The Joint Commission Primary Care Medical Home Certification Program

By Lon M. Berkeley, BA, MS

NOTE: Medical Home News has invited each of the five national organizations offering recognition/accreditation for medical homes – the Accreditation Association for Ambulatory Health Care, the Joint Commission, NCQA, Planetree, Inc., and URAC -- to provide a feature article describing their programs. This is the fourth in the series. Ed.

As health care professionals, we want our patients and the individuals we serve to receive the best quality care, but finding the best tools and processes to remain innovative and to assure we are doing our best to coordinate their care, improve access, and engage them can be challenging. The Joint Commission has options for organizations and providers that can simplify the process of becoming a medical or behavioral health home, while simultaneously addressing other potential risks relating to infection prevention, facilities and environment of care, credentialing and privileging, emergency management, and more.

The Joint Commission’s Primary Care Medical Home (PCMH) certification option is available to Joint Commission-accredited ambulatory care organizations, as well as hospitals and critical access hospitals that have ambulatory care practices and outpatient services that provide primary care services offered by a primary care clinician.

Organizations accredited under the Behavioral Health Care Accreditation program will be able to select the Behavioral Health Home (BHH) certification option in January 2014. There are certain differences between the certification options for these three types of providers relative to the applicable standards, the scope of the certification award, and the on-site survey process.

The surveys for all certifications are conducted at the time of the regular on-site survey, unless the organization or provider requests a separate survey. Certification remains in effect for up to three years, and is displayed on the Joint Commission’s Quality Check® website at www.QualityCheck.org.

The Joint Commission’s medical and behavioral health home models are based on the Agency for Healthcare Research and Quality’s five characteristics of a medical home, and include the following core functions and attributes:

- **Provides patient/person-centered care.** This care is relationship-based with an orientation toward the whole person. It involves understanding and respecting each individual’s unique needs, culture, values, and preferences. PCMH actively supports patients and clients individuals served in learning to manage and organize their own care at the level they choose.

- **Supports comprehensive care.** This involves meeting the large majority of each individual’s physical/mental health/substance abuse care needs, including prevention and wellness, acute care, and chronic care. Providing comprehensive care requires a team of care providers. Although some primary care medical health homes may bring together large and diverse teams of care providers to meet the needs of the people they serve, many others, including smaller practices, build virtual teams linking themselves and the individuals they serve to providers and services in their communities.
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- **Ensures coordinated care.** Care is coordinated across all elements of the broader health care system including specialty care, hospitals, home health care, and community services and support. This is particularly critical during transitions between sites of care, such as when patients are being discharged from the hospital. PCMHs also excel at building clear and open communication among individuals and families, the medical health home, and members of the broader care team.

- **Fosters superb access to care.** This involves offering accessible services with shorter waiting times for urgent needs, enhanced in-person hours, around-the-clock telephone or electronic access to a member of the care team, and alternative methods of communication such as e-mail and telephone.

- **Pursues a systems-based approach to quality and safety.** This involves a commitment to quality and quality improvement through ongoing engagement in activities, including the following:
  - Using evidence-based medicine and clinical decision support tools to guide shared decision making with patients/individuals and families,
  - Engaging in performance measurement and improvement,
  - Measuring and responding to patient/individual experiences and patient/individual satisfaction,
  - Practicing population health management; and
  - Sharing robust quality and safety data and improvement activities publicly.

The oldest of the three medical home certification programs, the PCMH certification option for ambulatory organizations has been offered since 2011, and nearly 100 accredited organizations with more than 900 practice sites serving three million patients who receive care from nearly 1,600 practitioners, have achieved certification.

The Joint Commission is in the process of updating standards for the PCMH certification option for free-standing ambulatory care organizations in order to align them with the Centers for Medicare & Medicaid Services’ meaningful use stage two expectations. The standards are currently in reviewed by the Joint Commission’s Board and committees, and are targeted for implementation in July, 2014.

Most hospitals are already quite familiar with Joint Commission accreditation standards and the benefit of on-site surveyors both identifying areas of needed improvement and offering valuable suggestions. As a result, they have welcomed the opportunity to include the PCMH certification as part of a hospital’s current survey process.

Although there are new requirements associated with the PCMH/BHH option, there is substantial overlap with the existing accreditation standards, so obtaining this certification is very achievable for accredited organizations.

**Joint Commission**
**Accreditation + Primary Care Medical Home (PCMH) or Behavioral Health Home (BHH) Certification**

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Benefits of Joint Commission certification extend beyond the opportunity to improve care, with a growing number of commercial and public payers accepting the Joint Commission’s PCMH certification for their enhanced reimbursement incentives or demonstration programs. The Joint Commission also continues to work with them to address their specific data requirements.

The Affordable Care Act has enabled many states to establish behavioral health homes, and the Joint Commission is working closely with state agencies to acquire recognition for this new certification. Behavioral health care providers interested in BHH certification do not need to provide all the services themselves, but must ensure that the full array of primary and behavioral health care services is available and coordinated.

The Joint Commission’s approach to PCMH certification builds on the value of a single integrated on-site survey by surveyors who provide suggestions for how to meet any non-compliant requirements, uses a tracer-based evaluation method that doesn’t require any additional application time or resources, augments existing standards and requirements, and provides personalized attention throughout the entire accreditation and certification process.

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