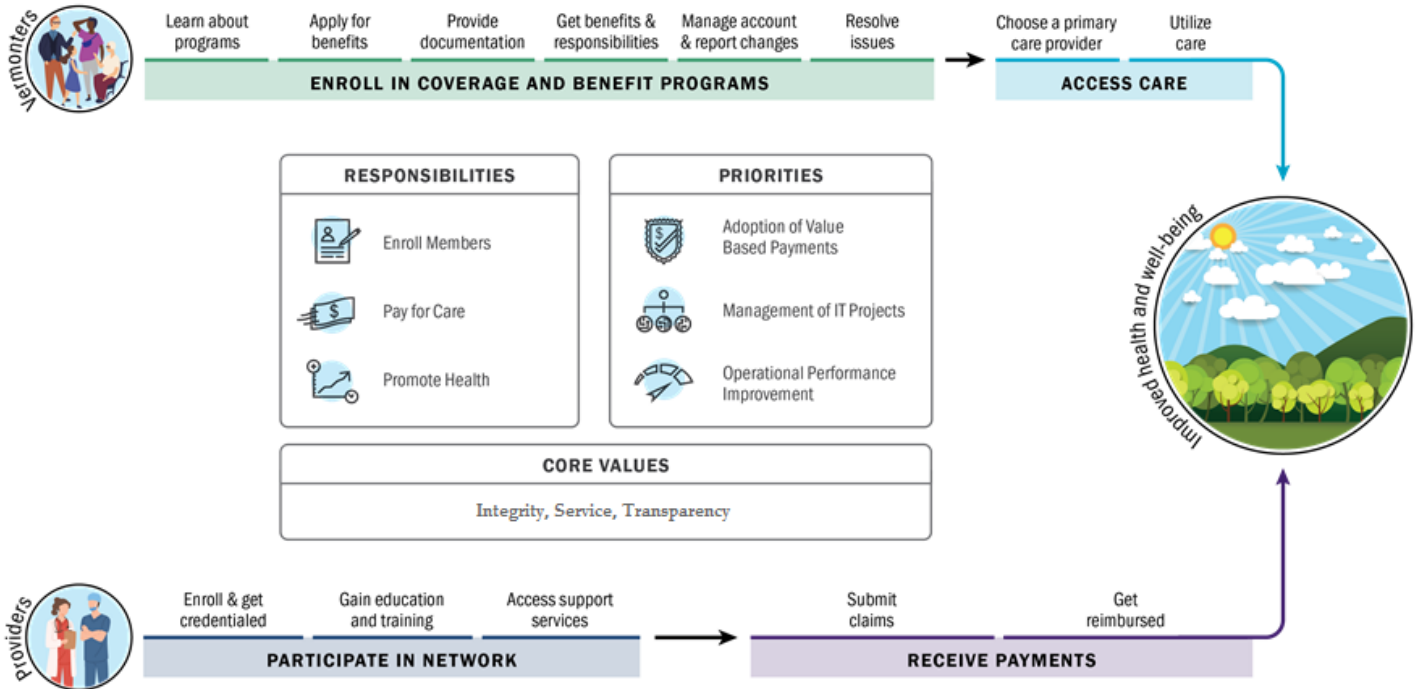




AGENCY OF HUMAN SERVICES
DEPARTMENT OF VERMONT HEALTH ACCESS

DVHA'S MISSION, RESPONSIBILITIES, PRIORITIES, AND CORE VALUES

OUR MISSION: IMPROVE THE HEALTH AND WELL-BEING OF VERMONTERS BY PROVIDING ACCESS TO QUALITY HEALTHCARE COST EFFECTIVELY.



Our Mission and Responsibilities

When we say our mission is "to improve the health and well-being of Vermonters by providing access to quality healthcare cost effectively," we are really saying that we are striving to do multiple things. First, we are saying what we're trying to do: *to improve the health and well-being of Vermonters*. Second, we're saying how we're trying to do it: by providing *access to quality healthcare*. But that's not all. We're committing to do so *cost-effectively*. In other words, we are conscious that we are accountable to both our members and to taxpayers.

To achieve this mission, our work revolves around three core responsibilities:

- 1) We engage Vermonters in need to *enroll as members* in appropriate programs. This work is represented by the "Vermonters" path in the diagram above.
- 2) We *pay for their care*. This work of building, and collaborating with, a robust network of health care providers, pharmacies, and other partners is represented in the "Providers" path above.
- 3) We recognize that simply signing up thousands of people and paying thousands of invoices will not achieve optimal outcomes at the most efficient cost, so we strategically invest in programs that *promote health*. This work is central to our commitment to quality and improvement.



Our Priorities

Our commitment to continual improvement is not limited to external health outcomes. When we look for opportunities to improve internally – in the way we carry out our responsibilities – three priorities emerge: *adoption of value-based payments, management of information technology projects, and operational performance improvement*. If we successfully execute these priorities, we will be well positioned to deliver on the triple aim of improving patient experience of care, improving population health, and reducing per capita cost growth.

Our department is comprised of 20 functional units, every one of which works on one or more of our responsibilities and contributes to one or more of our priorities.

Our Values

Our department commits to executing our responsibilities and priorities while adhering to three core values:

- 1) *Transparency* – We trust that we will achieve our collective goals most efficiently if we communicate the good, the bad, and the ugly with our partners and stakeholders.
- 2) *Integrity* – In the words of psychologist Brené Brown, we commit to “choosing courage over comfort.... choosing what is right over what is fun, fast, or easy.... choosing to practice [our] values rather than simply professing them.”
- 3) *Service* – Everything we do is funded by taxpayers to serve Vermonters. Therefore, we must ensure that our processes and policies are person-centered. We aim to model, drive, and support the integration of person-centered principles throughout our organizational culture.

These values guide our pursuit of the above responsibilities, priorities, and mission. We are committed to innovation and collaboration. We are not tied to any one way of carrying out our charges. We approach opportunities to manage Medicaid costs differently with an open mind and a commitment to do right by Medicaid members and Vermont taxpayers. We recognize that the success of our initiatives is dependent on strong working relationships with other state agencies, federal and local governments, and community partners.