



# The Value of Participating In Self-Funded ACO Programs:

Vermont's All Payer Accountable Care Organization (ACO) Model (APM): A Collaborative Approach to Improving Health and Lowering Costs



**Improving Vermont's health care system requires commitment and partnership from all of us. Working together, we can create a more efficient and effective model of care delivery for Vermonters. To improve access, lower costs, and create a healthier future for all Vermonters, all of us need to work together: policymakers, insurers, the health care community, and you. Shared accountability results in improved outcomes at lower cost.**

## **A SYSTEM BASED ON THE VALUE OF CARE, NOT THE VOLUME OF CARE**

In an "all-payer model," commercial and government health plans, self-insured groups, and state and federal agencies contract with an accountable care organization (ACO).

In Vermont, the ACO is called OneCare Vermont and is made up of a voluntary network of thousands of providers throughout the state. OneCare coordinates care, facilitates information sharing, and creates programs and payment structures designed to provide the delivery systems with the tools they need to meet our collective goals of: supporting wellbeing, managing chronic disease, promoting prevention, instead of our traditional acute care delivery and fee-for-service compensation.

## **ONECARE IS VERMONT'S ACCOUNTABLE CARE ORGANIZATION (ACO)**

OneCare Vermont is working together with Blue Cross Blue Shield of Vermont (BCBSVT) to support healthcare providers in focusing their time and energy on patient wellbeing.

OneCare's partnership with insurers allows additional flexibilities around traditional insurance requirements, streamlines administration, and incentivizes quality care, making it easier for Vermonters to receive the right care at the right time.



# The Benefits of OneCare Participation

## OneCare’s aligned clinical and payment models:

- Prioritize individualized care while curtailing the waste of fee-for-service billing
- Create shared accountability between payers and providers for health care costs
- Utilize data and continuous feedback to create a more standardized care experience
- Evaluate programs and providers on an ongoing basis to ensure the highest quality and performance
- Incentivize efficiency and reduces administrative burdens
- Encourage data-driven, patient-centered innovations in care delivery

With OneCare, employees maintain their relationships with their current healthcare providers. For those that don’t have an established relationship with a healthcare provider, OneCare can help to establish one in their local community. The benefits are automatic.

## Collective partnership:

- ✓ **Employers play an important role in controlling cost growth, encouraging health, and treatment for their employees with chronic conditions or illness.**
- ✓ **As an employer, your participation benefits everyone: the more Vermonters participate in OneCare’s programs, the more OneCare providers help improve care, cost, and access for all who live here.**
- ✓ **Together, we can build a better health care system in which every Vermonter has access to timely, effective, affordable, high-quality care.**

## How the All-Payer Model Works for:

Your Employees	You (Employer)	BCBSVT	OneCare
<p>Employees will seek care as usual from their chosen provider.</p> <p>Individuals may notice more proactive outreach and engagement from their PCP’s office.</p> <p>Otherwise, employees will enjoy the same benefits and extensive provider network as usual.</p>	<p>Employers will pay claims as usual, including the Value Payment PMPM for attributed OneCare employees.</p> <p>Employers will receive the benefits of reduced claims cost and increased quality and providers will share in a certain percentage of any cost increases.</p> <p>Businesses will share in the performance outcome of the All-Payer Model.</p> <p>Employers will have access to care and quality data.</p>	<p>BCBSVT sets the total expected cost of care based on the prior year’s incurred claims.</p> <p>BCBSVT establishes the new payment model—the Value Payment PMPM.</p> <p>This payment model allows the system to begin shifting from fee-for-service to value-based care.</p> <p>BCBSVT adjusts the Value Payment PMPM quarterly, based on OneCare performance.</p>	<p>OneCare passes the Value Payment PMPM from Blue Cross to network providers to support care delivery benefits.</p> <p>OneCare providers work to meet or beat the total-cost-of-care target set by Blue Cross, while improving provider quality scores.</p> <p>OneCare collaborates with Blue Cross on care value enhancement programs.</p>