



OneCare Vermont

December 12, 2024

Green Mountain Care Board
144 State Street
Montpelier, Vermont 05602

RE: OneCare Vermont FY25 Budget

Dear Chair Foster and Members of the Green Mountain Care Board:

Please accept this letter as public comment related to our proposed 2025 budget. We recognize this is a transitional time and aspire to find a pathway that allows us to fulfill our commitments while being mindful of cost.

First, we would like to note that 2025 is not a wind-down year. Rather, we intend to operate all programs and initiatives articulated in the budget submission throughout 2025 and will begin the actual wind-down of the organization in 2026. While there will be a significant amount of work required to conclude programs and general business in 2026, this will be an expeditious process to the extent possible.

Relating to the potential budget modifications outlined on slide 35 of the staff presentation, we are most concerned with Option 3 related to RCRs, and budget cuts that exceed the amount reflected in Option 4.

Regarding Option 3, the Regional Clinical Representative (RCR) initiative is key in promoting and supporting clinician leadership, connection, and quality work at the ground/practice level. It was resurrected in response to limited staffing resources within OneCare, OneCare's desire to emphasize local clinician support, and GMCB feedback that OneCare should do more to shift funds to primary care and push quality improvement work at the practice level. Eliminating this component of the submitted budget will limit our influence in improving clinical outcomes for patients in the final year of the APM and take funding away from primary care providers. Additionally, these dollars support and empower primary care providers as leaders within the healthcare community. This concept will be essential for success in both 2025, as well as any future reform efforts Vermont may adopt.


Regarding Option 4, we recognize that OneCare's circumstances have changed. As noted in testimony, however, living within the FY24 projection does not account for normal inflationary increases any business should expect. OneCare needs adequate resources to fulfill its obligations in 2025, which are substantial, and cuts beyond this level will jeopardize our ability to perform. With respect, we strongly recommend that administrative cuts do not cross this threshold.

If the GMCB wishes to reallocate administrative expense reduction, if any, to primary care and/or other provider types, we respectfully request flexibility to determine the way in which the funds are distributed. OneCare has put significant effort into streamlining financial operations so that there are

standard payments made to each practice and practice type. This work has created efficiencies and minimized errors and delays. Additionally, OneCare's work with provider participants in 2025 is already established through contract. Any imposed changes need to be evaluated relative to existing contractual language to minimize the administrative burden placed on providers if contractual changes are necessary. It is OneCare's position that any additional dollars to be funneled to primary care needs to be done on an equitable basis and in accordance with our programmatic initiatives.

Thank you for considering our feedback. Please recall that the submitted budget complied with all GMCB targets, and while circumstances have changed, we hope the GMCB keeps this in mind when making their decisions.

Sincerely,

A handwritten signature in black ink, appearing to read 'TB', with a horizontal line above it.

Tom Borys, CFO
OneCare Vermont

CC: Michelle Sawyer, Abe Berman, Sara Barry, Aaron Perry, Carrie Wulfman, Amy Bodette