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Integrated care innovation

Oregon health care clinics awarded grant to expand “patient-centered medical homes”

Portland, Ore., May 29, 2009 — One hundred years ago, you only visited the doctor when you were sick or injured. A bandage, a prescription, then off you’d go, on your own again until the next time you needed help.

Essentially, “acute care” is how medicine is still practiced today. But the greatest share of medical costs is from treating people with chronic conditions. An estimated 133 million Americans have one or more chronic diseases, and care for them accounts for 75 percent of the \$2 trillion in annual care costs. Clearly, the acute care model is obsolete and is contributing to the steep increase in health care costs.

Two Oregon organizations—CareOregon and the Oregon Primary Care Association (OPCA)—are the recipients of a grant to expand a promising alternative.

The National Medical Home Initiative for Safety-Net Clinics is a groundbreaking four-year project to improve health care delivery across the U.S. The grant will support health centers that serve the vulnerable and disadvantaged in achieving high performance through a patient-centered medical home (PCMH) model of delivery. The PCMH is also known as the primary care home or integrated health home model.

The Safety Net Medical Home Initiative is sponsored by The Commonwealth Fund, a private foundation supporting independent research on a high performance health system. The Commonwealth Fund is joined in support of the project by eight co-funders, including the Colorado Health Foundation, Jewish Healthcare Foundation (Pittsburgh), Northwest Health Foundation (Portland, Oregon), The Boston Foundation, Blue Cross Blue Shield of Massachusetts Foundation, Partners Community Benefit Fund (Boston), Blue Cross of Idaho, and Beth Israel Deaconess Medical Center (Boston).

Under the initiative, CareOregon and OPCA will work together as a Regional Coordinating Center for the PCMH model. The Center will receive \$125,000 per year for four years to build upon existing health policy and technical assistance and training programs at 13 clinics across Oregon. “Our ultimate goal,” said Craig Hostetler, OPCA executive director, “is to expand the PCMH model among safety net and other primary care clinics throughout the state.”

CareOregon is the state’s largest Medicaid managed care organization, and OPCA represents clinics that care for more than 20 percent of both the Medicaid and the uninsured populations.

Both organizations have already demonstrated a commitment to the concept by launching PCMH pilot projects. CareOregon has been working with six clinics in its Primary Care Renewal project since 2006. OPCA has focused on the PCMH model as a major goal for the last four years.

In addition, in order to promote the spread of medical homes in other safety net clinics, CareOregon and OPCA worked with the Oregon Rural Practice Research Network to identify two Rural Health Clinics to participate in the initiative.

“This is a tremendously exciting opportunity for us to be a part of a national dialogue and initiative to make the PCMH the new model of care in primary practice,” said David Labby, MD, PhD, CareOregon medical director.

In the acute care model, doctors focus on patient visits. Under the patient-centered medical home model, a team consisting of panel managers, medical assistants and behavioral health specialists as well as primary care providers (doctors, nurse practitioners or physician assistants) focus on every patient and works to make the population stay healthy or get better.

When a patient comes in for a visit, the team addresses all issues they’ve identified: preventive screenings, overdue exams or whatever else is needed. The team, rather than the patient, may even initiate the visit if it’s warranted.

“The PCMH model represents a paradigm shift for primary care providers, allowing them to focus on the health of all their patients, rather than just focusing on office visits,” Labby said.

CareOregon will be the clinical lead for the initiative, responsible for integrating the organizations’ current learning networks into a broader medical home learning network. OPCA will be the fiscal agent and lead for working with stakeholders to support the sustainability and spread of patient-centered medical homes through health policy. The clinics will be supported by OPCA, CareOregon and ORPRN staff.

The Qualis Health grant will provide funding for additional staff, materials and external expertise to expand and enhance the patient-centered medical home model. Collectively, the clinics participating in the initiative will serve 189,000 patients across Oregon. They include 16 percent of the state’s Medicaid patients and 12 percent of all uninsured patients.

“Many of our patients have complex medical, behavioral health and social issues,” Hostetler noted. “By demonstrating that the PCMH model works for them, we hope to encourage its adoption throughout the broader health care community.”

About CareOregon

CareOregon is a non-profit health plan that serves Oregonians with Medicare and Medicaid, including about one-quarter of Oregon Health Plan participants. Its mission is to help all Oregonians have quality health care, even in these times when health care is hard to afford. CareOregon works with its members and its network of providers so members can live healthier lives and have high-quality, affordable, effective health care whenever they need it, now and in the future. The Primary Care Renewal program is an essential part of this effort. For more information, see <http://www.careoregon.org/>.

Oregon Primary Care Association

The Oregon Primary Care Association is a nonprofit membership organization of 28 Federally Qualified Health Centers located across the state. OPCA provides advocacy on public policy and technical assistance and training to members to enhance health equities and increase access to comprehensive health care for low-income and vulnerable Oregonians. For more information, see <http://www.orpca.org>.

Background information

Commonwealth Fund

The Commonwealth Fund is a private foundation that aims to promote a high performing health care system that achieves better access, improved quality, and greater efficiency, particularly for society's most vulnerable. www.commonwealthfund.org

Qualis Health

Qualis Health, an independent nonprofit organization established in 1974, and headquartered in Seattle, is dedicated to developing and applying best practices while delivering an extensive range of patient-centered, evidence-based healthcare quality improvement and care management services. www.qualishealth.org

MacColl Institute for Healthcare Innovation

The MacColl Institute for Healthcare Innovation at Group Health Center for Health Studies aims to bridge the worlds of research and practice through the development, evaluation and dissemination of improvements in care, through a program of identifying, developing, and testing innovations in caring for individuals and disease-specific patient populations. In the mid-1990s the Institute developed the Chronic Care Model approach to improving ambulatory care.

Participating patient-centered medical home clinics:

OPCA Primary Care Home Clinics

Benton County Community Health Center

Sherlyn Dahl, CEO
530 NW 27th St.
Corvallis, OR 97330
541-766-6835
www.co.benton.or.us/healthcenter/benton.php

Community Health Center Inc.

Peg Crowley, CEO
19 Myrtle St.
Medford, OR 97504-7337
541-773-3863
www.communityhealthcenter.org/

Klamath Open Door

Bob Marsalli, CEO
Klamath Health Partnership, Inc.
2074 S Sixth St.
Klamath Falls, OR 97601
541-851-8110
www.klamathopendoor.org

La Clínica del Cariño

Mark England, RN, Clinical Services Director

849 Pacific Ave
Hood River, OR 97031
541-386-6380

425 E 7th St
The Dalles, Oregon 97058
541-296-4610

www.lcdcfh.org

Community Health Center of Lane County

Jeri Weeks, CEO
1640 G. Street
Springfield, OR 97477
541-682-3550
www.co.lane.or.us/CHC/default.htm

Outside In

Kathy Oliver, CEO
1132 SW 13th Ave.
Portland, OR 97205-1703
503-535-3800
www.outsidein.org/clinic.htm

CareOregon Primary Care Renewal clinics

Central City Concern Old Town Clinic

Ed Blackburn, CEO
727 W Burnside
Portland, OR 97209
503-228-4533
www.centralcityconcern.org/oldtown.htm

Legacy Clinic Emanuel

George Brown, MD, CEO
2800 N Vancouver Ave., Suite 230
Portland, OR 97227
503-413-2901
www.legacyhealth.org/body.cfm?id=287

Multnomah County Health Department

Amit Shah, MD, CEO
Mid-County Health Center
12710 SE Division St.
Portland, 97236-3134
503-988-3601
East County Health Center
600 NE Eighth Ave., Third Floor
Gresham, OR 97030
503-988-5155

Oregon Health & Science University

OHSU Family Medicine at Richmond
Ann O'Connell, executive director
3930 SE Division
Portland, OR 97202
503-418-3900
www.ohsu.edu/health/clinics-and-services/clinic.cfm?id=11481

OHSU Family Medicine at Scappoose
Diane Hudson, clinic manager
51377 Old Portland Road, Suite C
Scappoose, OR 97056
503-418-4222
www.ohsu.edu/health/clinics-and-services/clinic.cfm?id=11482

Virginia Garcia Memorial Health Center

Gil Munoz, CEO
85 N 12th Ave.
Cornelius, OR 97113
503-359-5564
www.virginiagarcia.org/cornelius.html

ORPRN Rural Health Clinics

Eastern Oregon Medical Associates

Jon Schott, MD, managing partner

3175 Pocahontas Road

Baker City, OR 97814

541-523-1001

www.eoma.familydoctors.net/

Winding Waters Clinic

Reni Grandi, MD, Elizabeth Powers, MD, and Scott Siebe, MD, owners

406 NE First St.

Enterprise, OR 97828

541-426-4502

203 E Main

Wallowa, OR 97885

541-886-2431