North Country HealthCare
A New Model of Primary Care

By Susan Bigley, FNP & Sara Morley, MPA

A new model of care is being implemented at North Country HealthCare, the Patient Centered Medical Home (PCMH). The PCMH model is much more than a physical location; it is an innovative approach to primary care. By transforming the way primary care is organized we can prevent costly medical interventions such as unnecessary hospitalizations, emergency room visits and unnecessary office visits. The medical home utilizes a team approach to healthcare, providing a personalized and holistic approach to the way care is delivered. The team concept is central to the success of the program. Each patient has an identified primary provider and medical assistant. The goal is a well run clinic operation that optimizes each patients level of health.

North Country is aiming to improve patient care, as well as the health and well-being of its patients as it moves toward Patient Centered Medical Home recognition through certification by the National Committee for Quality Assurance (NCQA). NCQA recognizes practices that meet the following criteria: prioritizes the relationship between patient and clinician; provides enhances access to care; coordinates services across multiple settings; empowers patients to fully engage and take control of their health; and provides care management for their highest risk patients.

Care management is one of the cornerstones of PCMH. Those patients that are identified as high risk or those with uncontrolled health conditions are offered special attention through care management services. Along with their primary care provider and medical assistant, a team of nurses and health coaches are available to assist individuals to achieve their self-management goals. Working one on one with the patient providing them with the needed education and tools to achieve their health goals helps to enrich the patient provider interaction. The RNs and health coaches can also identify barriers to care, and help find needed resources to overcome these barriers. To achieve optimal health one may need more services than a primary care provider can offer in a 15-30 minute appointment. The PCMH model, care management and health coaching are one way to augment the office visit to achieve better health outcomes.

In addition to individual care management, North Country also has developed a better way to track patient referrals to specialists and a way to monitor those patients who are hospitalized; thus North Country will better be able to anticipate post-hospital needs and arrange for timely hospital follow-up.

The use of electronic health records allows North Country to actively monitor patients and identify those that are due for care opportunities. These care opportunities range from recommended cancer screening to disease specific standards of care. Every scheduled appointment gets prescreened for these care opportunities.

North Country HealthCare is currently preparing their Flagstaff, Kingman and Lake Havasu City clinics for NCQA Patient Centered Medical Home recognition and plans to implement this cost-saving, health improving model at all of its primary care locations in the future.

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