

Department of Vermont Health Access**Vermont Blueprint for Health**

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Payment Implementation Workgroup Meeting- April 1, 2015

Attendees:

Barre: Mark Young, Patrick Clark, Burlington: Penrose Jackson, Pam Farnham, Deb Andrews, Bennington: Jennifer Fels, Middlebury: Susan Bruce, Morrisville: Elise McKenna, Rutland: Sara Narkewicz, Marie Gilmond, St. Johnsbury: Laural Ruggles, Upper Valley: Donna Ransmeier, Blue Cross: Carol Cowan Lynn Trepanier, MVP: Lou McLaren, Cigna: Kevin Ciechon, Medicaid: Terri Mitchell, Blueprint: Jenny Samuelson, Tim Tremblay, Mary Kate Mohlman, Jenney Samuelson, Susan Cartwright

1. Request for an update on BCBS payment changes – Discussions continue but no further progress on resolution.
2. Monthly Change report will be distributed by the end of the week.
3. Blueprint payment reform proposal
 - a. Insurer attribution - What level of detail will be provided by payers? HSA will need provider level detail in order to know how to distribute funds. The Blueprint will ask payers to provide detail down to the provider level.
 - b. Some payers already provide this level of detail to the practices, but Cigna and Medicaid do not. While it won't be solved immediately, Tim will discuss with Medicaid how this information could be obtained.
 - c. Concerns voiced regarding ability to release information to Blueprint at this level as a result of HIPAA, and the Blueprint's need to know this level of detail. Tim will send payers a template of information needed.
 - d. Request was made to have a written policy on attribution methodology. The effective date is 7/1 and the details need to be outlined and understood by all very soon.
 - e. Concern raised regarding practices keeping the portal patient count up to date knowing that payments will be based on insurer attribution. Tim emphasized the importance of keeping it updated.
 - f. Since Medicare fees will not increase along with other insurers, it could negatively impact practices with a high Medicare population.
 - g. Frontloading – Will be the same rate as BP CHT's are paid and will no longer round down for patient counts.
 - h. Details regarding the upcoming 7/1/15 payment reform changes will be discussed and communicated.