



Media Release

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Four CRDAMC clinics earn national recognition as Army Medical Homes

FORT HOOD, Texas – After 12 months of hard work, four additional Carl R. Darnall Army Medical Center primary care clinics have been recognized by the National Committee for Quality Assurance (NCQA) as Level 3 Patient Centered Medical Homes. Thomas Moore Health Clinic, Bennett Health Clinic, Russell Collier Health Clinic and the Family Medicine Residency Center now bear the NCQA seal of approval. Last year our three Community Based Medical Homes received similar recognition.

The NCQA is a non-profit organization dedicated to improving health care quality. Since its founding in 1990, NCQA has been a central figure in driving health improvement throughout the healthcare system. As part of the recognition process, NCQA reviewed hundreds of documents submitted by the staff at each of these clinics which provided fact-based evidence that the clinic was conducting business as a true Medical Home.

“Earning Level III NCQA recognition reflects CRDAMC’s commitment to The Surgeon General’s vision of transforming from a healthcare system to a system for health. Our clinics now rank amongst the highest nationwide – military or otherwise - in terms of quality. This achievement underscores our commitment to providing high quality care to our patients, where they need it. We are very proud of the hard work and dedication our teams put into making this transformation and are excited about the improved capabilities we bring to our patients,” Dr. (Col.) Frank Hauger, MD, CRDAMC Department of Family and Community Medicine, said.

The NCQA measures the ability of medical facilities to provide quality healthcare through standardized, objective measurement guidelines. NCQA requires recognized facilities to enhance access to care and patients' continuity with their provider teams, keep track of patient data to help manage patients' wellbeing, plan and manage care using evidence-based practices, provide self-care support and community resources, as well as track and coordinate tests, referrals and other care for patients. Finally, clinics have to show that they measure their performance and patients' feedback to continue improving the quality of care.

Here’s what patients can expect from the (Insert Clinic Name) Medical Home?

- A personal provider. Each patient has an ongoing relationship with a personal Physician, Physician Assistant or Nurse Practitioner who is trained to provide first contact, continuous and comprehensive care.
- Physician directed medical practice. The personal physician leads a team(s) of individuals at the practice level who collectively take responsibility for ongoing patient care.

- Whole person orientation. The personal provider is responsible for providing all of the patient's health care needs or for arranging care with other qualified professionals.
- Coordinated and Integrated Care. Each patient's care is coordinated and integrated across all elements of the health care system and the patient's community.
- Quality and Safety focus: All members of the healthcare team are focused on ensuring high quality care in the medical home.
- Improved access: In the PCMH, enhanced access to care options are available through open scheduling, same day appointments, secure messaging, and other innovative options for communication between patients, their personal physician and practice staff.

Army Medicine's goal is to have all of its primary care facilities in the continental United States and overseas achieve NCQA recognition and transform to the Patient Centered Medical Home (PCMH) model of care no later than October 1, 2014. The transition to the PCMH model of care is part of Army Medicine's overall shift from a health care system to a system for health.