Similarly, the Physician Charter on Professionalism articulates a "

medical error, increase patient safety, minimize overuse of health care resources, and optimize the outcomes of care." ¹⁰ The ACP Ethics Manual stresses the ethical importance of active physician engagement in quality efforts and patient safety. The PCMH, by integrating the system improvements paradigm into the practice environment, could help physicians meet these ethical obligations, although this must be done with sensitivity to the patient's perspective. Even as the PCMH promotes "patient-centeredness," automated processes of care could inadvertently depersonalize care and make patients feel less connected to their clinician. Importantly, the PCMH is an opportunity to help promote what patients view as measures of high quality care, 24,28 which include access to and continuity of care with trusted physicians;²⁹ effective communications and empathy; adequate time for office visits:³⁰ coordination of treatment across all providers and settings; decision making about treatment recommendations; and the role of the family in care.

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The patient-centered medical home (PCMH) is emerging and evolving as a model for medical practice that may become an important pillar of national health care reform. The PCMH has the potential to align with the principles of medical ethics and professionalism, and presents an opportunity to reinvigorate the patient-physician relationship and the aspects of health care that patients value. This analysis has explored some of the promise of and concerns about the PCMH through the lens of ethics and professionalism. On balance, many of the principles of the PCMH resonate well with core tenets of ethics and professionalism, and in some cases provide a pathway to enhance the ethical practice of medicine. This analysis may help to highlight some of the practical choices and implications of design and implementation that should be considered to ensure that the PCMH does not become a failed fad, but rather a stepping stone towards a brighter future for health care in America.

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- American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, American Osteopathic Association. Guidelines for Patient-Centered Medical Home Recognition and Accreditation Programs, Feburary 2011. Accessed at www.acponline.org/running_practice/pcmh/ understanding/guidelines_pcmh.pdf on on 20 May 2012.
- 23. **Wynia MK.** The risks of rewards in health care: How pay-for-performance could threaten, or bolster, medical professionalism. J Gen Intern Med. 2009;24:884–7.
- 24. Snyder L, Neubauer RL, for the American College of Physicians Ethics, Professionalism and Human Rights Committee. Pay-forperformance principles that promote patient-centered care: an ethics manifesto. Ann Intern Med. 2007;147:792-4.
- Mitnick S, Leffler C, Hood VL, for the American College of Physicians Ethics, Professionalism and Human Rights Committee. Family caregivers, patients and physicians: ethical guidance to optimize relationships. J Gen Intern Med. 2010;25:255–60.
- 26. Mitnick S, Snyder L, for the American College of Physicians Ethics, Professionalism and Human Rights Committee. Ethical Considerations for the Use of Patient Incentives to Promote Personal Responsibility for Health: West Virginia Medicaid and Beyond. Philadelphia: American College of Physicians; 2010.
- Stacey D, Bennett CL, Barry MJ, et al. Decision aids for people facing health treatment or screening decisions. Cochrane Database Syst Rev. 2011;10:CD001431.
- Wharam JF, Paasche-Orlow MK, Farber NJ, et al. High quality care and ethical pay-for-performance: a Society of General Internal Medicine policy analysis. J Gen Intern Med. 2009;24:854–9.
- 29. **Woo B.** Primary care—t**N**/c.5e50250te16.4%5lldlD(97)YEj2H4ldeO4D48ar4Q9GFVD(D5llfD)884023