



OneCare Vermont Accountable Care Organization Board of Managers Resolution Invoking Participation Waiver for Funded Projects

November 19, 2024

WHEREAS, OneCare participates in the Vermont All Payer ACO Model Vermont Medicare ACO Initiative and the Vermont Medicaid Next Generation Program. The Secretary of the Department of Health and Human Services by and through CMS, and the Department of Vermont Health Access, have provided certain waivers of federal and state fraud and abuse laws in connection with the Vermont All Payer ACO Model (“APM”), the Fraud and Abuse Waiver Notice for Vermont ACO Initiative, and the OneCare Medicaid contract;

WHEREAS, the waivers are intended to provide OneCare with flexibility to create arrangements that increase success in value-based care and that might not be permitted under the current federal and state health care regulatory schemes or that might be easier to accomplish without some of the strict requirements of those regulatory schemes; and

WHEREAS, OneCare has set the use of Fraud and Abuse Waivers to promote healthcare delivery system innovation as a strategic goal that will further the core activities of the ACO and further performance on established metrics for measuring quality, cost of care and access to care; and

WHEREAS, the Board of Managers has set aside funding for the use of Fraud and Abuse Waivers to promote performance on priority quality measures and delivery system goals, and after a competitive application process, funding has been awarded to eleven (11) projects, six (6) of which will involve Participation Waivers; and

WHEREAS, The Participation waivers are available when, among other things, the governing body of the ACO has reviewed and determined that the arrangements are reasonably related to ACO Activities. ACO Activities include:

- Promoting accountability for quality of care;
- Promoting accountability for cost of care;
- Promoting accountability for overall care;
- Managing and coordinating care;
- Encouraging infrastructure investment;
- Encouraging investment in re-designed care processes for high quality and efficient services delivery;
- Carrying out any obligation or duty under the Vermont ACO Initiative or the Vermont Medicaid NextGen Program (together “Programs”);
- Direct patient care;
- Promoting evidence-based medicine;
- Promoting patient engagement;



- Reporting on quality and cost measures;
- Coordinating care with telehealth, remote monitoring and other technologies;
- Establishing and improving ACO clinical systems;
- Establishing and improving ACO administrative systems;
- Meeting Programs' quality standards;
- Evaluating patient health;
- Communicating clinical knowledge;
- Communicating evidence-based medicine; and
- Developing standards for patient access and communication including to medical records.

BE IT RESOLVED by the Board of Managers (the "Board") of OneCare Vermont Accountable Care Organization, LLC ("OneCare") as follows:

1. The OneCare Board of Managers has duly authorized the arrangements below and made a bona fide determination that the arrangement is reasonably related to one or more of the above ACO Activities, including managing and coordinating care, accountability for quality, cost and overall care, and encouraging investment in re-designed care processes for high quality and efficient service delivery. The Board wishes to extend the protections afforded under the ACO Participation Waiver to the arrangements described below. Evergreen Family Health Partners, LLC will be provided with \$12,347 to purchase and deploy a retinal scanner in one of their offices to increase the rates of providing recommended screening for its diabetic patients and other patients at risk.
2. Brattleboro Memorial Hospital will be provided with \$20,000 to establish, with partner EMS provider Rescue, Inc., a system of in-home care to COPD patients who are being discharged by the hospital to avoid readmissions or emergency room visits by managing the patients in accordance with the follow up care plan. By way of example, EMS will regularly check in with patients and may provide in home nebulizer or other permitted treatments and will be paid for that care.
3. Addison County Home Health and Hospice, Porter Hospital, and Helen Porter Nursing Home will be provided \$30,000 to establish specialized wound care provided by the Addison County Home Health and Hospice wound care nurse when patients are admitted to Porter or Helen Porter and to pay for that care. The goal is to stop the worsening of wounds that occurs when patients are moved from home care to hospital or SNF.
4. Richmond Family Medicine will be provided \$15,000 to partner with and pay Whole Health Nutrition, to educate and train patients about nutrition and lifestyle activities that better health. This will include lifestyle change classes, open nutrition night culinary workshops, and patient handouts.
5. Rutland Regional Medical center will be provided \$20,000 to fund its program to facilitate discharge from inpatient or the emergency department. Examples include providing patients with support at home such as adaptive equipment or personal care services, paying for medications or other items at skilled nursing facilities, and transportation.
6. The University of Vermont Health Network, in partnership with District 3 Emergency Medical Services, will be provided \$27,653 to implement a pilot of paying EMS for non-emergent care provided in the field. After making a telehealth supported determination that a patient is non-emergent and does not need transport, EMS may treat the patient as permitted and will be paid for that visit.
7. The invocation of this Participation Waiver does not, in any respect, indicate that the arrangements are not compliant with applicable regulations.