

H.795

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

Sec. 4. HOSPITAL SUSTAINABILITY PLANNING; REPORTS (NEW)

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

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

(c) On or before April 1, 2021, the Board shall provide to the House Committee on Health Care and the Senate Committees on Health and Welfare 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) On or before September 1, 2021, the Board shall provide to the House
4 Committee on Health Care and the Senate Committees on Health and Welfare
5 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 Sec. 5. EQUITABLE PROVIDER REIMBURSEMENT; REPORT (NEW)

9 The Green Mountain Care Board, in collaboration with the Department of
10 Financial Regulation, the Department of Vermont Health Access, and the
11 Director of Health Care Reform in the Agency of Human Services, shall
12 determine ways to increase equity in reimbursement amounts between
13 providers for delivering the same services, regardless of setting or hospital
14 affiliation. On or before January 15, 2021, the Board shall report its findings
15 and recommendations to the House Committee on Health Care and the Senate
16 Committees on Health and Welfare and on Finance.

17 Sec. 6. 8 V.S.A. § 4062 is amended to read: (NEW)

18 § 4062. FILING AND APPROVAL OF POLICY FORMS AND PREMIUMS

19 * * *

20 (b)(1) In conjunction with a rate filing required by subsection (a) of this
21 section, an insurer shall file a plain language summary of the proposed rate.

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

11 * * *

12 (3)(A) In conjunction with a rate filing required by subsection (a) of this
13 section, an insurer shall disclose to the Board provider reimbursement
14 information, including fee schedules, payment methodologies, and other
15 information as requested.

16 (B) Information received from an insurer pursuant to subdivision (A)
17 of this subdivision shall be exempt from public inspection and copying under
18 the Public Records Act and shall be kept confidential, except that the Board
19 may disclose or release information publicly in summary or aggregate form if
20 doing so would not disclose trade secrets, as defined in 1 V.S.A. § 317(c)(9).
21 Notwithstanding 1 V.S.A. § 317(e), the Public Records Act exemption

1 established in this subdivision (B) shall continue in effect and shall not be
2 repealed through operation of 1 V.S.A. § 317(e).

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

6 * * *

7 Sec. 7. 18 V.S.A. § 9453(a) is amended to read: **(NEW)**

8 (a) The Board shall:

9 (1) adopt uniform formats that hospitals shall use to report financial,
10 reimbursement, scope-of-services, and utilization data and information;

11 * * *

12 Sec. 8. 18 V.S.A. § 9454 is amended to read: **(NEW)**

13 § 9454. HOSPITALS; DUTIES

14 (a) Hospitals shall file the following information at the time and place and
15 in the manner established by the Board:

16 (1) a budget for the forthcoming fiscal year;

17 (2) financial information, including costs of operation, revenues, assets,
18 liabilities, fund balances, other income, ~~rates, charges,~~ units of services, and
19 wage and salary data;

1 (3) scope-of-service and volume-of-service information, including
2 inpatient services, outpatient services, and ancillary services by type of service
3 provided;

4 (4) utilization information;

5 (5) new hospital services and programs proposed for the forthcoming
6 fiscal year;

7 (6) known depreciation schedules on existing buildings, a four-year
8 capital expenditure projection, and a one-year capital expenditure plan; ~~and~~

9 (7) reimbursement information, including commercial rates, charges, fee
10 schedules, reimbursement methodologies, proposed reimbursement increases
11 or decreases, and rates as a percentage of Medicare rates or another benchmark
12 determined by the Board; and

13 (8) such other information as the Board may require.

14 (b) Hospitals shall adopt a fiscal year ~~which~~ that shall begin on October 1.

15 Sec. 9. 18 V.S.A. § 9457 is amended to read: **(NEW)**

16 § 9457. INFORMATION AVAILABLE TO THE PUBLIC

17 (a)(1) All information required to be filed under this subchapter shall be
18 made available to the public upon request, ~~provided that~~ in accordance with
19 1 V.S.A. chapter 5, subchapter 3 (Public Records Act), except that the
20 following information shall be exempt from public inspection and copying
21 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 to
5 section 9454 of this subchapter, except that the Board may disclose or release
6 information publicly in summary or aggregate form if doing so would not
7 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. EFFECTIVE DATES **(revised)**

18 (a) Secs. 1 (Green Mountain Care Board; price transparency dashboard;
19 private pay pricing; report), 3 (interactive price transparency dashboard;
20 demonstration; recommendations; report), 4 (hospital sustainability planning

1 reports), 5 (equitable provider reimbursement; report), and this section
2 shall take effect on passage.

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

6 (c) Secs. 6 (8 V.S.A. § 4062), 7 (18 V.S.A. § 9453), 8 (18 V.S.A. § 9454),
7 and 9 (18 V.S.A. § 9457) shall take effect on November 1, 2020.

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