

# What is the Vermont Blueprint for Health?

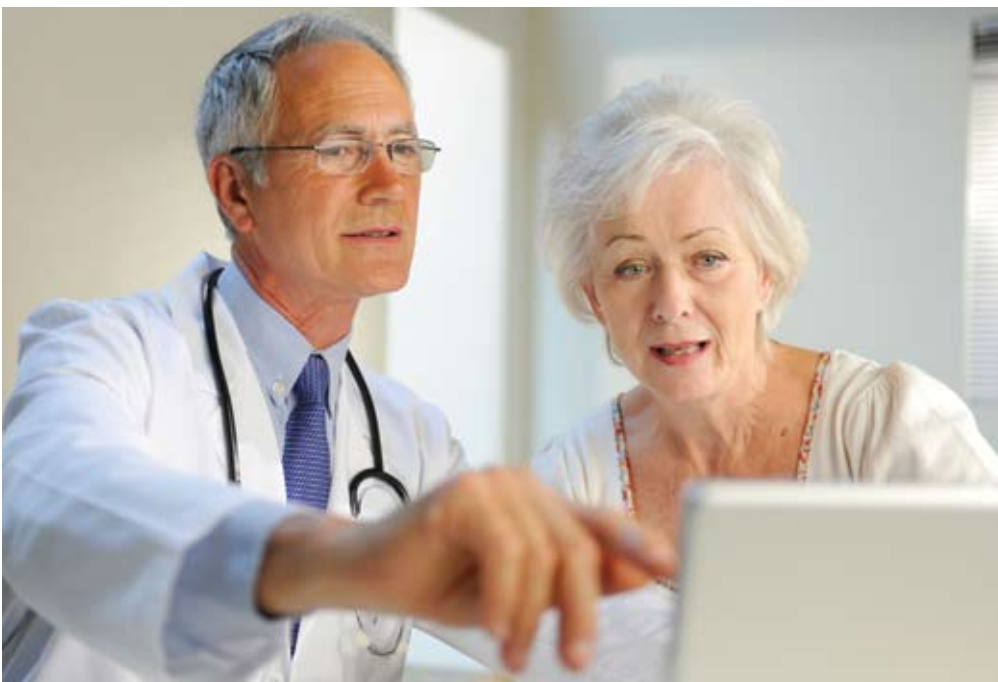
The Vermont Blueprint for Health is a state-led program that aims to integrate a system of health care for patients; improve the health of the overall population; and improve control over health care costs by promoting health maintenance, prevention, care coordination, and management. Launched in 2003 with a goal to address the increasing costs of people with chronic illnesses, the Blueprint has become a learning health system that evolves to meet the needs of health care professionals and improve the health outcomes of all Vermonters.

At the foundation of this learning health system is the Advanced Primary Care Practice Model, which includes:

- **Patient-Centered Medical Homes** (PCMH) that provide well-coordinated and patient-centered care;
- **Community Health Teams** that support practices' care delivery and patients' self-management;
- **Multi-insurer payment reform** to support practice improvements and Community Health Teams;
- A **health information technology infrastructure** that helps health care practitioners track, manage, and report on the preventive and chronic health needs for each patient; and
- A flexible and dynamic **evaluation infrastructure** that analyzes progress, informs policy, and influences the direction of health care in Vermont.

## VCHIP'S EVALUATION OF BLUEPRINT

The Vermont Child Health Improvement Program (VCHIP) has worked with Blueprint leadership to develop a rigorous and timely evaluation of the adult primary care practice components of the Blueprint. Formative evaluation techniques are used to assess activities currently underway and to assist Blueprint staff and its collaborators to make changes and enhancements to the existing and planned activities in communities across the state. VCHIP's work, like the Blueprint's more generally, is a reflexive process in which activities and outcomes are analyzed critically and are used to guide future action. VCHIP works closely with community-level Blueprint staff as well as primary care professionals and practice staff and is deeply involved in this ongoing process of deliberate examination.



VCHIP uses both quantitative and qualitative methods to capture practice processes, guideline adherence, progress toward goals, and the perspectives of Blueprint staff, primary care clinicians, practice staff, and consumers served by practices participating in the Blueprint. This multi-method approach enables VCHIP to understand what is going on and why. Because its evaluation is longitudinal, VCHIP is able to follow the effects of the Blueprint on participating communities over time and to develop a comprehensive understanding of the Blueprint's successes as well as future challenges.

**“For practices seeking NCQA recognition as a Patient Centered Medical Home, the survey language and process can be very complex. VCHIP provides needed clarity and support to the practices and practice facilitators who work with the practices. We could not do this survey process as efficiently or effectively without VCHIP.”**

DANA NOBLE, RN, Practice Facilitator for Vermont Blueprint

Currently, VCHIP's Blueprint evaluation includes:

- **Review** of approximately 4,500 medical records annually;
- **Interviews and focus groups** with project and practice staff, Community Health Team members, and health care consumers;
- **Surveys** completed by individuals working in primary care;
- An assessment of practice health care quality as measured by the **National Committee for Quality Assurance's (NCQA) PCMH Survey** (public and private insurers pay enhanced reimbursement to participating practices based on their NCQA score and the number of beneficiaries served by the practice); and
- **Analyses and evaluations** of all data from the four collection methods above.



## BLUEPRINT EXPANSION

Funded through a 5-year Children's Health Insurance Program Reauthorization Act (CHIPRA) Quality Demonstration grant from the federal Centers for Medicare & Medicaid Services (CMS), VCHIP also plays an integral role in the Blueprint's planning and expansion to pediatrics. Central elements include:

- Expanding **NCQA assessments** to pediatric and family medicine practices throughout Vermont;
- Enhancing practice-based support – or **practice facilitation** – in pediatric and family medicine practices seeking PCMH recognition;
- Promoting guideline-based care by expanding the use of **Bright Futures**;
- Improving panel management in the pediatric population through Blueprint's **health information technology infrastructure**; and
- **Evaluating** the impact of the Blueprint on care delivery, health status, and health care costs.

For more information on Vermont's health care reform initiatives, please visit <http://hcr.vermont.gov>

## WHAT IS NCQA'S PCMH?

NCQA's Patient-Centered Medical Home is an innovative program for improving primary care. In a set of standards that describe clear and specific criteria, high-quality care is supported by registries, information technology, health information exchange, and other means to ensure that patients get indicated care when and where they need and want it. In Vermont, completion of the PCMH standards survey process can result in enhanced reimbursement based on recognition level. VCHIP helps practices seeking PCMH recognition to understand the standards, complete a web-based data collection tool, and collect documentation that corroborates survey responses. It is projected that the number of practices seeking NCQA recognition in Vermont will reach 240 by 2014.

[www.ncqa.org](http://www.ncqa.org)