At the Green Mountain Care Board's June 14th meeting, during discussion of OneCare VT's 2023 Revised Budget Submission, a few seminal topics were covered and two culminated in new rules via vote:

- 1. A mandated decrease in OneCare VT executive compensation.
- 2. A mandated auditing retrospectively to 2018 and prospectively of \$10.5mm in population health investments after discovery it cannot be properly accounted for.

A third, more fiscally materially significant topic GMCB Member Walsh broached was the issue of OneCare's transitioning of its Data Analytics to its parent company University of Vermont Health Network at a cost of \$2mm annually. <u>Walsh suggested cancelling or at least pausing the transition</u> to which Chair Foster suggested it be properly vetted in the OneCare 2024 budget guidance currently being deliberated.

This transition has raised considerable public specter, with the Health Care Advocate even raising antitrust violation concerns and Blue Cross Blue Shield VT citing it as one of several enumerated reasons it was withdrawing from the ACO. Walsh's point was that since 2018 millions were poured into OneCare's analytics with no understanding of either its return on investment or how its scope of work will be replaced by UVMHN's "Data Management Office."

Here is a breakdown of the Vermont Department of Health's nearly \$13mm in investments alone made in OneCare's Analytics.

Part 4. ACO Financial Plan - Appendix 4.2: Income Statement • Illustrative for Comparison							
Income Statement	2016	2017	2018	2019	2020	GRAND	
	Actual	Actual	Actual	Budget Approved	Budget Submitted	m	
State Support							
Informatics Infrastructure Support	\$ -	\$ 1,500,000.00	\$ 3,500,000.00	\$ 4,250,000.00	\$ 3,500,000.00	\$ 12,750,000.00	

No different than GMCB mandating Population Health investments of \$10.5mm be audited, OneCare's \$12.75mm historical Analytics investments must be audited retrospectively and prospectively as follows:

1. OneCare Must provide a breakdown by tool it was paid to stand up, utilization results – user counts by organization, session counts and average session times and what ACO activities they were directed towards:

Number of Sessions								
Application	ADK Internal		External		Health Catalyst		OCV Internal	
aco explorer	0	0%	11	22%	4	17%	27	4%
aco measures data quality - blinded data	0	0%	0	0%	0	0%	5	1%
attribution	41	16%	0	0%	0	0%	60	9%
audit and usage analyzer	0	0%	0	0%	0	0%	6	1%
financial targets	0	0%	6	12%	0	0%	26	4%
governance dashboard	0	0%	0	0%	9	39%	0	0%
hcc insights	0	0%	14	28%	7	30%	2	0%
mssp aco measures	2	1%	3	6%	0	0%	60	9%
network analyzer - all aco view	1	0%	0	0%	1	4%	5	1%
patient risk stratification - all aco view	4	2%	0	0%	0	0%	4	1%
pmpm analyzer	206	79%	11	22%	2	9%	281	43%
risk model analyzer all aco view	7	3%	0	0%	0	0%	4	1%
total bundled payments	1	0%	0	0%	0	0%	41	6%
vmng utilization	0	0%	0	0%	0	0%	38	6%
vt aco measures	0	0%	5	10%	0	0%	90	14%
Total	262	100%	50	100%	23	100%	649	1009

User Group User Count	Session Count
BMH 4	5
Copley 1	3
Copley Professional 1	7
CVMC 4	80
DARTMOUTH 1	2
NCH 1	4
NMC 4	28
NOTCH 2	5
PCHP 1	23
Porter 1	3
Rutland 4	17
SVMC 9	101
UVMMC 20	349
WINDSOR 4	8

2. A cross-walk of the tools the ACO was paid to standup and the tools UVMHN's Data Management Office will employ:

WORK BENCH ONE ANALYTICS	CROSSWALK	UVMHN "DATA MANAGEMENT OFFICE"
HEALTH CATALYST	>	
РМРМ	>	
MSSP ACO	I>	
PATIENT STRAT	I>	
ACO EXPLORER	I>	
HCC INSIGHTS	I>	
OCV STAFF PROGRAMMED		
NETWORK ANALYZER	I>	
FINANCIAL TARGETS	I>	
VMNG UTIL	I>	
TTL BUNDLED	I>	
ATTRIBUTION	>	
CC INTERNAL	>	
CC EXTERNAL	>	
VT ACO MEASURES	I>	
DATA QUALITY	>	

Finally, GMCB has if not a statutory obligation, an ethical one to state clearly for the public during the 2024 ACO budget process that both OneCare VT and its parent company who it seeks to transition analytics to are <u>heading to trial for wrongfully terminating</u> someone who raised urgent flags that these Analytics were not viable, and moreover, those who wrongfully terminated that employee will be <u>the</u> <u>very ones stewarding the Data Management Office</u>.

If the reader agrees with the foregoing, please write between now and Tuesday, June 27th at noon requesting GMCB adopt the guidance by attaching a link to this article and submitting to:

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