

## Abstract

The State of Connecticut Department of Social Services proposes to utilize a web-based application to connect providers in federally qualified health centers (FQHCs) and hospitals in designated communities throughout the state to create a common platform to search and schedule appointments for Medicaid enrollees. We propose to use the web-based application, *My Health Direct*, created by Global Health Direct, Inc. The Connecticut Primary Care Association, the Connecticut membership association for FQHCs, will lead the project under contract with the State of CT.

*My Health Direct* facilitates access to primary care for Medicaid recipients by removing barriers patients face to obtaining primary care appointments and enhancing linkages between emergency departments and community-based primary care providers. The My Health Direct system is also available to schedule appointments 24 hours a day, 7 days a week, 365 days a year. The process to make appointments available to non-emergent patients is described in the following steps.

- Step 1: Appointment inventory is created by primary care providers (“receivers”)
- Step 2: Appointment inventory is searched by hospitals (“senders”)
- Step 3: Appointments are selected on behalf of the patient.
- Step 4: Patient confirmation is created

Each referred patient leaves the emergency department with a written confirmation of their primary care appointment in hand. Patient confirmations are printed in the patient’s language of choice, and contain the day and time of the appointment, along with the name, address, and telephone number of the clinic. The confirmation specifies the bus lines that operate near the clinic. The confirmation contains all of the information that the patient needs in relation to the appointment, and increases the likelihood that they will attend their appointment.

Use of My Health Direct will reduce the repeated utilization of hospital emergency departments by non-emergent Medicaid patients and thereby reduce cost to the Medicaid program. It will also allow hospital emergency departments to allocate a greater share of its resources to patients with emergent conditions. Patients will be engaged in the selection of their primary care medical home to ensure that the medical home meets their immediate and ongoing needs.

Fourteen hospitals and the FQHC’s within ten communities will be recruited to participate in the project, including the three largest cities of Bridgeport, New Haven and Hartford. A high percentage of the Connecticut’s Medicaid enrollees seek health services in these medically underserved communities.