

GREEN MOUNTAIN CARE BOARD (GMCB)  
GMCB Board Meeting Minutes  
Wednesday, November 4, 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 Mullin called the meeting to order at approximately 1:00 pm. Susan Barrett announced there is an ongoing special comment period on the FY 2021 OneCare Vermont budget submission which ends on December 21, 2020. For public comment to be considered by GMCB staff in the December 9, 2020 presentation, public comments must be submitted by December 2, 2020. There is a special comment period on the 2020 update to the 2018-2022 Health Information Exchange (HIE) plan until EOB November 30, 2020. [Public comment information can be found here on the GMCB website.](#) Susan Barrett reviewed [the November 2020 Board Meeting schedule.](#)

**Minutes**

The Board voted (5-0) to approve the minutes from October 28, 2020.

**FY 2021 Hospital Budget Debrief**

Patrick Rooney, Director of Health Systems Finances, GMCB  
Michael Fisher, Chief Health Care Advocate, Vermont Legal Aid  
Jeffrey Tieman, President and CEO, VAHHS

Patrick Rooney reviewed the notes from the GMCB staff to be considered by the Board in order to continually improve the hospital budget review process. The list included: leaving follow up questions to those of a technical question or clarifying nature, the collaboration with legal on motion language, the budget preview process as a part of deliberations prior to decisions, breaking down the components of a requested increase of change in charge request, noting the impact of public payers to the change in charge request, the disclosure of materially supported entities not within the hospital, guidance on change in charge, the disclosure of fixed versus variable costs, a better understanding of some of the hidden costs being incurred, the Board's expectations of budget impacting rate releases after hospital budgets submissions, strengthening guidance around NPR growth and application of the guidance, potentially shifting the focus from

NPR growth to expense growth with inflation factors, consider starting deliberations with UVMHN, consider “pooling” hospitals into different hospital types, understanding the impact of FPP on the payer mix and reimbursement ratios, knowing how much of the rate request passes to bad debt and free care, the relative pricing to other hospitals, and the hearings being held virtually.

Michael Fisher thanked the GMCB staff and the Board for their work in the hospital budget process and discussed the challenges of the process, if it is having an impact on the cost to Vermonters, salaries in healthcare, continued focus on solving racial disparities in healthcare, commercial rates, and Vermonters not being able to afford healthcare. Chair Mullin asked a follow up question about the compensation in health care as it relates to line items in the budgets and Michael Fisher answered.

Jeffrey Tieman discussed the cyber systems attack on UVMHN and the work they are doing to put patients first. Jeffrey Tieman thanked the Board Members, the GMCB staff, and Michael Fisher for their work in the hospital budget process and discussed his concern about the vulnerability with the Affordable Care Act, the hospitals managing old and new challenges, the strengths of the hospital budget process (robust regulatory system for Vermonters, sharing goals, and transparency), the weaknesses of the process (deliberations and hearings can be hard to follow, decisions hard to understand, and administrative burden), the opportunity to better understand expense structures, and the threats (the pandemic, dramatic or unplanned health care reform, Medicare and Medicaid payment policies, growing numbers of uninsured, the need to make infrastructure improvements, the cost of pharmaceutical drugs, and over-regulation).

Board Member Maureen Usifer discussed revenue and operating margins, commercial rate increases, that part of the rate approvals should be revisited next year, the need for efficiencies, looking at PMPM, looking at less information during the budget process, connecting utilization and rate information to the insurance assumptions, price transparency, and contribution to the margin by payer type. Board Member Tom Pelham discussed the All-Payer Model, the NPR growth rate, the insurance review process, the Accountable Care Organization, the Medicaid cost shift, payer mix, imbalances among hospitals with NPR and commercial rate increases, and affordability. Board Member Robin Lunge discussed the need for a clearer sense of information inputs, potential guidance in change in charge and commercial rate increases, concern about affordability in the commercial sector, clearer communication and process, maintaining streamlined information, transparency of information, community health needs assessments, pooling hospitals into categories, price transparency, the challenges of state wide metrics and looking at individual hospitals, and sustainability planning. Jeffrey Tieman responded to some of the points made by Board Members before needing to leave the meeting. Board Member Jessica Holmes discussed the hospital budget process with streamlined information, different approaches to the commercial rate, too much emphasis on NPR, possibly breaking down the commercial rate into component parts, public payers and cost shift, patient migration, sustainability planning, quality work, delivery of care, reconciliation of approved commercial rates, and the impact of the budget process. Chair Mullin discussed the need for specificity in the guidance, lack of transparency, looking at the bigger picture of high quality care at the most affordable rate possible, value based care, workforce issues, and possible use of subpoena powers of the Board.

**Public Comment**

None

**Old Business**

None

**New Business**

None

**Adjourn**

The Board voted (5-0) to adjourn at approximately 2:50 pm.