

[Zeph] Hi, this is Zeph again coming to you from the UVM Autism Collaborative. Today we're going to be going over different research studies that we're going to be talking about in the focus groups. And the first one we're going to be going through is study number one.

This is called the HOME Model. And it's about a Medical Home and Managed Care model for transition.

This model was created at the University of Utah. It's the University of Utah HOME Model. And it stands for the Neurobehavior **H**ealthy **O**utcomes **M**edical **E**xcellence Program. It's a medical model of primary care that serves autistic children and adults of all ages and other people who have complex needs and mental health conditions in the area of Salt Lake City, Utah, population 200,000.

The University of Utah HOME Model provides primary care and other services to 1,200 patients. A network of specialty clinicians provides in-patient care and transitions youth from pediatric to adult providers at the age of 22.

The University of Utah HOME Model provides different types of service at the same clinic: primary care, mental health care, behavior therapy, dietician, and case management, in addition to insurance support.

HOME is its own HMO or healthcare system.

So how is it paid for?

State medical and mental health funding together, prepaid capitated per-member, per-month payment from Medicaid and private insurance coverage. HOME pays for care outside the clinic. This has resulted in decreased costs and improved quality of care for 20 years.

About the study.

The study is a survey of 129 caregivers of autistic children who attended the HOME clinic. The results were compared to the answers of caregivers from across the United States.

Autistic children from HOME were older, had more severe autism and complex conditions, and were more likely to be female compared to the autistic children in the US survey.

Caregivers from the HOME program reported more often that the family was at the center of care, and more often care decisions were being made together, and more care in a Medical Home Model. Caregivers from the HOME program reported more access to coordination of care, increased access to behavior therapy, and less frustration paying healthcare bills. Caregivers from the HOME program reported less frustration getting needed care, more discussions about transition to an adult provider.

Those outcomes were achieved for children with multiple conditions and children with severe symptoms.

You're done with this case study, you're going to need to use the link in the email to confirm that you're done with this module.

References. Suen, et al, 2020. Patient-Centered Outcomes in an Interdisciplinary Clinic for Complex Children with Autism. Journal of Developmental and Behavioral Pediatrics.

