



Supporting Vermonters to lead healthy and satisfying lives community by community

## Legislative Update for April 16, 2019

### **Secretary Gobeille Shares National SIM (State Innovation Modeling) Analysis with Key Committees**

Secretary of Human Services Al Gobeille presented information on a national evaluation of the State Innovation Modeling grants to the House Health Care and Appropriations Committees last week and will share the same with the Senate Health and Welfare Committee this week. Here is the presentation link: [https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Health%20Care/Health%20Care%20Reform/W~Al%20Gobeille~Vermont%20State%20Innovation%20Model%20\(SIM\)%20Initiative~4-10-2019.pdf](https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Health%20Care/Health%20Care%20Reform/W~Al%20Gobeille~Vermont%20State%20Innovation%20Model%20(SIM)%20Initiative~4-10-2019.pdf)

The study found that by 2018, all states implemented alternative care delivery and payment models that offered primary care and behavioral health providers incentives to integrate care.

- The six states tested nine alternative payment and delivery models.
- One payment model, the Vermont ACO SSP, yielded \$97 million in Medicaid savings over 3 years relative to spending for an in-state comparison group.

### **House Health Care Continues to Learn about OneCare Vermont**

Vicki Loner, the Chief Operating Officer of OneCare returned to the House Health Care Committee to educate them about the work of OneCare. Here is a link to her presentation:

<https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Health%20Care/Health%20Insurance/W~Vicki%20Loner~OneCare%20Vermont%20Overview%20Continued~4-11-2019.pdf>

Vicki began by focusing on Care Coordination. The vision for shared care planning is to “provide high-quality, person-centered community-based care coordination services in an integrated delivery system to achieve optimal health outcomes.” The focus is on the top 16% of the enrollees in terms of complex and chronic health conditions using an algorithm that predicts who will most benefit from care coordination. Clinicians also have a role in using their judgement in identifying people who are at risk and could benefit from care coordination. Vicki spoke about the difference between the goals of people served and those of health care coordinators and noted that good health usually allows people to achieve their personal goals. The lead coordinator is chosen by the person being served, explained Vicki, so they avoid overwhelming them with multiple care coordinators. OneCare is also looking at options that provide a lighter touch than care coordination, for instance, ensuring that all members have visits with their primary care clinicians.

OneCare Vermont invested in Blueprint for Health community health teams for capacity building. There is an annual \$25,000 payment for each community for project management. Additionally per member per month payments (PMPM) of \$15 are made to community partners based on previous claims information about the amounts of people served who are at high risk and in need of care coordination.

The lead care coordinator receives additional payments of \$10 PMPM. The new model will be based more on engagement. There is \$9.1 million set aside for care coordination this year. Quarterly outcome measures are collected on utilization of inpatient and emergency departments; total cost of care; and number of visits to primary care physicians.

To date OneCare has achieved the required quality measures, but not the savings target. For calendar year 2019 \$843 million is the projected health care expenditure for attributed lives. Plus there is \$37 million of new monies for investment. Hospitals receive prospective payments from Medicare and Medicaid, but receive fee for service payments from Blue Cross/Blue Shield. OneCare distributes \$352 as prospective payments to participating hospitals and hospital-employed primary care. Providers other than participating hospitals including: FQHCs, independent primary care and specialists, home health agencies, designated agencies, and skilled nursing facilities receive \$538 million through fee for service.

### **House Health Care Learns about Blueprint for Health**

Beth Tanzman gave an overview of Blueprint for Health to the House Health Care Committee. Its mission is “integrating a system of health care for patients, improving the health of the overall population, and improving control over health care costs by promoting health maintenance, prevention, and care coordination and management.” It consists of several components:

- Patient Centered Medical Homes with a strong primary care foundation
- Community Health Teams that bridge health and social services
- SASH for healthy aging-in-place
- Hub and Spoke for opioid use disorder treatment
- Women’s Health Initiative increase planning for pregnancies and healthy families

Components that are in the design stage:

- Screening, Brief Intervention, & Navigation to Services (SBINS)
- Pilots of Comprehensive, Integrated Services for Chronic Pain

Health Services Network Key Components: (December, 2018)

- Patient Centered Medical Homes - 136 Practices
- Primary Care Providers - 830 Unique MD, DO, APRN, & PAs
- Primary Care Patients - 314,952 (Attributed in VHCURES)
- Women’s Health Practices - 21 Women’s Health Practices 18 Primary Care Practices
- Community Health Teams (CHT) Staff - 307 Full Time Equivalent (FTE)
- CHT – Patient Centered Medical Homes - 162 FTE
- CHT – Spokes - 65 FTE
- CHT - Women’s Health Initiative - 12 FTE
- SASH Staff - 68 FTE

### **Vermont Care Partners Joins in Coalition Seeking Full Funding for School Lead Remediation**

The 14 independent therapeutic schools who are part of designated and specialized service agencies would be impacted by S.40 which requires testing and remediation of lead in the drinking water of schools and child care facilities. Therefore, on Friday, April 12, 2019 Vermont Care Partners joined: Let’s Grow Kids, Voices for Vermont’s Children, Vermont Association of School Business Officials, Vermont Early Childhood Advocacy Alliance, Vermont Independent Schools Association, Vermont Principals’ Association and the Vermont School Boards Association in requesting that the Administration and Legislature support the entities being called upon to do lead testing and remediation to provide full

funding of water sampling costs and 100% of estimated remediation costs under this program for all of Vermont's school and child care facilities.

The letter stated our support for the State of Vermont's initiative to test and remediate drinking water in all child care facilities, independent schools and public schools given our shared priority of keeping Vermont's children safe. While the program funds the first round of testing and specific forms of remediation, it is silent on who pays the costs of future testing and does not address certain forms of remediation not anticipated by the bill.

***To take action or for more information, including the weekly committee schedules:***

- Legislative home page: <https://legislature.vermont.gov/>
- Sergeant-at-Arms Office: (802) 828-2228 or (800) 322-5616
- State House fax (to reach any member): (802) 828-2424
- State House mailing address (to reach any member):  
Your Legislator  
State House  
115 State Street, Drawer 33  
Montpelier, VT 05633-5501
- Email, home address and phone: Legislators' email addresses and home contacts may be found on the Legislature home page at <https://legislature.vermont.gov/>
- Governor Phil Scott (802) 828-3333 or <http://governor.vermont.gov/>

The purpose of the legislative update is to inform individuals who are interested in developmental, mental health and substance abuse services about legislative advocacy, policy development and activities that occur in the State Legislature. The Vermont Council is a non-profit trade association which works in partnership with Vermont Care Network to form Vermont Care Partners. Together our mission is to provide statewide leadership for an integrated, high quality system of comprehensive services and supports. Our membership consists of 16 designated developmental and mental health agencies.