

## **Combined Meeting of The Blueprint Executive Committee and Blueprint Planning and Evaluation Committee**

**January 17, 2018**

**Attendees:**

B. Tanzman, M. Donohue, A. Frey, C. Elmquist, E. Just, T. Tremblay, M. Snodgrass, K. Murphy, P. Jackson, J. Plavin, N. Walke, E. Richards, M. McAdoo

**By phone:**

J. Fels, P. Farnham, V. Loner, M. Gravett, J. Krulewitz, K. Fitzgerald, T. Dolan, L. Hendry, E. McKenna, L. Ruggles, G. Cloud, S. Winters, P. Biron, S. Gretkowski, R. Lunge, P. Clark, T. Dougherty, A. Buchanan, E. Emard, S. Bruce

The meeting opened at 8:30 a.m. Beth Tanzman stated that today's meeting includes a review of the trend analysis as presented in the 2017 Blueprint Annual Report, and a discussion on aligning the VCCI and the Blueprint.

As reported in the 2017 Blueprint Annual Report, pharmacy spend remains lower in Blueprint practices in relation to comparison practices. Primary care visits also remain lower in Blueprint practices with an overall statewide decline in primary care visits. The Executive Committee discussed whether this could be explained by increasing visit with Community Health Team staff and/or other extenders, however it was noted that primary care access is a common statewide issue.

The discussion at the Executive Committee meeting on the Vermont Chronic Care Initiative revealed that the program varies in structure across regions. This local variability has worked well in some regions and not others. Overall, the regions that have maintained more VCCI staff embeddedness within the primary care practices seem to be more successful.