

## MEDICAL HOME

According to the American Academy of Pediatrics, children's medical care should be accessible, continuous, comprehensive, family centered, coordinated, compassionate, and culturally effective.<sup>1</sup> Together, these characteristics of care form the medical home model. The 2007 National Survey of Children's Health measured if a child's health care met the standards of a medical home during the previous 12 months. For this purpose, the survey included questions on the following: 1) whether the child has a personal doctor or nurse and a usual source of sick care; 2) whether the child has no problems gaining referrals to specialty care and access to therapies or other services or equipment; 3) whether the family is very satisfied with the level of commu-

nication among their child's doctors and other programs; 4) whether the family usually or always gets sufficient help coordinating care when needed, and receives effective care coordination; 5) whether the child's providers usually or always spend enough time with the family, listen carefully to concerns, are sensitive to values and customs, provide needed information, and make the family feel like a partner in the child's care; and 6) whether an interpreter is usually or always available when needed. If a child's care met all of these criteria, according to the parent, then the child was defined as having a medical home.

In 2007, the care received by 57.5 percent of children met this medical home standard. This varied substantially by household income: 39.4 percent of children in households with incomes

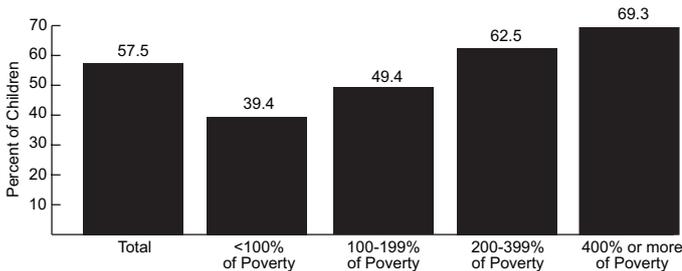
at less than 100% of the Federal poverty level (\$20,650 for a family of four in 2007) had a medical home, compared to 69.3 percent of children in households at or above 400% of the Federal poverty level.

Receipt of care from a medical home also varied by parent-reported health status. Children in excellent or very good health were the most likely to receive care in a medical home (61.8 percent), followed by children in good health (36.5 percent). Children in fair or poor health were the least likely to have a medical home (25.3 percent).

*1 American Academy of Pediatrics, Medical Home Initiatives for Children With Special Needs Project Advisory Committee. The medical home. Pediatrics. 2002;110(1 pt 1):184-186*

### Children with a Medical Home, by Poverty\*, 2007

Source (III.9): Health Resources and Services Administration, Maternal and Child Health Bureau and Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



\*The U.S. Department of Health and Human Services establishes poverty guidelines for determining financial eligibility for Federal programs; the poverty level for a family of four was \$20,650 in 2007.

### Children with a Medical Home, by Parent-Reported Health Status, 2007

Source (III.10): Health Resources and Services Administration, Maternal and Child Health Bureau and Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health

