

GREEN MOUNTAIN CARE BOARD (GMCB)
GMCB Board Meeting Minutes
Wednesday, May 12, 2021
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 *(via Microsoft Teams)*
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 that [the May 2021 Board Meeting schedule can be viewed on the GMCB website](#). The Board is continuing to accept [public comment to inform a potential new agreement with the State of Vermont and CMS](#), which will be shared with the other All-Payer Model signatories.

Michael Barber announced on February 10, 2021, Blue Cross Blue Shield of Vermont and The Vermont Health Plan submitted a consolidated rate filing for their large group plans. The filings are projected to affect approximately 5,800 members in 36 groups. After the carriers corrected an error relating to the development of the administrative charge, the Board approved the filing, which is now expected to result in an average premium change of -1.7%, effective in the third quarter of 2021. Due to the nature of the large group rating formula, the actual rate change for any particular group, or even averaged across groups, may differ from the expected -1.7% average premium change.

On February 12, 2021, MVP Health Plan, Inc. submitted a rate filing for its large group point of service riders. These riders are purchased in conjunction with MVP's base large group major medical coverage. There are currently six members with these riders. The filing requested an average proposed rate change of -3.4%. The Board approved the filing as submitted.

On May 7, 2021, Blue Cross and Blue Shield of Vermont and MVP Health Plan, Inc. submitted rate filings for their 2022 individual and small group plans. For 2022, the individual and small group markets are being unmerged to take advantage of significantly enhanced federal subsidies available under the American Rescue Plan Act to individuals who purchase their insurance through the Exchange. Because the markets are being unmerged, the proposed rate changes differ for individual and small group plans. For small group plans, BCBSVT has proposed an average 7.8% decrease and MVP has proposed an average 5.0% increase. For individual plans, BCBSVT has proposed an average 7.9% increase and MVP has proposed an average 17.0% increase. Again, because of the expanded subsidies available to individuals who purchase through Vermont Health Connect, these increases will be offset by increased federal subsidies.

Consumers should use Vermont Health Connect's plan comparison tool to understand what subsidies they may be eligible to receive for these plans. DVHA will be presenting to the Board on the ARPA subsidies on June 2.

The filings are currently open for public comment. A public hearing will be held on each filing. The hearing on MVP's filing will be held on July 19, 2021 starting at 8:00 a.m. The hearing on BCBSVT's filing will be held on July 21, 2021 starting at 8:00 a.m. On July 22, 2021, the Board will hold a public forum to hear from Vermonters on the filings. These hearings are expected to take place virtually again this year. More information on how the public may observe and participate will be available on the Board's website.

Minutes

The Board voted (5-0) to approve the minutes from April May 5, 2021.

Guidance Regarding Accountable Care Organization (ACO) Executive Compensation under GMCB Rule 5.000

Russ McCracken, Staff Attorney, GMCB

Russ McCracken explained that no public comment was received and no changes to the guidance were made since the interpretive guidance was presented to the Board on May 5, 2021. [The presentation can be seen here on the GMCB website.](#) Board Member Lunge moved to approve the interpretive guidance of GMCB Rule 5.000, § 5.203(a), regarding the requirements for the structure of executive compensation in the form presented to the Board on May 5, 2021. Board Member Pelham seconded the motion. The Board voted (5-0) to approve the motion.

Public Comment

None

Core Competencies of High Performing ACOs

Michael Bailit, President, Bailit Health Purchasing

Alena Berube introduced Michael Bailit and explained how GMCB staff would like to incorporate core competencies into future work with ACO guidance.

Michael Bailit presented an overview of the work of Bailit Health, a summary of the ACO market in Vermont, the distinguishing characteristics of OneCare Vermont, the facilitating factors of successful performance, the structural characteristics of high-performing ACOs, and operational characteristics and investments. At the GMCB staff's request, Bailit Health identified a set of ACO core competencies, representing structural and operational characteristics of high-performing provider organizations that are successfully managing population health. Michael Bailit reviewed the methodology for creating the core competencies and the details of the five primary areas: governance and management, provider engagement and network management,

engaging patients, population health management, and managing data. Michael Bailit reviewed the considerations and recommendations for Vermont. [The presentation can be seen here on the GMCB website.](#)

The Board Members had a discussion and asked Michael Bailit questions regarding care management, alignment of core competencies across organizations, how to operationalize the core competencies, management of referrals, fixed prospective payments, price transparency, having one ACO in Vermont, and physician led ACOs.

Public Comment

Richard (Mort) Wasserman, MD, MPH, Professor Emeritus of Pediatrics, Larner College of Medicine, University of Vermont

Rick Dooley, PA-C, Clinical Network Director, Health First

Hamilton Davis, Journalist and Policy Analyst

Walter Carpenter, Health Care Advocate

FY 2022 ACO Guidance Kick-Off & 2021 Debrief

Alena Berube, Director of Health Systems Policy, GMCB

Marisa Melamed, Associate Director of Health Care Policy, GMCB

Marisa Melamed presented an overview of the GMCB staff's approach to the FY 2022 ACO oversight, the timeline of the FY 2022 ACO guidance, the statutory authority of GMCB's oversight, an overview of the debrief discussions from the FY 2021 process, the FY 2022 goals in relation to the FY 2021 goals, the FY 2021 certification eligibility verification, and the FY 2021 budget guidance table of contents. [The presentation can be seen here on the GMCB website.](#) Board Member Lunge gave feedback to the GMCB staff on the FY 2022 guidance.

Public Comment

None

2019 Vermont Health Care Expenditure Analysis

Lori Perry, Health Finance Analytics Director, GMCB

David Glavin, Data & Reporting Project Manager, GMCB

Lori Perry reviewed the background of the Vermont Health Care Expenditure Analysis which is required under 18 V.S.A. §9375a §9383 since 1991. David Glavin presented [the interactive report available here on the GMCB website.](#) Lori Perry reviewed the summary of the analysis, the differences between the analysis and the All-Payer Model Total Cost of Care (APM TCOC), how regulated hospital budgets are a subset of the analysis' provider expenditures, and how regulated insurance rates are a subset of the analysis' resident and provider expenditures. Lori Perry reviewed the 2019 Vermont resident analysis, the 2019 Vermont provider analysis, next steps, and the appendices. [The presentation can be seen here on the GMCB website.](#) The Board

Members had a discussion and asked Lori Perry questions regarding the drivers in cost for drugs/supplies and hospitals, the impact of the shift to hospital owned physician practices on the analysis, lessons for the hospital budget process, and the increases in resident spend and commercial insurance rates.

Public Comment

Rick Dooley, PA-C, Clinical Network Director, Health First
Walter Carpenter, Health Care Advocate
Marc Stanislas, Vice President of Finance, University of Vermont Health Network

Old Business

None

New Business

None

Adjourn

The Board voted (5-0) to adjourn at approximately 3:55 pm.