

GMCB Health Care Reform Update

In 2020, the State of Vermont enters performance year 3 of the All-Payer ACO Model Agreement (APM). The Green Mountain Care Board (GMCB) continues to maintain regulatory authority over the state's only ACO, OneCare Vermont.

2020 ACO Budget and Certification Oversight Update

- OneCare's continued eligibility for certification was verified by GMCB staff and memorialized in a memo to the board sent [January 9, 2020](#)
- GMCB staff presented their analysis of OneCare Vermont's FY2020 budget to the GMCB on [Dec. 11, 2019](#)
- OneCare Vermont's FY2020 budget was approved by the GMCB on [Dec. 18, 2019](#) with a series of 23 conditions outlined in the 2020 Budget Order requiring, among others:
 - more robust reporting, evaluation, and strategic plans for population health and delivery system reform programs, including when programs should be scaled or sunset;
 - submission of OneCare's 2021 Network Development Strategy;
 - greater oversight by the GMCB into OneCare's use of its reserve funds;
 - a performance dashboard, including cost, quality and outcome data by health service area; and
 - a future evaluation of OneCare's value-add relative to their administrative cost over the duration of the APM agreement.
- The GMCB is requiring that OneCare return before the board on or before April 15, 2020 to provide an update on final payer contracts, attribution numbers, and population health programs and their funding, among other topics.

All-Payer ACO Model Reporting and Monitoring Update

Though it is too early to determine the success or failure of the model, the GMCB produces reports for the Centers for Medicare and Medicaid Services (CMS) and the State to monitor model progress. CMS has hired NORC, the non-partisan and objective research organization, at the University of Chicago, to conduct a third-party evaluation. NORC will evaluate the cumulative results of the five-year model, and during the interim, will produce annual reports that include results from provider surveys, community-based interviews, and comparison group analyses. Existing and future APM reports include:

- APM Performance Year 1 Reports (2018)
 - 2018 Scale Target Report: posted to the GMCB website¹
 - 2018 Annual Total Cost of Care: Q1 2020
 - 2018 Medicare Total Cost of Care: Q1 2020
 - 2018 Statewide Health Outcomes and Quality of Care: January 31, 2020
- Other upcoming reports
 - 2019 Scale Target: June 2020
 - 2019 and 2020 ACO Payer Differential Report: June 2020
 - NORC first APM Annual Evaluation Report: Fall 2020

Since the APM is not yet at scale, and the ACO represents only a subset of the broader population, performance of the APM and the ACO are considered separately. Preliminary results of ACO performance to date, which capture contractual performance by payer, have been documented and posted to the GMCB website or presented publicly.²

REMINDER

The ACO affects population health in Vermont along with several key state agencies including: The Blueprint for Health, the Department of Health Access, the Agency of Human Services, health care professionals, and social service providers share responsibility for population health initiatives. *See back of page for a complete diagram of the Vermont entities impacting community health.*

¹ https://gmcboard.vermont.gov/sites/gmcb/files/PY1%20Annual%20ACO%20Scale%20Targets%20and%20Alignment%20Report_FINAL.pdf

² On Nov. 20, 2019, at a public board meeting, GMCB, DVHA, BCBSVT, and OneCare staff presented the 2018 ACO Quality and Financial Results by Payer. The presentation can be found [here](#).



Source: [State Innovation Model Population Health Plan](#)