

Title: Vermont Medicaid Next Generation (VMNG) Accountable Care Organization (ACO) Program

Issuance Date: May 3, 2023

(Must be reviewed annually)

Applicable Regulations, Guidelines, and AHS Policy:

Federal statute or rule:

- 42 CFR 438.6 - Special contract provisions related to payment.

Vermont statute or rule:

- Act 48
- Act 54
- Act 113

Waiver:

Global Commitment to Health Waiver 1115

Other:

- GMCB Rule 5.0 ACO Oversight
- Vermont Medicaid Next Generation (VMNG) ACO Contract 42438

Purpose:

The Payment Reform Unit seeks to transition Vermont Medicaid's health care revenue model from Fee-for-Service payments to value-based payments with the goal of providing better, more efficient, coordinated care for Vermonters. In support of this goal, the Payment Reform Unit partners with internal and external stakeholders in taking incremental steps toward the integrated healthcare system envisioned by the Vermont All-Payer Accountable Care Organization Model agreement with the Centers for Medicare and Medicaid Services. The Payment Reform Unit is responsible for the implementation and oversight of the VMNG Accountable Care Organization (ACO) program, a financial model designed to support and empower the clinical and operational capabilities of the ACO provider network in support of the Triple Aim of better care, better health and lower costs.

Procedure:

This procedure focuses on the ongoing implementation and operation of the Vermont Medicaid Next Generation ACO program. The procedure assumes that the design phase and initial contract negotiation phase of this program have already been completed. Refer to DVHA's Payment Model Design SOP for a detailed description of payment model development for new models. The following outlines the standard activities which are monitored in compliance with the contract, and which occur on a regular basis in order to maintain a successful Medicaid Accountable Care Organization program.

- Ensure that reporting manuals and timelines are up to date, and that the VMNG program is adhering to its weekly, monthly, and quarterly reporting deadlines by maintaining a tracking sheet.
- Meet as needed with OneCare's operational team to ensure that the program is running smoothly and that any operational concerns are identified and addressed in a timely manner with minimal disruption to program operations. If issues are unresolvable between operations teams, escalate to DVHA Commissioner's Office for resolution via email or phone conference. This may include, but is not limited to, timely reporting, claims, utilization, attribution, or prior authorization process to name a few.
- Ensure that financial transactions are occurring correctly and as scheduled between DVHA's fiscal intermediary and the ACO, through routine check-ins with the fiscal agent and DVHA's Business Office.
- Distribute reports from the ACO to DVHA subject matter experts for review. Units which receive reports from the ACO for subject matter review include Provider/Member Relations, Special Investigations, Clinical Operations, Quality Unit, and the Vermont Chronic Care Initiative.
- Conduct financial validation exercises on a monthly and quarterly basis to ensure that reporting strategies on VMNG financial information between DVHA, Gainwell, and the ACO are aligned, data sources are consistent, and exclusions are applied uniformly.
- Conduct contract negotiation activities on an ongoing basis. These include, but are not limited to: identifying programmatic and financial arrangement elements for modification and conducting data analysis to determine impacts of such changes; liaising with DVHA leadership to prioritize changes; coordinate and facilitate series of contract negotiation meetings with appropriate leadership and subject matter expert representation; track and coordinate changes to contracting documentation.
- Conduct program approval activities, including (but not limited to):
 - Policy, Budget, Reimbursement (PBR) approvals within DVHA.
 - Adequate public comment period for any programmatic changes through DVHA's Global Commitment Register (GCR) process.
 - Federal approval from CMMI through the Global Commitment Payment Model approval process.

Revision History:

Date	Summary of Revisions
10/9/18	Draft
11/13/18	Accepted by OMU
3/6/20	Revised draft – new template
3/8/22	New template, reviewed by OMU.

Table 1 Revision History