

To: Kevin Mullin, Chair, Green Mountain Care Board
CC: Susan Barrett, Green Mountain Care Board; Melissa Miles Green Mountain Care Board; Kevin Stone, Interim CEO OneCare Vermont, Karen Lee, VP of Strategy and Finance, OneCare Vermont, Vicki Loner, COO OneCare Vermont
From: Tom Borys, Director of Finance, OneCare Vermont
Date: March 11, 2019
Subject: OneCare Vermont ACO 2018 Budget Order Amendment Request Follow-Up

Dear Chairman Mullin,

A review of public comments indicates a misunderstanding of our request to modify the ratio for population health management (PHM) spending included in the 2018 budget orders. This letter aims to clarify the misunderstanding.

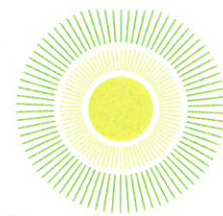
OneCare agrees in the importance of investing in key population health and prevention initiatives. As evidence of our commitment, 2018 operations resulted actual PHM payments to participating providers as follows:

Investments	Amount
Primary Care	\$ 12,396,119
Area Agency on Aging	\$ 577,370
DA	\$ 1,445,744
Home Health	\$ 1,041,791
Community Health Teams	\$ 2,245,853
Supports and Services at Home (SASH)	\$ 3,704,400
Total	\$ 21,411,277

Not included in this accounting are the dollars that will be paid from the Value Based Incentive Fund after receiving the final year quality scores. The magnitude of these investments is strong evidence of the continued commitment to our providers and the importance placed on PHM and prevention initiatives.

The public comment submissions seemed to suggest that there are dollars held by OneCare that are “unspent” or being “set aside.” This is not the case. OneCare collects revenues from payers, and the hospitals fund the balance through participation fees. This means that funding PHM investments above and beyond the program designs would require additional revenue from the hospitals. In the current landscape, this is not a favored approach.

It is important to note that OneCare has fully implemented the PHM programs as approved by the GMCB and in accordance with our contractual requirements with the payers and the providers. In order to fund



the PHM programs at an increased level, it would require modification to payer contracts, provider contracts, and likely result in changes to the budget model that would necessitate GMCB approval. Ultimately, the programs have been operationalized in their intended design and in no way are funds earmarked for PHM investments being withheld, deferred, or retained by OneCare.

Thank you, and please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tom Borys'. The signature is fluid and cursive, with a long horizontal line at the top and a large loop at the bottom.

Tom Borys
Director of Finance
OneCare Vermont