

Stipulations for Approval of OneCare Vermont's 2023 Budget

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December 1, 2022

We are submitting the following suggested stipulations for the Green Mountain Care Board to include in its approval of OneCare's 2023 Budget. In our opinion, OneCare has evaded any meaningful accountability since the inception of the All Payer Model and we find ourselves with a very poorly performing ACO that is budgeted to cost Vermonters nearly \$1.5B in 2023. Accountability is paramount. Any disencumbered funds should be redirected to meet the needs of Vermonters.

1. End payments for OneCare's data, data analytics, and associated IT functions now that these belong to UVM Health Network.
2. Require 10% improvement on all ACO quality measures.
3. Remove any budget items relating to Population Health Services. OneCare is being folded into UVM Health Network's new Population Health Services Organization (PHSO). If not removed, population health funds become the domain of UVM Health Network. These funds need to be preserved and disseminated by the State.
4. End OneCare's care management payments and utilize Vermont's existing locally-based case management system. FQHCs, Community Mental Health Centers, Home Health Agencies, Recovery Centers, Area Agencies on Aging and others all have robust care management systems that have been in place for decades. Having an outside entity such as OneCare attempt to coordinate care is expensive, ineffective, and duplicative. Instead, the money budgeted for OneCare's care management activities should be redirected to local entities. Even the hospitals [concur](#), according to Vermont Legal Aid. *"Hospitals consistently demonstrated during this year's budget hearings that they appear both compelled to and capable of investing in effective, community-informed population health and care coordination programs in their Health Service Areas (HSAs) without OCV."* OneCare's Care Navigator failed and as we enter Year 7 of the All Payer Model, OneCare is still trying to determine the best approach to care management.
5. Remove Blueprint funding from OneCare's budget and return the program to its original home, the Agency of Human Services.
6. The Green Mountain Care Board should establish accountability metrics which, if not achieved, result in a decrease in OneCare's administrative funds.