

GREEN MOUNTAIN CARE BOARD (GMCB)
GMCB Board Meeting Minutes
Wednesday, December 22, 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)*
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. Executive Director Susan Barrett reviewed [the open special comment period on the GMCB website](#). Susan Barrett announced that the agenda for the Board Meeting on December 29, 2021 was TBD and would be determined after the meeting today, and that the January Board Meeting schedule would be released by the end of next week.

Minutes

The Board voted (4-0) to approve the minutes from December 15, 2021.

2022 Medicare Benchmark Proposal – Potential Vote

Sarah Lindberg, Director of Health Systems Data Analytics, GMCB

Sarah Lindberg presented the Medicare premium growth calculation and explained that Congress recently passed legislation that extends Medicare's exemption from sequestration. Because we do not know how this will pan out, the sequestration factor is added back in, which adds about 2% to the overall recommended trend, taking it from 5.5% to 7.3%. Sarah Lindberg presented the 2022 Trend Rates and estimated Medicare total cost of growth. Sarah Lindberg presented the Board with two options for the Board decision, selecting a trend based on agreement parameters or proposing a retrospective trend. Sarah Lindberg presented the one public comment that was received on the proposal from OneCare Vermont, to assist with the Board decision. Sarah Lindberg presented the GMCB staff recommendation for the Benchmark.

Board Member Lunge moved to approve a Medicare Benchmark of the staff recommended rate of 7.3% for both Non-ESRD and ESRD, with the guardrails included in the proposal to assess the 2021 estimated experience with actuals and adjust if necessary, monitor 2022 closely to determine if the trend requires revision, and ask that staff come back to the Board should that be the case, and ensure that the baseline and performance year have the same inclusions and exclusions in the Total Cost of Care (TCOC). Board Member Lunge also moved to include the

advance of the \$9,073,982 for the blueprint and SASH programs. Board Member Holmes seconded the motion. The Board members had a brief discussion about the maximum trend rates, guardrails, and monitoring regarding when we will know if the 7.3% was the appropriate trend rate. The Board voted (4-0) to approve the motion.

[The presentation can be seen here on the GMCB website.](#)

Public Comment

Victoria Loner, MHCDS, RN, CCM, CPUR, PAHM, CEO, OneCare Vermont

Jeffrey Tieman, President and CEO, VAHHS

Mary Alice Bisbee

FY 2022 OneCare Vermont ACO Budget and Certification – Potential Vote

Sarah Kinsler, Director of Health Systems Policy, GMCB

Marisa Melamed, Associate Director of Health Systems Policy, GMCB

Marisa Melamed presented a summary of public comment received and reviewed the general themes of those comments. Marisa Melamed presented highlights and changes to the staff recommendations for conditions to the OneCare FY 2022 budget. The Board Members asked questions and discussed the OneCare budget, staff recommended conditions and the reporting manual and reporting requirements. [The staff presentation can be seen here on the GMCB website](#) and the [final staff recommendations can be seen here](#).

Board Member Pelham made a motion that OneCare must submit a report to the Board on its progress relative to its targets for commercial payer Fixed-Perspective Payments (FPP) levels that OneCare set in accordance with its FY21 budget order, condition 15, and any FPP targets set according to conditions in the FY22 budget order. Board Member Lunge seconded the motion for purpose of discussion. The Board Members and GMCB staff discussed the motion. Board Member Lunge offered an amendment and moved to amend staff condition 9 which currently reads “at its presentation of the revised budget and no later than April 30, 2022, OneCare must present to the GMCB on the following topics,” to add a new topic which would be progress on commercial payer FPP levels as further defined by the staff and consistent with the reporting manual. The Board voted (4-0) to approve the motion.

Board Member Lunge moved that the Board delegate to GMCB staff to specify and determine a methodology for FPP targets, and to also include in the reporting manual appropriate reporting on those targets. Board Member Holmes seconded the motion. General Counsel Michael Barber recommended specifying a position or person to delegate to. Board Member Lunge amended her motion to be clear that the delegation of authority would be to the Director of Health Systems Policy. The Board voted (4-0) to approve the motion.

Board Member Pelham made a motion that in consultation with the Board of Managers (BOM), recommend to the GMCB an actuarially sound analytical approach that the ACO can use to annually provide an estimate of the incremental growth of the Medicaid cost shift and the effect

of such growth on ACO Medicaid benchmark trend rates relative to ACO Medicaid provider costs. Board Member Holmes seconded the motion for the purpose of discussion. The Board members asked questions and discussed the motion. After discussion, Board Member Holmes offered to simplify the motion by stating that in the reporting manual, describe the effect of the ACO Medicaid benchmark trend rate on the cost shift. The Board voted (2-2) by roll call to deny the motion, with Board Member Lunge and Chair Mullin voting no.

Board Member Pelham made a motion that to ensure recommendations for revisions to Vermont's Essential Health Benefits (EHB) Benchmark Plan support the ACO's strategic plan to reduce cost growth or improve the quality and overall care of enrollees in the individual and small group markets, within one week following DFR's presentation to the Board recommending changes to Vermont's EHB Benchmark Plan, OneCare shall submit a report to the GMCB that addresses whether the proposed EHB Benchmark Plan is appropriately aligned with Vermont's health care reform goals of cost and quality regarding population health and prevention, as set forth in the Vermont All-Payer Accountable Care Organization (ACO) Model agreement and the Department of Health's State Health Improvement Plan: 2019–2023, and identifies which revisions enhance or detract, if any, from the ACO's efforts to enhance affordability and improve population health and prevention. The motion was not seconded.

Board Member Lunge moved to accept the staff recommendations on the OneCare Vermont FY22 budget as presented to the Board in the December 22, 2021 document and amended by the previous motions, and to add an additional condition that staff develop and maintain the reporting manual for reporting requirements for OneCare for FY22. Board Member Holmes seconded the motion. The Board voted (4-0) to approve the motion.

Public Comment

Victoria Loner, MHCDS, RN, CCM, CPUR, PAHM, CEO, OneCare Vermont
Mary Alice Bisbee, Healthcare Consumer
Michael Fisher, Chief Health Care Advocate, Vermont Legal Aid
Susan Aranoff, Senior Planner and Policy Analyst, Vermont Developmental Disabilities Council
Hamilton Davis, Journalist and Policy Analyst
Dale Hackett, Health Care and Disability Rights Advocate

Old Business

None

New Business

None

Adjourn

The Board voted (4-0) to adjourn at approximately 3:10 PM.

Unapproved