

A new GMCB Public Comment has been received.

Submit Time: 12/4/2023

Name: Jane Katz Field

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Town/City: Putney

Topic: Vytalize-ACO REACH

Comment: I urge the GMCB to reject the budget submitted by Vytalize, which is seeking to establish an ACO REACH in partnership with two FQHCs in Vermont. I am a senior enrolled in Traditional Medicare, which I chose over a Medicare Advantage plan because I don't want a for-profit entity, such as an insurance company or private equity-backed firm, to have a role in decisions about my health care. The goal of such companies is to maximize their profits, which they do at the expense of patients' health care. Indeed, Vytalize expects to clear \$1 million for its work with the two FQHCs in Vermont. And how cavalier it is that Medicare patients at the two centers will be enrolled without their consent or knowledge. I am also a physician, who is aware of the pressures these for-profit entities place on primary care physicians. Such contractual arrangements require more restricted networks and lead to more delays and denials of care. Vytalize has created a restricted set of specialists, based on the specialists "performance" (which includes consideration of their costliness to Vytalize), to whom the primary care physicians can refer. My concern is heightened by the fact that private equity-backed firms are very lightly, if at all, regulated. Their acquisitions are not reportable to financial regulatory authorities, and they operate without effective oversight. The Board, as a regulatory body, should have serious concerns about this. I am a member of the Vermont Medical Society, which recently adopted a resolution on CMS' payment reform programs, which included the following principles: — "For-profit corporations, including but not limited to venture capital firms, should be excluded from serving as contracting intermediaries in CMS-sponsored value-based care programs," — "Medicare beneficiaries who enroll in the original Medicare program should not be unwillingly or unwittingly assigned to managed care or capitation systems that contract with corporate intermediaries, such as allowed in the ACO REACH and Primary Care First Programs...." — "Programs should not impose ethical conflicts on participating clinics, such as clinicians facing significant financial loss when their patients require costly procedures.." While I am not an employee or patient at the two affected federally-qualified health centers, I firmly oppose private equity-financed companies getting a foothold in Vermont and expanding to other health centers. The issue of private equity backed contractors entering the Vermont Medicare market is a huge one in front of the Board, and I was shocked to read that the comment period is so short. Most seniors and people with disabilities who are affected by this have not even heard about it. I urge the Board to take the time to look into and make public the contracts between Vytalize and the physicians' practices, so we can see if Vytalize is financially incentivizing physicians to upcode, to refer to a select group of specialists because they cost Vytalize less, and to spend less on patients' health care. While good health care depends in large part on the physician-patient relationship, having a profit driven intermediary between the physician and the patient just leads to mistrust and poorer care.

Post Comment: Yes