

Submitted on Monday, December 2, 2019 - 4:03pm

Name: Gena Melissa

Topic: ACOs

Comment: GMCB must clarify the impact of no timely clinical data (vs. claims) for OneCare's purportedly "timely and actionable analytics" and why OneCare Vermont pays VITL \$800k+ annually if it is unable to access Clinical data as its most recent response to GMCB 11/12 questions outlines: "many of the measures have no accessible data source for ongoing monitoring. For example, the clinical measures require cumbersome manual data gathering from many unique EHRs which causes burden on the practices."

Submitted on Monday, December 2, 2019 - 4:32pm

Name: Gena Melissa

Topic: ACOs

Comment: part 2

In response to GMCB's round 2 question 30 and in conflict with the CMS contract requiring institutional level programming and monitoring of network activities, OneCare confirms it is not tracking its investments consistent with State Auditor Hoffer's findings: "Each organization and local HSA determines its own programs and focus areas per OneCare's decentralized model. OneCare supports this decision making by sharing data to identify opportunities and monitor progress. OneCare does not maintain a list of activities in each organization or HSA supporting the clinical priority areas." This is an explicit deviation from the CMS and DVHA contracts and requires an actionable and intelligible response from GMCB demonstrating its knowledge of the contracts it is meant to regulate.