

WHY SUPPORT THE BLUEPRINT FOR HEALTH?

- **The Vermont Blueprint for Health drives improvement in the primary care delivery system, supporting better health and lower healthcare costs.**
- The Blueprint helps primary care providers transform their practices into patient-centered medical homes, recognized by the National Committee for Quality Assurance's rigorous standards.
 - This time and resource intensive process is incentivized by a \$2 per patient per month (PMPM) payment, which has not increased since the Blueprint's inception and which providers deem inadequate to support the transformation process.
- The Blueprint also supports practices and patients with locally-directed Community Health Teams that provide services including care management, wellness education, behavioral health care, and links to the wide range of social services that help make good health possible for all Vermonters.
 - Community Health Teams also receive a per patient per month (PMPM) payment of \$1.50, which also has not increased since the Blueprint launched and does not adequately support staffing or services.
- This proposal increases the medical home payments to an average of \$5.00 PMPM, including incentive payments for improving the health of patients. In addition, the proposal increases the payments to Community Health Teams to about \$2.25 PMPM. Lastly, because more Vermonters have Medicaid coverage today compared to 2008, Medicaid's share toward the Community Health Teams has increased.
- **The Blueprint has a proven track record of improving health while decreasing the cost of medical care.**
- In January, the Centers for Medicare and Medicaid Services (CMS) measured Medicare savings produced by Vermont's Blueprint for Health and similar primary care reform efforts in seven other states. Of the eight states in the CMS study, Vermont was one of only two that achieved slower growth in total Medicare spending, and of those two Vermont had the more dramatic savings.
- The CMS report shows a net savings to Medicare of \$9,754, 128 in one year – a 4.14% return on investment.
- Reduced growth in acute care spending drove the slowdown of total Medicare spending. Qualitatively, providers said the Community Health Teams are a resource that helps patients implement the prevention and health maintenance plans they make with their providers, helping prevent crisis-oriented care.