Problem:

Uncontrolled hypertension among patients has been a problem for West End Medical Centers, Inc. (WEMC) in Atlanta, Georgia.

Program:

WEMC anticipates that improved delivery of patient-centered hypertension management strategies through the implementation of Patient-Centered Medical Home (PCMH)-supported activities will lead to better health outcomes for their patients.

Overview

West End Medical Centers, Inc. (WEMC), established in 1976, is a nonprofit organization of federally qualified health centers. WEMC provides comprehensive primary health care services in seven locations throughout Georgia’s Fulton and Cobb counties. WEMC programs focus on cardiovascular disease prevention and management (including high blood pressure), diabetes control, asthma management, breast and cervical cancer treatment, perinatal care, and behavioral health wellness. WEMC also offers health education, pharmacy patient assistance, translation services (Spanish and French), and mobile medical unit services throughout Atlanta and surrounding areas.

In 2011, the Joint Commission certified WEMC as a Patient-Centered Medical Home (PCMH). WEMC uses this care model to support program and service delivery for patients with hypertension. Provider-led teams tailor and organize care and treatment strategies, which are tracked over time for each patient. Patients with uncontrolled blood pressure receive referrals for additional care and support services, including—

Health education-
The WEMC Health Education Team, composed of a health educator, dietician, and fitness instructor, works with referred patients to develop self-management goals. The health educator provides hypertension education materials; invites the patient to attend self-management classes; and highlights the importance of diet, exercise, medication adherence, and stress management to overall health. The dietician and fitness instructor are available to the patient through health education classes. The team gathers and shares information with the patient’s primary care provider and provides documentation in the patient’s health records.

iADAPT-
A 12-month diabetes program conducted in partnership with the Morehouse School of Medicine, iADAPT connects patients to community health workers, who serve as a link between the patient and primary care provider. These individuals provide patients with health education and resources for diabetes self-management. Because many patients with diabetes also have hypertension, education covers hypertension self-management as well. Participants receive grocery store gift cards as incentives.

Pharmacy patient assistance-
WEMC partners with pharmaceutical companies to provide low or no cost medication to eligible patients.

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Field Notes (cont.)

Goals and Objectives
WEMC’s goal is to improve health outcomes for patients with hypertension. Toward this end, WEMC performs several key activities that lead to better delivery of hypertension management strategies. By using the PCMH model, WEMC aims to reduce uncontrolled hypertension among patients who receive clinical and other support services by—

- Ensuring that each patient has a relationship with a team of providers and staff who provide initial and ongoing care.
- Establishing physician-led provider teams responsible for delivering and coordinating integrated and comprehensive care.
- Establishing and using an electronic health record system to ensure all providers and team members share and have access to patient information.
- Integrating continuous quality improvement standards and processes to improve the quality of care and service delivery.

Intended Participants
WEMC patients who participate in hypertension management programs and services have uncontrolled blood pressure. Overall, WEMC’s patient population is predominantly African American. Cobb County’s Family Health Center has a large Hispanic population (30%–40%), but other WEMC locations serve fewer Hispanic patients (about 12%). The majority of patients are women (60%), and about 40% of patients are uninsured.

Progress Toward Implementation
Following PCMH certification in 2011, WEMC had not implemented fully all PCMH model components supporting hypertension management by 2012. Full implementation is on course for the end of 2013.

Community Involvement
WEMC maintains partnerships with external organizations, including a long-standing collaboration with the Morehouse School of Medicine. For example, WEMC and Morehouse partnered to conduct iADAPT, which educates and supports patients for diabetes self-management.

WEMC also partners with the Georgia Medical Foundation, pharmaceutical companies, and schools of pharmacy. These partnerships provide health education materials and low-cost prescriptions to WEMC patients and improve quality management efforts. Specifically, the Georgia Medical Foundation partnership aims to understand communication between patients and providers about prescriptions and evaluates patient compliance with medication instructions. The Foundation also sponsors the health education class offered at WEMC.

Reach and Impact
WEMC aims to reach individuals with high blood pressure in the greater Atlanta area and refer them to hypertension management programs and services. In 2012, 63% of WEMC’s 4,000 patients with hypertension had controlled blood pressure. Control rates continue to improve as WEMC moves toward full PCMH implementation, especially among patients who receive clinical and social support for hypertension self-management.

Demographic and clinical data suggest that diabetes health outcomes also are improving at WEMC through the use of the PCMH model. In 2012, WEMC was ranked in the 90th percentile for controlled A1c levels across federally qualified health centers nationwide.

This document does not constitute an endorsement of any organization or program by the CDC or federal government, and none should be inferred.