



OneCare Vermont

March 26, 2020

Kevin Mullin
Chair
Green Mountain Care Board
144 State Street
Montpelier, Vermont 05602

Dear Chair Mullin,

These are unprecedented times for Vermonters and for the healthcare providers and organizations that are working tirelessly during this pandemic and plan to be there after this is behind us. OneCare Vermont (OneCare), as a voluntary network of thousands of hardworking providers, has been a force for good in advancing the state's healthcare reform efforts and serves as a primary vehicle for payment reform and care delivery transformation under Vermont's All Payer ACO Model. During this time of crisis, OneCare, on behalf of its providers, is requesting operational relief from the Green Mountain Care Board so that every effort can be dedicated to the task at hand – caring for Vermonters in this time of need. To that end, we have identified the following adjustments that could aid in these efforts:

- Provide immediate financial relief to hospitals currently contributing 0.5% of their All Inclusive Population Based Payment (AIPBP) to the Value Based Incentive Fund (VBIF) by waiving this GMCB budget requirement for the 2020 performance year. This VBIF withhold is separate from, and in addition to, the quality performance provisions between Centers for Medicare & Medicaid Services (CMS) and OneCare. A waiver would allow OneCare to return collected funds to hospitals through dues adjustments, retroactive to January 1, 2020, and will reduce future hospital dues to OneCare through the remainder of the calendar year. OneCare anticipates it could operationalize this change and return funds within 21 days of written approval from the GMCB.
- Request weekly claims files from CMMI/Lewin to OneCare to support more proactive monitoring and adjustments to Medicare fixed payments (currently they flow about six weeks in arrears).
- Adjust OneCare's budget orders as follows:

- Extend the due dates for budget orders #8, 9, and 13 to May 30, 2020. This will allow OneCare sufficient time to make the contractual and budget adjustments needed to be responsive to the pandemic and to provide the Board with detailed information that is accurate and up-to-date.
- Extend the due dates for budget orders #17 and 19 to September 30, 2020. This provides OneCare with time to respond to changing budgets and contractual obligations and to allocate staff to meet the immediate needs of our provider network. Further, for budget order #19, OneCare is awaiting guidance documents from GMCB staff and will need sufficient time thereafter to design the prototype performance dashboard.
- Amend budget order #18. OneCare proposes to refocus this effort around its core programs that are included in our program of payments annually. Specifically, OneCare suggests the language read:
 - No later than June 30, 2020, or a date agreed to by OneCare and GMCB staff, OneCare must develop a workplan to evaluate the effectiveness of its core population health investments that are included in their annual program of payments (i.e. PHM payments to primary care, value based incentive fund, complex care coordination program) with a focus on defining the criteria by which each program's impact will be evaluated. The focus of these efforts will be to align with the evolution of these programs for the 2021 performance year in time for distribution in network contracting in summer 2020. This workplan may exclude Blueprint for Health investments.

Thank you for your consideration of these changes which will allow OneCare to focus its efforts on supporting providers through this pandemic and their recovery process thereafter. We look forward to discussing these and any further opportunities for provider relief with you.

Respectfully,



Vicki Loner, RN.C, MCHDS
Chief Executive Officer

cc: Susan Barrett, Executive Director
Alena Berube, Director of Value Based Programs & ACO Regulation