

GREEN MOUNTAIN CARE BOARD (GMCB)
GMCB Board Meeting Minutes
Wednesday, December 23, 2020
1:00 pm

Attendance

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

Executive Director's Report

Chair Mullin called the meeting to order at approximately 1:00 pm. Susan Barrett announced the agenda for the Board Meeting on December 30, 2020 is not decided yet. The January 2021 Board Meeting schedule will be released next week.

Minutes

The Board voted (4-0) to approve the minutes from December 16, 2020 and December 18, 2020.

2021 Medicare Benchmark Proposal – Potential Vote

Sarah Lindberg, Director of Health Systems Data Analytics, GMCB

Sarah Lindberg explained that there was no public comment received and the PY 2021 Medicare Benchmark proposal is to use a retrospective trend factor for the Benchmark for the ACO and that it will include advanced savings in the amount that is advised in the ACO budget process. Board Member Robin Lunge moved to propose to the Center on Medicare and Medicaid Innovation that, for the 2021 performance year, the Vermont Next Generation ACO program use retrospective trend factors reflecting the observed changes in actual per beneficiary expenditures between 2021 and 2020 for the ESRD and non-ESRD Vermont Medicare beneficiaries eligible for attribution to the ACO and an advanced shared savings component in the amount determined by the ACO budget process. Board Member Tom Pelham seconded the motion. The Board voted (4-0) to approve the motion.

Public Comment

None

Accountable Care Organization Oversight: FY 2021 ACO Budget – Potential Vote

Alena Berube, Director of Health Systems Policy, GMCB
Marisa Melamed, Associate Director of Health Care Policy, GMCB
Victoria Loner, MHCDS, RN, CCM, CPUR, PAHM, CEO, OneCare Vermont

Alena Berube reviewed the process of approving the ACO budget, the letter from OneCare Vermont (OCV) received on December 21, 2020, the letter received from the Agency of Human Services (AHS) regarding Blueprint for Health, and the other public comment received since December 9, 2020. Alena Berube presented the FY21 ACO budget order conditions numbered one through eight. Marisa Melamed presented the FY21 ACO budget order conditions numbered nine through seventeen and the next steps in the process. [The presentation can be seen here on the GMCB website.](#)

Victoria Loner provided background and information on the administrative budget, the inflationary factor for the Blueprint for Health funding, and the Fixed Prospective Payments (FPP). The Board Members had a discussion and asked Victoria Loner questions about possible markers for FPP, the benchmark plan, hospital feedback on the new risk model, incentivizing participation in the ACO, fixed payments for Medicare and commercial insurers, the administrative costs, potentially tying executive compensation to ACO performance through the rule making process, the issues with level funding the Blueprint for Health and SASH programs, the proposed 4.35% inflationary rate for communities participating in Medicare, and occupancy costs.

Board Member Tom Pelham moved to revise condition fifteen with language that the ACO shall advise the GMCB as to the preferred level in critical mass of FPP systemwide across hospitals that will achieve significant and meaningful cost reductions and improvements in population health and that may help guide the GMCB regarding its responsibilities to review and approve hospital budgets and commercial rate increases. Board Member Robin Lunge seconded the motion with an amendment to the motion that instead of “shall advise” the ACO is required to work with all payers to propose the plan that could be reported to the GMCB along with the Agency of Human Services. The Board discussed that this new motion would replace the language in condition fifteen presented by GMCB staff. Board Member Tom Pelham revised the previous motion to replace condition fifteen with language requiring OCV to work with payers to propose a target for FPP levels, a strategy for achieving those levels, and a related timeline, with clear goals, milestones, and targets. Board Member Robin Lunge seconded the motion. Victoria Loner spoke to the feasibility of the condition. The Board Members voted (4-0) to approve the motion.

The Board discussed condition eleven and had no changes to the staff recommendations.

Board Member Jessica Holmes moved to approve condition eight with option two that in 2021, OCV’s administrative expenses must not exceed \$15.9 million and to also direct the GMCB legal team to incorporate a new requirement in the ACO certification rule that ties executive compensation to ACO quality and financial performance and provide an update to the Board by

the end of January 2021. Board Member Robin Lunge seconded the motion. The Board voted (4-0) to approve the motion.

Board Member Robin Lunge moved to approve OCV's 2021 budget with the staff conditions as outlined in the presentation with an amended and replaced condition fifteen and an amended and replaced condition eight which is inclusive of the motions already voted on. Board Member Robin Lunge withdrew the motion.

Board Member Tom Pelham moved to add a condition that the ACO shall review Vermont's current benchmark plan on file at CMS relative to its clinical alignment with current ACO and APM population health objectives and advise the GMCB and the Department of Vermont Health Access as to realignments that will improve population health while being actuarially sound. The Board discussed the motion. Board Member Tom Pelham withdrew the motion. Board Member Tom Pelham moved to add a condition that the ACO shall, subject to available funding, review Vermont's current benchmark plan on file at CMS relative to clinical alignment with current ACO and APM population health objectives and advise the GMCB and the Department of Vermont Health Access as to realignments that will improve population health while being actuarially sound. There was no second made by a Board Member.

Board Member Robin Lunge moved to approve the ACO's FY 2021 budget with the staff conditions as outlined in the presentation with a revised and replaced condition fifteen and a revised and replaced condition eight as voted on earlier. Board Member Jessica Holmes seconded the motion. The Board voted (3-1) by roll call to approve the motion, with Board Member Tom Pelham voting no.

Public Comment

Michael Fisher, Chief Health Care Advocate, Vermont Legal Aid
Steve Gordon, President & CEO, Brattleboro Memorial Hospital
Susan Aranoff, Senior Planner and Policy Analyst, Vermont Developmental Disabilities Council

Old Business

None

New Business

None

Adjourn

The Board voted (4-0) to adjourn at approximately 2:50 pm.