The Economic Impact of Primary Care Physicians

By Charles D. MacLean MD, Associate Dean for Primary Care, UVM College of Medicine

According to a 2011 publication by the Russell Sage Foundation, the Great Recession of 2007-2009 was the most devastating global economic crisis since the Great Depression. As a result of the crisis, the U.S. lost more than 7.5 million jobs and the unemployment rate doubled. The mortgage crisis had a profound effect on the housing sector, while U.S. manufacturing continued to contract. As we have been emerging from this economic downturn, it has become clear that while there has been some flattening of rising health care costs, the healthcare sector of the economy has remained relatively healthy. This is true both nationally and here in Vermont. One indicator of the strength of the healthcare sector is the Vermont Department of Labor’s most recent projections for job growth in the next decade, which estimated that, of the top 25 growing jobs in the state, 13 will be in the healthcare sector. See table on page two.

Over the last decade we have also seen an increasing recognition of the importance of primary care. There are several factors contributing to this renewed focus. First of all, there is mounting evidence that primary care not only improves healthcare quality, but also helps lower healthcare costs. It is no surprise that strengthening primary care relationships for patients is a central theme of many current health reform efforts. Secondly, as we are grappling with the complexity of the myriad social determinants of health, primary care is embracing inter-professional teams of care that are more able to tackle problems that go beyond the historical role of the medical model of care. Finally, specialty care is often most effective when coordinated in collaboration with a robust medical home to help avoid duplication of services or conflicting recommendations.

There are approximately 559 primary care physicians and 267 primary care nurse practitioners and physician assistants in the state, most of whom are practicing in small clinical settings. This primary care workforce is essential to the success...
of health care reform efforts embodied in the Vermont Blueprint for Health and implementation of Accountable Care Organizations (ACOs). Furthermore, these clinicians are widely distributed around the state providing care in rural hospitals and practices resulting in an economic boost to these communities.

So, beyond the direct services that physicians and other clinicians provide to communities, what are the specific economic impacts of primary care? This question was addressed by researchers at the National Center for Rural Health Works in 2007 who estimate that the direct and indirect economic impact of a primary care physician on their community is almost $900,000 annually[4]. The Vermont Department of Labor estimates that physicians overall support 17,412 jobs and generate $93.3 million in local and state tax revenue[2].

This is an important time in healthcare reform in Vermont. As we reshape the way we pay for and deliver health care services it is important to recognize the contribution of our widely distributed and thriving clinical and economic engine.

### Vermont AHEC Network Honored by Bi-State PCA

The Vermont AHEC Network was honored with the 2015 Vermont Community Service Award at the Bi-State Primary Care Association’s recent annual conference. In addition to Vermont AHEC’s efforts to interest young people in health careers and support health professions and medical students in community learning projects, Bi-State recognized Vermont AHEC for its statewide community service in support of FQHCs and rural health clinics through continuing education programs, administration of the Vermont Educational Loan Repayment Programs, and other efforts to recruit and retain health care professionals.

In accepting the award, Elizabeth Cote, director of the UVM Office of Primary Care and AHEC Program, noted that she accepted on behalf of the entire Vermont AHEC Network, which includes Champlain Valley AHEC in St. Albans, Northeastern Vermont AHEC in St. Johnsbury, and Southern Vermont AHEC in Springfield, VT.

Vermonters also honored were Representative George Till, MD, a member of the Vermont Legislature who received the Chair’s Award; Melanie Bristol, FNP, a family nurse practitioner at Little Rivers Health Care who received the Outstanding Clinician Award; and John A. Olson, Chief of the Office of Rural Health and Primary Care at the Vermont Department of Health, who received the Public Service Award.

### Further Reading


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**Footnotes**


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**Health care sector jobs among the top 25* growing jobs in Vermont 2012-2022**

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*Occupations with employment of 50 or more in 2012

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Left to right: John Olson, of the Vermont Department of Health; Elizabeth Cote, Director of the Vermont AHEC Program; and Tess Stack Kuenning, president and CEO of the Bi-State Primary Care Association.
New Academic Detailing Session: Stroke Prevention in Atrial Fibrillation

The Vermont Academic Detailing Program’s new topic for 2015 is “Stroke Prevention in Atrial Fibrillation” which will be offered in addition to “Management of Migraines,” “Management of Insomnia,” “Management of ADHD,” and “Management of Type 2 Diabetes.”

One credit/contact hour of continuing education is approved for each session (e.g., 1 AMA PRA Category 1 Credit(s)™.)

The new 2015 topic includes reviewing stratification tools for evaluating stroke versus bleeding risks, an overview of the available medications, strategies for optimizing therapy for individual patients, and strategies for safe prescribing. As always, patient resources will be included as part of this prescriber continuing education program.

Small group or one-on-one sessions with an academic detailer are available for any of the Vermont Academic Detailing Program topics; “live” sessions online via user-friendly technologies such as GoToMeeting or Skype are also offered.

The session “Discontinuing Medications” will be retired this year, so those practices that would like to schedule that topic should do so soon! Contact Laurie McLean in the UVM Office of Primary Care at 802-656-2888 or at Laurie.Mclean@uvm.edu to schedule an Academic Detailing session for you or your practice.

People in the News

Thank You, Laurie Hurowitz!

The University of Vermont College of Medicine Office of Primary Care and AHEC Program bid a fond farewell to Laurie Hurowitz, PhD, who retired after nearly 15 years of administering the Freeman Educational Loan Repayment Program and the Freeman Medical Scholars Program. She also played a key role in data analysis and program evaluation. We thank Laurie for her many contributions and wish her a happy and healthy retirement (with lots of travel and new adventures)!

Lynn Boggs, MBA, MSN, RN has succeeded James L. Daily as Porter Medical Center’s new President and Chief Executive Officer this spring. She most recently served as Senior Vice President, System Operations, for Mission Health in North Carolina, while concurrently serving as president and CEO of McDowell Hospital, a post she held since 2012.

Paul Bengston, CEO of Northeastern Vermont Regional Hospital, has received the American Hospital Association’s 2015 Grassroots Champions Award for his work over the previous year in effectively delivering the hospital message to elected officials, helping to broaden the base of support for hospitals and advocating for patients, hospitals and communities.

New Book Connects Health Care Finance with Nursing Practice

For 25 years, Betty Rambur, professor of health policy and nursing at UVM, has worked on health care reform. In the early 1990s, she chaired reform efforts in her home state of North Dakota. One of the areas she has long wanted to address during her professional career as a practitioner, professor, dean, and member of the Green Mountain Care Board, is the lack of information connecting traditional nursing practice with health care finance, economics and policy.

Rambur addresses these increasingly critical issues, especially in light of the passage of the Affordable Care Act, and fills a major gap in the literature with her new book, “Health Care Finance, Economics, and Policy for Nurses: A Foundational Guide.” This undergraduate nursing text is a must-read for all nurses, according to Susan Reinhard, senior vice president and director of AARP Public Policy Institute, and is the only such text grounded in nurses’ understanding and experience written as an “easily understandable guide for nursing action from bedside to boardroom.”

Four UVM Medical Students Awarded Freeman Legacy Scholarships

Hillary Anderson, Tristan McKnight, Brian Till, and Erin Pichiotino, all of the UVM Class of 2017, have each been awarded a $5,000 Freeman Foundation Legacy Scholarship toward their tuition costs.

The program was started in 2010 to honor the Freeman family and Foundation for their long history of support for College of Medicine students. Recipients sign a letter of intent to practice medicine in Vermont following completion of their medical training.

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Greetings from the department of family medicine and happy spring! Like many of you, we are active in the family medicine department with primary care medicine and dentistry improvements. It’s very rewarding that primary care is being embraced as the foundation for health in communities across the state. This shows up in: medical homes, workforce interest, health polls, and the design of health reform measures.

Medical student interest in family medicine is at an all-time high in Vermont; this year 17 graduating students will be heading to family medicine residencies in Vermont and across the country. Without a doubt the contributions of community-based preceptors, our volunteer faculty, across the state have made a major difference in UVM educational programs. Thank you. It was truly an honor to receive a letter of commendation from the Green Mountain Care Board for this accomplishment!

We are graduating two exceptional classes of residents: six family physicians, two of whom are going off to additional fellowship training, and two who will practice in Vermont; and four dentists from our first year operating the general dental residency program. We also welcome an outstanding incoming group of family medicine and dental residents.

Sincere congratulations to several family physicians: Karen Burke, MD retired from her practice in Milton this past year after many years of dedicated patient care and teaching in Vermont; Rachel DiSanto, MD in Newport, who received the 2014 Recent Alumnus Award from the College of Medicine; David Little, MD practicing in Milton, who received the 2014 Vermont Medical Society Physician of the Year Award; and Allyson Bolduc, MD who has “retired” from practice in South Burlington and as President of the Vermont Academy of Family Physicians. Allyson remains very active across the state in several public health initiatives, and will also be recognized by the College of Medicine next month with the 2015 Service to Community and Profession Award. Thank you to each of them, and I recognize that their work is a reflection of exceptional and dedicated primary care physicians across the state.

Speaking of public health, it also has been encouraging to know that so many of you are engaging in health-related conversations at the policy-making level. We can make a difference there as well, and with our expertise are able to provide important leadership for health policy in Vermont. Our students and residents follow your example!

We had a great opportunity to participate in writing two HRSA educational grant applications this year, both proposals focusing on Interprofessional education and practice: I think the evolution of the medical home has led to recognition of the many effective contributions that an Interprofessional team can make for patients and community-based care.

As the Physician Assistant (PA) profession turns 50 years old, Vermont celebrates a landmark event for PAs. Catherine Gemmiti, MPAS, PA-C Chair/Director is leading development of the first Master of Medical Science Physician Assistant Program in Vermont, and plans to welcome the inaugural class at the College of St. Joseph in Rutland next summer pending approvals by the New England Association of Schools and Colleges (NEASC) and the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). About 330 licensed PAs in Vermont provide excellent primary and specialty care medicine throughout the state. As our in-state PA program grows, so will the need for health care professionals sharing their knowledge as clinical preceptors.

For additional information, visit: www.csj.edu/academics/paprogram

The Physician Assistant Academy of Vermont (PAAV) held its 33rd Annual Winter Continuing Medical Education Conference in Manchester Village, with 160 registrants from 16 states. This conference consistently combines high quality lectures and workshops with opportunities to connect with colleagues from our region and beyond. Planning for the 34th conference at the Stowe Mountain Lodge is well underway.

The PAAV awards the annual Devlin Scholarship to a PA student from Vermont and was pleased to honor Morgan Jackson from Enosburg Falls this past year. Application deadline for the 2015 award is June 30.

For more information about the PAAV’s educational program, the Devlin Scholarship, and other PAAV activities, visit www.paaov.org.
Rebecca Bell (critical care with expertise in vaccine advocacy as well), Pam Puthoor (gastroenterology), Leslie Young (neonatology), and Heather Link (primary care). In the upcoming year we will also welcome former resident Dr. Keith Robinson (returning as a pediatric pulmonologist and as our new Director of Quality), Dr. Kathryn Nacca (pediatric emergency medicine) and Dr. Danielle Ehret (neonatology and global health).

Our hospitalist team continues to expand its services offering breast feeding consultation for mothers (Drs. Molly Rideout, Rebecca Goodman, along with Dr. Anya Koutras from Family Medicine) and several have been credentialed to perform circumcisions. Dr. Paul Rosenu, former Director of Quality, has shifted into informatics technology to improve the electronic health record as it relates to children’s care.

Finally, department faculty and staff continue to garner accolades. For example, the Vermont Child Health Improvement Program was recently named the 2015 winner of the National Health Services Award from the Academic Pediatric Association as well as the Best Collaborative Team for preventing child abuse and neglect by KidSafe Vermont. There’s much more to write about, but we’ll save space and share in a future issue of Primarily Vermont.

University practice at the completion of her residency in July 2015. Both physicians will be available for obstetric and gynecologic referrals. Dr. Dalpe has a special interest in menopausal transition and Dr. Kenney is particularly interested in pregnancy care. Also joining the faculty in July will be Dr. Jennifer Dundee as a subspecialist in Endocrinology and Infertility. She will join Dr. Elizabeth McGee, who currently serves as the director of Endocrinology and Infertility, in providing sub-specialty referral care.

Dr. Bronwyn Kenney

Primarily Vermont

Obstetrics, Gynecology & Reproductive Sciences

The Department of Obstetrics, Gynecology and Reproductive Sciences at the University of Vermont Medical Center has been expanding its Generalist division in order to provide improved access for both obstetric and referral gynecologic care. Two new providers have been added to the faculty: Dr. Joanne Dalpe joined the practice in February 2015 moving from a private practice position in Plattsburgh, NY, and Dr. Bronwyn Kenney will be joining the University practice at the completion of her residency in July 2015. Both physicians will be available for obstetric and gynecologic referrals. Dr. Dalpe has a special interest in menopausal transition and Dr. Kenney is particularly interested in pregnancy care. Also joining the faculty in July will be Dr. Jennifer Dundee as a subspecialist in Endocrinology and Infertility. She will join Dr. Elizabeth McGee, who currently serves as the director of Endocrinology and Infertility, in providing sub-specialty referral care.

Internal Medicine

Primary Care Internal Medicine had a great year. We welcomed exceptional new faculty and providers – Drs. Jason Bartsch, Rosy Hill, Zail Berry, Jessica Lunardini, and Andrea Fossati (per diem). We have introduced a number of new clinical services and partnerships over the past year. Dr. Zail Berry and Dr. Jaina Clough have been instrumental in starting our Partners in Acute and Transitional Care at Home (PATCH) Program. This program offers care at home to patients who have difficulty accessing our primary care clinics. We collaborated with Rosemary Dale, ANP, PhD in the UVM College of Nursing to help establish an innovative nurse practitioner-based primary care practice at Appletree Bay in the North End of Burlington. Dr. Fossati is starting to offer Integrative Medicine consults at our South Burlington site. In our efforts to provide comprehensive care to our patients, Dr. Berry assumed the role of medical director at Birchwood Terrace Transitional Care and Rehab and Dr. Hill took over the medical directorship at Green Mountain Nursing and Rehabilitation, while Dr. Isaura Menzies remains the medical director at Starr Farm Nursing Center.

Our faculty members continue to play key roles in teaching and directing courses for a broad audience of clinical learners. After an historic tenure, Dr. Mark Levine stepped away from the role of Director for the Internal Medicine Residency Program to assume the position of Designated Institution Official at the UVM Medical Center and Associate Dean for Graduate Medical Education (GME) at the UVM College of Medicine. Dr. Mark Pasanen was appointed as the new Director of the Internal Medicine Residency Program and Dr. Shaden Eldakar-Hein was named as a new Associate Program Director. Dr. Eldakar-Hein also received the William Osler, MD Award for Outstanding Teacher of the Year in General Internal Medicine in 2014.

Our faculty and providers have been engaged in service at the state and national levels. As two examples, Dr. Claudia Berger was named Regional Clinician Representative for OneCare Vermont Accountable Care Organization, and Dr. Patricia King was elected to the Board of Directors of the Federation of State Medical Boards.

We thank you for your interest in Primary Care Internal Medicine and look forward to providing an update on our many initiatives in the next Primary Care Rounds.

The College of Nursing and Health Sciences (CNHS) is proud to report that our Appletree Bay Primary Care practice is fully implemented. To date, 40 graduate-level nursing students have had clinical experiences with faculty mentors at the site. Future plans include incorporating undergraduate nursing students and students from other disciplines, including speech-language pathology, and physical therapy. Alan Repp MD and Rosemary Dale APRN and their teams are working on a practice and research initiative designed to illustrate how physician and nurse practitioner roles in primary care can support each other for the best possible patient care.

Recently, the College built a...
primarily Vermont (continued from page 7) partnership with Shelburne Bay Senior Living, creating a faculty lecture series responding to issues of interest to seniors such as understanding their lab results and protecting themselves from falling. In fall 2015, 100 undergraduates will be actively involved in service learning with the seniors—similar to a project initiated in the College of Medicine (COM) that will offer COM and CNHS students an experience at Shelburne Bay.

In the fall, the Department of Communication Science and Disorders will be launching a Post-Stroke Group educational series for individuals who have had strokes, and have residual speech issues, and their families. The projected site is the New North End of Burlington; Dr. Shelley Velleman will lead that group.

Professor Alan Maynard, a Certified Athletic Trainer, and Athletic Training faculty, played a key role in creating Act 68: An Act relating to health and schools (passed by the Legislature and signed by Governor Shumlin on June 4, 2013) which, effective July 1, 2015, requires that the home team ensure that a health care professional trained in concussion management is present at any athletic event in which a high school athletic team participates in a collision sport.

A federal HRSA grant in Nursing designed to examine and refine the care of frail elders has brought together an amazing collaboration among medicine, nursing, social work, counseling, speech-language pathology, pharmacy, physical therapy, and nutrition. Using online learning opportunities through Second Life and Avatars, created at UVM in conjunction with Duke University, students have had the opportunity to participate in a virtual primary care setting and work as a team to provide care to an elderly Korean woman, a patient case designed for this particular activity. Dr. Mary Val Palumbo has spearheaded this project.

A Screening, Brief Intervention and Referral to Treatment (SBIRT) grant, spearheaded by Family Medicine has provided an avenue for counseling, family practice, internal medicine, social work, and nursing to identify roles and opportunities for collaboration in the primary care setting.

The CNHS has had a steady impetus to expose students to the work environment of the future; for many disciplines that means moving some experience from the traditional hospital-base to the community-based settings. Faculty are addressing adjustments in the curriculum and clinical placement activities associated with that transition. This summer, the University of Vermont Medical Center will support one rising senior to complete an internship in Community Health Improvement, the VNA will support two students to work within the VNA, and Appletree Bay Primary Care will support two student internships in ambulatory primary care nursing.
Spring Briefs

E-cigarette Use in Students Triples

Use of e-cigarettes among middle and high school students tripled in the last year, from 4.5 percent to 13.4 percent, according to the Centers for Disease Control and Prevention. E-cigarettes are battery-powered devices that heat a liquid nicotine solution and create an inhalable vapor; they are not regulated by the Food and Drug Administration (FDA) but the agency is developing rules on the product to restrict use by minors, include warning labels, and decide whether they can be sold in vending machines. E-cigarettes are now more popular among teenagers than traditional cigarettes.

Mixed Results for Affordable Care Act Primary Care Innovation Tests

In early 2015, Kaiser Health News reported that two experiments by the Center for Medicare and Medicaid Innovation delivered mixed results in enhancing primary care. The programs reduced expensive hospital visits in some cases but struggled to show net savings after accounting for their cost. Quality of care indicators did not show a large change, either, in areas such as follow-up visits after hospital discharge and making sure patients get recommended diabetes tests. The Multi-Payer Primary Care Demo (MAPCP) did produce a savings ($4.2 million) for Medicare; MAPCP reimbursing primary care practitioners for care management also include state Medicaid programs and numerous insurance companies. Latest reports show mediocre results for medical homes; some reform advocates say many medical home experiments don’t include potent enough incentives for doctors.

UVM Initiates “On-Ramp to Medical School” Master’s

The University of Vermont will begin to offer a 30-credit master’s in medical science for 25 students per year, to be taught by existing UVM College of Medicine faculty. David Rosowsky, Provost and Senior Vice President at UVM, said the program will be aimed at helping students who may lack credentials for medical school to be able to make that bridge successfully.

UVM Trustees also approved the College of Nursing and Health Sciences’ new online bachelor’s degree in health sciences for 25 to 30 students per year. Both new programs will begin in fall 2015.

Green Mountain Care Board Recognizes UVM Family Medicine

Vermont’s Green Mountain Care Board recognized the University of Vermont College of Medicine’s Family Medicine Department for its record number of family medicine residency matches this March – 17 students, with four matching at the UVM Medical Center. The Green Mountain Care Board is charged with ensuring that the state’s health care system reforms improve quality of care while stabilizing costs.

Board chair Al Gobeille stated, “We hear from all areas of the state that our ability to develop a high quality, accessible, and fully integrated health care system in Vermont will depend on a solid foundation in primary care. For this reason, we believe the increased number of students choosing family medicine this year is an important milestone. It represents a true commitment by the leaders of the College of Medicine and University of Vermont Medical Center to serve both the needs of their institutions and the needs of all the people in Vermont.”

UVM Tops in Health Professions

The University of Vermont has been named one of “10 best colleges to study health professions” in a list compiled by College Factual and reported in USA Today. It specifically noted UVM’s number of majors within the field, small class sizes, collaborative learning opportunities, and high salaries following graduation and at the mid-career level.

UVM Joins Global Health Consortium

The University of Vermont College of Medicine, in alliance with Global Health Program partner Danbury Hospital/Western Connecticut Health network, has been accepted as a member of the Washington, D.C.-based Consortium of Universities for Global Health (CUGH), which includes more than 130 academic institutions and other organizations from around the world in addressing global health challenges. Since 2012, the UVM College of Medicine (COM) has partnered with Danbury Hospital to participate in seven programs in five countries where COM students, residents, and faculty participate in global health rotations, collaborative research, and medical education projects.

Academic Medical Center Rankings

The University of Vermont Medical Center earned top rankings among academic medical centers in the 2014 University HealthSystem Consortium (UHC) Quality and Accountability Study. UHC is an alliance of nearly all of the academic medical centers in the U.S. Outcomes in infection prevention, low rates of complications and readmissions, and overall efficiency of care measures contributed to the high rankings. The high rankings include the medical center’s fourth “top 20” ranking in five years; improved patient outcomes over 2013; and #2 ranking in supply chain (buying and distributing all clinical and non-clinical items at the lowest possible cost) performance for the second year.

Rankings of Nations Best for Common Care

According to U.S. News and World Report, Rutland Regional Medical Center is among the best hospitals in the nation for providing what’s known as common care.

While many Americans are hospitalized for complex procedures, the vast majority of people need care for chronic illnesses such as lung disease or congestive heart failure, or elective surgeries such as joint replacement. In a recent survey using Medicare data, U.S. News and World Report graded 4,000 U.S. hospitals on how they handled five common issues, and Rutland Regional is ranked in the top 40.
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* For more information call: UVM College of Medicine Continuing Medical Education at (802) 656-2292, or go online to http://cme.uvm.edu.
PTSD Consultation Program
FOR PROVIDERS WHO TREAT VETERANS

Who can contact us?
Any provider treating Veterans with PTSD.

Who are the consultants?
Experts at the National Center for PTSD including psychologists, social workers, physicians, and pharmacists.

Ask us about
- Evidence-Based Treatment
- Medications
- Clinical Management
- Resources
- Assessment
- Referrals
- Educational Opportunities
- Improving Care
- Transitioning Veterans to VA Care

What can you expect?
- It’s easy to make a request
- Responses are quick
- Questions are answered by email or phone
- Calls are scheduled at your convenience

THE CONSULTATION PROGRAM does not provide emergency services. For emergencies, please follow the protocol at your facility or contact 911 or the Veterans Crisis Line at (800) 273-8255, then press “1”.

Disclaimer for non-VA providers: The VA PTSD Consultation Program for Community Providers offers education, training, information, consultation and other resources to non-VA health professionals who treat Veterans with PTSD outside of the VA system. These services are provided consistent with evidence-based practices for PTSD and VA consensus statements such as the VA/DoD Clinical Practice Guidelines for PTSD. Our goal is to improve the care available to all Veterans with PTSD regardless of where they access services. We offer expert guidance on general issues that come up in the course of caring for Veterans with PTSD. We cannot, however, provide direct guidance or consultation regarding nor assume clinical responsibility for specific patients; any potential liability would be only in accordance with the Federal Tort Claims Act.
Opioid Prescription Management Toolkit for Chronic Pain

By Constance Van Eeghen, Dr.P.H., Assistant Research Professor; Charles D. MacLean MD, Associate Dean for Primary Care; and Amanda G. Kennedy, PharmD, BCPS, Associate Professor at the University of Vermont College of Medicine

This toolkit is a collection of best practice strategies for managing opioid prescriptions in primary care (and other) ambulatory settings. It results from a two-year project (The Opioid Prescribing Quality Improvement Project, 2012-2014) to identify the most helpful methods used to create predictable and well-managed opioid prescribing patterns for physicians, nurse practitioners, and physician assistants, and their patients.

These strategies include assessing risk for misuse, use of pill counts and urine drug testing, best-practice documentation, standardizing prescribing intervals to minimize communication issues between the patient, office staff and prescriber, and others. All ten practices reported positive results from the best practice strategies they chose to implement from the toolkit.

The toolkit is posted on the UVM Office of Primary Care and AHEC Program website at: uvm.edu/medicine/ahec.

Practical Strategies for Pharmacist Integration with Primary Care: A Workbook of Things We Wish We Knew Before We Started

By Amanda G. Kennedy, PharmD, BCPS, Associate Professor at the University of Vermont; and Michael A. Biddle, Jr., PharmD, BCPS, Assistant Professor, Pharmacy Practice at the Albany College of Pharmacy and Health Sciences

This workbook collects practical strategies and examples that promote the successful integration of pharmacists with primary care practices, and outgrowth of the medication Management Pilot Study that evaluated the integration of pharmacists with Vermont patient-centered medical homes. The study results appeared in the journal Population Health Management in July 2014.

Pharmacists were partnered into five Vermont primary care practices, one day per week, to provide direct patient care, population-based medication management, and prescriber education. The pharmacists identified 708 drug therapy problems through direct patient care, population-based strategies, and education. Common population-based strategies included adjustment of doses and discontinuation of unnecessary medications. The cost avoidance model suggests $2.11 in cost was avoided for every $1.00 spent on a pharmacist.

The workbook was written specifically for pharmacists but primary care practitioners, nurses, and practice administrators will find it helpful; it is available on the UVM Office of Primary Care and AHEC program website (uvm.edu/medicine/ahec), click on “Programs” and then on “Pharmacists in Primary Care.”