

Green Mountain Care Board VITL Oversight Susan Barrett, J.D., Executive Director

House Health Care Committee

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What do we do?

Regulation

Health insurer rates and rules (including the Exchange)

Hospital Budgets

Major capital expenditures (Certificate of Need)

VITL Oversight

Implementing APM

Oversight / Certification of ACOs (Act 113)

The **Green Mountain Care Board** is charged with reducing the rate of health care cost growth in Vermont while ensuring that the State of Vermont maintains a high quality, accessible health care system.

Innovation

Payment Reform Health care delivery reform Data and analytics Payer policy VT ACO APM Agreement

Evaluation

Payment Reform Pilots

Expenditure Analysis

State Innovation Grant (VHCIP)

Review/modify/approve plan designs for Vermont Health Connect



VITL Budget Review

Background

Act 54 of 2015 charged the Green Mountain Care Board with a new regulatory task: oversight of the budget and core activities of Vermont Information Technology Leaders (VITL). Specifically, Act 54 tasked the Board to "[a]nnually review the budget and all activities of VITL and approve the budget, consistent with available funds, and the core activities associated with public funding." See 2015 Vt. Acts & Resolves No. 54 (Act 54), § 7 (adding 18 V.S.A. § 9375(b)(2)(C)). Under Vermont law, VITL is "designated . . . to operate the exclusive statewide health information exchange network." 18 V.S.A. § 9352(c)(1). Each year, the Secretary of Administration (or its designee the Department of Vermont Health Access (DVHA)) funds this work by "enter[ing] into procurement grant agreements with VITL" after the Board "approves VITL's core activities and budget." Id. This division of regulatory tasks recognizes the interdependent roles of the Board and the Administration in managing the state's relationship with VITL: The Board's oversight is intended to provide strategic guidance and policy parameters within which the Administration, through DVHA, operationalizes that relationship.



VITL Budget Review Principles

Review Process Principles

• The review process will be transparent and will incorporate public input.

• The Board will review VITL's budget and core activities in order to determine whether they reflect a strategy and priorities consistent with the State's health care reform goals and the HIT Plan. The Board will not direct the technical details of VITL's work or the details of VITL's contractual relationship with the State.

•The Board's review process must be structured and timed in order to assist DVHA and VITL in negotiating timely, effective grant agreements each year.

•The process must result in Board decisions that are sufficiently clear to enable VITL to do its work and DVHA to support that work without requiring repeated clarification or intervention by the Board.



Proposed VITL Budget/ Reporting Timeline 2018





5 *These dates are tentative and subject to change

References

Green Mountain Care Board Website: <u>http://gmcboard.vermont.gov</u> <u>http://gmcboard.vermont.gov/hit/vitl-oversight</u>

Link to GMCB Decision to APM:

http://gmcboard.vermont.gov/content/vermont-all-payer-accountable-care-organization-model-agreement

