

## **Levels of Care Medical Home**

**Levels of Care (LOC)** are assigned to all patients that qualify as a Medical Home patient. This means the patient must be “linked” to the practice with the practice being the “primary care” physician.

LOC assignment is a simplified version of the Home Index; there are only two phases that are determined by:

- Intensity of services (staff productivity: coordinating referrals and services, telephone consults and extensive documentation)
- Complex diagnosis
- Complex cases involving complex psychosocial and/or medical conditions
- Special circumstances

### **Rationale for using a two-tier classification for care:**

Where at least 98% of the patients in the Medical Home are Medicaid beneficiaries, this population is by definition a high risk group for poor health outcomes.

Given this large proportion of the patient population, the majority of patients will require some level of care coordination.

The majority of patients are Level I requiring occasional referrals and consultations  
All patients admitted to Medical Home are classified at least to LOC 1.

Levels of Care are not static but may change to either a greater or lesser intensity of services all of which are dependent upon the patient’s changing condition.

Patients will be assigned LOC 2 by the Care Coordinator in consultation with the physician.

Finally, Care Coordination is an interdisciplinary activity, with the Medical Home rendering services to patients by specialists, residents, medical staff, and a Care Coordinator.