



**BlueCross BlueShield
of Vermont**

An Independent Licensee of the Blue Cross and Blue Shield Association.

Don C. George
President and Chief Executive Officer

October 13, 2016

Peter Shumlin
Governor, State of Vermont
109 State Street, Suite 6
Montpelier, Vermont 05609

Dear Governor Shumlin:

Thank you for the opportunity to review the All Payer Model (APM) Agreement that your office and the Green Mountain Care Board have negotiated with the Center for Medicare and Medicaid Services. Blue Cross Blue Shield of Vermont (BCBSVT) has long advocated for comprehensive health care system reform and population health management. The programs we have created through our commitment to workplace population health can contribute to and flourish in a system where more Vermonters have access to appropriate care; the APM presents that very opportunity. BCBSVT agrees that new payment methodologies will initiate delivery system changes, which is crucial to the creation of a reformed health care system that will control cost and improve outcomes for Vermonters.

The APM represents an opportunity for Vermont to align value-based payments across the entire system and create incentives that will transform our care delivery system to improve health outcomes of Vermonters and make health care costs more affordable. Successfully navigating the myriad unknown implementation details and decisions that lie ahead will be critical to achieving the goals of reform. We believe a strong, multiple-stakeholder, public and private partnership will be vitally important in this journey.

Improving consumer affordability will be a primary measure of the APM's success and two factors will be critical components. First, this effort must produce a renewed commitment to funding Medicaid adequately in order to constrain the shifting of cost to Vermonters with private insurance. Second, to make care more affordable, it is important that savings achieved by improvements in the system be shared with the employers and consumers that pay the bill. As you have rightly said before, "if the health care system wins, consumers must win, too."

BCBSVT is enthused about the prospect of contributing to comprehensive health care system reforms that will improve health outcomes and control costs across our entire population. As the state's largest health plan, providing health care coverage to 240,000 Vermonters, we pledge our leadership to support and partner with Vermont's health care system and the State of Vermont as we take advantage of this opportunity.

Sincerely,

A handwritten signature in blue ink that reads "Don George".

Don George

October 24, 2016

Peter Shumlin
Governor, State of Vermont
109 State Street, Suite 6
Montpelier, Vermont 05609

Al Gobeille
Chair, Green Mountain Care Board
3rd Floor City Center
89 Main Street
Montpelier, Vermont 05620

Dear Governor Shumlin and Chair Gobeille,

We are writing on behalf of the Boards of Directors for the Vermont Care Organization (VCO) and its affiliated ACOs OneCare Vermont (OneCare) and Community Health Accountable Care (CHAC), each of which has endorsed providing this letter of support for the State of Vermont to pursue the All Payer Model.

We endorse the All Payer Model (APM) Agreement negotiated with the Centers for Medicare and Medicaid Services (CMS). We believe it represents a unique opportunity to structure the value-based reform model in a coordinated way appropriate for Vermont as we build on our capabilities and leadership to date. We believe that the APM Agreement provides a good framework on which to build the transformation of Vermont's health care system and, in turn, achieve the aims of health care reform.

Ultimately, of course, successful implementation of the APM in Vermont depends upon equally positive outcomes in developing effective care delivery support systems and managing health expenditures under the detailed Model elements still to come. As that important work unfolds, we believe some elements are crucial to drive the level of APM success desired by all and to engender strong provider support and sustained participation in the ACO. These key elements include:

- Medicaid must be a responsible payer including a multi-year approach to minimize continued growth of the cost shift. This responsibility must include providing payment equity for all services rendered by out of state providers who are willing to participate in Vermont's ACOs and the APM
- There must be strong support through all available mechanisms to provide resources for a redesigned and adequate revenue model for primary care practices of all types in Vermont
- The shift from fee-for-service to value-based revenue models through ACOs must be done without jeopardizing the service capabilities and solvency of Vermont's hospitals, doctors, and community based providers of care and services

- We need financial support for the direct costs of our transformative program and infrastructure, especially in early years when we must invest in the programs which will generate full results years later, and in recognition that providers through ACOs are assuming risk and duties now held by payers, and will be living under a mixed models as we build scale in alternative payment models
- Vermont and CMS must allow the provider-led ACO model to work without undue encumbrances or regulatory requirements, and work with us to converge fragmented programs and efforts under a unified model coordinated by the ACO

We believe with success on these elements, Vermont Care Organization can be a true leader and partner with the State of Vermont, CMS, Commercial Health plans and all providers to deliver the targeted outcomes for the APM. Even more importantly, success in these critical elements will permit our ACO and its provider members deliver a better system of health for our families, co-workers, and fellow citizens across the state.

We look forward to direct engagement with the Administration and GMCB as we move forward with APM if pursued by the State. Our plan calls for using the VCO as the central entity for planning and coordination, and for overseeing a unified, scalable infrastructure to support the new models of care and payments to providers. Initially, we will be using the OneCare and CHAC organizations as the primary contracting entities for ACO payer programs and providers through 2018. This model allows us to offer flexibility on the pathway and pace toward a fully accountable model, but still provides aligned incentives and common support infrastructure for all provider communities as they take their reform journey.

We recognize the complexity of the negotiations that led to the APM Agreement and appreciate the time and effort that went into it on the part of the Administration team, the GMCB and CMS. We will follow your example of sustained effort and perseverance toward a high quality and cost-efficient health system for Vermont.

Sincerely,

Thomas Huebner

Thomas Huebner
Chair, The Vermont Care organization

Kevin Kelley

Kevin Kelley
Chair, Community Health Accountable Care

Kevin Stone

Kevin Stone
Chair, OneCare Vermont Accountable Care Organization



OneCareVermont

356 Mountain View Drive
Suite 301
Colchester, VT 05446

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onecarevt.org

October 17, 2016

Peter Shumlin
Governor, State of Vermont
109 State Street, Suite 6
Montpelier, Vermont 05609

Dear Governor Shumlin:

I am writing you in support of the All Payer Model (APM) which your Administration and the Green Mountain Care Board have negotiated with the Centers for Medicare and Medicaid Services (CMS). I have held three roles through the development of the APM; Senior Vice President for Accountable Care and Revenue Strategy at the University of Vermont Health Network, founding CEO of the OneCare Vermont ACO, and most recently CEO of the Vermont Care Organization (VCO) which was created to be a unified statewide ACO network and population health organization for Vermont. Your teams' efforts and that of the GMCB, in alignment with CMS to define a Vermont-specific implementation of the value-based revolution, would offer the prospect of true provider-led transformation and improved outcomes for Vermonters. The APM represents a once-in-a generation opportunity for Vermont, which I do not believe is replicable if we don't proceed at this time.

Over the past 24 months, I have been among those who have worked to build strong connections across all parts of our health system in Vermont. Based on the level of provider engagement I have witnessed, as demonstrated through thousands of hours of meetings and travel time for ACO board meetings, brainstorming work groups, program planning, and data review, I can tell you first hand that there is a large "coalition of the willing" in Vermont ready to build the nation's most prominent model for a high quality, patient-focused, and cost efficient health system. Having a documented model representing an aligned set of rules across payers and programs (as exists in the APM) will clearly help us succeed.

As the CEO of the OneCare Vermont ACO and the Vermont Care Organization, I offer you my recommendation that the State of Vermont should take advantage of this unique opportunity with the federal government. Much work is still to come as we implement the model, and those details will ultimately determine the full level of provider support that the APM will achieve. I look forward to continuing to bring deep and broad provider support for value-based care and payment reform to the table through the APM.

Sincerely,

Todd B. Moore
CEO, OneCare Vermont Accountable Care Organization
CEO, Vermont Care Organization
SVP, Accountable Care and Revenue Strategy, University of Vermont Health Network

VERMONT LEGAL AID, INC.

OFFICE OF THE HEALTH CARE ADVOCATE

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OFFICES:

BURLINGTON
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OFFICES:

MONTPELIER
SPRINGFIELD

October 21, 2016

The Honorable Peter Shumlin
Office of the Governor
109 State Street
Montpelier, VT 05609

Re: Letter of Support for Vermont All-Payer Accountable Care Organization September 2016
Model Draft Agreement

Dear Governor Shumlin,

On behalf of the Office of the Health Care Advocate, I am writing to show support for the Vermont All-Payer Accountable Care Organization Model Agreement. Our office believes the model holds promise for beginning to address our health care system's unsustainable cost growth and poorly coordinated care delivery. The Office of the Health Care Advocate (HCA) is a special project of Vermont Legal Aid. It provides consumer assistance to individual Vermonters on questions and problems related to health insurance and health care and also engages in a wide variety of consumer protection activities on behalf of the public, including advocacy before the Green Mountain Care Board, other state agencies and the state legislature. Our office has reviewed the version of the draft agreement released on September 29, 2016, so this letter does not pertain to any changes made to the agreement after that time.

Starting in October 2015, the HCA participated in weekly stakeholder meetings to discuss the development of the all-payer model (APM). We pushed for regulatory and consumer protection provisions for ACOs at the legislature that were included in Act 113 of 2016. We also participated in work groups to develop the population-level quality measures that are included in the agreement. We are pleased with the population health measures included in the September draft and believe they will help our health care system focus on important state-level goals.

Our ongoing support of the APM is contingent on how important issues of concern to consumers are addressed in the model's implementation. We detail our concerns with the APM, including access to care, quality of care, consumer protection, consumer and patient engagement,

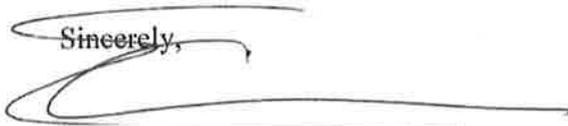
The Office of the Health Care Advocate, previously named the Office of Health Care Ombudsman, is a special project of Vermont Legal Aid.

transparency, social determinants of health, and integration in our paper: *Consumer Principles for Vermont's All-Payer Model*.¹ Act 113 and the APM agreement give the Green Mountain Care Board and ACOs significant discretion. For the model to ultimately be successful, the Green Mountain Care Board must implement robust regulatory structures with patient protections, and the participating ACO(s) must employ comprehensive processes to ensure robust quality measurement, reporting, and transparency.

The APM is a state-wide model meant to create a coordinated and unified health care system for all Vermonters. For the model to be successful, the state must adequately fund its Medicaid program. Additionally, to prevent further fragmentation in the health care system all Medicare beneficiaries should receive the same benefits enhancements regardless of their attribution to an ACO. Limiting Medicare benefits enhancements to only certain individuals is harmful to the goals of the APM and likely to cause confusion for beneficiaries and providers.

Increasing costs and lack of care coordination create significant barriers to quality health care for a growing number of Vermonters. The current system therefore must change. If the APM is implemented thoughtfully and with clear strategies for each of the areas listed above, we believe it has the potential to bend the health care cost curve and improve care coordination.

Sincerely,



Eric Avildsen,
Executive Director
Vermont Legal Aid

¹ Office of the Health Care Advocate. *Consumer Principles for Vermont's All-Payer Model*. November 2015. Attached and available at: <http://www.vtlawhelp.org/health-care-policy>.

VERMONT MEDICAL SOCIETY

Alfred Gobeille, Chair
Green Mountain Care Board
3rd Floor City Center
89 Main Street
Montpelier, Vermont 05620-3601

Lawrence Miller
Senior Advisor and Chief of Health Care Reform
State of Vermont
109 State Street, 5th floor
Montpelier, Vermont 05609

October 17, 2016

Dear Mr. Gobeille and Mr. Miller,

On behalf of the physician members of the Vermont Medical Society, I am pleased to provide the Society's support for the Draft Vermont All-Payer Accountable Care Organization Model Agreement.¹ As the VMS has publically stated on Vermont Public Radio: "the Medical Society believes this is a sincere effort to move in a good direction."

To the VMS' knowledge, the agreement represents the first time that the federal government and a state have developed a draft reform framework for a statewide all-payer framework focused on improving population health. The VMS also believes the draft agreement is consistent with the GMCB's mission "to improve health care quality and moderate cost for Vermonters."

During its November 7, 2015 annual meeting, the VMS adopted a policy resolution on Criteria for an All-payer ACO Model for Vermont² and the resolution conditions the VMS' willingness to support the State of Vermont's agreement with the Center for Medicare & Medicaid Innovation on the waiver's satisfactory inclusion of a number of provisions. The provisions included the following:

- The agreement should commit the State of Vermont to increasing Medicaid reimbursement to at least the negotiated or applicable Medicare level; and

¹ http://gmcboard.vermont.gov/sites/gmcb/files/documents/payment-reform/DRAFT_APM_Agreement_UNDER_LEGAL_REVIEW.pdf

² <http://www.vtmd.org/sites/default/files/files/2015%20Waiver.pdf>

- The agreement should ensure physicians' freedom of choice, so that physicians deciding not to join an ACO would be able to elect to continue to operate under traditional Medicare, Medicaid and commercial insurer payment policies; and
- The agreement should not reduce Vermont's already low predicted spending per Medicare enrollee; and
- The agreement should not penalize providers for receiving incentive payments under MACRA's merit-based incentive system (MIPS) and its alternative payment models (APMS).

On October 13, the VMS sent a comment letter to GMCB Chair Al Gobeille with a number of suggested amendments to the draft agreement that would more closely align the document with the VMS' provisions.

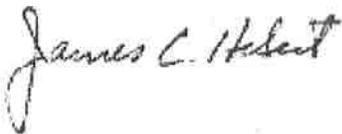
In an email dated October 17, Lawrence Miller indicated that the VMS' "comments are absolutely consistent with our thinking and I expect three of the four specific recommendations will be accepted by CMS for inclusion in the final draft. The fourth recommendation is already addressed in statute, consistent with your recommendation, so CMS Office of General Counsel is not likely to approve inclusion in the document."

The Society's support is conditioned on the Green Mountain Care Board, the State of Vermont and CMS working with the VMS to achieve the aforesaid criteria during the six years term of the agreement.

Finally, I want to thank you and your colleagues for the extraordinary time and effort you have devoted to working with representatives from the Centers for Medicare and Medicaid Services in negotiating the Draft Vermont All-Payer Accountable Care Organization Model Agreement. Its successful implementation could be a transformative event in the evolution of our nation's health care system.

Please let me know if you have any questions or if I can be of further assistance.

Sincerely,



James C. Hebert, MD,
President

cc: Green Mountain Care Board
VMS Council



VERMONT ASSOCIATION OF
HOSPITALS AND HEALTH SYSTEMS

October 17, 2016

The Honorable Peter Shumlin
Office of the Governor
109 State Street
Montpelier, VT 05609-0101

Dear Governor Shumlin:

On behalf of the health care provider organizations represented by the Vermont Association of Hospitals and Health Systems, I am writing to express support for Vermont's All-Payer model agreement currently in the final stages of negotiation. Our principles for health reform include reducing health care costs to Vermonters, access for everyone and patient choice of provider. We believe the All-Payer model has the potential to help us better align Vermont's health care system with these principles.

At the same time, many details are still needed to enable hospitals to plan for a new environment and ensure that they can continue serving as a vital resource to their communities. As these important steps are taken, we encourage your Administration to review our recent comments to the Green Mountain Care Board on the draft agreement. Those comments are attached to this letter and we appreciate you taking the time to carefully consider them.

We are encouraged by the all-payer model's potential to strengthen our health care system and make it more affordable and effective for patients as well as providers. As we learn additional details, the Association will continue to offer feedback on how the model must continually adapt to new information and changing circumstances.

Thanks for your consideration.

Sincerely,

Jeff Tieman
President & Chief Executive Officer
Vermont Association of Hospitals and Health Systems

cc: Lawrence Miller, Chief of Health Care Reform
Al Gobeille, Chair of Green Mountain Care Board



October 15, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street
The Pavilion
Montpelier, VT 05609

Dear Gov. Shumlin:

On behalf of Brattleboro Memorial Hospital, I am writing to express our support for Vermont's all-payer model agreement currently in the final stages of negotiation. This new model under consideration complements BMH's principles related to improved patient access, community initiatives focused on improving care and reducing healthcare costs. We appreciate your efforts and those of Al Gobeille and the Green Mountain Care Board in working to develop Vermont's this new model of healthcare and payment reform.

We look forward to our participation in the model's continued development and implementation. Many details will need to be addressed and we will need clear understanding of how the new model will impact our Medical Staff, employees and most importantly our patients and our community. BMH also supports VAHHS's recent comments to the Green Mountain Care Board on the draft agreement.

Thank you again for leading this important initiative and we look forward to our involvement in creating a sustainable, cost effective and responsible healthcare system.

Sincerely,

Steven R. Gordon
President & Chief Executive Officer
Brattleboro Memorial Hospital

cc: Lawrence Miller, Chief of Health Care Reform
Al Gobeille, Green Mountain Care Board Chair



Brattleboro Retreat

MENTAL HEALTH AND ADDICTION CARE

October 17, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street
The Pavilion
Montpelier, VT 05609

Dear Governor Shumlin:

On behalf of the Brattleboro Retreat I am writing to express support for Vermont's all-payer model agreement currently in the final stages of negotiation. We endorse the model's principles for health reform including the reduction of health care costs to Vermonters, access for everyone, and patient choice of provider. I believe the all-payer model has the potential to help better align Vermont's health care system with these principles.

At the same time, many details are still needed to enable hospitals such as the Retreat to plan for a new environment and ensure that they can continue serving as a vital resource to our community. As these important steps are taken, I encourage your Administration to review my recent comments at the public meeting in Brattleboro where I raised concerns about the need for more resources for mental health and addiction treatment.

I am encouraged by the all-payer model's potential to strengthen our health care system and make it more affordable and effective for patients and providers alike. As we learn additional details, the Retreat will continue to offer feedback on how the model must continually adapt to new information and changing circumstances.

Thanks for your consideration.

Sincerely,

Louis Josephson, Ph.D.
President and Chief Executive Officer

cc: Lawrence Miller, Chief of Health Care Reform
Al Gobeille, Green Mountain Care Board Chair

Miller, Lawrence

From: Arthur Mathisen <amathisen@CHSI.org>
Sent: Monday, October 17, 2016 4:12 PM
To: Miller, Lawrence
Subject: APM Agreement

Hi Lawrence,

Although VAHHS has written a letter on behalf of Vermont Hospitals supporting the signing of the all-payer model agreement, I wanted to send a personal email expressing support of the signing of the APM agreement. I believe that the negotiated agreement is the best current opportunity for us to redesign and improve health care in Vermont.

As we move forward, we must be very deliberate and thorough with our analysis of the model to ensure hospitals and all other providers are able to maintain key services and remain financially viable.

I'm confident that Vermont can continue moving toward a model of health care that improves overall access to care and achieves better overall outcomes while making health care costs sustainable for years to come.

Sincerely,

Art Mathisen
Copley Hospital CEO



Gifford Health Care

44 South Main Street, Randolph, Vermont 05060
802-728-7000 • fax 802-728-4245

October 17, 2016

Peter Shumlin
Governor, State of Vermont
109 State Street, Suite 6
Montpelier, VT 05609

Dear Governor Shumlin,

I am writing this letter in regard to the All Payer Model (APM) agreement that your administration and the Green Mountain Care Board (GMCB) have negotiated with the Centers for Medicare and Medicaid Services. Gifford Health Care is committed to delivering the highest quality health care services and reducing the cost of care to patients in our health care system. We believe the APM creates an opportunity to redesign our health care system in a manner consistent with these goals.

However, we recognize that the details of the APM are yet to be finalized and we remain concerned about our ability to continue as a critical resource to our community within this new health care environment. We ask that your administration and the GMCB consider the comments contained in the Vermont Association of Hospitals and Health Systems' recent letter to you.

Gifford has a long history of providing innovative, quality health care services throughout the central Vermont area. We look forward to working with all stakeholders to design a health care system that is affordable, accessible, and of the highest quality.

Respectfully,

Daniel A. Bennett
President and CEO

Gifford Primary Care,
OB/GYN and Midwifery, and
Pediatric and Adolescent Care

Bethel Health Center
Chelsea Health Center
Gifford Health Center at Berlin

Rochester Health Center
Twin River Health Center



October 14, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street
The Pavilion
Montpelier, Vermont 05609-0101

Dear Governor Shumlin:

On behalf of the Board of Trustees of Grace Cottage Hospital, I am sending this letter of support for the negotiated All Payer Waiver draft agreement with the Center for Medicare and Medicaid Services (CMS). We note and support the overarching population or community health goals that are important to improving the lives of Vermonters: 1) improving access to primary care, 2) reducing deaths from suicide and drug overdose, and 3) reducing prevalence and morbidity of chronic disease. Increasing the financial focus on primary care, preventable care, and community health initiatives will help to achieve the goals being sought by this waiver.

While it is understood that participation is voluntary, the agreement has the ability to move our State forward in value-based healthcare reform. Much work remains to be done, we understand, by the ACO and providers in order to be ready for a system with very different health care incentives.

Sincerely,

A handwritten signature in blue ink, appearing to read "Roger Allbee".

Roger Allbee, CEO
Grace Cottage Hospital
802-365-3600

Cc: Lawrence Miller, Senior Advisor and Chief of Health Care Reform
Al Gobielle, Chair of the Green Mountain Care Board

Grace Cottage Family Health
802-365-4331

Grace Cottage Hospital
802-365-7357

Grace Cottage Rehabilitation
802-365-3637

Messenger Valley Pharmacy
802-365-4117



A Dartmouth-Hitchcock Affiliate

October 17, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street
The Pavilion
Montpelier, VT 05609

Dear Gov. Shumlin:

On behalf of the Board of Trustees of Mt. Ascutney Hospital and Health Center, I am writing to express support for Vermont's all-payer model agreement currently in the final stages of negotiation. We believe the all-payer model has the potential to help us better align Vermont's health care system to ensure access to health care for all citizens, while containing growth in costs.

At the same time, many details are still needed to enable hospitals to plan for a new environment and ensure that they can continue serving as a vital resource to their communities. Concerns about the lack of data left our Board of Trustees feeling some ambivalence in fully endorsing the all-payer model. We request that every effort be made to provide timely and detailed data regarding the impact of the new model on individual organizations. Timely provision of this data will enable each provider organization to fully understand the model and develop the appropriate structures and processes needed to facilitate successful outcomes.

We are encouraged by the all-payer model's potential to strengthen our health care system and make it more affordable and effective for patients and providers alike. We look forward to working with our other provider colleagues and ACO leadership to create the structures to support Vermont's all-payer model.

Thanks for your consideration.

Sincerely,

Gay L. Landstrom, PhD, RN
Interim Chief Executive Officer
Mt. Ascutney Hospital and Health Center

cc: Lawrence Miller, Chief of Health Care Reform
Jeff Tieman, Vermont Association of Hospitals and Health Systems
Al Gobeille, Green Mountain Care Board Chair



October 17, 2016

The Honorable Peter Shumlin
Governor
State of Vermont
109 State Street, Suite 6
Montpelier, Vermont 05609

(Via electronic mail: Lawrence.Miller@vermont.gov)

Dear Governor Shumlin:

I am writing on behalf of North Country Hospital to express our qualified support for the All Payer Model agreement that the Administration and the Green Mountain Care Board has negotiated with the Center for Medicare and Medicaid Services.

Here in the remote reaches of the Northeast Kingdom, North Country Hospital cares for the most socioeconomically challenged population in Vermont. Due to our small size and rural location, North Country has a special designation from the Center for Medicare & Medicaid Services as a Critical Access Hospital. The Critical Access Hospital program was created by Congress in the late 1990s to preserve access to healthcare in rural areas in the wake of numerous small hospital closures that occurred when the Medicare program enacted sweeping payment reform through the creation of the prospective payment system. Our support is qualified because we still don't know many of the specific details as to how this will affect North Country Hospital and our ability to provide access to critically needed health care services to the residents of the Northeast Kingdom.

Despite our circumspect response, we recognize the challenges facing Vermonters due to the rising cost of healthcare. We realize that nationwide, the healthcare system is evolving towards value-based payment. We believe that the All Payer Model as proposed is our best chance to achieve meaningful payment reform designed to advance the Institute for Healthcare Improvement's Triple Aim of improving the patient experience of care; improving the health of populations; and reducing the per capita cost of health care.

Thank you for your efforts to improve healthcare in Vermont and for the opportunity to share our thoughts on this important matter.

Sincerely,

Claudio Fort
President & CEO

Cc: Lawrence Miller, Senior Advisor and Chief of Health Care Reform
Al Gobeille, Chair, Green Mountain Care Board
Jeff Tieman, President & CEO, VAHHS



October 12, 2016

Office of the Governor
Attn: Lawrence Miller, Senior Advisor and Chief of Health Care Reform
5th Floor
The Pavilion, 109 State Street
Montpelier, Vermont 05609-0101

Dear Governor:

The purpose of this letter is to express Northeastern Vermont Regional Hospital's (NVRH) support of the negotiated draft All-Payer Model agreement between the State of Vermont and the Center for Medicare and Medicaid Services (CMS). As CEO of NVRH I have reviewed the draft agreement, understand the details of its content, and support the strategic intent of the agreement.

I have been involved with Vermont's health reform initiatives for many years, and have been directly involved at the leadership level in the details related to transforming health delivery systems and financing in Vermont from traditional methods to the innovative methods anticipated in the negotiated agreement. I look forward to working on the successful implementation of the concepts and goals included in the agreement.

I have participated right from the start of Vermont's State Innovation Model grant-related work, and am knowledgeable about the teamwork required and depth of expertise required to achieve our goals for better care, better access to primary care and improved patient experience, while restraining the growth of health care costs in future years. I am convinced Vermont is a great place to start this much-needed process. Please accept our support for this agreement.

Thank you!

Sincerely,

A handwritten signature in black ink, appearing to read "Paul R. Bengtson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Paul R. Bengtson, CEO



October 17, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street, The Pavilion
Montpelier, VT 05609

Dear Gov. Shumlin:

On behalf of the Northwestern Medical Center, I am writing in regard to the All Payer Model (APM) Agreement that your office and the Green Mountain Care Board have negotiated with the Center of Medicare and Medicaid Services to express our support for the agreement. We believe the all-payer model has the potential to help us transition to a health care delivery system we can sustain for the future.

We also understand there are many details still needed to be developed in order for all hospitals to plan for a new environment and ensure that they can continue serving as a vital resource to their communities. As these important steps are taken, we encourage your Administration to review the recent comments to the Green Mountain Care Board on the draft agreement offered by VAHHS. The current system we have is not sustainable and we support the opportunity for redesign. We are encouraged by the all-payer model's potential to strengthen our health care system and make it more affordable and effective for patients and providers alike. As we conduct an impact analysis and learn additional details, Northwestern Medical Center will continue to offer feedback on how the model must continually adapt to new information and changing circumstances.

Thank you for all your effort to get to this point in our quest to design a sustainable healthcare delivery system for Vermont.

Sincerely,



Jill Berry Bowen, CEO

cc: Lawrence Miller, Chief of Health Care Reform
Al Gobeille, Green Mountain Care Board Chair

Porter Medical Center, Inc.

Middlebury, VT 05753 • (802) 388-4701

Mr. Lawrence Miller
Chief of Health Care Reform
State of Vermont
Pavilion Office Building, 109 State Street
Montpelier, VT 05609

October 13, 2016

Dear Lawrence,

I am writing in support of the All Payer Waiver, and would like to elaborate on my current perspective based on my understanding of this initiative at this time.

At the Rutland community forum on this topic on October 12, I verbally expressed the support of Porter Medical Center for this All Payer Waiver. However, I qualified our support as "tepid" (a better word might be "cautious"). Without a doubt, we view the opportunity to have predictable revenue as a significant advantage over our current system of year to year unpredictability. Additionally, the focus on primary care, wellness, and chronic disease management aligns perfectly with our mission of caring for our community. We have outstanding health services in Addison County and a reasonably healthy and educated population and our community is ready for a system which rewards primary care, healthy lifestyles and integration of services. Also, we have leveraged our Blueprint for Health program progress throughout our community, and it would be a significant set-back to lose this funding. Finally, I agree with Mr. Gobeille and Governor Shumlin when they say that the rate in rise of cost for our current fee for service system is unsustainable.

However, there are several reasons I continue to express "cautious" support for the All Payer Waiver.

First, the plan is lacking in detail; and details matter. Second, we know that the all payer model as currently envisioned will cover only a portion of our patient population, leaving us in the challenging "a foot in each canoe" situation with some of our patient receiving care in a value based model, and others remaining in the volume/fee for service world. This paradigm makes it very challenging to go "all in" on population health.

As Governor Shumlin pointed out, "change is frightening". When we are contemplating an approach which really has not been tested nationwide and involves a service as important and costly as healthcare, I think we are all well-advised to move forward cautiously.

In summary, we at Porter Medical Center are cautiously optimistic that a value based payment system will help us achieve our mission of caring for our community, one patient at a time. We eagerly await further details.

Sincerely,



Fred Kniffin MD
Chief Executive Officer



Rutland Regional Medical Center
An Affiliate of Rutland Regional Health Services

160 Allen Street, Rutland, VT 05701 • www.rrmc.org • 802.775.7111

October 12, 2016

Peter Shumlin
Governor, State of Vermont
109 State Street, Suite 6
Montpelier, VT 05609

Dear Governor Shumlin:

I am writing to you in regard to the All Payer Model (APM) Agreement that your office and the Green Mountain Care Board have negotiated with the Center for Medicare and Medicaid Services. As you know I have participated in the planning for the APM for nearly two years. I chair the Vermont Care Organization which hopes to be the designated Accountable Care Organization (ACO) under the APM model.

I believe that the agreement that has been negotiated is the best available opportunity for us to redesign and reincent health care in Vermont.

As you know, there is still enormous work still to be done. An ACO needs to be designated. Contracts between all the payers and the ACOs need to be negotiated. Contracts between the ACO and providers need to be constructed. The ACO and providers still have much to do to be ready for a system with very different incentives.

Still I believe the status quo is not sustainable and this opportunity for redesign must be pursued.

Sincerely,

Thomas W. Huebner
President and CEO

TWH/jsb

October 17, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street, Pavilion
Montpelier, VT 05609

Dear Governor Shumlin,

On behalf of Southwestern Vermont Medical Center, I am writing in a show of support for the State of Vermont to sign the All Payer Model (APM) agreement which is currently in the final stages of negotiations with the Center for Medicare and Medicaid Services.

As we review the outline of the proposed agreement, we are encouraged that the plan addresses many of the principles of health care reform for the State of Vermont. We are also encouraged that the APM provides the opportunity to strengthen our health care system, with the goal of making it more affordable and efficient for all Vermonters.

SVMC understands that signing the APM agreement is only the first step and does not obligate SVMC to any provider contracts. However, we look forward to carefully reviewing the related contracts and more deeply analyzing the financial implications for our institution and for the community we serve.

Sincerely,



Thomas A. Dee, FACHE
President and CEO

cc: Al Gobeille, Chair of the Green Mountain Care Board
Lawrence Miller, Chief of Health Care Reform

THE
University of Vermont
HEALTH NETWORK

EXECUTIVE OFFICE

462 Shelburne Road
Suite 301
Burlington, VT 05401

October 17, 2016

Lawrence Miller
Senior Advisor and Chief of Health Care Reform
Office of the Governor
109 State Street
Montpelier, VT 05609-0101

Re: All-Payer Model Agreement

Dear Lawrence:

I am writing to express our support for the draft All-Payer Model (APM) agreement that has been negotiated by the State of Vermont and the Green Mountain Care Board with the Centers for Medicare and Medicaid Services (CMS).

The University of Vermont Health Network comprises two hospitals in Vermont and three in northern New York, along with the physician practices associated with them. Our goal is nothing short of achieving the Triple Aim: improving the health of our population, providing an excellent patient care experience, and making health care affordable. To reach this goal requires us, as providers of health care services, to come together with shared purpose, motivations and aligned incentives, so that our collaboration and integration activities create value for those we serve.

Together, we are writing a new prescription for the health of Vermonters: pay health care providers for keeping people healthy instead of just treating them when they are sick.

This is a change the UVM Health Network is committed to making. Last year, we set a goal of having 80% of our revenue tied to the overall health and wellness of our patients by 2018, rather than being paid for every test or procedure we perform or by our hospital admissions.

The draft APM model, which has been under negotiation for many months, is completely aligned with our vision, and would measurably impact our ability to transform how we get paid. It will bring new tools and resources to support the provider-led solutions that we have been innovating in Vermont for the past several years, with goals and outcomes that will have a meaningful impact on our communities.

THE
University of Vermont
HEALTH NETWORK

While there are many questions that remain to be answered, and details to be fleshed out, we look forward to working with the State of Vermont, the Green Mountain Care Board, and our collaborators across the care continuum to make the APM a successful tool for the transformation of Vermont's delivery and payment system.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Brumsted', with a large, stylized circular flourish at the end.

John Brumsted, MD
President and CEO, UVM Health Network
CEO, UVM Medical Center

THE
University of Vermont
MEDICAL CENTER

October 18, 2016

The Honorable Peter Shumlin
Governor of Vermont
109 State Street
The Pavilion
Montpelier, VT 05609

Dear Governor Shumlin:

I am writing on behalf of The University of Vermont Medical Center to express support for Vermont's All-Payer Model (APM) agreement that has been negotiated by the State of Vermont and the Green Mountain Care Board with the Centers for Medicare and Medicaid Services (CMS). Our principles for health reform include reducing health care costs to Vermonters, access for everyone, and patient choice of provider. We believe the all-payer model has the potential to help us better align Vermont's health care system with these principles.

As the only academic medical center and the largest provider of healthcare in the State we are committed to working together to improve the health of our communities. Our goal is to achieve the Triple Aim: improving the health of our population, providing an excellent patient care experience, and making health care affordable. To reach this goal requires us, as providers of health care services, to come together with shared purpose, motivations and aligned incentives, so that our collaboration and integration activities create value for those we serve. We believe the all-payer model has the potential to help us better align Vermont's health care system with these principles.

We are encouraged by the all-payer model's potential to strengthen our health care system and make it more affordable and effective for patients and providers alike. While there are many questions that remain to be answered, and details to be fleshed out, we look forward to working with the State of Vermont, the Green Mountain Care Board, and our collaborators across the care continuum to make the APM a successful tool for the transformation of Vermont's delivery and payment system.

Thanks for your consideration.

Sincerely,



Eileen Whalen, MHA, RN
President
The University of Vermont Medical Center

cc: Lawrence Miller, Chief of Health Care Reform
Al Gobeille, Green Mountain Care Board Chair