



March 20, 2019

To: Members of the House Health Care Committee

From: the Vermont Medical Society & Vermont Health Care Stakeholders

Re: S.42, a bill requiring one member of Green Mountain Care Board to be a health care professional

Dear House Health Care Committee Members,

Along with the 2,000 members of the Vermont Medical Society (VMS), we, the undersigned organizations, urge you to support S.42, which would require at least one member of the Green Mountain Care Board (GMCB) to be a currently or recently-practicing health care professional.

Currently, the state of Vermont is in the process of transforming our entire health care system to a “value-based” All Payer Accountable Care Organization and at the center of this substantial reform is the Green Mountain Care Board. The goals of the All-Payer Model are to control health care cost growth, increase access to primary care and to improve health care outcomes. The Model framework touts “provider-led reform” and yet there are currently zero health care professionals on the five-member board.

The Board is also responsible for regulating hospital budgets, regulating health insurance rates and maintaining Vermonter's health care data systems, as part of their core mission to provide every Vermonter with access to high quality, affordable health care, while at the same time reducing duplication and controlling health care costs.

Each decision the GMCB makes stands to have considerable impact on every health care clinician and most importantly, every patient in the state. Health care professionals have been trained to take care of patients and their clinical experience can be invaluable when grappling with critical health care reform issues.

VMS Executive Director Jessa Barnard says, "That clinician perspective is unique, and having someone who's been in the exam room with patients, managed patient care and seen how health care works on the ground can provide critical insight."

Parallels have been drawn between the GMCB and the Public Utility Commission to suggest that health care professionals should not make decisions as part of the GMCB. There are very little parallels between the GMCB and PUC, as the PUC is a quasi-judicial entity that deliberates behind closed doors. In contrast, GMCB deliberations are required to be held in public and are subject to public meeting laws, meaning that all contributions of a health care professional and appropriate decisions regarding recusal, would be subject to public monitoring. The statute creating the Board already provides protection against conflicts of interest by vetting applicants for impartiality and providing a thorough recusal process.

The Board benefitted from a physician member, Dr Karen Hein, at its inception and most recently Dr. Allan Ramsay, a primary care doctor and Betty Rambur, a registered nurse, provided the clinician perspective to the Board. That clinician perspective is critical to ensuring the quality of health care in Vermont. This on-the-ground experience can help other regulators on the board understand whether a great concept on paper would translate to better patient care in the exam room.

Like all Vermonters, we are dependent on the success of the GMCB in implementing the ACO/All Payer Model, increasing access to quality primary care, controlling the rate of growth of health care costs and maintaining a viable health insurance market in the state. Please support the requirement of a health care professional on the GMCB by taking the bill up in your Committee and voting YES on S.42.

Sincerely,

Vermont Medical Society

American Academy of Pediatrics Vermont Chapter

Vermont Academy of Family Physicians

Physician Assistant Association of Vermont

Vermont Psychiatric Association

Bi-State Primary Care

VNAs of Vermont

Vermont Dental Society

Vermont Psychological Association

Vermont Nurse Practitioners Association

American Nurses Association Vermont

American Lung Association Vermont

Vermont Climate and Health Alliance

Vermont Association of Naturopathic Physicians