



OneCare Vermont

March 24, 2020

Senator Patrick Leahy
United States Senate
437 Russell Senate Building
Washington, DC 20510

Senator Bernie Sanders
United States Senate
332 Dirksen Building
Washington, DC 20510

Congressman Peter Welch
United States House of Representatives
2187 Rayburn House
Office Building
Washington, DC 20510

Dear Senators Leahy and Sanders and Representative Welch,

I am writing in support of the National Association of Accountable Care Organizations (NAACOs) recommendations to Centers for Medicare & Medicaid Services (CMS) to assure that clinicians and organizations that are part of Advanced Alternative Payment Models (APMs) do not face further administrative burden and financial loss because of their transition to Value Based APMs. In addition to NAACOs, the American Academy of Family Physicians, American College of Physicians, American Hospital Association, American Medical Group Association, America's Essential Hospitals, Association of American Medical College, Federation of American Hospitals, HealthCare Transformation Task Force, and Medical Group Management Association endorsed these recommendations. The recommendations are as follows:

1. Hold clinicians harmless from performance-related penalties for the 2020 performance year, particularly those in two-sided risk APMs. At a minimum, make appropriate adjustments to address the impact of COVID-19 on financial expenditures, performance scores, patient attribution, and risk adjustment.
2. Hold clinicians and ACOs harmless from quality assessments and reporting obligations for the 2020 performance year.
3. Consider additional options to support APM participants, including up front funding opportunities and reinsurance options.

4. Extend application timelines and/or provide additional application opportunities to join Alternative Payment Models.
5. Extend the upcoming March 31 MSSP and Merit-based Incentive Payment System (MIPS) reporting deadlines for 2019 data to at least June 30th and consider additional extensions as warranted.
6. Extend the MIPS measure submission deadline for measure developers for the 2021 performance year to at least July 1, possibly later as the situation evolves.
7. Commit to a gradual implementation timeline for the MIPS Value Pathway.

Although not all of these recommendations impact Vermont, many of them do, in part because Vermont has been a pioneer in advancing the necessary transition to value-based care. As you are aware, Vermont's Medicare ACO Initiative is tailored to Vermont ACO(s) under the Vermont All-Payer Model. Thousands of providers in health care and community agencies (home health, housing, mental health, Area Agencies on Aging) participate in one or more of our payer programs in order to help the state transition away from fee for service delivery system to a value based system of delivery. Currently there are over 200,000 attributed lives in the Medicare, Medicaid, and Commercial programs.

This pandemic is unprecedented and is putting significant strain on our provider resources. We urge you to support these recommendations nationally and locally. We are also working with our other payer partners, the Agency of Human Service, and our regulators here in Vermont to secure support. We will look to coordinate all of these efforts with the signers of the Vermont model. Vermont clinicians and community organizations should not be financially harmed because of their leadership in APMs and value based care. OneCare Vermont providers need assurance that their tireless efforts to fight the pandemic will not result in penalties because of their participation in the Medicare initiative. We urge you to show your support for Vermont's health care providers and community organizations and the future of Vermont's health care reform efforts.

Respectfully,



Vicki Loner RN.C, MHCDS
Chief Executive Officer

CC: Governor Phil Scott
Mike Smith, Secretary of the Agency of Human Services
Ena Backus, Director of Health Care Reform
Kevin Mullin, Chair Green Mountain Care Board