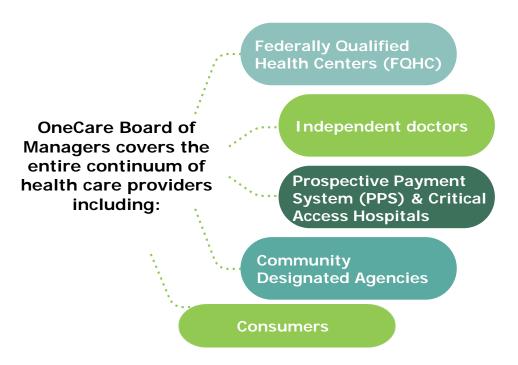
OneCare Vermont Board of Managers





Key Facts about the Board

- Representative Board to ensure voices of **all provider types** are present
- Requires "supermajority" vote to decide important key issues
- Use committees to process issues/make recommendations





Vermont Board of ManagersOneCare Vermont Board as of January 2019

| Seat | Individual |
|------------------------------------|---|
| Community Hospital - PPS | Jill Berry-Bowen - CEO Northwestern Vermont Health Care |
| UVM Health Network | John Brumsted, MD - Chief Executive Officer |
| Consumer (Medicare) | Betsy Davis - Retired Home Health Executive |
| At-Large | Steve Gordon - CEO Brattleboro Memorial Hospital |
| UVM Health Network | Todd Keating - Chief Financial Officer |
| Dartmouth-Hitchcock Health | Sally Kraft, MD – Vice President of Population Health |
| Dartmouth-Hitchcock Health | Steve LeBlanc - Executive Vice President |
| UVM Health Network | Steve Leffler, MD - Chief Population Health Officer |
| Consumer (Medicaid) | Sierra Lowell – Nursing Student |
| Skilled Nursing Facility | Judy Morton - Regional Executive Director Genesis |
| Mental Health | Tomasz Jankowksi - CEO Northeast Kingdom Human Services |
| FQHC | Pamela Parsons - Executive Director Northern Tier Center for Health (NOTCH) |
| Dartmouth-Hitchcock Health | Joe Perras, MD - CEO Mt. Ascutney Hospital |
| Home Health | Judy Petersen - CEO VNA of Chittenden/Grande Isle Counties |
| Independent Physician | Toby Sadkin, MD - Primary Care Health Partners |
| Consumer (Commercial) | John Sayles - CEO Vermont Foodbank |
| Independent Physician | Vacant (To be Seated in March) |
| FQHC | Vacant (To be Seated in February) |
| Community Hospital-Critical Access | Vacant (To be Seated in February) |
| At-Large Seat | Vacant (To be Seated in February) |

OneCare Vermont Financial Flow

Payer Fixed Health Care Cost ~\$843 million

(Medicaid, Medicare, BCBSVT)

Health Care Reform (HCR) Investments ~\$37 million

(Medicaid, Medicare, BCBSVT, Hospitals)

Pay Directly to Delivery System: (Fee for Service \$528 million)

- All Providers other than Participating Hospitals including:
 - FQHCs
 - Independent Primary Care & Specialists
 - Home Health & Hospice, Designated Agencies, Skilled Nursing Facilities

Pay OneCare Monthly for: (\$352 million)

- \$315 Million Hospital Fixed Prospective Payment Allocation (includes all services, including hospital employed primary care)
- \$37 Million Health Care Reform Investments for OneCare Population Health Management

Hospital & CPR Practices

- Fixed Prospective Payments
- Population Health Management Payments
- Care Coordination Program Payments
- Value Based Incentive Fund

Non-Hospital Attributing Practices

- Population Health Management Payments
- Care Coordination Program Payments
- · Value Based Incentive Fund

Non-Attributing Practices

- Care Coordination Program Payments
- Value Based Incentive Fund



Efforts to Proactively Address Social Determinants

Statewide

Care Coordination

- Integrated Care Team and Person Focused
- Data Informed and evolving to more systematically capture Social determinants of Health

Rise VT

 RiseVT is a unique public health movement that integrates wellness and prevention into the healthcare delivery system

Pilots

❖ DULCE

 Parent Child Center Partnership at 3 new sites in Franklin, Windsor, Chittenden County

Data Informed Identification

 Algorex Health and pediatricians, evaluating the reliability of augmenting risk stratification models to include social determinants of health data

St. Johnsbury

 Geographic focus to further invest in prevention interventions and expand care model to new populations

Innovation Grants

 Funds that support innovative evidenced based (or informed) programs that align with OneCare's priorities- such as addressing social determinants of health



Investments in Vermont's Delivery System

| Delivery Support | Annual Investment |
|--|-------------------|
| Primary Care Population Health Support | ~\$ 5.6 M |
| Complex Care Coordination (Primary Care, HH, DAs, AAA) | ~\$ 9.1 M |
| Value Based Incentive Funds (70% Primary Care and 30% participating providers) | ~\$7.8 M |
| Comprehensive Payment Reform (Independent Primary Care) | ~\$ 2.25 M |
| Specialists Payment Reform (Select Specialists) | ~\$ 2.0 M |
| Primary Prevention (Rise VT) | ~\$ 1.0 M |
| DULCE, Howard Center/ SASH, and St. Johnsbury Pilots | ~\$ 600,000 |
| SASH | ~\$ 3.8 M |
| Community Health Teams | ~\$ 2.3 M |
| PCMH Payments (Primary Care- Blueprint) | ~\$ 1.8 M |
| Innovation Fund | ~\$ 1 M |
| Total | ~\$37.25 M |

