

GREEN MOUNTAIN CARE BOARD (GMCB)
GMCB Board Meeting Minutes
Wednesday, July 29, 2020
1:00 pm

Attendance

Kevin J. Mullin, Chair (*via phone*)
Susan J. Barrett, JD, Executive Director (*via phone*)
Michael Barber, General Counsel (*via phone*)
Robin Lunge, JD, MHCDS (*via phone*)
Maureen Usifer (*via phone*)
Jessica Holmes, PhD (*via phone*)
Tom Pelham (*via phone*)

Executive Director's Report

Chair Kevin Mullin called the meeting to order at approximately 1:00 pm. Susan Barrett announced that the special public comment period on hospital sustainability planning was extended until Friday, July 31, 2020. FY21 Hospital Budget submissions are due on July 31, 2020. The decisions for the Qualified Health Plan rate filings will be issued on August 14, 2020. Michael Barber announced on July 17, 2020 the Board issued a decision and order with respect to the third quarter 2020 large group rate filings of BCBSVT and the Vermont Health Plan. The Board ordered the carriers to reduce the proposed manual rate increase from 1.9% to approximately 0.7%. Large groups will experience premium changes that vary from this approved manual rate because each group's premium change will account for its recent claims experience and other factors. The Board estimated that the average group may experience a premium increase of approximately 4.7%.

Minutes

The Board voted (5-0) to approve the minutes from July 15, 2020.

Staff Analysis on FY20 Accountable Care Organization (ACO) Revised Budget

Alena Berube, Director of Value Based Programs & ACO Regulation, GMCB
Marisa Melamed, MPH, Associate Director of Health Care Policy, GMCB
Michele Degree, Health Policy Advisor, GMCB
Sarah Tewksbury, Health Policy Analyst, GMCB

Alena Berube reviewed the background of the ACO oversight statute, process, and timeline. Sarah Tewksbury presented an overview of the payer programs and reviewed the relevant budget order conditions numbers 2-5. The staff analysis was that there were no changes needed for conditions 2-4 and recommended an update in the FY21 process for condition number 4. Commercial contracts required by condition number 5 are currently under GMCB staff review and actuarial certification has not been provided. Sarah Tewksbury reviewed OneCare

Vermont's 2020 provider network; this information has not changed since it was presented in December 2019. Budget order number 1 relates to the 2021 network development strategy, which was submitted on April 15, 2020. The staff analysis was that no changes were needed for condition 1.

Michele Degree reviewed the scale target ACO initiative [ACO payer programs that meet certain requirements set forth in the All-Payer Model (APM) agreement], the 2020 revised attribution, preliminary scale estimates, and the scale target survey. Budget order number 7 includes written follow-up to each item from the August 16, 2019 scale survey. The staff analysis was that no changes were needed for condition 7 and staff suggests asking for more information about the timeline and next steps for scale strategies identified in the scale target survey as part of the FY21 process.

The ACO holds participating providers accountable to quality standards through its payer contracts. This aligns with the APM quality framework that requires the state to maintain, if not improve, its performance across a variety of care and population health measures, but they are not the same frameworks. Michele Degree reviewed the quality measurements of the State and the APM 2018 results and updates. Budget order number 16 relates to the community specific quality health investments by the ACO. The staff analysis was that no changes were needed for condition number 16 and offered additional items to consider.

Alena Berube presented the ACO financials including the budget components, provider payments, provider dues, hospital-ACO participations Fixed Prospective Payment (FPP)%, and the administrative expense ratio. Staff determined that condition number 10 was met, and no changes were needed. Detailed financial statements were submitted to the Board on July 27, 2020 and are under staff review. The staff analysis was that no changes were needed to condition number 12 and suggested that "sustainability planning" language could be removed from item "b" to broaden the pool of applicable risk bearing entities. Alena Berube reviewed the ACO risk model. The staff analysis was that no changes were need for conditions 6 and 11 and offered additional items to consider.

Marisa Melamed reviewed the model of care and population health investments, including the population health ratio (PHM ratio). Budget order conditions number 13 and 18 are under staff review. The staff analysis was that no changes were needed for conditions 14 and 17 and offered additional items to consider. Marisa Melamed reviewed the evaluation of the APM and the ACO and budget order condition number 20.

Alena Berube reviewed the remaining budget order conditions numbers 8, 9, 15, 19, 21, and 22, and the next steps. The presentation can be seen [here](#) on the GMCB website. The Board Members asked questions and had a discussion with the staff about streamlining the FY21 budget process, the risk for hospitals, the CRF funding application and stipulation, attribution, and the scale survey.

Public Comment

Hamilton Davis, Journalist and Policy Analyst

Dale Hackett, Health Care and Disability Rights Advocate
Susan Aranoff, Senior Planner and Policy Analyst, Vermont Developmental Disabilities Council

Old Business

None

New Business

None

Adjourn

The Board voted (5-0) to adjourn at approximately 2:20 pm.