

From: LaJeunesse, Kristen<Kristen.Lajeunesse@vermont.gov>

Sent on: Thursday, November 30, 2023 4:55:55 PM

To: GMCB - ACO<GMCB.ACO@vermont.gov>; GMCB - Board Members<GMCB.BoardMembers@vermont.gov>; Bredice, Tara<Tara.Bredice@vermont.gov>

Subject: Public Comment: Accountable Care Organization (ACO) 2023-11-30T16:55:53Z

A new GMCB Public Comment has been received.

Submit Time: 11/30/2023 4:55:53 PM

Name: Ellen Schwartz

Affiliation:

Town/City: Brattleboro

Topic: Accountable Care Organization

Comment: I am on traditional Medicare and I urge you to deny the budget request from Vytalize. I chose traditional Medicare because I don't want my providers to be pressured by a corporation that is looking to maximize profits, creating ethical dilemmas for the providers and possible health consequences for patients. I am especially concerned that Vytalize is the worst kind of for-profit entity—one that is heavily financed through private equity. Private equity exists to turn profits for investors, not to provide quality healthcare. As regulators, you should be extremely concerned about the ways that private-equity-backed firms escape regulation, transparency and accountability. A 2021 report from the Petris Center School of Public Health, University of California, Berkeley explained private equity thus: "Private equity firms operate under the public and regulatory radar. Private equity is, in a word, private. Most private equity acquisitions in healthcare are not reportable to antitrust or financial regulatory authorities under current law. And, even where transactions are reportable, the complex structure of private equity funds obscures the competitive impact of those deals. As a result, private equity companies operate in healthcare without any effective oversight." (<https://publichealth.berkeley.edu/wp-content/uploads/2021/05/Private-Equity-I-Healthcare-Report-FINAL.pdf>) We do not need a a corporation that operates "without any effective oversight" in Vermont's healthcare system. I am very concerned that if Vytalize gets a foothold in Vermont and turns a profit, they will expand to other practices, such as the one that I use. Were that to happen, I would be "attributed" to Vytalize if my providers were to sign up with them. I object to this corporation taking away the choice that I and others on Medicare currently have—the choice to be in a form of Medicare that is not beholden to profiteering. I urge you to read a position paper recently passed by the Vermont Medical Society that advocates for a set of standards for CMS's payment reform programs. The resolution states that "for-profit corporations should be excluded from serving as contracting intermediaries in CMS-sponsored value-based care programs," and goes on to detail related standards. It raises important ethical considerations and proposes standards of transparency around the financial relationships in the contracts of corporations such as Vytalize. The concerns raised by the doctors threaten our healthcare system both in delivery of care and medical ethics, and this will affect patients as well as doctors. The Medical Society's resolution—which raises a red alert—is only two pages long, and you can read it in its entirety here: https://vtmd.org/client_media/files/Ethical%20Conflicts%20of%20Pay%20for%20Performance%20-%202023.pdf Please deny Vytalize's budget request so they are not fast-tracked into a contract through the ACO REACH program. At the very least, you should give yourselves and the public more time to investigate and comment before allowing for-profit contractors to enter Vermont, eroding traditional Medicare's independence from profiteering. You could do this by pushing back the deadline for making a decision and extending public comment period beyond Dec. 5, as well as advertising it widely through organizations that provide services for elders and people with disabilities—the two groups of people who will be affected by this change. Many people on Medicare have no idea that this is happening and what it could mean for them. This is simply not enough time for people to get educated so they can comment to the Board. This important decision

will have ramifications for people on Medicare for years to come. There is no reason to rush the process, and every reason to take the time to research private-equity-financed corporations in healthcare yourselves, and to allow the public adequate time to submit comments.

Post Comment: Yes