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Sent on: Monday, December 30, 2024 5:11:48 PM

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Subject: Public Comment: All-Payer Model-AHEAD 2024-12-30T17:11:44Z

A new GMCB Public Comment has been received.

Submit Time: 2024-12-30T17:11:44Z

Name: Patrick

Affiliation: Flood

Town/City: Woodbury

Topic: All-Payer Model- AHEAD

Comment: Dear members of the GMCB. Thank you for your scrutiny of the AHEAD model term sheet. It is most discouraging to hear the state still plans to move forward with this model and a vote to support it when there are so many "unknowns" as the Health Advocate testified. I strongly endorse the very specific and critical comments filed recently by Julie Wasserman. There is not much to add to her very convincing analysis. There are numerous serious issues with health care in Vermont. The AHEAD model will do nothing to improve access or affordability. Committing the state, the Board, and many providers to implementing the very flawed AHEAD model defies common sense. It will not solve our problems but it will consume a lot of money, time and energy. Let us all be clear: CMS' purpose for implementing the AHEAD model is to reduce Medicare spending. As a very low cost Medicare spend state, why would Vermont participate in such a model? The additional Medicare funding promised by the AHEAD model is only a lure; in the end, the goal is to reduce our spending, not expand it. I understand that many parties are concerned about the potential loss of Medicare funding for the SASH and Blueprint programs. But the relatively small amount of funding needed for these programs is no reason to burden the whole system with a nine year model that will do nothing to address the serious problems in Vermont health care. If they believe that SASH and the Blueprint are extremely valuable, then the hospitals and AHS should be able to find the funding to support them, especially since now the hospitals will not be funding OneCare. I still have not seen any meaningful list of positive and measurable outcomes expected from the AHEAD model. Will it expand access to primary care? Will it reduce hospital spending? If so, by how much and by when? Will it expand access to mental health care? Will it reduce the costs of health care insurance? If so, by how much and by when? Without a specific set of goals I see no reason to embark on such a confusing initiative. I urge the Green Mountain Care Board to vote against the AHEAD model and stay focused on the struggle to control hospital expenditures, to initiate Reference Based Pricing, expand primary care and mental health and start a process to implement the key elements of the Act 167 report. Embarking on the AHEAD model is a waste of time and resources.

Post Comment: Yes