Vermont Medical Society

To: Green Mountain Care Board Members
From: Jessa Barnard, Vermont Medical Society, Executive Director
Date: December 19, 2022
RE: Comments Regarding OneCare Vermont 2023 Budget

The Vermont Medical Society (VMS) is the largest physician membership organization in the State, representing 2,400 physicians, medical students, and physician assistant members spanning employment settings and specialties. We also serve as the administrative home for the Vermont Academy of Family Practice and American Academy of Pediatrics-Vermont Chapter, giving us a strong primary care focus. We write with concern regarding the potential implications of several decisions the Board has discussed for the OneCare Vermont (OCV) 2023 Budget.

We have read OCV's letter dated December 16th[1] stating that the amount of financial risk being contemplated by the GMCB to be held by OCV coupled with a base spend target that is yet to be validated as sufficient may force OCV to withdraw from participation in the All-Payer Model for 2023. We cannot overstate the implications for medical practices of the rapid loss of an ACO that can partner with the State to implement the All-Payer Model. OCV outlines these impacts in their letter, but to reiterate, they include the loss of:

- $9.5M in federal Blueprint/SASH funding;
- $4.0M in Population Health Management base payments to primary care practices and other continuum of care providers;
- $815,000 in Population Health Management bonus potential paid to PCP and other provider types;
- More than $900,000 in payments to independent primary care practices participating in the Comprehensive Payment Reform (CPR) program;
- More than $2.7 million in Medicare Quality Payment Program bonuses for participation in an Advanced Alternative Payment Model;
- Administrative relief from federal reporting requirements; and
- Approximately $262M of healthcare provider payments reverting to fee for service from fixed payments.

While we understand the focus by the GMCB for OCV to demonstrate fiscal responsibility and concrete benefits of their work for Vermonters, the above financial supports for primary care practices are concrete necessities for the sustainability of primary care in Vermont. The loss of these programs from one year to the next would be devastating. We respectfully request that the GMCB engage with OCV to find workable solutions that allow OCV to continue to participate as an ACO in Vermont's All-Payer Model for 2023. Further, we share OCV's concern that any Medicare Benchmark must be sufficient to allow adequate Medicare payments to Vermont practitioners. At a time when medical practices face unprecedented inflationary increases in costs as well as cuts in the Medicare fee for service rates,[2] any additional downward pressure on alternative payment models are untenable.

Thank you for considering our feedback. Should you have any further questions, I can be reached at jbarnard@vtmd.org or 802-917-1460.

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[1] https://gmcboard.vermont.gov/sites/gmcb/files/documents/Letter%20to%20GMCB%2012.16.2022.pdf
[2] https://www.ama-assn.org/practice-management/medicare-medicaid/congress-must-stop-45-medicare-pay-cut-whole-45-cut