

GREEN MOUNTAIN CARE BOARD (GMCB)
GMCB Board Meeting Minutes
Wednesday, June 12, 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
Jessica Holmes, PhD
Tom Pelham

Executive Director's Report

Kevin Mullin called the meeting to order at approximately 1:00 pm. Susan Barrett announced the two public comment periods that are currently open, which can be seen [here](#) on the GMCB website. May 13, 2019 through July 24, 2019 the Board is accepting public comment regarding the 2020 Proposed Vermont Health Connect Filing Rates, and June 5, 2019 through COB June 17, 2019 the Board is accepting public comment regarding the FY 2020 ACO Budget Guidance.

Minutes

The Board voted (5-0) to approve the minutes from June 3, 2019 and June 5, 2019.

Q4 Update for the University of Vermont (UVM) Milestone Report and Investments towards Increasing Mental Health Capacity

Dr. John Brumsted, Present and CEO, The University of Vermont Health Network, CEO, the University of Vermont Medical Center
Anna Noonan, RN, BSN, MS, President and COO, Central Vermont Medical Center

Anna Noonan reviewed the UVM Health Network's Psychiatric Inpatient Capacity (PIC) Aim Statement, and the goals of the Psychiatric Inpatient Facility Planning. To design and create this facility they will use data driven/evidence-based process, provide a forum for interested stakeholders, and share information publicly. The next forum meeting will be July 9, 2019. Anna Noonan explained the supporting structure, which includes a steering committee. Currently the planning process is in Phase II: Design and Operational Requirements, which includes facility programming, PIC facility location, schematic design, financial and operational impact, and Certificate of Need (CON) outreach planning. The facility programming is complete as of May 2019 and they hope to identify a PIC facility location by the end of July 2019. Anna Noonan explained the process of facility programming, which consisted of work groups that focused on Tier 1, Tier 2, Tier 3, and Intake area. There were two site visits to psychiatric facilities recently constructed/renovated. The programming outcomes were an operational plan, staffing plan, and a space table. The next steps are to identify a facility location, begin a schematic design, conduct a

financial and operational impact analysis, and continue outreach and engagement. The presentation can be seen [here](#) on the GMCB website. The Board asked questions and had a discussion with Dr. John Brumsted and Anna Noonan.

Public Comment

Ken Libertoff

FY 2020 Non-Financial Reporting Update

Agatha Kessler, Health Policy Director, GMCB

Michele Degree, Health Policy Advisor, GMCB

Agatha Kessler presented the FY 2020 Budget Guidance. The hospitals submitted information on quality improvement initiatives, access to care, and community health needs by April 30, 2010, before the annual budget submission. Agatha Kessler reviewed the considerations that should be remembered when interpreting the data in the analysis. Michele Degree presented the quality improvement initiatives, a comparison to All Payer Model (APM) targets, and a comparison to the FY 2019 budget guidance document. The systemwide staff analysis found utilization of existing state programs for community benefit, designated staff to connect ED patients with primary care, Medication Assisted Treatment (MAT) initiation in the ED, specialized ED staffing, and transitioning existing ED space. The staff recommended considering trending when considered appropriate, considering a deeper dive into certain measures for FY 2021 guidance, and continued consistency within the regulatory process. Board Member Robin Lunge thanked the staff and commented on the reduction of deaths related to drug overdose.

Agatha Kessler presented the Community Health Needs Assessment (CHNA). A CHNA is conducted by non-profit hospitals at least once every three years, as required by the Affordable Care Act. The purpose is to identify the health needs of the community, prioritize the needs, and describe the resources to address the needs. Agatha Kessler reviewed the common methodology, which includes an advisory committee, quantitative research, and qualitative research. She presented the GMCB methodology and considerations for the CHNAs and the results. Michele Degree spoke about the results and how they relate to the APM measures. Agatha Kessler presented the underlying needs, the community needs identified as a top priority, the financial support for community needs, and the systemwide staff analysis. The staff recommended for the FY 2020 Budget submission potential questions for the hospitals and to monitor risks/opportunities, provider transfers/acquisitions, and CONs, related to community needs. Board Member Maureen Usifer commented on the potential questions for the hospitals.

Agatha Kessler presented patient access/wait times, the methodology, and considerations. She then reviewed the tables of the compiled data on wait times and the systemwide staff analysis. Workforce issues contributed substantially to higher wait times and specialty care experiences higher wait times. The staff recommended potential questions for hospitals and to monitor risk/opportunities, provider transfers/acquisitions, and CONs, related to access/wait times. The Board asked questions and had a discussion with Agatha Kessler and Michele Degree. The presentation can be seen [here](#) on the GMCB website.

Public Comment

Susan Aranoff

Rate Review 101 Presentation

Amerin Aborjaily, Staff Attorney, GMCB
Tom Crompton, Assoc. Dir. Health System Finances, GMCB
Michael Fisher, Chief Health Care Advocate, Office of the Health Care Advocate
Addie Strumolo, Health Care Director, Agency of Human Services
Dana Houlihan, Director, Plan Management & Enrollment Policy, VT Health Connect
Emily Brown, Director of Rates and Forms, VT Dep. Of Financial Regulation

Amerin Aborjaily presented the Vermont insurance market. The GMCB's rate review is in the insured market which covers 92,000 Vermonters in 2017 (out of 623,000). Michael Fisher spoke about the Office of the Health Care Advocates roll in advocating for consumers in the rate review process. Amerin Aborjaily explained the differences between large and small group rates, the basics of premium components, the timeline and regulatory roles with small group and individual rates, and a summary of the large group rate review process. Dana Houlihan and Addie Strumolo presented the Annual Qualified Health Plan Design for small group rates done by the Department of Vermont Health Access (DVHA) and the annual federal guidance. Emily Brown presented the Qualified Health Plan (QHP) form review and the solvency analysis done by the Department of Financial Regulation (DFR). Amerin Aborjaily and Tom Crompton discussed the GMCB's small group and individual rate review. Addie Strumolo and Dana Houlihan spoke about the annual QHP certification and implementation done by DVHA. Amerin Aborjaily reviewed the regulatory integration and the effect on premiums, the state individual mandate, and the loss of Cost-Sharing Reduction (CSR) funding. Emily Brown discussed the timeline of Association Health Plans and pending federal litigation cases. The Board asked questions and had a discussion with the presenters. The presentation can be seen [here](#) on the GMCB website.

Public Comment

Sara Teachout

Old Business

None

New Business

None

Adjourn

The Board voted (5-0) to adjourn at approximately 3:50 pm.

Unapproved