



# State Auditor Audits Pertaining to Health Care Reform

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# Overview

Our goal is to help you make informed decisions.

- Very briefly discuss what we learned during two ACO Model audits
- Discuss what we learned during a recent Blueprint audit

# Vermont's All-Payer ACO Model

Report of the Vermont State Auditor



DOUGLAS R. HOFFER  
Vermont State Auditor

## *Vermont's All-Payer Accountable Care Organization (ACO) Model*

An Overview of the All-Payer ACO Model  
and the State's Oversight of Vermont's  
Only ACO, OneCare Vermont, LLC.

June 26, 2020

Rpt. No. 20-02

This was primarily a descriptive audit.

## Findings:

- GMCB had not developed a methodology to determine whether OneCare's operating costs will be greater or less than the benefits of the ACO Model.
- Six of the 22 quality measures in the All-Payer Agreement had baselines that were either the same or higher than their corresponding 2022 targets

# All-Payer ACO Model Implementation Costs

Report of the Vermont State Auditor



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## *All-Payer ACO Model Implementation Costs*

Department of Vermont Health Access  
Provided Substantial Funding for OneCare's  
Operating Costs (Which Have Exceeded  
Reported Savings) But Has No Assurance that  
OneCare Used All Funds for Their Intended  
Purposes

Released in June 2021, this audit primarily focused on the amount of money that State was paying OneCare's operating costs.

- DVHA was the only insurer that gave money to OneCare for its operating costs.
- From 2017 through 2019, the model cost DVHA \$26 million more than it saved.

June 18, 2021

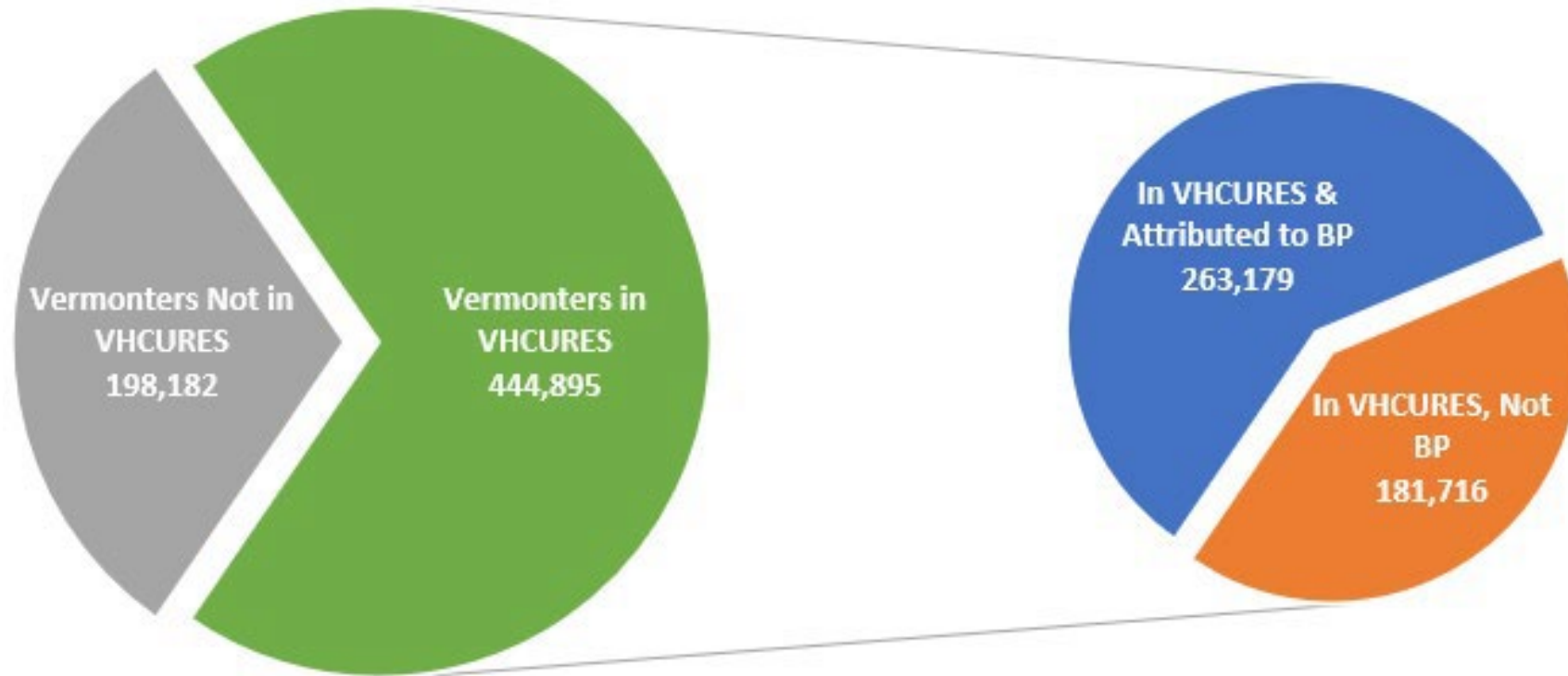
Rpt. No. 21-05

# Takeaways from ACO Audits

- It is prudent to know exactly where we are before we establish expectations for where we want to be (i.e., determine baselines before setting targets).
- If a goal of a reform effort is to save money, the cost of implementing that effort should be considered in the savings calculations.

# Vermont Blueprint for Health

Number of Vermonters in VHCURES and Attributed to Blueprint (BP)



# Vermont Blueprint for Health

Report of the Vermont State Auditor



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## *Vermont Blueprint for Health*

Blueprint Is Not Demonstrating  
Whether It Is Improving Health  
Outcomes or Controlling Health Care  
Costs

February 3, 2025

Rpt. No. 25-02

Released in February 2025, this audit primarily focused on whether Blueprint was measuring and reporting on its effects.

- Blueprint was not assessing the program's impact and was misleading about cost savings.

# Vermont Blueprint for Health

Beyond these utilization measures, individuals attributed to Blueprint PCMH practices showed a lower overall health claims cost, as shown in the table below.

Per Member Per Year Medical and Pharmacy Claims for All Individuals

Year Ending	Blueprint Attributed	Non-Blueprint Attributed	Difference
2019	\$8,059.97	\$10,435.74	\$2,376.17
2020	\$7,711.31	\$10,298.18	\$2,586.86
2021	\$8,254.25	\$11,005.17	\$2,750.91
2022	\$8,580.73	\$11,253.14	\$2,672.41

Furthermore, the annualized rate of increase of overall claims is 1.6% for Blueprint PCMH attributed individuals compared to 1.9% for non-Blueprint attributed individuals (not adjusted for inflation).

This analysis provides a recent year update to past work done on the Blueprint's effectiveness at controlling health care costs and providing high quality primary care to Vermonters.

# Vermont Blueprint for Health

- Blueprint cited Centers for Medicare and Medicaid Services study in 2017 that determined Blueprint resulted in \$64 million in Medicare savings.
- Blueprint was not mentioning that the same study determined expenditures for child Medicaid beneficiaries increased between \$57 and \$67 million relative to the comparison group, and expenditures for adult Medicaid beneficiaries increased by \$40 million.

# Vermont Blueprint for Health

- Blueprint has had a performance bonus payment program since 2016.
- Blueprint did not provide any evidence that they evaluated the effectiveness of this program.

# Takeaways from the Blueprint Audit

Information provided to decision makers and the public should be clear about:

- What the information means
- What the information does not mean
- Any limitations to the information

Evaluating a program's impact is more than presenting data.

# Questions?