



LPRO: Legislative Policy and Research Office

PATIENT-CENTERED PRIMARY CARE HOME PROGRAM

BACKGROUND BRIEF

BACKGROUND

The Patient-Centered Primary Care Home Program (**PCPCHP**) was created with the passage of House Bill 2009 (2009). The goals of the program are to develop strategies to identify and measure what a primary care home does, promote their development and encourage Oregonians to seek care through recognized Patient-Centered Primary Care Homes (**PCPCH**).

In 2010, the Oregon Health Policy Board charged the Oregon Health Authority (**OHA**) with providing access to patient-centered primary care, with the ultimate goal that 75 percent of all Oregonians would have access to care in a Patient-Centered Primary Care Home by 2015.

In 2011, the **PCPCHP**, partnered with the Northwest Health Foundation to convene a task force to provide recommendations for implementation of the primary care home model in Oregon. The program is working to implement the recommendations of the Task Force, as outlined in the [report and one](#) of the top priorities identified by the Task Force was to build on the available expertise and resources to create a Patient-Centered Primary Care Institute which would convene and

broker resources, create a centralized learning system and provide technical assistance to clinics.

In 2012, the **PCPCHP** again partnered with Northwest Health Foundation to launch the Patient-Centered Primary Care Institute, housed within the Oregon Health Care Quality Corporation. The Institute provides technical assistance, training, and resources to help primary care clinics adopt the PCPCH

standards to become recognized clinics.

CONTENTS

BACKGROUND

STANDARDS ADVISORY
COMMITTEE

PCPCH MODEL

STAFF CONTACT

STANDARDS ADVISORY COMMITTEE

In 2009, OHA convened the 15-member Standards Advisory Committee. The Committee membership includes patients, clinicians,

health plans and payers which Collaborate with OHA to develop the final model. Additionally, the Committee was directed to:

- Define the core attributes of the PCPCH
- Develop a process to identify PCPCH's that meet the core attributes defined by OHA;



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- Define uniform quality measure for acute care hospital and ambulatory services that align with PCPCH quality measures; and
- Create policies that encourage the retention of, and the growth in, the numbers of primary care providers in Oregon.

PCPCH MODEL

The Oregon Legislature adopted the PCPCH model which is a variant of the medical home concept to strengthen primary care delivery and improve Oregon's Triple Aim outcomes. Since the evidence and outcomes are still evolving, OHA therefore decided to implement the PCPCH model incrementally to obtain provider support, allow for capacity building, improve the model's effectiveness, and time to adapt the model to Oregon's changing health care needs. As of February 2016 there are 600 clinics across the state that have been recognized as a Patient-Centered Primary Care Home.

CURRENT PCPCH ACTIVITIES

In 2015, the Legislature passed Senate Bill 832 which directed OHA to continue with the expansion of the PCPCH model by developing standards for "achieving integration of behavioral health services and physical services in Patient-Centered Primary Care Homes and Behavioral Health Homes." With the new directive, the Committee convened and was tasked by OHA to:

- Revise a specific set of existing standards and measures based upon staff and community experience with the model;

- Refine the current tier structure/measurement system; and
- Develop recommendations on standards for integration of primary physical health care in sites where the main focus is delivery of behavioral health care services.

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