

AN ACT

1 Establishing the Patient-Centered Medical Home Advisory Council;
2 providing powers and duties of the council, the Department of
3 Public Welfare, the Insurance Department and the Department
4 of Health; and providing for development of a plan to
5 implement a Statewide medical home model.

6 The General Assembly of the Commonwealth of Pennsylvania
7 hereby enacts as follows:

8 Section 1. Short title.

9 This act shall be known and may be cited as the Patient-
10 Centered Medical Home Advisory Council Act.

11 Section 2. Definitions.

12 The following words and phrases when used in this act shall
13 have the meanings given to them in this section unless the
14 context clearly indicates otherwise:

15 "Alternative therapy." The term includes, but is not limited
16 to, chiropractic therapy, biofeedback, acupuncture or massage
17 therapy.

18 "Council." The Patient-Centered Medical Home Advisory
19 Council established by this act.

1 "Department." The Department of Public Welfare of the
2 Commonwealth.

3 "Health care professional." A person who is licensed,
4 certified or otherwise authorized or permitted by the law of
5 this Commonwealth to administer health care in the ordinary
6 course of business or in the practice of a profession.

7 "Patient-centered medical home." A physician-led team
8 approach to providing health care that:

9 (1) originates in a primary care setting;

10 (2) fosters a partnership among the patient, the
11 personal provider and other health care professionals and,
12 where appropriate, the patient's family;

13 (3) utilizes the partnership to access all medical-
14 health-related services and nonmedical-health-related
15 services needed by the patient to achieve maximum health
16 potential; and

17 (4) maintains a centralized, comprehensive record of all
18 health related services to promote continuity of care.

19 "Primary care." Health care that emphasizes a patient's
20 general health needs and utilizes collaboration with other
21 health care professionals and consultation or referral as
22 appropriate to meet the needs identified.

23 "Primary care physician." Any of the following who provide
24 primary care and meet certification standards:

25 (1) a physician who is a family or general practitioner;

26 (2) a pediatrician;

27 (3) an internist;

28 (4) an obstetrician; or

29 (5) a gynecologist.

30 "Telemedicine." The use of telecommunication and information

1 technology in order to provide clinical health care at a
2 distance.

3 Section 3. Patient-Centered Medical Home Advisory Council.

4 The Patient-Centered Medical Home Advisory Council is
5 established. The council shall advise the department on how
6 Pennsylvania's Medicaid program can increase the quality of care
7 while containing costs through the following Patient-Centered
8 Medical Home model approaches:

9 (1) Coordinate and provide access to evidence-based
10 health care services, emphasizing convenient, comprehensive
11 primary care and including preventive, screening and well-
12 child health services.

13 (2) Provide access to appropriate specialty care, mental
14 health services, inpatient services and any evidence-based
15 alternative therapies.

16 (3) Provide quality-driven and cost-effective health
17 care.

18 (4) Provide access to medication and medication therapy
19 management services, where appropriate.

20 (5) Promote strong and effective medical management,
21 including, but not limited to, planning treatment strategies,
22 monitoring health outcomes and resource use, sharing
23 information and organizing care to avoid duplication of
24 services, including the use of electronic medical records. In
25 sharing information, the protection of the privacy of
26 individuals and of the individual's information shall be
27 priorities. In addition to any and all other Federal and
28 State provisions for the confidentiality of health care
29 information, any information-sharing required by a medical
30 home system shall be subject to written consent of the

1 patient.

2 (6) Provide comprehensive care management to patients to
3 align and assist with treatment strategies, health outcomes,
4 resource utilization and organization of care and address
5 determinants of health impeding goals of care.

6 (7) Emphasize patient and provider accountability.

7 (8) Prioritize access to the continuum of health care
8 services in the most appropriate setting and in the most
9 cost-effective manner.

10 (9) Establish a baseline for medical home goals and
11 establish performance measures that indicate a patient has an
12 established and effective medical home. These goals and
13 performance measures may include, but need not be limited to,
14 childhood immunization rates, well-child care utilization
15 rates, care management for chronic illnesses and emergency
16 room utilization.

17 Section 4. Council development, composition and duties.

18 (a) Meetings.--The department shall establish and coordinate
19 meetings of the Medical Home System Advisory Council. The
20 members of the council shall not be paid but shall be reimbursed
21 for reasonable expenses and shall consist of the following
22 members and any other members the department determines
23 necessary to assist in the department's duties:

24 (1) The Secretary of Public Welfare, or a designee.

25 (2) A representative of the Pennsylvania Academy of
26 Family Physicians.

27 (3) A representative of the Pennsylvania section of the
28 American Congress of Obstetricians and Gynecologists.

29 (4) A representative of the Pennsylvania Coalition of
30 Nurse Practitioners.

1 (5) A representative of the Pennsylvania Chapter of the
2 American College of Physicians.

3 (6) A representative of the Pennsylvania Chapter of the
4 American Academy of Pediatrics.

5 (7) A representative of the Pennsylvania Medical
6 Society.

7 (8) A representative of the Pennsylvania Pharmacists
8 Association.

9 (9) A representative of the Hospital and Health System
10 Association of Pennsylvania.

11 (b) Organizational model.--The council shall recommend to
12 the department an organizational model for the patient-centered
13 medical home system in this Commonwealth, including possible
14 Medicaid pilot projects. The organizational model shall provide
15 a strategy to coordinate health care services and provide for
16 monitoring and data collection on patient-centered medical
17 homes, for training and education to health care professionals
18 and families and for transition of children to the adult medical
19 care system. The organizational model may also include the use
20 of telemedicine resources and may provide for partnering with
21 pediatric and family practice residency programs to improve
22 access to preventive care for children. The organizational
23 structure shall also address the need to organize and provide
24 health care to increase accessibility for patients, including
25 using venues more accessible to patients and having hours of
26 operation that are conducive to the population served.

27 (c) Standards.--

28 (1) The council shall recommend to the department
29 standards and a process to certify patient-centered medical
30 homes based on standards developed by a number of

1 nongovernmental accrediting entities such as the National
2 Committee for Quality Assurance and Accreditation Association
3 for Ambulatory Health Care. The certification process and
4 standards shall provide mechanisms to monitor performance and
5 to evaluate, promote and improve the quality of health of,
6 and health care delivered to, patients through a patient-
7 centered medical home. The standards and process shall also
8 include a mechanism for other ancillary service providers to
9 become affiliated with a certified patient-centered medical
10 home.

11 (2) The council shall recommend to the department
12 education and training standards for health care
13 professionals participating in the patient-centered medical
14 home system.

15 (d) Reimbursement methodology.--The council shall recommend
16 to the department a reimbursement methodology and incentives for
17 participation in the patient-centered medical home system
18 sufficient to ensure that providers enter and remain
19 participating in the system and to promote wellness, prevention,
20 chronic care management, immunizations, health care management
21 and the use of electronic health records and other pertinent
22 concerns. In developing the recommendations, the council shall
23 consider the feasibility of all of the following:

24 (1) Reimbursement under the medical assistance program
25 to promote wellness and prevention and to provide care
26 coordination and chronic care management.

27 (2) Increasing to Medicare levels the reimbursement for
28 certain wellness and prevention services, chronic care
29 management and immunizations.

30 (3) Reducing the disparities between reimbursement for

1 specialty services and primary care services.

2 (4) Increased funding for efforts to transform medical
3 practices into patient-centered medical homes, including the
4 use of electronic health records.

5 (5) Linking provider reimbursement rates to health care
6 quality improvement measures established by the department.

7 (6) Providing reimbursement for medication
8 reconciliation and medication therapy management service.

9 Section 5. Effective date.

10 This act shall take effect immediately.