

**Medical Home Workgroup  
Strategic Plan Update – March 2007**

Strategies and Activities	Status
<p><b>A. Expand statewide focus on medical home implementation.</b></p> <ol style="list-style-type: none"> <li>1. Increase public awareness and understanding regarding Medical Home concept among providers, families, and other stakeholders.*</li> <li>2. Monitor progress to establish a medical home for children. [existing child health data, Title V CSHCN National Performance Measure 04, SLAITS, etc]</li> <li>3. Increase the overall number of health care practitioners providing a medical home through work with pediatric and family practices to increase care coordination and other medical home characteristics.*</li> </ol>	<ul style="list-style-type: none"> <li>· <b>Texas Early Childhood Comprehensive Systems (TECCS)</b> - The Health and Human Services Commission, Office of Program Coordination for Children and Youth received the Notice of Grant Award for the TECCS Initiative from Maternal and Child Health (\$140,000) and will move forward towards implementation of the TECCS plan. The Office of Early Childhood Coordination is in the process of building a sustainable infrastructure to ensure implementation of the goals, objectives and activities identified within the TECCS plan. Establish four component workgroups consisting of content expert staff, external stakeholders, and family members. (Access to Insurance and Medical Home (AIMH), Social Emotional Development and Mental Health (SEDMH), Early Care and Education (ECE), and Parent Education/Family Support (PEFS)) Establish the Raising Texas Steering Committee (pending HHSC approval) – will consist of agency members with sufficient policy and operational authority to approve policy recommendations, to explore or approve the availability of agency resources as proposed by the component workgroups and to provide guidance in prioritizing and addressing areas requiring cross agency coordination. Proposed membership will include a representative from each HHS agency, Texas Education Agency, Texas Workforce Commission, Office of the Attorney General, and the State Center for Early Childhood Development. In addition, a chair member from each of the four component workgroups will be a member of the Steering Committee. Chair - Dr. Charles Bell, Deputy Executive Commissioner of Health Services in HHSC. Component Workgroup meetings will begin at the end of October and the beginning of November, with the first meeting of the Raising Texas Steering Committee anticipated to be held the first of December 2006. The Raising Texas Initiative, in coordination with Healthy Child Care Texas, will be working with Texas Parent to Parent on including Medical Home Tool Kit materials in training Child Care Health Consultants. <i>Update – 12/06</i> <ul style="list-style-type: none"> <li>- Each of the four component Implementation Teams have had their first meetings. The Implementation Teams have or are in the process of reviewing the goals and objectives outlined within the TECCS Plan and prioritizing activities for 2007. Each Implementation Team has identified a chair to represent and bring forward recommendations by the teams.</li> <li>- The first Raising Texas Steering Committee, chaired by Dr. Charles Bell, is scheduled for 1/9/07.</li> <li>- The Healthy Child Care Texas Initiative is still in the process of prioritizing and finalizing their implementation plan as it pertains to the TECCS Initiative.</li> <li>- A core State Team will be participating in at a National Conference in January 2007. The purpose of the conference is to help strengthen and advance partnerships at the State and Federal levels to enhance systems for early childhood development.</li> </ul> </li> <li>· <b>Common Message</b> - There has been discussion with HHSC to develop an official HHSC circular to enable a common message on the Medical Home model throughout the enterprise. An executive circular can serve to promote a common definition, and improved coordination and collaboration around Medical Home. <i>Update – 12/06 – no action anticipated at this time. Update – 3/07 – no action anticipated at this time.</i></li> </ul>

Strategies and Activities	Status
	<ul style="list-style-type: none"> <li>• <b>Medicaid/CHIP Managed Care Organizations (MCO)</b> - 4-06 - Dr. Walker gave a presentation and provided information materials, resources, and tools on Medical Homes to Medicaid/CHIP MCO Medical Directors. Most of the Medical Directors present indicated considerable knowledge regarding medical home concepts and practices, ability to identify and track CSHCN, and to facilitate care coordination for CSHCN. They rated the effectiveness of their organizations' mechanisms to facilitate family involvement and communication with subspecialists somewhat lower. Most indicated that their organizations did not identify and track CSHCN through an EMR system. The Medicaid/CHIP MCO Medical Directors or designated staff were added to the Medical Home Workgroup distribution list.</li> <li>• <b>American Academy of Family Physicians (AAFP)</b> – The AAFP has implemented a quality improvement initiative, known as TransforMed. One Texas clinic, Trinity Clinic in Whitehouse (small family medicine group practice with 3 or fewer physicians) is participating in the 36 practice AAFP initiative that uses a patient-centered model of care to support a strong medical home. <i>Update – 3/07.</i> <ul style="list-style-type: none"> <li>- <i>One of the interesting points that's coming out of the Transformed project is that doctors never even file on approximately 30% of charges. Either physicians don't mark it on the charge sheet, or don't recognize that they can charge for it. Electronic Medical Records (EMR) seem to pick these up.</i></li> <li>- <i>The AAFP and three other primary care organizations on March 5 released a definition of the personal medical home that forms the foundation on which health system reform can be built. The definition, "Joint Principles of the Patient-Centered Medical Home," was developed by the AAFP, the American Academy of Pediatrics, the American College of Physicians and the American Osteopathic Association.</i></li> </ul> </li> <li>• <b>Medical Home brochures</b> were shared at Texas Academy of Family Physicians Annual Session. <i>Update – 3/07. Information on Medical Home and Medical Home brochures were shared with THSteps provider relation staff. Medical Home brochures are also disseminated through conferences and local DSHS offices.</i></li> <li>• <b>TMHP CSHCN Services Program workshops</b> - Medical Home brochures were shared at 12 TMHP "Success with CSHCN Workshops". Participants shared information through a Quick Medical Home Assessment Questionnaire.</li> <li>• <b>Online provider education</b> – THSteps has initiated an online provider education campaign that will include a module on Medical Home.</li> <li>• <b>Texas Parent to Parent</b> – <i>Update – 12/06</i> - Two presentations on what a Medical Home is were given this year at parent/professional conferences. Another presentation will be given at a Parent Conference in Katy in January for parents and professionals.</li> <li>• <b>Medical Home Survey</b> - All clients who receive services or are on the waiting list for the CSHCN Services Program health care benefits received a copy of a survey asking for information related to the family's experiences with the doctor or nurse that their child sees the most. The purpose of the survey was to gather information from a family perspective related to 14 quality indicators of a medical home. Over 300 families responded to the survey (approximately 9.2% return rate). Nearly 2/3 of respondents indicated that their doctors or nurses implemented more than half of the 14 characteristics of medical home. Only 29% of respondents indicated that their doctors or nurses implemented at least 12 of the 14 characteristics to rank "very high" on a scale of "medical homeness." 20% of respondents indicated that their doctors or nurses implemented 5 or fewer of the 14 characteristics to rank "low"</li> </ul>

Strategies and Activities	Status
	<p>or “very low” on a scale of “medical homeness”. The Medical Home Survey is being adapted for use as a web-based survey that will be available through the CSHCN Services Program website in the near future. A summary of the survey results was disseminated to Medical Home Workgroup members and will be included in articles for the CSHCN Provider Bulletin and CSHCN Family Newsletter.</p> <ul style="list-style-type: none"> <li>• <b>Medical Home website</b> – The Medical Home webpage on the CSHCN Services Program is being updated. Once the update to the CSHCN Services Program website is completed, the Texas page on the AAP Medical Home website will also be updated.</li> </ul>
<p><b>B. Increase accessibility of primary care medical home services for children and adolescents and their families.</b></p> <ol style="list-style-type: none"> <li>1. Expand the community-based health care infrastructure – [work with FQHCs and TACHC].</li> <li>2. Increase access to services in rural areas. [?telemedicine]</li> <li>3. Partner with medical and nursing schools.</li> <li>4. Explore alternative approaches to maximizing compensation for operating comprehensive Medical Homes* - Support appropriate reimbursement for services provided within the context of the medical home.</li> <li>5. Create or share tools with providers [referral forms, fax-back]</li> <li>6. Increase continuity of health care for children in the foster care system, including children with special health care needs.</li> </ol>	<ul style="list-style-type: none"> <li>• <b>FQHCs</b> – Meetings are being planned with one to two FQHCs to discuss medical home quality improvements and available tools and resources. <i>Update – 3/07- TACHC distributed a memo and information on Medical Home concepts to Medical Directors of member Community Health Centers. The purpose of the information is to introduce members to Medical Home quality improvement efforts and to highlight the potential for Medical Home quality improvement concepts to enhance existing comprehensive services provided by FQHCs. Community Health Centers are encouraged to contact DSHS and other resources to access Medical Home materials, tools, and technical assistance. The memo also notes that the Medical Home effort is another opportunity for FQHCs to establish and strengthen networks with regional DSHS staff and/or other local providers.</i></li> <li>• <b>TACHC</b> - Medical home information and materials will be distributed at the Texas Association of Community Health Centers (TACHC) Annual Conference. <i>Update – 3/07- The TACHC Annual Conference will be held October 20-24, 2007 in Austin. <a href="http://www.tachc.org">www.tachc.org</a></i></li> <li>• <b>Su Clinica Familiar</b> – Medical Home team continues to meet. In process of identifying all CSHCN by color coding on chart. Reviewing options for data management. Use of laptop notebook for care planning, including updating care plans during the appointment with the family. Also, installing a program to help with prescriptions for children with multiple medications. Challenges – maintaining a Social Worker to assist with care planning and coordinating a parent support group.</li> <li>• <b>Reimbursement/Coding</b> <ul style="list-style-type: none"> <li>• A Clinician Directed Care Coordination Policy (reimbursement of non face to face coordination activities) was developed and is still under review at HHSC. <i>Update – 3/07- The Benefits Management Workgroup has completed it's work. There are still some issues on the financial impact of this policy that have not been concluded. It is under financial review within HHSC.</i></li> <li>• Dr. Bob Warren (Texas Children’s Hospital) and Dr. Cynthia Lopez (Su Clinica Familiar) will give a presentation on Concepts and Coding for the CSHCN Medical Home to the Medicaid Managed Care Medical Directors on April 26, and also as a TPS Annual Meeting Plenary Session in June. Dr. Warren has also given the presentation to the CSHCN Subcommittee of the Harris SDA RAC, who recommended that it be given to the whole RAC in June.</li> </ul> </li> <li>• <b>Medical Home Research</b> - Two Texas health plans (Parkland Community Health Plan - Dr. Lachman and Texas Children's Hospital - Dr. Giardino) are participating in national research conducted by the Center for Medical Home Improvement. <ul style="list-style-type: none"> <li>• Texas Children’s Hospital has six participating practices, and sent surveys to 114 families with a response rate of nearly 25%. A second round of surveys was sent mailed at the beginning of September.</li> </ul> </li> </ul>

Strategies and Activities	Status
	<p><i>Update – 3/07- Parkland Community Health Plan</i></p> <ul style="list-style-type: none"> <li>· <i>All data has been completed for the Center for Medical Home Improvement research – currently awaiting their results.</i></li> <li>· <i>Identification for CSHCN project -- Being presented at the end of March at a national conference on predictive modeling.</i></li> <li>· <i>Continued development work on children in need of PT, OT and Speech. Have developed some useful definitions and procedures for coordinating care.</i></li> </ul> <ul style="list-style-type: none"> <li>· <b>Senate Bill 6</b> (79th Regular Session) directs HHSC to develop a statewide healthcare delivery model for all children in foster care. The RFP included input related to strengthening medical home requirements. <i>Update – 12/06 - The contract procurement process had not been completed.</i></li> <li>· <b>Telemedicine</b> - The Texas Medicaid - Telemedicine Advisory Committee is being reconvened (last met in January 2004) – potential meeting date in December 2006. The purpose for this meeting is to <ul style="list-style-type: none"> <li>· Propose bylaws for the committee to cover membership, leadership, etc</li> <li>· Inform the committee of Medicaid telemedicine changes since January 2005</li> <li>· Review Medicare - Medicaid policies</li> <li>· Review Medicaid telemedicine utilization data.</li> </ul> </li> <li>· <b>Immunization</b> The Immunization Branch at DSHS actively supports medical home as a strategy that is consistent with higher vaccine coverage levels. Fifty local health departments (LHD) and 19 FQHCs contract with DSHS to provide immunization infrastructure activities that include recruitment and training of TVFC and ImmTrac providers, promotion of the medical home concept, use of registries, and use of reminder/recall systems among other activities. In September 2006, a Call to Action was held for local health department contractors. The Call to Action focused on proven strategies to raise vaccine coverage levels. Eight break-out groups discussed barriers to the medical home, and ways to promote the medical home concept. Additional funding was made available to LHD contractors to implement new activities within six strategy areas. Some of the contractors requested funding to implement activities related to promoting the medical home.  The Immunization Branch has multiple activities that promote the medical home concept. The Texas Vaccines for Children Program has over 3000 public and private providers enrolled to administer vaccines to children age birth to 18 years. ImmTrac, the statewide immunization registry, is promoted to providers as a complete resource of immunization histories for children in the provider's practice, and ImmTrac can perform reminder and recall functions for provider patients. The Call to Action allowed LHDs to request funding for new staff to perform outreach to children in ImmTrac with incomplete immunization histories. Outreach workers will contact families of these children, seek all immunization records, and ensure that all immunizations are entered into ImmTrac. <i>Update – 3/06</i> <ul style="list-style-type: none"> <li>· <i>Parkland Community Health Plan – Immtrac project - Continued development on use of the registry to assist Medical Home providers in improving immunization rates including development of online tools. Driscoll and PHCP are featured in a DSHS immunization bulletin article for their efforts.</i></li> </ul> </li> </ul> <p><b>Resources shared –</b></p> <ul style="list-style-type: none"> <li>· American Academy of Pediatrics - Immunization in a Medical Home - training tool to assist health care</li> </ul>

Formatted

Strategies and Activities	Status
	<p>professionals to immunize children in the context of a medical home.</p> <ul style="list-style-type: none"> <li>• National Academy of Health Policy - Improving the Delivery of Health Care that Supports Young Children's Healthy Mental Development: Early Accomplishments and Lessons Learned from a Five-State Consortium, How States are Working with Physicians to Improve the Quality of Children's Health Care, External Quality Review Organizations (EQROs) to promote young children's healthy mental development; and reimbursing pediatric providers for screening for maternal depression.</li> <li>• MCH Policy and Research Center - Promising Approaches for Strengthening the Interface Between Primary and Specialty Pediatric Care</li> <li>• Commonwealth Foundation - New Manual on Improving Child Developmental Services in Primary Care Practices</li> <li>• The Medical Home &amp; Early Child Development in Primary Care" - Calvin C. J. Sia, MD, Lynn B. Wilson, PhD, Sharon Taba, MEd</li> </ul>
<p><b>C. Increase partnerships with families, providers, and other stakeholders.</b></p> <ol style="list-style-type: none"> <li>1. Ensure family participation and partnership in coordination of care and in the education and training of health care providers and ancillary staff *- Partner with family organizations. [Family to Family Health Education Center/P2P]</li> <li>2. Continue to provide leadership through the Medical Home Workgroup.</li> </ol>	<ul style="list-style-type: none"> <li>• <b>Texas Parent-to-Parent</b>– Presentations were provided on family-centered care and creating a Medical Home, and transition to adult health care at the Annual Conference. <i>Update – 12/06</i> - TXP2P continues to provide medical home information to all the Pediatric and Family Practice residents trained through their Medical Education Program. TXP2P is working with Early Childhood Intervention on their HRSA grant for deaf and hard of hearing screening. TXP2P will create training on the communication options parents face and train parents to help support them through that choice.</li> <li>• <b>Medical Home Family Toolkit</b> - The toolkit, developed by Texas Parent to Parent, and Provider resource - Small Steps, Big Differences, The Medical Home Partnership (new England Serve) were finalized and announced in the May CSHCN Provider Bulletin. <ul style="list-style-type: none"> <li>○ A link to the Toolkit was posted on the Texas Page - AAP National Ctr for Medical Home Initiatives website, TXP2P website, and CSHCN Services Program website.</li> </ul> </li> <li>• <b>Emergency Planning</b> - The Children with Special Health Care Needs (CSHCN) Services Program of the Texas Department of State Health Services recently published a bilingual booklet titled, "Emergency &amp; Disaster Planning for Children with Special Health Care Needs". All clients who receive services or are on the waiting list for the CSHCN Services Program will receive a copy of the booklet in early October. Others can download it for free from <a href="http://www.dshs.state.tx.us/cshcn/NewsPage.shtm">http://www.dshs.state.tx.us/cshcn/NewsPage.shtm</a>. There is also a direct link to the booklet at <a href="http://www.dshs.state.tx.us/cshcn/pdf/emer_plan.pdf">http://www.dshs.state.tx.us/cshcn/pdf/emer_plan.pdf</a>.  <p>The booklet contains a bilingual Emergency Information Form for Children with Special Needs. The form was developed by the American Academy of Pediatrics and adapted by DSHS. The Emergency Information Form can also be downloaded for free from <a href="http://www.dshs.state.tx.us/cshcn/NewsPage.shtm">http://www.dshs.state.tx.us/cshcn/NewsPage.shtm</a>. There is also a direct link to the Emergency Information Form at <a href="http://www.dshs.state.tx.us/cshcn/pdf/emer_info_form.pdf">http://www.dshs.state.tx.us/cshcn/pdf/emer_info_form.pdf</a>. Families were asked to complete and return a brief survey on emergency planning and other aspects of medical home that was included in the packet mailed to clients receiving services or on the waiting list for the CSHCN Services Program.</p> </li> <li>• <b>Newborn Screening</b> – Dr. Rajagoplan had noted challenges regarding children lost to follow-up due to name changes, etc. Dr. Lachman noted that ImmTrac uses different criteria to track children and is able to look-up/track children by various ways (i.e. name, partial name, SS#, birth date, etc). Information shared with the MHWG</li> </ul>

Strategies and Activities	Status
	<p>regarding the client matching methods in ImmTrac.</p> <p>The Texas Early Hearing Detection and Intervention (TEHDI) program will share the data report for calendar year 2005 at January 2007 Medical Home Workgroup meeting. Final data analysis is done in October each year for the previous year. (Birth screen information is available within a few months following the end of the year, but it takes up to six months following the birth screen to receive the follow up screening and diagnostic hearing testing and intervention information). Dr. Rajagopalan had some preliminary data in her excellent presentation at the July MHWG meeting.</p> <p>The HRSA Grant at Early Childhood Intervention (ECI) is in its second year, and is currently emphasizing the addition of pediatric audiologists and ECI programs into the TEHDI data system, so that there is more robust information on follow-up hearing testing and arrival at intervention services. Next year the emphasis will be on sharing information and interactions with parents and the medical home. Continuing education modules and educational brochures have been discussed, and the TEHDI program would appreciate receiving information from the MHWG regarding how physicians like to receive information, so that they can interact more effectively.</p> <p>Update – 3/07 - Texas Early Hearing Detection and Intervention (TEHDI), the newborn hearing screening program, will soon have a continuing education module for physicians, nurses, audiologists, midwives, social workers, and other health professionals involved in the hearing screening process. The module will be around one hour and will be provided at no charge. The module development is being provided through Texas Health Steps for education of their providers and others who work with preventive care for children. It should be available in April 2007, and a notice will be sent to the Medical Home Workgroup for dissemination to members.</p> <ul style="list-style-type: none"> <li>• <b>Quality of Care for CSHCN</b> - HHSC has convened meetings of agency representatives to discuss measurements of quality of care for CSHCN in response to letters and requests by TPS for HHSC to gather and analyze data on the quality of care being provided to CSHCN and their families across agency programs. <ul style="list-style-type: none"> <li><i>Update – 12/06</i></li> <li>- Representatives from the Texas Pediatric Society (TPS) met with the Children's Policy Council (CPC) in November to provide an overview of the project. TPS and CPC decided to join together to establish an ad hoc workgroup to further discuss quality of care issues and to review and provide input for agencies regarding existing quality of care measures. Stakeholders interested in participating on the workgroup should contact Terry Beattie at terry.beattie@hhsc.state.tx.us 512-424-6528. The group plans to meet early in 2007.</li> <li>- Update – 3/07 - The project has been "adopted" by the Children's Policy Council (CPC), with a plan to convene a workgroup to develop/recommend a plan for the CPC to endorse and put forward. A meeting of a workgroup has been delayed until summer 2007 due to demands of the legislative session.</li> </ul> </li> <li>• <b>MHWG Quarterly Meetings</b> <ul style="list-style-type: none"> <li>- 4/10/06</li> <li>- 7/10/06 – Presentation on early hearing detection and intervention in the medical home</li> <li>- 10/24/06</li> <li>- 1/9/07</li> </ul> </li> </ul>
<p><b>D. Improve Infant and Child Health Surveillance and Screening</b></p>	<ul style="list-style-type: none"> <li>• A link to CSHCN Medical Home web page and Medical Home brochures added to Texas Health Steps website</li> <li>• 7/06 – Information on Medical Homes was presented to Regional THSteps Coordinators and Directors of Social Work Services.</li> </ul>

Strategies and Activities	Status
<p><b>Programs in conjunction with THSteps. *</b></p>	<ul style="list-style-type: none"> <li>• Resources shared - Nat'l Academy for State Health Policy - Resource Guide for Developmental Screening in Primary Care Practices, First Signs – tools and information to improve screening and referral practices and to lower the age at which young children are identified with autism and other developmental disorders.</li> </ul>
<p><b>E. Strengthen preventive health services and transition programs for adolescents.</b></p> <ol style="list-style-type: none"> <li>1. Identify opportunities to educate providers of adult care on treating young adults with chronic conditions.</li> <li>2. Work with medical associations, primary care associations, and others to identify medical providers trained in adolescent health and special health care needs.</li> </ol>	<ul style="list-style-type: none"> <li>• <b>Articles published</b> – Two articles related to “Intermediate and Advanced Transition Training” were published in the CSHCN Family Newsletter. Please check with Kathy regarding the info for this section.</li> <li>• <b>Online provider education</b> – THSteps developed an online provider education module on Transition for case managers.</li> <li>• <b>Texas Parent to Parent</b> – TXP2P provided information in all four of their newsletters in 2006 on transition issues for children and youth with special health care needs. The newsletters go to parents and professionals and are posted on the website (<a href="http://www.txp2p.org">www.txp2p.org</a>).</li> </ul>

\* Specifically addressed in the Texas Early Childhood Comprehensive Systems Initiative component plan – “Access to Insurance and Medical Home”.