

**Blueprint Executive Committee**  
**Meeting Minutes of**  
**October 20, 2010**

**Attendees:** C. Jones, G. Bjornson, H. Blair, D. Cochran, D. Curry, W. Davis, B. Grause, P. Harrington, M. Hartman, J. Hester, C. Hindes, J. Leddy, W. Little, C. Jones, C. MacLean, C. Oliver, L. Watkins, S. Williams, Nicole Wilson

1. Expansion:
  - Pilots are currently operating in 3 communities. (Burlington, Central Vermont Medical Center and St. Johnsbury)
  - We are required to have two practices in each Hospital Service Area by July 2011 per Act 128. The expansion process is aggressively moving forward.
  - There will be one lead administrative entity in each hospital service area. Two working planning groups (one clinical and one IT group) are being set up or are already established in each hospital service area.
  - Bennington and Mt. Ascutney are both close to starting as formal advanced medical homes. Bennington has 7 practices that have already been scored by VCHIP. Both sites are well into their development work and staffing process. We are hoping to have NCAQ scoring for Mt. Ascutney between now and the end of the year. Bennington is slated to come onboard in November and Mt. Ascutney's tentative start date is January.
  - In response to Act 128 of 2010 we are working on the Blueprint Rules to codify the Blueprint for Health. The rules provide guidance for the structure and sequence of the Blueprint expansion process, and they also detail the process for modification of the payment reforms and participation of hospitals in the statewide Health Information Exchange network to support the Blueprint's IT infrastructure. The ICAR rules will be less spelled out, instead referring to the new Blueprint Manual or "guidebook" currently being written. The Blueprint manual will help with the planning and tracking steps in each hospital service area.
  - NCQA scoring and IT work are both rate limiting steps of our expansion process. Work being done to modify EMRs has proven to be very complex (time- and resource-consuming) work.
  - DocSite has been sold to Covisint. DocSite is a strong player in today's environment and we look forward to our continuing work together.
  
2. EQUIP Coaching and Facilitation:

- EQUIP (Expansion and Quality Improvement Program)
  - The Blueprint is in the process of contract negotiations with 7 practice facilitators.
  - The purpose is to provide a stable team of coaches throughout Vermont. We are moving toward a “learning health system” as defined by the Institutes of Medicine, which will be embedded in every day work. To date we have not had a sustained team of people, coaching and facilitation, dedicated to continuously support the teams.
  - The facilitators will be hired contractors and our goal is to have 7 fully executed contracts by November 1<sup>st</sup>.
  - We are looking for highly skilled people with nursing/clinical backgrounds who possess exquisite social skills, and can think on their feet. We will be conducting a boot camp for the group and will make sure that each facilitator has a list of project managers in their hospital service area.
  - We have been working with various teams around the country with many years of experience. Training will be an ongoing process. All training events will be open to VITL’s coaches as well as the community health teams. Our current curriculum does not specifically address pediatrics or geriatrics.
3. Blueprint Messaging Outreach
- Bea Grause agreed to lead an Executive Committee workgroup on messaging and communication education for the Blueprint.
  - The workgroup is charged with bringing back recommendations around content and funding. We look forward to reviewing a product that encompasses strong, concrete thinking. The challenge will be to bring back some real content ideas as well as funding strategies.
  - Wendy Davis, David Cochran, Nicole Wilson and Hunt Blair volunteered to work with Bea.
  - Church Hinds asked if we had any sense of scale regarding funding. He has been exploring some possible external funding sources.
4. National Reform:
- As you all know, we have submitted an application to participate in the CMS Multi-payer Advanced Primary Care Practice Demonstration. (MAPCP) We hope to receive word in November regarding the status of our application. Our commercial insurers and Medicaid are currently participating in payment reform. We look forward to having Medicare participate as well. We understand that there is some internal debate regarding the number of states to be included in the demonstration. This is a once in a life time opportunity to make a substantial shift and transform how we do things.

With no further business, the meeting adjourned at 10:00 a.m.

Next Meeting: *November 17<sup>th</sup>, 2010*  
*8:30 – 10:00 a.m.*  
*Large Conference Room*  
*DVHA, 312 Hurricane Lane, Williston, VT*