

## States Advancing All-Payer Health Equity Approaches and Development (AHEAD) Model FAQ's

### Introduction to the AHEAD Model

1. **What is the States Advancing All-Payer Health Equity Approaches and Development (AHEAD) Model?**
  - a. The AHEAD Model is a new model from the Centers for Medicare & Medicaid Services that allows states to use Medicare funds more strategically. If implemented, AHEAD will provide more federal investment in Vermont. It will also allow Vermont to use Medicare funds at the state level and invest in existing health care initiatives.
  - b. Vermont participation in AHEAD would be just one component of broader Health Care Reform, contributing to the larger goal of improving health equity, affordability, access to care and increasing quality across the state.
  - c. The AHEAD framework supports the state's vision for all Vermonters to have access to the high-quality care they need, when and where they need it.

### AHEAD Model Selection

2. **Vermont was selected to participate, what happens next?**
  - a. Vermont will collaborate with the Centers for Medicare & Medicaid Services (CMS) to negotiate a state-level agreement tailored to meet the specific health care needs of Vermonters.
  - b. Together with CMS, Vermont will design the AHEAD model focusing on affordability, quality, and equity in health care delivery.
  - c. After the negotiation phase, Vermont will assess the AHEAD model to determine if it aligns with the state's health care goals and decide whether to participate.

### Enhancing Accessibility and Affordability

3. **Will the AHEAD Model make it easier to see a doctor in Vermont?**
  - a. There are many reasons that Vermonters may have trouble seeing a doctor. AHEAD is one tool available to help address this.
  - b. The AHEAD Model seeks to improve how primary care is funded in Vermont. Additional payments from AHEAD may allow primary care practices to extend operating hours, hire more staff, and expand health care services, thereby improving access across the state.
4. **Will the AHEAD Model make health care more affordable for Vermonters?**
  - a. The AHEAD Model allows Vermont to implement fixed payments to hospitals through hospital global budgets with total cost of care incentives, which may help control the growth of health insurance premiums over time. Through the AHEAD Model, both individual hospitals and the state would receive incentives to hold down total cost of care.
    - i. An alternative approach being considered is fee-for-service with reference-based pricing (RBP). RBP is less likely to reduce growth because the existing system of fee-for-service (i.e., volume) incentives would remain.
  - b. The AHEAD Model also aims to slow the growth of total cost of care by prioritizing preventative care. This approach strengthens primary care and allows Vermont to find more effective ways to spend health care dollars that promote efficient health care delivery.
  - c. By focusing on prevention and delivering care in the right setting, AHEAD helps reduce the need for expensive medical interventions, leading to less growth in health care costs for Vermonters.

### Targeted Health Improvements

5. **How does the AHEAD Model address health disparities in Vermont?**
  - a. AHEAD requires states to use data to identify populations experiencing health disparities and proactively address inequities. Through AHEAD, Vermont would implement initiatives at the state and hospital level to improve health equity and report progress regularly.
6. **How will the AHEAD Model impact mental health and substance use disorder services in Vermont?**
  - a. As a component of broader health care reform, AHEAD allows Vermont to support the ongoing Blueprint for Health program expansion that integrates mental health (MH) and substance use disorder (SUD) services in primary care settings. AHEAD also aligns with other initiatives under the Department of Mental Health.
    - i. For example, Blueprint for Health provides resources for primary care practices to integrate MH and SUD staff and treatment into primary care, screening people for mental health conditions and substance use disorders. If additional services are needed, a “warm hand-off” is made to a mental health provider in the primary care office or community.
  - b. Beyond AHEAD, Vermont is working to strengthen mental health which includes:
    - i. The Community Mobile Crisis Program provides 24/7 support for individuals facing emotional, mental health, or substance use crises. Teams of skilled providers and recovery coaches deliver rapid and compassionate assistance directly to homes, workplaces, or other community settings. The approach is: “someone to call, someone to come, somewhere to go.”
    - ii. The 988 crisis hotline in Vermont operates 24/7, handling calls, texts, and chats related to mental health crises.
    - iii. Providing alternatives to Emergency Departments.

### Health Care and System Transformation

7. **What impact does the AHEAD Model have on hospitals in Vermont?**
  - a. AHEAD introduces fixed payments for hospitals called Hospital Global Budgets, encouraging them to optimize resources and focus on effective care solutions instead of services that generate high revenue.
  - b. AHEAD would provide flexibility and predictability to Vermont’s hospitals. By setting payments in advance, the AHEAD Model allows hospitals to allocate resources more strategically to address specific community needs, enhancing health care delivery.
  - c. The fixed payments available through Hospital Global Budgets will provide financial stability to hospitals. The AHEAD model also gives hospitals support to implement changes that focus on sustainability. Changes in population and service utilization will not have a sudden impact on hospital financials, allowing for more predictable service delivery.
  - d. Without consistent payments, hospitals can have trouble managing their finances to provide the wide variety of services needed in their communities.
  - e. Under AHEAD, both individual hospitals and the state are given incentives to hold down the total cost of care.
8. **How does the AHEAD Model drive transformation in health care beyond cost growth reduction?**
  - a. The AHEAD Model is designed to transform health care delivery and outcomes, focusing on more than just containing cost growth. It facilitates investment in community-specific health initiatives, addressing unique local health challenges and promoting overall community wellness.
  - b. AHEAD incentivizes improved quality of care by providing payments to hospitals and primary care practices based on quality measures.

## Vermont AHEAD Model Overview – July 2024

- c. AHEAD would allow additional payments to primary care to improve coordination of services and quality of care. This means Vermont would gain greater access to coordinated, team-based, health care services.
  - d. AHEAD would also focus on health equity. It requires Vermont and hospitals to make proactive plans to make the best possible health care available to everyone and would use data to measure Vermont's progress in achieving health equity goals.
  - e. The AHEAD Model builds on work that has been done in collaboration with the legislature and other state leaders to enhance the overall delivery of care and support a more holistic and patient-centric approach.
    - i. The AHEAD quality initiatives give Vermont an opportunity to align and focus. For example, Vermont has successfully implemented this strategy through efforts like the Blueprint for Health, Community Health Team Expansion Pilot Program and the planned introduction of Certified Community Based Health Clinics (CCBHCs). These initiatives demonstrate Vermont's commitment to investing in models that effectively improve health care delivery and outcomes across the state.
9. **What are the benefits of the AHEAD Model for health care professionals in Vermont?**
- a. The AHEAD model provides predictable payments to providers, facilitating better decision-making and reducing administrative burdens.
  - b. AHEAD provides more funding to primary care practices, which could support practices to meet local needs by extending operating hours, hiring more staff, and expanding the services they offer.
  - c. Through AHEAD, states are eligible to receive up to \$12 million dollars in grant funding for program implementation, which Vermont could use to provide technical assistance to providers to advance their data collection, reporting, and health IT capabilities.
10. **Will the AHEAD Model address all the health care challenges facing Vermonters?**
- a. AHEAD won't solve all of the challenges facing Vermonters; no single initiative or model could do that. If implemented, AHEAD would be a vital component of Vermont's broader health care reform system.
  - b. While the AHEAD Model is just one framework, it will allow Medicare to join Vermont's efforts to make health care more affordable, to help Vermonters receive high quality care that is coordinated and focuses on the whole-person, to provide payments in ways that support the stability of our health care providers, and to improve care, especially for Vermonters who have historically experienced unequal care or outcomes.