional information should be noted using the comment section.*

*Present this tool to the surveyor(s), and these self-reported responses will be validated during the indicated survey activities.*

### I. OPERATIONAL CHARACTERISTIC: PATIENT-CENTEREDNESS

#### A. FOCUS AREA: INFORMATION TO PATIENTS ABOUT THE PCMH

1. The organization **provides information to the patient** about: (indicate Yes or No to each item)

\_\_\_ The mission, vision, and goals of the primary care medical home. [RI.01.04.03/EP1 (C)]

*Note: This may include how it provides for patient-centered and team-based comprehensive care, a systems-based approach to quality and safety, and enhanced patient access.*

\_\_\_ The scope of care and types of services provided [RI.01.04.03/EP2 (C)]

\_\_\_ How the primary care medical home functions, including the following: [RI.01.04.03/EP3 (C)]

- Processes supporting patient selection of a primary care clinician
- Involving the patients in his or her treatment plan
- Obtaining and tracking referrals
- Coordinating care
- Collaborating with patient-selected clinicians who provide specialty care or second opinions

\_\_\_ How to access the primary care medical home for care or information [RI.01.04.03/EP4 (C)]

\_\_\_ Patient responsibilities, including providing health history and current medications, and participating in self-management activities [RI.01.04.03/EP5 (C)]


\_\_\_ The patient's right to obtain care from other clinicians within the primary care medical home, to seek a second opinion, and to seek specialty care [RI.01.04.03/EP6 (C)].

YES at **all** sites \_\_\_\_\_ YES at **some** sites: \_\_\_\_\_ (list sites) NO \_\_\_\_\_

[Explain any items above that are Not Provided]

Site Name(s): \_\_\_\_\_

# 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 Report's "Patient Centered Medical Home Guidelines - A Tool to Compare National Programs"
  - The American College of Physicians' updated "Medical Home Builder"

# Comparison to NCQA PCMH Recognition

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

This tool, prepared by The Joint Commission, compares the National Committee for Quality Assurance (NCQA) general standard areas for its 2011 version of the Patient-Centered Medical Home to the specific Joint Commission requirements for its Primary Care Medical Home. While there are differences between The Joint Commission's evaluation and scoring process (see table below), this analysis demonstrates that The Joint Commission's Primary Care Medical Home option requirements are comparable to NCQA's Patient-Centered Medical Home Level 3 requirements.

FEATURE	THE JOINT COMMISSION	NCQA
Name	Primary Care Medical Home	Patient-Centered Medical Home
Award Label	Designation	Recognition
Accreditation of organization also required?	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 evaluate compliance?	YES	NO (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

# PCMH Resources for Hospitals & Critical Access Hospitals

## ■ The Joint Commission PCMH Website

[http://www.jointcommission.org/accreditation/primary\\_care\\_medical\\_home\\_certification\\_option\\_for\\_hospitals.aspx](http://www.jointcommission.org/accreditation/primary_care_medical_home_certification_option_for_hospitals.aspx)

- ✓ PCMH Eligibility
- ✓ Prepublication Standards for Hospitals & CAHs
- ✓ Frequently Asked Questions

## ■ Existing accredited customers:

Call your Account Executive

## ■ New customers not yet accredited:

Send inquiries to [qualityhospitals@jointcommission.org](mailto:qualityhospitals@jointcommission.org)



# FOR MORE INFORMATION

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# Questions?

