

EXECUTIVE OFFICE

462 Shelburne Road Suite 301 Burlington, VT 05401

October 31, 2016

The Honorable Al Gobeille, Chairman Green Mountain Care Board 89 Main Street Montpelier, VT 05620

Dear Chairman Gobeille:

As a colleague recently commented, all of the work that has culminated with the signing of the All Payer Model waiver with the Centers for Medicare and Medicaid Services signals "the end of the beginning." We have an incredible amount of work ahead of us to ensure that we, as a state, can deliver on our promise to Vermonters: that we will increase health care access, improve quality and reduce costs. Throughout this process, we recognize that having access to accurate, factual data is paramount to ensuring the success of all of our efforts. We have a shared duty to ensure that not only are we informed by data, but that all Vermonters have easy access to the same factual data as they consider the path we are taking.

Given our shared commitment to true and open transparency, we believe it is important for the Green Mountain Care Board (GMCB), as Vermont's health care regulatory agency, to be the source of fact as we move forward. We think that an important next step is for the GMCB to analyze and publish data on health care expenditure and utilization variation across the state of Vermont by hospital service area (HSA). Additionally, we ask that the Green Mountain Care Board particularly identify and compare expenditures and utilization at the University of Vermont Medical Center, both within its HSA and across all other HSAs. There have been previous studies in the State examining portions of what we are hoping the GMCB can explore, including the attached Phase 1 report produced by the Vermont Association of Hospitals and Health Systems – Network Services Organization (VAHHS-NSO). However as we move forward at this critical juncture, it is important to have access to both more current and more comprehensive information. We believe this work should include public and

private expenditure and utilization data for all inpatient, outpatient, and professional services provided to Vermonters, and it should be Case Mix Indexed or risk adjusted. I am proud of our track record of embracing and encouraging transparency, and believe it is only when all Vermonters have access to all of the facts that we can make the important decisions that lie ahead.

My team and I are prepared to assist in any way needed in this work, and I look forward to the information you are able to bring to light.

Sincerely,

John R. Brumsted, MD

President and CEO, University of Vermont Health Network

CEO, University of Vermont Medical Center