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***Health care innovation***

**Oregon health care clinics awarded grant to expand “patient-centered medical homes”**

**Portland, Ore., May 11, 2009** — One hundred years ago, you only visited the doctor when you were sick or injured. A bandage, a prescription, then off you’d go, on your own again until the next time you needed help.

Essentially, “acute care” is how medicine is still practiced today. But the greatest share of medical costs is from treating people with chronic conditions. An estimated 133 million Americans have one or more chronic diseases, and care for them accounts for 75 percent of the \$2 trillion in annual care costs. Clearly, the acute care model is obsolete and is contributing to the steep increase in health care costs.

Two Oregon organizations—CareOregon and the Oregon Primary Care Association (OPCA)—are the recipients of a grant to expand an alternative that promises to be a valuable tool in health care reform.

The National Medical Home Initiative for Safety-Net Clinics is a groundbreaking four-year project to improve health care delivery across the United States. The grant will support health centers that serve the vulnerable and disadvantaged in achieving high performance through a patient-centered medical home (PCMH) model of delivery. The PCMH is also known as the primary care home or integrated health home model.

The Safety Net Medical Home Initiative is sponsored by The Commonwealth Fund, a private foundation supporting independent research on a high performance health system. The Commonwealth Fund is joined in support of the project by eight co-funders, including the Colorado Health Foundation ([www.coloradohealth.org](http://www.coloradohealth.org)); Jewish Healthcare Foundation (Pittsburgh) ([www.jhf.org](http://www.jhf.org)); Northwest Health Foundation (Portland, Oregon) ([www.nwhf.org](http://www.nwhf.org)); Partners HealthCare (Boston) ([www.partners.org](http://www.partners.org)); The Boston Foundation ([www.tbf.org](http://www.tbf.org)); Blue Cross Blue Shield of Massachusetts Foundation ([www.bcbsmafoundation.org](http://www.bcbsmafoundation.org)); Blue Cross of Idaho Foundation for Health ([www.bcidahofoundation.org](http://www.bcidahofoundation.org)); and Beth Israel Deaconess Medical Center (Boston) ([www.bidmc.org](http://www.bidmc.org)).

The initiative is being led by Qualis Health, a Seattle-based quality improvement organization, to provide support to the states and health centers to improve quality of care. Working closely with the MacColl Institute for Healthcare Innovation, Qualis Health will support health centers’ efforts to improve primary care.

Under the initiative, CareOregon and OPCA will work together as a Regional Coordinating Center for the PCMH model. The Center will receive \$125,000 per year for four years to build upon existing health policy and technical assistance and training programs at 13 clinics across Oregon. “Our ultimate goal,” said Craig Hostetler, OPCA executive director, “is to expand the PCMH model among safety net and other primary care clinics throughout the state.”

CareOregon is the state's largest Medicaid managed care organization, and OPCA represents clinics that care for more than 20 percent of both the Medicaid and the uninsured populations.

Both organizations have already demonstrated a commitment to the concept by launching PCMH pilot projects. CareOregon has been working with six clinics in its Primary Care Renewal project since 2006. OPCA has focused on the PCMH model as a major goal for the last four years.

In addition, in order to promote the spread of medical homes in other safety net clinics, CareOregon and OPCA worked with the Oregon Rural Practice Research Network (ORPRN) to identify two Rural Health Clinics to participate in the initiative.

"This is a tremendously exciting opportunity for us to be a part of a national dialogue and initiative to make the PCMH the new model of care in primary practice," said David Labby, MD, PhD, CareOregon medical director.

In the acute care model, doctors focus on patient visits. Under the patient-centered medical home model, a team consisting of panel managers, medical assistants and behavioral health specialists as well as primary care providers (doctors, nurse practitioners or physician assistants) focus on every patient and works to make the population stay healthy or get better.

When a patient comes in for a visit, the team addresses all issues they've identified: preventive screenings, overdue exams or whatever else is needed. The team, rather than the patient, may even initiate the visit if it's warranted.

"The PCMH model represents a paradigm shift for primary care providers, allowing them to focus on the health of all their patients, rather than just focusing on office visits," Labby said.

CareOregon will be the clinical lead for the initiative, responsible for integrating the organizations' current learning networks into a broader medical home learning network. OPCA will be the fiscal agent and lead for working with stakeholders to support the sustainability and spread of patient-centered medical homes through health policy. The clinics will be supported by OPCA, CareOregon and ORPRN staff.

The Qualis Health grant will provide funding for additional staff, materials and external expertise to expand and enhance the patient-centered medical home model.

"We're grateful to the funders of this initiative for supporting our work," Hostetler said. "I would like to thank in particular the partnership between The Commonwealth Fund and our local funder, the Northwest Health Foundation. They have been generous in supporting the medical home model, and they have also been key partners in our work regarding comprehensive health care reform in Oregon."

Collectively, the clinics participating in the initiative will serve 189,000 patients across Oregon. They include 16 percent of the state's Medicaid patients and 12 percent of all uninsured patients.

"Many of our patients have complex medical, behavioral health and social issues," Hostetler noted. "By demonstrating that the PCMH model works for them, we hope to encourage its adoption throughout the broader health care community."

## **About CareOregon**

CareOregon is a non-profit health plan that serves Oregonians with Medicare and Medicaid, including about one-quarter of Oregon Health Plan participants. Its mission is to help all Oregonians have quality health care, even in these times when health care is hard to afford. CareOregon works with its members and its network of providers so members can live healthier lives and have high-quality, affordable, effective health care whenever they need it, now and in the future. The Primary Care Renewal program is an essential part of this effort. For more information, see <http://www.careoregon.org/>.

## **Oregon Primary Care Association**

The Oregon Primary Care Association is a nonprofit membership organization of 28 Federally Qualified Health Centers located across the state. OPCA provides advocacy on public policy and technical assistance and training to members to enhance health equities and increase access to comprehensive health care for low-income and vulnerable Oregonians. For more information, see <http://www.orpca.org>.

## **Background information**

### **Commonwealth Fund**

The Commonwealth Fund is a private foundation that aims to promote a high-performing health care system that achieves better access, improved quality and greater efficiency, particularly for society's most vulnerable. [www.commonwealthfund.org](http://www.commonwealthfund.org)

### **Qualis Health**

Qualis Health, an independent nonprofit organization established in 1974, and headquartered in Seattle, is dedicated to developing and applying best practices while delivering an extensive range of patient-centered, evidence-based healthcare quality improvement and care management services. [www.qualishealth.org](http://www.qualishealth.org)

### **MacColl Institute for Healthcare Innovation**

The MacColl Institute for Healthcare Innovation at Group Health Center for Health Studies aims to bridge the worlds of research and practice through the development, evaluation and dissemination of improvements in care, through a program of identifying, developing and testing innovations in caring for individuals and disease-specific patient populations. In the mid-1990s the Institute developed the Chronic Care Model approach to improving ambulatory care.

### **Northwest Health Foundation**

The mission of the Northwest Health Foundation is to advance, support and promote the health of the people of Oregon and Southwest Washington. The foundation has been investing in programs and projects since 1997, working to improve the health of the people in this region.

**Participating patient-centered medical home clinics:**

**OPCA Primary Care Home Clinics**

Benton County Community Health Center

Sherlyn Dahl, CEO  
530 NW 27th St.  
Corvallis, OR 97330  
541-766-6835  
[www.co.benton.or.us/healthcenter/benton.php](http://www.co.benton.or.us/healthcenter/benton.php)

Community Health Center Inc.

Peg Crowley, Executive Director  
19 Myrtle St.  
Medford, OR 97504-7337  
541-773-3863  
[www.communityhealthcenter.org/](http://www.communityhealthcenter.org/)

Klamath Open Door

Bob Marsalli, CEO  
Klamath Health Partnership, Inc.  
2074 S Sixth St.  
Klamath Falls, OR 97601  
541-851-8110  
[www.klamathopendoor.org](http://www.klamathopendoor.org)

La Clínica del Cariño

Tina Castañares, Executive Director

849 Pacific Ave  
Hood River, OR 97031  
541-386-6380

425 E Seventh St.  
The Dalles, Oregon 97058  
541-296-4610

[www.lcdcfh.org](http://www.lcdcfh.org)

Community Health Center of Lane County

Jeri Weeks, CEO  
1640 G St.  
Springfield, OR 97477  
541-682-3550  
[www.co.lane.or.us/CHC/default.htm](http://www.co.lane.or.us/CHC/default.htm)

Outside In

Kathy Oliver, CEO  
1132 SW 13th Ave.  
Portland, OR 97205-1703  
503-535-3800  
[www.outsidein.org/clinic.htm](http://www.outsidein.org/clinic.htm)

## **CareOregon Primary Care Renewal clinics**

### Central City Concern Old Town Clinic

Ed Blackburn, CEO  
727 W Burnside  
Portland, OR 97209  
503-228-4533  
[www.centralcityconcern.org/oldtown.htm](http://www.centralcityconcern.org/oldtown.htm)

### Legacy Clinic Emanuel

George Brown, MD, CEO  
2800 N Vancouver Ave., Suite 230  
Portland, OR 97227  
503-413-2901  
[www.legacyhealth.org/body.cfm?id=287](http://www.legacyhealth.org/body.cfm?id=287)

### Multnomah County Health Department

Amit Shah, MD, CEO  
Mid-County Health Center  
12710 SE Division  
Portland, 97236-3134  
503-988-3601  
East County Health Center  
600 NE Eighth Ave., Third Floor  
Gresham, OR 97030  
503-988-5155

### Oregon Health & Science University

OHSU Family Medicine at Richmond  
Ann O'Connell, Executive Director  
3930 SE Division  
Portland, OR 97202  
503-418-3900  
[www.ohsu.edu/health/clinics-and-services/clinic.cfm?id=11481](http://www.ohsu.edu/health/clinics-and-services/clinic.cfm?id=11481)

OHSU Family Medicine at Scappoose  
Diane Hudson, clinic manager  
51377 Old Portland Road, Suite C  
Scappoose, OR 97056  
503-418-4222  
[www.ohsu.edu/health/clinics-and-services/clinic.cfm?id=11482](http://www.ohsu.edu/health/clinics-and-services/clinic.cfm?id=11482)

### Virginia Garcia Memorial Health Center

Gil Munoz, CEO  
85 N 12th Ave.  
Cornelius, OR 97113  
503-359-5564  
[www.virginiagarcia.org/cornelius.html](http://www.virginiagarcia.org/cornelius.html)

**ORPRN Rural Health Clinics**

Eastern Oregon Medical Associates

Jon Schott, MD, managing partner

3175 Pocahontas Road

Baker City, OR 97814

541-523-1001

[www.eoma.familydoctors.net/](http://www.eoma.familydoctors.net/)

Winding Waters Clinic

Reni Grandi, MD, Elizabeth Powers, MD, and Scott Siebe, MD, owners

406 NE First St.

Enterprise, OR 97828

541-426-4502

203 E Main

Wallowa, OR 97885

541-886-2431