

Payment Systems & Organizational Structures for the Medical Home



Organizational models

- Focus should be on outcomes
 - preventable hospitalizations, patient satisfaction.
- Resist unnecessary barriers to entry, particularly for smaller practices
 - NCQA (on the positive side) captures some essential functions, but emphasizes form over function (applies mostly to greater than Level I.)
 - Providers do need guidance and assistance on how to organize for outcomes. (NCQA could be helpful to achieve these)



Organizational Models (cont'd)

- Currently we do not know what structures will work
 - NCQA or otherwise
 - Demonstrations are needed – trying a variety of models needed with evaluations
 - In the future that could hopefully lead to better informed standards, guidelines and examples
- From the outset, will have to have the ability to report outcomes as core functionality.
 - At a community level there must be a measurement capability.



Payment Systems

- Long Run Goal:
 - Single per patient amount with performance bonus based on outcomes
- Short Run:
 - Billing codes (or other mechanisms) for new services that support medical home
 - Rewards/penalties based on outcomes
- Distribution of outcome payments may be through multi-MD organizations