

FINAL BILL REPORT

E2SHB 2549

C 295 L 08

Synopsis as Enacted

Brief Description: Establishing a patient-centered primary care collaborative program.

Sponsors: By House Committee on Appropriations (originally sponsored by Representatives Seaquist, Lantz, Morrell, Lias, Barlow and Green).

House Committee on Health Care & Wellness

House Committee on Appropriations

Senate Committee on Health & Long-Term Care

Senate Committee on Ways & Means

Background:

In 2007 legislation was enacted that provided health care coverage to children with family incomes at or below 250 percent of the federal poverty level. As part of the legislation, the Department of Social and Health Services (DSHS) was directed to identify explicit performance measures that indicate that a child has an established and effective medical home and report the measures to the Legislature by December 2007. In the report, dated November 30, 2007, the DSHS workgroup recommended the adoption of the medical home definition identified in the Washington State Medical Home Fact Sheet, a concept document created by the Washington State Partnership for Medical Homes. The document provides that a medical home is "an approach to delivering primary health care through a 'team partnership' that ensures health care services are provided in a high quality and comprehensive manner."

In separate 2007 legislation, the DSHS was directed to work with the Department of Health (DOH) to design and implement medical homes for its aged, blind, and disabled clients in conjunction with chronic care management programs to improve health outcomes, access, and cost-effectiveness. The legislation provided that the approach was to build on the Washington State Collaborative Initiative, based on a systematic approach to healthcare quality improvement in which organizations test and measure practice innovations. The DOH has implemented the legislation through the Washington State Collaborative to Improve Health, in which several medical teams work to improve the quality of care delivered by their primary practice. The focus areas for the DOH Collaborative are asthma, diabetes, and hypertension for adults, and asthma, medical homes, and obesity for children.

In the same legislation, the DSHS was instructed along with the state Health Care Authority to develop a five-year plan by September 1, 2007, to change provider reimbursement protocols in order to reward quality and incorporate evidence-based standards.

The 2008 State Quality Improvement Institute is a national project that will focus on activities that help the states improve the quality of their health care system. The project is sponsored

by Academy Health, an organization for health professionals, and the Commonwealth Foundation, a private foundation that seeks to promote a high-performing health care system. The State Quality Improvement Institute will be held in 2008 and will assist selected states with the conceptualization and implementation of substantial quality improvements.

Summary:

The Department of Health (DOH) must establish a medical home collaborative pilot project. The pilot project will be based on the collaborative model developed to implement medical homes for addressing chronic care management programs.

The DOH must report to the appropriate committees of the Legislature on the progress and outcomes of the project with an interim report by January 1, 2009, and a final report by December 31, 2011. The Health Care Authority and the Department of Social and Health Services must also report its findings on changing reimbursement for primary care and a time line for adoption of payment and provider performance strategies by January 1, 2009.

Naturopaths are included in the list of health care providers who may participate in the primary care pilot program.

Votes on Final Passage:

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| House | 94 | 0 | |
| Senate | 47 | 0 | (Senate amended) |
| House | 93 | 0 | (House concurred) |

Effective: June 12, 2008