



What is a Medical Home?

A Medical Home is not a building, house or hospital, but a team who provides quality and cost-effective health care. A Medical Home is a family-centered approach that provides comprehensive, continuous, coordinated, accessible, compassionate, and culturally-competent care.

What services are available through a Medical Home?

Providers enrolled as Medical Homes are responsible for ensuring health maintenance and preventive care; health education; acute and chronic illness care; coordination of medications, specialists and therapies; hospital care; and 24-hour telephone care.

What are the components of a Medical Home approach?

- Comprehensive Care – Families, health care professionals and social service providers identify and provide all medical and non-medical services to help the child and family.
- Continuity of Care – The same health care professionals are available from infancy through adolescence, and transition to the adult health care system is successful.
- Coordinated Care – Families are linked to appropriate educational and community-based services. The provider communicates and collaborates with all service agencies and a centralized record of all relevant information from all service providers is maintained.
- Family-Centered Care – The family is recognized as the principal caregiver and center of strength, knowledge and support for the child. The family voice is valued.
- Accessible Care – Care is provided in the child's community and access to health care and advice is available 24 hours a day, seven days a week.
- Compassionate Care – There is a demonstrated concern for the well-being of the child and family.
- Culturally-Competent Care – The family's cultural background including beliefs, rituals and customs, are recognized and respected.

Preliminary Outcomes

- As of December 2012, 236,000 Medicaid and 83,000 CHP+ children are enrolled in a Medical Home.
- 214 practices, representing 904 physicians, are designated as Medical Homes.
- 97% of all Pediatricians
- 48% of Family Medicine Providers
- Medicaid enrolled children in a Medical Home are more likely to have a well-child visit and less likely to visit the emergency room for non-life threatening conditions or be hospitalized.
- Medicaid well-child checks have increased from 56% in 2007 to 71% in 2011.

Partners

- Parents
- Providers
- Local Foundations
- Colorado Child Healthcare Access Program (CCHAP)
- Family Voices Colorado
- Colorado Department of Public Health and Environment

- Colorado Medical Home Initiative
- Assuring Better Childhood Health and Development Program

Medicaid will continue to pay the current pay-for-performance reimbursement to all Children’s Medical Home providers. This includes those who are participating in PCMPs in the ACC Program, through June of 2013. Medicaid had originally planned to discontinue Children’s Medical Home pay-for-performance reimbursements in July 2012 and transition these providers to per-member-per-month payments under the ACC Program. However, Medicaid is planning to work with the RCCOs and Children’s Medical Home providers during 2012-2013 to determine the best way to integrate the two programs. *In preparation of greater alignment between the two programs, Medicaid encourages all Children’s Medical Home providers to contact the RCCO in their region to become a primary care medical provider in the ACC Program and to participate in ACC Advisory Committee discussions about integration of the programs.*

CONTACTS:

Program: [Gina Robinson](#)
303-866-6167

Media: [Rachel Reiter](#)
303-866-3921

