Spoke Funding Proposal: Update

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Original Proposal

Original Proposal

- Spoke payments are set annually.
  - 12-month attribution period.
- $5.00 Increase in Spoke PMPM
- Simplified staffing model.

Spoke Staffing at 100 patients	Total Estimated Annual Costs
1 FTE RN Care Manager	
1 FTE Licensed Counselor/Social Worker	$196,500

- Use medians, not averages.

Goal

- Promote consistent Spoke staffing and thus consistent patient care.
  - Provide consistent funding.
  - PMPM increase to promote hiring and staff retention.
  - Promote flexibility with funding staff.

Current Proposal

Current Proposal

- Spoke payments are set annually.
  - 3-month attribution period.
- Simplified Staffing Model.

Spoke Staffing at 100 patients	Total Estimated Annual Costs
1 FTE RN Care Manager	
1 FTE Licensed Counselor/Social Worker	$196,500

- Use averages, not medians
- Due to budget challenges:
  - Spoke PMPM increase had to be removed.
  - Attribution period shortened.

Goal

- Promote consistent Spoke staffing and thus consistent patient care.
  - Provide consistent funding on an annual cycle.
  - Simplify staffing model to promote flexibility of funding.

Future Goals

- Future goals for FY2026.
  - Spoke PMPM increase.
  - Lengthen attribution period.
  - Attribution period length and PMPM increase to be determined.
- Requires appropriation for an increased budget.
  - Additional updates will be provided in CY2025.

Current Manual Revision

- Insert simplified staffing model shown on slide 2.
- From the current manual that is posted online ([Implementation Materials | Blueprint for Health (vermont.gov)](vermont.gov)), the following language on Page 34, Section 6.1.2 will be changed.
  - Paragraph Two
    - *"The patient counts for each Health Service Area (HSA) are calculated ~~quarterly~~ annually... "*

FEEDBACK AND QUESTIONS?

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Thank you to the Blueprint Team for your help with this proposal!