

GREEN MOUNTAIN CARE BOARD (GMCB)
GMCB Board Meeting Minutes
Wednesday, May 15, 2019
1:00 pm

Attendance

Kevin J. Mullin, Chair
Susan J. Barrett, JD, Executive Director
Michael Barber, General Counsel
Robin Lunge, JD, MHCDS
Maureen Usifer – *not present*
Jessica Holmes, PhD
Tom Pelham

Executive Director's Report

Kevin Mullin called the meeting to order at approximately 1:00 pm. Susan Barrett announced there will be no Board Meeting on Wednesday, May 22, 2019, and on Wednesday, May 29, 2019 there will be a Traveling Board Meeting at Gifford Medical Center. She announced the Cigna Rate Decision and the Vermont Health Connect 2020 Proposed Filing Rates. On Feb. 7, 2019, Cigna Health and Life Insurance Company proposed an average annual rate decrease of -3.6% for its large employer groups, affecting 534 Vermont members. On Feb. 22nd, Cigna corrected an error in its filing, which changed the proposed average annual rate from a decrease of -3.6% to an increase of 0.2%. On May 9th, the Green Mountain Care Board ordered Cigna to reduce its profit margin from 3.5% to 1.0% and approved the modified rate, resulting in an overall average annual rate **decrease** of approximately -2.4%. On May 10, 2019 BCBSVT and MVP filed proposed rates for plans that will be offered on Vermont Health Connect for 2020. BCBSVT proposes an average annual increase of 15.6% over 2019 premiums, with proposed increases per plan ranging from 9.1% to 18.5%. MVP proposes an average annual increase of 9.4% over 2019 premiums, with proposed increases per plan ranging from 5.0% to 23.7%. The hearing dates are July 22nd for MVP and July 23rd for BCBS. The Board will also hold a Public Comment Forum on the afternoon of July 23 beginning at 4:30 p.m. The anticipated decision date for the filings is Aug. 8th.

Minutes

The Board voted (4-0) to approve the minutes from April 24, 2019.

Vermont Information Technology Leaders (VITL) FY2020 Budget Presentation and Quarterly Update

Mike Smith, President and CEO, VITL
Robert Turnau, CFO, VITL
Andrea De La Bruere, Client Services Director, VITL
Frank Harris, Strategic Technology Advisor, VITL

Mike Smith gave an introduction and reviewed VITL's progress in FY 2019. The three major objectives as they look forward to 2021 are: stabilize operations, reestablish credibility, and put in tools that allow value added products. Last year VITL created a three-year budget plan, and Mike Smith reviewed the updates of that plan.

Robert Turnau presented a recap of the FY 2019 budget. Revenue is expected to be on budget, and expenses will be 10% under budget, which is driven by lower personnel costs due to vacancies in the administration and technology teams. Robert Turnau then reviewed the most significant FY20 Budget Assumptions: the need to complete current contract requirements, the award of follow-on contracts, maintaining critical talent, and identifying cost reductions and opportunities. He reviewed the revenue of FY 2017 through FY 2021 and the decline in State Funding, a \$1.3 Million reduction. Mike Smith commented on the ability of VITL staff to lower their cost while enhancing operations even with this large reduction in revenue.

Robert Turnau presented the FY 2020 revenue, and over half of the revenue is based on firm awarded contracts. Mike Smith spoke about the collaborative services to only buy software once and share between different organizations, with VITL taking the lead in three out of the four software services. Four essential items are having a common master patient index, common terminology services, a hub that allows for bringing in more information to the Vermont Health Information Exchange (VHIE), and an interface hub with utilities that are used by most major health care operations.

Robert Turnau presented the FY 2020 expenses, in which labor costs are the most expensive item. The increase in materials/services cost is driven by the collaborative services projects. Robert Turnau and Mike Smith reviewed the VITL organizational chart and the removal of a level of management that was not needed. Robert Turnau presented the headcount of positions, personnel costs, VHIE hosting, and the balance sheet by year.

Frank Harris presented VITL's focus areas in technology objectives. He reviewed the new collaborative services initiative and how it supports the priorities they envisioned last year: improved patient matching, terminology services, and interfacing capabilities. VITL expanded their approach to provide analysis data by conducting an RFI to look at a "Future Platform," and they are now looking at the feasibility of changing platforms. VITL is continuing to advance their infrastructure approach by minimizing overhead costs. This includes creating a project plan to establish HDM DR and streamlining. Frank Harris reviewed the achievements and plans with data quality, patient matching, data availability/ease of use, patient consent, and security.

Andrea De La Bruere presented the Quarterly Report. She reviewed the meaningful use and security risk assessment consultations. The intent is to improve data quality and help health insurance providers meet measures set by the government and have effective use of their electronic health records. The focus on data quality requires a high number of hours. In March, the number of hours was 103.5 and the goal is 80 hours per month. Andrea De La Bruere reviewed the percent of Vermont patients providing consent. The target is 42% and they are on track to hit that target by the end of June. She presented the work plans, that are a part of the connectivity criteria, as well as the point of care utilization.

The Board asked questions and had discussions with the VITL presenters. The presentation can be found [here](#) on the GMCB website.

Public Comment

Ken Libertoff
Dale Hackett

Department of Vermont Health Access (DVHA) Health Information Exchange (HIE) Program Quarterly Update

Emily Richards, Health Information Exchange Program Director, DVHA
Jenney Samuelson, Deputy Commissioner, DVHA

Emily Richards gave an overview of the presentation and Jenny Samuelson introduced herself as a new staff member at DVHA. Emily Richards reviewed the HIE Consent Policy that is currently in the Legislature for discussion. The three goals of the implementation process are informed consent, a robust and transparent process, and a real stakeholder engagement process. She presented the proposed consent implementation process created by the HIE Steering Committee, the guiding principles for implementation, and the 2019 HIE Steering Committee membership and goals. One of the goals of the HIE Steering Committee is to create a *Technical Roadmap* that reflects a 3-5 year investment and growth strategy related to key HIE strategic objectives, and DVHA hired national experts to support the development of this roadmap. Emily Richards gave an update on the VITL and DVHA contract, and VITL is currently meeting all their goals in the contract. Emily Richards gave an HIE program update and Jenney Samuelson spoke about the expansion of partnerships. There is an opportunity to have a shared services model with Maine and New England states are exploring strategies for maximizing data collection. The presentation can be found [here](#) on the GMCB website.

Susan Barrett announced that there is a special comment period for the proposed FY 2020 VITL Budget beginning May 15, 2019 and ending June 3, 2019. The special comment period and the budget proposal can be found [here](#) on the GMCB website. The Board is always accepting public comment.

Public Comment

Dale Hackett
Eric Schultheis
Susan Aranoff

Old Business

None

New Business

None

Adjourn

The Board voted (4-0) to adjourn at approximately 2:40 pm.