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GREEN MOUNTAIN CARE BOARD SET 2024 BUDGET TARGETS FOR ONECARE VERMONT FOCUSING ON ACCOUNTABILITY FOR HEALTH CARE QUALITY AND COST

Montpelier, VT – Today, the Green Mountain Care Board (GMCB) set 2024 budget targets for OneCare Vermont (OneCare). The budget targets outline GMCB's expectations for increased accountability for health care costs and improving accountability for health care quality at the provider level.

"The GMCB continues to push for improvement, accountability, and transparency from OneCare and the budget targets are an important step in that direction," said Owen Foster, GMCB Chair. "The budget targets build on data from GMCB mandated benchmarking that compares OneCare to other peer ACOs. The benchmarking identifies areas for improvement that are critical to our healthcare system, and the targets imposed today make clear our expectations."

The <u>budget targets</u> set expectations for OneCare's 2024 budget which OneCare will submit to GMCB in October. The targets align with GMCB's statutory duties to improve access, affordability, and quality of care for Vermonters. The targets for OneCare's 2024 budget submission include:

- Investments connected to areas for improvement: OneCare must identify and submit plans
 for three areas for improvement based on OneCare's performance compared to national
 ACOs. This target builds on GMCB's 2023 Budget Order which required OneCare to
 benchmark its performance against a national cohort of ACOs.
- Strengthen provider-level accountability for quality: OneCare's budget must include a plan to strengthen provider accountability for quality of care through programmatic changes such as increasing available bonus payments to primary care and community providers for quality of care metrics.
- Contain ratio of operating expenses to population health funding: OneCare must keep its
 operating expenses relative to its population health funding at no more than the five year
 average of 3.25%. Limiting relative operating expense growth will ensure that the cost of
 operations does not outpace funding to directly improve health outcomes for Vermonters.
- Retaining financial risk at the ACO level: Building on last year's guidance, GMCB is requiring
 OneCare to hold 100% of Medicare Advanced Shared Savings dollars as risk at the entity
 level (up from approximately 40% in 2023) instead of passing this risk along to the provider
 network. This target protects providers in OneCare's Medicare payer program from outsized
 risk associated with this federal money, which funds the statewide Blueprint and SASH
 programs.
- **Fixed Prospective Payments:** GMCB continued to set targets for the percentage of Medicaid and commercial payments in the form of fixed prospective payments that OneCare should work to achieve in order to continue advancing the goals of payment reform in the state.





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At a later date, GMCB will also review and evaluate whether or not additional budget targets related to executive compensation should be added.

GMCB will receive OneCare's 2024 budget submission in October 2023 and will review the budget based on the 2024 guidance and ACO oversight rules and statutes.

About: The Green Mountain Care Board (GMCB) is a 5-member, independent Board with a vision of a sustainable and equitable health care system that promotes better health outcomes for Vermonters. The GMCB was created in 2011 with an ambitious mission to drive system-wide improvements in access, affordability, and quality of health care to improve the health of Vermonters. Through public meetings, the GMCB ensures a transparent approach to health care regulation and a voice for stakeholders, including health care organizations, clinicians, and members of the public. With a holistic, data driven approach, the GMCB carries out its regulatory duties, supports innovation in health care delivery and payment reform, and serves as an important resource for independent, transparent analyses of Vermont's health care system performance.

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