

# HIE Population Health Toolbox: PCMH Prevalidation

Patient-Centered Medical Home (PCMH) is a team-based, primary care delivery model that provides proactive and comprehensive health care through active patient partnerships. Health Information Exchanges (HIEs) are uniquely positioned to provide comprehensive clinical information and analytics to support practices in meeting PCMH standards. HIEs that provide a Prevalidation solution will alleviate the administrative burden commonly experienced by practices through transfer and practice support credits.

## PCMH BY THE NUMBERS



**Recognition:** ~13,000 Practices



**Support:** 100+ Payers



**Program:** 86% NCQA



**Spend:** ↓ 2.2 - 10%



PCMH Concept	Practice Description	HIEs Role
Team-Based Care and Practice Organization	Provides continuity of care through effective team work and patient communication.	Provide clinical information and communication channels that support each team members' role.
Knowing and Managing Your Patients	Use information about patients to deliver evidence-based, culturally appropriate services.	Expose population characteristics and rising risk patients to promote proactive services.
Patient-Centered Access and Continuity	Offers 24/7 access to informed care teams and medical records to support continuity of care.	Deliver on-demand access to longitudinal patient records and empanelment information to support coordinated care.
Care Management and Support	Identify needs at the individual and population levels to effectively plan, manage and coordinate care.	Develop care plans that address barriers and preferences for patients that would benefit from care management services
Care Coordination and Support	Orchestrate high quality, low cost care with tracking tests, referrals and care transitions.	Systematically track orders and referrals to reduce redundancies and patient harm events.
Performance Measurement and Quality Improvement	Establish a culture of data-driven performance improvement on clinical quality, efficiency and experience.	Report internally and externally to drive competition through performance benchmarking.

## WHY NOW?

2019 marks the time in history when government and industry started getting real about primary care improvement, evidenced by CMMI's announcement of five new payment models.

## WHY PREVALIDATION?

Establish your reputation as an innovator that exceeds your customers' expectations by making value-based care the path of least resistance through burden reduction.