## To: Senate Health & Welfare Committee

- From: Jessa Barnard, Vermont Medical Society; Mary Kate Mohlman, Bi-State Primary Care; Stephanie Winters, American Academy of Pediatrics-Vermont Chapter & Vermont Academy of Family Practice
- Date: February 18, 2022
- Re: S. 285, An Act Relating to Expanding the Blueprint for Health and access to home-and community-based services

Please accept these preliminary comments from Bi-State Primary Care Association, the Vermont Medical Society, the American Academy of Pediatrics-Vermont Chapter and the Vermont Academy of Family Practice regarding S. 285. Our organizations support the finding by Health System Transformation, LLC that "The Blueprint is a trusted existing community-based program that is currently supported by all payers making it an ideal vehicle for expanding efforts that support improved clinical outcomes." The model of care and infrastructure developed through the Blueprint for Health program has meaningfully advanced primary care in Vermont. Further, the all-payer aspect of the program allows providers to manage their whole patient population according to clinical needs rather than dividing up their patient population by payer-specific programs.

Our organizations believe that continuing the investment in this model and infrastructure is an important part of increasing access to care and supporting the sustainability of primary care. Further, we believe that this investment could be an approach to achieving the goal of S. 244, Section 4, which calls on payers to increase the percentage of total health care spending that they allocate to primary care to 12 percent of the plan's or payer's overall annual spending. This section also calls for these increases to not occur through fee-for-service increases.

We regularly hear from our practices how critical this program and funding is to supporting patient needs. Based on feedback from our practices, we suggest the following ways to leverage the Blueprint and expand access to care:

## **Increase Investment in Community Health Teams**

Blueprint primary care practices in Vermont are supported by Community Health Teams (CHTs), which are multidisciplinary teams of dedicated health professionals in each of the state's health service areas. The CHTs support primary care providers in identifying root causes of health problems, including screening for mental health needs, substance use disorders, and social determinants of health, and include staff such as social workers and mental health counselors. Our primary care practices continually report to us that patient need far exceeds the CHT team availability and more funding could support CHT staff to serve additional patients.

Funded by Medicaid, Medicare, and major commercial insurers, access to local CHTs is offered to patients with no co-payments, prior authorizations, or billing. Further, these services are available regardless of whether the individual is attributed to the ACO or even a non-participating payer such as a self-insured plan. Funding for core CHT staff has been relatively flat since 2011 with minor adjustments in 2015. We recommend that each payer increase its commitment to CHT staffing.

## Support Community-Based Facilitation of Health Reform

Quality Improvement Facilitators have also had an important role in assisting primary care practices in meeting new health care reform initiatives and challenges. Originally, titled Practice Facilitators, these

individuals supported practices in meeting National Committee of Quality Assurance (NCQA) standards to achieve patient-centered medical home recognition. They continued to work with practices to maintain this recognition, part of which included continuous quality improvement efforts based on actionable data. As the health care system, including primary care, considers shifting to value-based care, practices will need support in adapting how care is best delivered and managed under an alternative payment method. The Quality Improvement Facilitators can play this role for practices with their whole patient population in mind. We recommend that Vermont invest in this resource established through the Blueprint to further primary care's ability to meet patients' needs and succeed under a value-based care model.

Thank you for the opportunity to comment. We are happy to answer any questions or clarification either verbally or in writing.