

1 H.795

2 Senator Lyons moves that the Senate propose to the House that the bill be
3 amended by striking out Sec. 4, effective dates, in its entirety and inserting in
4 lieu thereof Secs. 4–10 to read as follows:

5 Sec. 4. HOSPITAL SUSTAINABILITY PLANNING; REPORTS

6 (a) The Green Mountain Care Board shall consider ways to increase the
7 financial sustainability of Vermont hospitals in order to achieve population-
8 based health improvements while maintaining community access to essential
9 services. In conducting this work, the Board shall consult with the Director of
10 Health Care Reform in the Agency of Human Services, Vermont hospitals, the
11 Vermont Association of Hospitals and Health Systems, certified accountable
12 care organizations, the Office of the Health Care Advocate, and other
13 interested stakeholders.

14 (b) On or before November 15, 2020, the Board shall inform the Health
15 Reform Oversight Committee about its consideration to date of ways to
16 increase hospital financial sustainability as set forth in subsection (a) of this
17 section.

18 (c) On or before April 1, 2021, the Board shall provide to the House
19 Committee on Health Care and the Senate Committees on Health and Welfare
20 and on Finance an update on its progress in considering and developing

1 recommendations for increasing hospital financial sustainability as set forth in
2 subsection (a) of this section.

3 (d)(1) On or before September 1, 2021, the Board shall provide to the
4 House Committee on Health Care and the Senate Committees on Health and
5 Welfare and on Finance its final recommendations for increasing the financial
6 sustainability of Vermont hospitals in order to achieve population-based health
7 improvements while maintaining community access to essential services.

8 (2) In the event that the COVID-19 pandemic makes it
9 impracticable for the Board to submit its recommendations by the date
10 specified in subdivision (1) of this subsection, the Board shall provide an
11 update on its progress by September 1, 2021 and shall make best efforts to
12 submit its final recommendations in a timely manner.

13 Sec. 5. **EQUITABLE PROVIDER SUSTAINABILITY AND**
14 **REIMBURSEMENTS; REPORTS**

15 (a) The Green Mountain Care Board, in collaboration with the Department
16 of Financial Regulation, the Department of Vermont Health Access, and the
17 Director of Health Care Reform in the Agency of Human Services, shall
18 determine ways to increase equity in reimbursement amounts between
19 providers for delivering the same services, regardless of setting or hospital
20 affiliation identify processes for improving provider sustainability and

1 increasing equity in reimbursement amounts among providers. In

2 evaluating potential processes, the Board's considerations shall include:

3 (1) care settings;

4 (2) value-based payment methodologies, such as capitation; and

5 (3) Medicare payment methodologies;

6 (4) public and private reimbursement amounts; and

7 (5) variations in payer mix among different types of providers.

8 (b) On or before November 15, 2020, the Board shall provide an

9 update to the Health Reform Oversight Committee regarding its progress

10 in identifying processes for improving provider sustainability and

11 increasing equity in reimbursement amounts among providers.

12 (c) On or before January March 15, 2021, the Board shall report its

13 findings and recommendations provide to the House Committee on Health

14 Care and the Senate Committees on Health and Welfare and on Finance the

15 options that the Board has identified as demonstrating the greatest

16 potential for improving provider sustainability and increasing equity in

17 reimbursement amounts among providers and shall identify areas that

18 would require further study prior to implementation.

19 Sec. 6. 8 V.S.A. § 4062 is amended to read:

20 § 4062. FILING AND APPROVAL OF POLICY FORMS AND PREMIUMS

21 * * *

1 (b)(1) In conjunction with a rate filing required by subsection (a) of this
2 section, an insurer shall file a plain language summary of the proposed rate.
3 All summaries shall include a brief justification of any rate increase requested,
4 the information that the Secretary of the U.S. Department of Health and
5 Human Services (HHS) requires for rate increases over 10 percent, and any
6 other information required by the Board. The plain language summary shall be
7 in the format required by the Secretary of HHS pursuant to the Patient
8 Protection and Affordable Care Act of 2010, Pub. L. No. 111-148, as amended
9 by the Health Care and Education Reconciliation Act of 2010, Pub. L. No.
10 111-152, and shall include notification of the public comment period
11 established in subsection (c) of this section. In addition, the insurer shall post
12 the summaries on its website.

13 * * *

14 (3)(A) In Upon request, in conjunction with a rate filing required by
15 subsection (a) of this section, an insurer shall disclose provide to the Board
16 provider reimbursement information, including detailed information
17 about the insurer's payments to specific providers, which may include fee
18 schedules, payment methodologies, and other payment information specified
19 by the Board.

20 (B) Information received from an insurer pursuant to subdivision (A)
21 of this subdivision shall be exempt from public inspection and copying under

1 the Public Records Act and shall be kept confidential, except that the Board
2 may disclose or release information publicly in summary or aggregate form if
3 doing so would not disclose trade secrets, as defined in 1 V.S.A. § 317(c)(9).
4 Notwithstanding 1 V.S.A. § 317(e), the Public Records Act exemption
5 established in this subdivision (B) shall continue in effect and shall not be
6 repealed through operation of 1 V.S.A. § 317(e).

7 (C) Notwithstanding 1 V.S.A. chapter 5, subchapter 2 (Vermont
8 Open Meeting Law), the Board may examine and discuss confidential
9 information outside a public hearing or meeting.

10 * * *

11 Sec. 7. **[Deleted.]**

12 Sec. 8. **[Deleted.]**

13 Sec. 9. 18 V.S.A. § 9457 is amended to read:

14 § 9457. INFORMATION AVAILABLE TO THE PUBLIC

15 (a)(1) All information required to be filed under this subchapter shall be
16 made available to the public upon request, ~~provided that~~ in accordance with
17 1 V.S.A. chapter 5, subchapter 3 (Public Records Act), except that the
18 following information shall be exempt from public inspection and copying
19 under the Public Records Act and shall be kept confidential:

1 (A) information that directly or indirectly identifies individual
2 patients or health care practitioners ~~shall not be directly or indirectly~~
3 identifiable;

4 (B) reimbursement information submitted by a hospital pursuant
5 to section 9454 of this subchapter, except that the Board may disclose or
6 release information publicly in summary or aggregate form if doing so would
7 not disclose trade secrets, as defined in 1 V.S.A. § 317(c)(9); and

8 (C) financial information the Board collects to address financial
9 solvency or sustainability issues.

10 (2) Notwithstanding 1 V.S.A. § 317(e), the Public Records Act
11 exemptions created in this subsection shall continue in effect and shall not be
12 repealed through operation of 1 V.S.A. § 317(e).

13 (b) Notwithstanding 1 V.S.A. chapter 5, subchapter 2 (Vermont Open
14 Meeting Law) or any provision of this subchapter to the contrary, the Board
15 may examine and discuss confidential information outside a public hearing or
16 meeting.

17 Sec. 10. 2020 Acts and Resolves No. 91, Sec. 8, as amended by 2020 Acts and
18 Resolves No. 140, Sec. 13, is further amended to read: **(NEW)**

19 Sec. 8. ACCESS TO HEALTH CARE SERVICES; DEPARTMENT OF
20 FINANCIAL REGULATION; EMERGENCY RULEMAKING

1 It is the intent of the General Assembly to increase Vermonters' access to
2 medically necessary health care services during and after a declared state of
3 emergency in Vermont as a result of COVID-19. Until July 1, 2021, and
4 notwithstanding any provision of 3 V.S.A. § 844 to the contrary, the
5 Department of Financial Regulation shall consider adopting, and shall have the
6 authority to adopt, emergency rules to address the following through June 30,
7 2021:

8 (1) expanding health insurance coverage for, and waiving or limiting
9 cost-sharing requirements directly related to, ~~COVID-19~~ the diagnosis of
10 COVID-19, influenza, pneumonia, and other respiratory viruses, and the
11 treatment; and prevention of COVID-19 when it is either the primary or
12 secondary diagnosis;

13 (2) modifying or suspending health insurance plan deductible
14 requirements for all prescription drugs, except to the extent that such an action
15 would disqualify a high-deductible health plan from eligibility for a health
16 savings account pursuant to 26 U.S.C. § 223; and

17 (3) expanding patients' access to and providers' reimbursement for
18 health care services, including preventive services, consultation services, and
19 services to new patients, delivered remotely through telehealth, audio-only
20 telephone, and brief telecommunication services.

1 Sec. 11. 2020 Acts and Resolves No. 140, Sec. 4 is amended to read: **(NEW)**

2 Sec. 4. MENTAL HEALTH INTEGRATION COUNCIL; REPORT

3 * * *

4 (f) Meetings.

5 (1) The Commissioner of Mental Health shall call the first meeting of
6 the Council.

7 (2) The Commissioner of Mental Health shall serve as chair. The
8 Commissioner of Health shall serve as vice chair.

9 (3) The Council shall meet every other month between ~~October 1, 2020~~
10 January 15, 2021 and January 1, 2023.

11 (4) The Council shall cease to exist on July 30, 2023.

12 * * *

13 Sec. 12. 18 V.S.A. § 9376 is amended to read: **(potential NEW section**
14 **requiring independent providers to report reimbursement information)**

15 Sec. 13. EFFECTIVE DATES

16 (a) ~~Secs. 1 (Green Mountain Care Board; price transparency dashboard;~~
17 ~~private pay pricing; report), 3 (interactive price transparency dashboard;~~
18 ~~demonstration; recommendations; report), 4 (hospital sustainability planning~~
19 ~~reports), 5 (provider sustainability and reimbursements; reports), and this~~
20 ~~section shall take effect on passage.~~

1 ~~(b)~~ Sec. 2 (18 V.S.A. § 9411) shall take effect on November 1, 2020, with
2 the interactive price transparency dashboard becoming available for use by the
3 public as soon as it is operational, but in no event later than February 15, 2022.

4 **(b)** Secs. 6 (8 V.S.A. § 4062) and 9 (18 V.S.A. § 9457) shall take effect on
5 November 1, 2020.

6 **(c) The remaining sections shall take effect on passage.**

7 and that after passage the title of the bill be amended to read: “An act relating
8 to hospital price transparency, hospital sustainability planning, provider
9 sustainability and reimbursements, and regulators’ access to information”