General Background Information

Our country’s health care system has gone through tremendous changes in recent years. HMOs are now commonplace, but the demands for health care and the shortage of insurance, especially for the poor, are creating new demands. Medicaid is now being taken on by many ambulatory care practices (ACPs) that previously did not see Medicaid patients. The ACPs now have to plan for Medicaid managed care. ACPs that previously had suburban, middle class patients must now learn to care for a lower economic level of patients who come with many governmental regulations.

These changes are challenging for everyone involved. For the HMO, they must insist on certain expectations of the ACPs, such as engaging in immunization policies, and keeping in sync with regulations and a positive public image. And for the ACPs, who may have previously enjoyed independence as a group of physicians in a partnership medical practice, they may now have to answer to the expectations of an HMO.

Simulation Background

The simulation focuses on a health insurance organization in New Jersey called Whole Health Care, Inc. which has been serving New Jersey for five years. It offers multiple products, including an HMO and PPO. Whole Health Care, Inc. contracts with an ambulatory care practice (ACP) called The Family Care Center. The ten-year-old Center has several outpatient facilities and provides pediatrics, ob-gyn, family medicine, and internal medicine services. The Family Care Center historically served only privately insured patients, mostly middle-class, suburban families. However, two years ago The Family Care Center entered into a contractual relationship with Whole Health Care, Inc., and part of its new contract includes Medicaid patients. As a result, The Family Care Center has doubled its patient load, with an influx of new patients from a variety of cultures, including immigrants from Korea, Russia and Pakistan. The majority of new Medicaid patients, however, come from a large Puerto Rican community within the Center’s catchment area.

A peer review committee is examining Whole Health Care, Inc., which is held to accountability by the National Committee for Quality Assurance (NCQA) for outcomes of care, i.e., disease prevention, chronic care, and early intervention. The New Jersey
Department of Human Services wants Whole Health Care, Inc. to monitor and evaluate the quality of health services of its HMO components, particularly for the Hispanic patient population served by The Family Care Center. The goal of the evaluation is to assess current health and medical practices that influence the rates of asthma, diabetes, and other health conditions prevalent among Puerto Ricans, and to determine what measures to use. Specific areas to be evaluated include prevention and screening services for mammography, asthma, diabetes and immunization disparities in Latino populations, particularly Puerto Ricans, since they are one of the primary groups served by The Family Care Center. The New Jersey Department of Human Services is requesting that the evaluation be conducted in a participatory fashion through focus groups surveys of patients and community members of Puerto Rican descent within the catchment area of The Family Care Center. The NJ Department of Human Services also requested that the Department of Family Medicine and its Center for Healthy Families and Cultural Diversity, University of Medicine and Dentistry of New Jersey (UMDNJ) – Robert Wood Johnson Medical School conduct the evaluation, since The Family Care Center does not conduct this type of research, and that the research be completed as quickly as possible.

Joanne Kairys was contacted by Richard Walsh, Director of Whole Health Care, Inc. and Arlene Hegeman, Director of The Family Care Center, who requested technical assistance. The Directors specifically requested the evaluation be conducted by UMDNJ because of its reputation in conducting focus group needs assessments with diverse populations. Joanne Kairys is establishing a research team of fellows and faculty members. A meeting has been scheduled for this morning at The Family Care Center. Attending the meeting will be Richard Walsh, Director of Whole Health Care, Inc., Arlene Hegeman, and the research team. The purpose of the meeting is to determine how the participatory research/evaluation will be conducted, to begin to define the questions, and to discuss the process of inviting subjects to participate in the focus groups. The research/evaluation team has not met nor spoken with Directors Walsh or Hegeman. Joanne Kairys is the only person from UMDNJ who has had contact with them. This will be the first meeting of the team and the stakeholders.

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