



## Medical home is key to improved health care

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The issue of medical care is the underlying theme of all political discussions we will be facing in the coming months. The demands on physicians are increasing. Under the traditional health-care model, physicians are not compensated for time spent educating patients, providing preventive health care or arranging for specialists' care. The problem is nationwide. Oklahomans, however, may soon benefit from a new health-care model being considered by the state Legislature.

More than 30 years ago, the American Academy of Pediatrics created the concept of the patient-centered medical home, a model for providing comprehensive, compassionate and coordinated care. Since then, the American Academy of Family Physicians, the American Academy of Physicians and the American Osteopathic Association have supported a "medical home" in which a patient establishes a relationship with a primary care physician who personally directs all medical care.

The patient-centered medical home design recognizes the value of medical-care management and establishes a payment structure that will reimburse physicians for providing optimal medical care, coordinating services and utilizing technology. In doing so, Oklahoma will improve health-care services while reducing costs by:

- Preventing medical errors, repetitive procedures and dangerous drug interactions.
- Increasing routine, preventive screenings and enhancing the management of chronic illnesses.
- Reducing hospitalizations, emergency-room visits, utilization, claims and therefore costs.
- Reimbursing primary care physicians for services that fall outside of face-to-face visits.

Currently, more health-care dollars are being spent on invasive surgeries, costly hospitalizations and end-of-life treatments than the therapies that could prevent the illness in the first place. With limited time and resources, doctors and patients must focus on a disease-driven office visit. Without proper reimbursement appropriate counseling and preventive practice can't take place.

We only have to look to others who have implemented medical homes and benefited. North Carolina began enrolling Medicaid recipients in medical homes with an investment of \$10.2 million. In less than a decade, the program saved the state \$244 million in overall health-care costs. Denmark, which has aligned its health-care system entirely around the medical home model, has the lowest per-capita health expenditures and highest patient satisfaction ratings in the world.

Studies show that when a primary care physician directs the care of patients suffering from heart failure, asthma and diabetes, there are fewer complications and fewer hospitalizations.

The technology and plan are ready to be studied and implemented. Patients can choose their personal physician to provide comprehensive care in coordination with consultants. Primary care physicians already provide same-day appointments, extended hours, preventive therapies and health maintenance information. Appropriate reimbursement will encourage all doctors to make health management a priority — not an afterthought squeezed into the free moments of the day.

It's about time, Oklahoma. Let us lead the nation in providing the highest standard of care by all doctors.

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The patient-centered medical home design will help in reducing hospitalizations, emergency-room visits.



#### **PRIORITIES**

**Stephanie W. Cobble: Appropriate reimbursement will encourage all doctors to make health management a priority — not an afterthought squeezed into the free moments of the day.**

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