

Nurse care coordinators are key to success of patient-centered medical home programs

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Patient-Centered Medical Home (PCMH) programs include a team of primary care providers that manage patient care and oversee individual care plans. Their goals are to improve health outcomes, enhance quality, and reduce costs. Medicare and private payers have adopted these programs to improve primary care delivery.

George Mason University's College of Health and Human Services led new research on provider experiences with PCMH programs. To date, few projects have studied provider experiences with these programs. Providers said that nurse care coordinators (NCC) and individual care plans were key factors for improving health care quality and delivery.

Associate Professor Dr. Gilbert Gimm led the study with CHHS colleagues Dr. Debora Goldberg and Dr. Len Nichols and colleagues from the Peterson Center on Healthcare and Alan Newman Research. The study was published in April 2019 in the *Journal of General Internal Medicine*.

The research team held [focus groups](#) with 65 primary care doctors and phone interviews with 14 doctors and two practice administrators in the CareFirst PCMH program.

"Primary care quality and effective care coordination are especially important for adults with [chronic conditions](#) and complex needs for [health care services](#)," Gimm explained.

The researchers also found that some primary care providers had skeptical views of CareFirst. Provider concerns included one-way communication, lack of trust, and differing priorities in selecting patients for individual care plans. For example, they did not view the secure online data portal as a useful part of the program.

"A successful payer-based PCMH program depends on whether primary care providers believe the components are useful for improving care quality," Dr. Gimm noted. "Our study found that improved communication and trust between providers and payers is crucial for the success of these programs."

In 2019, as Medicare payment changes take effect for doctors in delivery models like the PCMH, interest in successful PCMH programs by policymakers and doctors will continue to grow. The researchers suggest that additional study of provider experiences in other PCMH programs is needed.

More information: Gilbert Gimm et al, Provider Experiences with a Payer-Based PCMH Program, *Journal of General Internal Medicine* (2019). [DOI: 10.1007/s11606-019-05005-7](https://doi.org/10.1007/s11606-019-05005-7)

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