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Model for U.S. Health Reform Featured in *North Carolina Medical Journal*

Award-winning Community Care of North Carolina often touted as national model

July 9, 2009 – Morrisville, N.C. – Numerous proposals to reinvent our nation’s health care system are being discussed in Washington, D.C. Most strategies include simultaneously improving quality while decreasing costs. One way to do this is through the implementation of the “medical home.” Community Care of North Carolina (CCNC) has been described as one of the most promising examples of how a system of medical homes can be created.

In response to the high level of national attention to health reform, the *North Carolina Medical Journal’s* latest edition focuses entirely on CCNC. The latest issue of the *Journal* describes how the medical home was implemented, examines how it works, and discusses its strengths and weaknesses as a model for national reform.

“I applaud the *Journal* for focusing an entire issue on CCNC because of its great importance to the state and potential usefulness for national health care reform. This issue is a great resource for individuals interested in learning more about the program and for states considering implementing a similar model,” said L. Allen Dobson, MD, FAAFP, chair of North Carolina Community Care Networks, Inc.

The editors of the *North Carolina Medical Journal* crafted this issue as a comprehensive overview of how the pieces of CCNC fit together to create a high-quality system of care. Articles provide perspectives of individuals involved with the system, including medical directors, patients, physicians and case managers.

Community Care of North Carolina’s effects on costs, quality and health outcomes are also covered. Actuarial studies have found that from 2002 to 2006, CCNC saved North Carolina Medicaid \$150-\$170 million. Further, a UNC Chapel Hill study found that between 2000 and 2002, CCNC achieved approximately \$3.3 million in savings for patients with asthma and \$2.1 million in savings for patient with diabetes, with both groups experiencing improved health outcomes. Such cost savings are important to maintaining the livelihood of North Carolina’s Medicaid program and creating a fiscally sound state budget.

The full issue can be viewed at <http://www.ncmedicaljournal.com/May-Jun-09/toc0509.shtml>

Ed. Note: To receive email alerts for upcoming *North Carolina Medical Journal* issues, contact Christine Nielsen at 919-401-6599, ext. 25 or cnielsen@nciom.org

About the North Carolina Medical Journal

The *North Carolina Medical Journal* is published bimonthly by the North Carolina Institute of Medicine and The Duke Endowment. The *Journal* reaches more than 30,000 readers, making it the most widely distributed North Carolina-based health-focused journal in the state. Each installment of the *Journal* features a policy forum devoted to interchange and debate about a single, highly salient health issue. The *Journal* also publishes original peer-reviewed studies from North Carolina researchers. The purpose of the *Journal* is to be a standard reference for policymakers and health care leaders who are engaged in the difficult task of addressing the health challenges facing our state. <http://www.ncmedicaljournal.com>