



# NH Medicaid Care Management: DHHS Perspectives on Medical Home

MCM Commission

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## The 5 W's + H (Who, What, Where, When, Why & How)

- DHHS' perspective is informed by its vision for the Medicaid Care Management Program (MCM)
  - Review: What is DHHS' vision for MCM?
  - What role does a medical home have in the MCM program?
  - How is the integration of Medical Home into MCM Program envisioned?



## DHHS MCM Vision: Based on real life experiences

- Develop a sustainable , integrated, whole person-centered system of care.
  - Improves Medicaid beneficiaries' health,
  - Assures timely access to the right care at the right time in the right place,
  - Supports continuity of care across the lifespan, & across a continuum of medical and social services ( preventive, acute, chronic, rehabilitative & habilityative),
  - Promotes shared decision making & consumer directed care,
  - Results oriented with priority focus on Quality Improvement,
  - Promotes transparency in the expenditure of public dollars for beneficiaries, providers, policy makers and the public,
  - Prepares NH to leverage the ACA Medicaid Expansion Opportunity to improve population health for the State.
- This vision is informing our entire Department's organizational and business strategies not just MCM.



## Where does the Medical Home fit into the Vision.

- The Medical Home is one tool used to support a holistic system of care that provides Medicaid beneficiaries with:
  - An integrated approach to the coordination of health care and psycho-social needs:
    - Assures responsive and proactive coordination and communication between primary care, other providers & specialists of all types, across settings, across episodes of care and transitions of sites of care, and in partnership with community-based social services and family care givers,
    - Reflects the commitment to recognizing the impact of the social determinants of health,
    - Leverages and maximizes areas of expertise and capacity.
  - Implementing a Medical Home:
    - No one right answer. Not being prescriptive is key.
    - Do want the health plans to establish the expectation of meaningful participation of PCPs as part of a team whose composition reflects the needs and concerns of the individual and not exclusively a medical model.
  - The fulfillment of the vision has commenced through our work with the three health plans.
    - Contractual obligations, state and federal mandates that must be attended to however, despite the mandates DHHS knows the health plans recognize the value of medical homes and we are excited by what we see even in 5 weeks of operations.

# The 5 W's + H



- Who? All Medicaid beneficiaries
- What? Care Coordination, Accountability, Quality
- Where/When? Right care at the right place, right time
- Why? The status quo did little to support the vision
- How? The Care Management Program