

GREEN MOUNTAIN CARE BOARD (GMCB)  
GMCB Board Meeting Minutes  
Wednesday, August 11, 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 (*Absent*)  
Jessica Holmes, PhD (*via Microsoft Teams*)  
Tom Pelham (*via Microsoft Teams*)

**Minutes**

Chair Mullin called the meeting to order at approximately 1:00 pm. The Board voted (4-0) to approve the minutes from July 28, 2021 and August 4, 2021.

**Executive Director's Report**

Michael Barber announced the Board's recent decisions on the 2022 individual and small group rate filings. As a result of legislation passed during the most recent session, the individual and small group health insurance markets were unmerged for 2022. This meant that Blue Cross and Blue Shield of Vermont and MVP Health Plan each submitted separate filings for their individual and small group plans. Unmerging the markets had the effect of lowering small group rates and increasing individual rates compared to what they otherwise would have been, with individual rate increases being offset by expanded premium tax credits available in 2022 as a result of the American Rescue Plan Act.

For individual plans, based on the filings, there are approximately 31,000 members covered by these plans, with membership being split pretty evenly between the two carriers. Blue Cross requested a 7.9% average annual increase for its individual plans, which it lowered to 5.0% based on the recommendations of the Board, and then increased to 5.2% following the submission of hospital budgets. The Board approved a 4.7% average annual increase for Blue Cross. MVP requested a 17.0% average annual increase for its individual plans, which the Board reduced to 12.7%.

For the small group filings, according to the submissions, there are approximately 40,600 members in these plans, with 21,858 members enrolled in MVP plans and 18,755 members enrolled in BCBSVT plans. BCBSVT proposed a rate change of -7.8%, which it increased to -6.4% based on the recommendations of the Board's actuaries and then increased again to -6.2% following the submission of hospital budgets. The Board approved a rate of -6.7% for BCBSVT plans. MVP proposed an average annual rate increase of 5.0% for its plans, which the Board reduced to 0.8%.

Susan Barrett announced that the hospital budget hearings commence August 17, 2021. The hearings will be held remotely and there is a physical location at which the public can attend. Susan Barrett announced [the open special comment periods on the GMCB website](#).

### **Potentially Avoidable Hospital Utilization at Rural Hospitals**

Sule Gerovich, Ph.D., Senior Fellow, Mathematica Policy Research

Susan Barrett explained that the presentation will add to the ongoing work and discussions the Board is undertaking on rural health care sustainability and the transition to value-based care. Susan Barrett introduced Sule Gerovich.

Sule Gerovich explained what Mathematica is, Mathematica's mission, Mathematica's data innovation lab that aims to create a bridge between decision makers and data, the dashboard that measures avoidable utilization at hospitals, the definition of Potentially Avoidable Utilization (PAU), and the three claims-based measures. The three claims-based measures include 30-day all cause readmissions, ambulatory care sensitive inpatient hospitalizations, and avoidable emergency department visits. Sule Gerovich presented the summary results for rural hospitals in Vermont, including the PAU dashboard specifics. Sule Gerovich then reviewed the policy applications of the dashboard including aligning financial incentives for better and more efficient care, movement towards population-based payments, disparities in access and health in rural areas, global budget examples to align incentives for hospitals, hospital fixed-revenue models, and saving opportunities that align with population health. [The presentation can be seen here on the GMCB website](#). The Board Members had a discussion and asked Sule Gerovich questions regarding the balance between Fee-For-Service (FFS) and Value Based Payments, the Federal price transparency rule for hospitals, inclusion of commercial data in the dashboard, factors contributing to PAU, and the costs of the ambulatory care sensitive inpatient hospitalizations.

### **Public Comment**

Jeffrey Tieman, President and CEO, VAHHS  
Hamilton Davis, Journalist and Policy Analyst

### **Old Business**

None

### **New Business**

None

### **Adjourn**

The Board voted (4-0) to adjourn at approximately 2:15 p.m.