

Table 1: OneCare Updates to Issues Identified in Hospital/FQHC Survey Regarding Participation in the Vermont All-Payer ACO Model

Strategy	Lead	Status
Offer a multiple risk models based on hospital size and readiness	OCV	OneCare Vermont has convened network finance leaders as well as the finance committee to discuss options for future risk models. This work is ongoing.
Continue to improve Care Navigator to allow use for all patients (not just ACO-attributed) and reduce burden of duplicate record-keeping by allowing uploads from existing EMR systems	OCV	OneCare Vermont is working with each health service area in the ACO network to educate and engage providers on the new care coordination payment model, which includes incentives to use Care Navigator. The ACO continues to work on integration opportunities with EMRs as part of a longer-term strategy and is currently working to identify short-term goals on site with key stakeholders. No Updates
Offer interested hospitals/FQHCs one year of shadow attribution without payment changes in advance of joining the ACO	OCV	This concept will be discussed in payer negotiations as the main barrier remains access to data for lives that aren't technically attributed.
Improve hospital understanding of payer reconciliation	OCV	OneCare has convened a series of finance retreats to discuss an array of topics and provide education in core areas. These meetings will continue through the summer.
Improve attribution and performance data clarity and timeliness for both Medicaid and Commercial programs	OCV/ payers	OneCare Vermont and payers continue to improve processes, alignment on methodology, and accuracy of data. Some improvements have already been made, including earlier contracting to allow the ACO to receive attribution files sooner and deliver them earlier to the network than in past years. For the 2020 performance year, OneCare and DVHA added an expanded attribution cohort which increases the overall proportion of Medicaid members aligned under ACO programs. OneCare is currently in the process of incorporating feedback from its provider network to enhance data reporting and clarity for 2020 performance reporting.
Improve clarity of contracts with FQHCs (e.g., expectations, deliverables, attribution methodology)	OCV	Completed for 2019. OneCare Vermont added more detail around expectations to FQHC contracts following feedback from FQHCs and other providers. Information about attribution, as well as other Readiness education materials, are available to providers via a secure portal. No Updates
Develop FQHC-specific contract with more primary care funding and incentives to ease provider burden	OCV	OneCare Vermont's new payment model provides stronger incentives for care management and quality. OneCare continues to work with DVHA to expand the prior-authorization waiver and will engage with BCBSVT to partner on a similar waiver. OneCare is considering additional contracting strategies for future years. No Updates
Offer option for primary care to join without hospital partner	OCV	Currently, hospitals take on risk for the entire health service area's population and costs; under this model, OneCare Vermont is unable to provide this contract option, though other models may be considered. No Updates
Offer or facilitate network-based telehealth opportunities to smaller providers	OCV	OneCare Vermont offers innovation programs and grant opportunities to its provider network and would welcome proposals about telehealth and about meeting the specific needs of smaller providers. We are also working with the FQHCs to advocate for Medicare approval of FQHCs serving as "distant sites" for telemedicine services. With the COVID19 outbreak, OneCare is engaged with VPQHC, UVMHN, Vermont Medical Society, and payers to gather up to date information/rule modifications to promote emergency use of telemedicine. OneCare is sharing updates through regular communications with providers.
Expand outreach to providers, including FQHCs, about benefits of joining	OCV	OneCare Vermont conducts outreach to all FQHCs as part of its network development during contracting, and will work to increase outreach in the future. No Updates
Change attribution methodology	OCV	OneCare partnered with DVHA to implement a revised attribution methodology in 2020 that resulted in significant attribution growth over the prior year. OneCare will continue to evaluate of applying this revised methodology to other payer programs in future years.