

**H.107 – Section breakdown (as amended by Senator Lyons)
updated May 10, 2013**

Bill Section	Statutory Section	Subject
1	8 V.S.A. § 4079	Health insurance for out-of-state employers with >25 VT employees
2	8 V.S.A. § 4089a	Mental health care services review
3	8 V.S.A. § 4089i(d)	Prescription drug benefits for high-deductible health plans, step therapy, prohibition on non-generic off-label use provisions
4	8 V.S.A. § 4092(b)	Insurance coverage for newborns
5	18 V.S.A. § 9418	Pending insurance claims during three-month grace period
5a	18 V.S.A. § 9418b(g)(4)	Prior authorization requests must be responded to within 48 hours for urgent requests and 2 business days for non-urgent
5b		GMCB and others to develop standardized edits and payment rules for use beginning January 1, 2015; applies to Medicaid January 1, 2017
5c-5n	Various	Health insurance rate review process and conforming changes; Health Care Advocate may submit comments and Board must post on website and consider before making decisions
6	8 V.S.A. § 4080d	Deletes Catamount reference in section on coordinating insurance and Medicaid
7	8 V.S.A. § 4080g(b)	Deletes references to Catamount and VHAP for small group grandfathered plans, replaces reference to CHAP with HIPP
8	8 V.S.A. § 4088i	Deletes reference to VHAP for early childhood developmental disorders
9	8 V.S.A. § 4089j	Deletes references to VHAP and VScript in retail pharmacy parity statute
10	8 V.S.A. § 4089w	Deletes reference to VHAP in Health Care Advocate statute
11	8 V.S.A. § 4099d	Deletes reference to VHAP in coverage of midwifery and home births
12	8 V.S.A. § 4100b	Deletes reference to Catamount in statute on children's health insurance
13	8 V.S.A. § 4100e	Deletes references to VHAP and VScript in required coverage of off-label use of prescription drugs for cancer treatment
14	8 V.S.A. § 4100j	Deletes reference to VHAP for coverage of tobacco cessation
15	8 V.S.A. § 4100k	Deletes reference to VHAP in telemedicine coverage
16	13 V.S.A. § 5574(b)	Replaces VHAP with Medicaid-equivalent as part of damages for post-conviction finding of innocence
17	18 V.S.A. § 1130	Deletes reference to VHAP for immunization pilot
18	18 V.S.A. § 3801	Deletes references to VHAP and VermontRx in pharmacy audit chapter
19	18 V.S.A. § 4474c(b)	Deletes reference to VHAP in chapter on marijuana for symptom relief
20	18 V.S.A. § 9373	Deletes reference to VHAP in GMCB chapter
21	18 V.S.A. § 9471	Deletes reference to VHAP/Vermont Rx in laws on pharmacy benefit managers
22	33 V.S.A. § 1807(b)	Deletes references to VermontRx in navigator duties
23	33 V.S.A. § 1901(b)	Deletes subsection on VHAP monthly premium
24	33 V.S.A. § 1903a	Deletes reference to VHAP in Medicaid chronic care management
25	33 V.S.A. § 1997	Deletes references to VHAP/VermontRx in Medicaid Pharmacy Best Practices and Control Program

26	33 V.S.A. § 1998(c)(1)	Deletes references to VHAP/VermontRx in Medicaid Pharmacy Best Practices and Control Program
27	33 V.S.A. § 2004(a)	Deletes references to VHAP/VermontRx for prescription drug manufacturer fee
28	33 V.S.A. § 1804	Definition of “qualified employer” for Exchange
29	33 V.S.A. § 1805	Deletes free choice vouchers from Exchange duties
30	33 V.S.A. § 1811(a)	Definition of “small employer” for Exchange
31	33 V.S.A. § 2003(c)	Income calculation for Healthy Vermonters pharmacy discount plans
32	33 V.S.A. § 2072(a)	Income calculation for VPharm
32a		Legislative intent that change in income calculation not make people lose eligibility for Healthy Vermonters or VPharm
33	18 V.S.A. § 707(a)	Health Information Exchange
34	18 V.S.A. § 9456	Hospital connectivity to Health Information Exchange as part of hospital budget review
34a	18 V.S.A. § 9352(i)	VITL to develop criteria for connectivity to Health Information Exchange
35		Hospital energy efficiency
35a-h	18 V.S.A. Chapter 229	Creates Office of Health Care Advocate through contract with Agency of Administration
36	18 V.S.A. § 9404	Deletes references to Division of Health Care Administration in DFR
37	18 V.S.A. § 9405	Health Resource Allocation Plan
37a-37c	Various	Allocation of expenses (bill back)
37d		Health Care Advocate; Bill Back
38	18 V.S.A. § 9405b	Hospital community reports
39		Extension for publication of 2013 hospital community reports
40	18 V.S.A. § 9410	VHCURES
40a	18 V.S.A. § 9377	Prior Authorization Pilot Program
40b.	18 V.S.A. § 9414a(a)(5)	Insurer Claims Denial Reporting
40c.		DVHA Denied Claims Information
41	18 V.S.A. § 9375(d)	Cost-shift - Green Mountain Care Board
42		Medicaid cost-shift reporting
42a		Exchange impact report (added by Finance)
43	26 V.S.A. § 1353	Workforce planning data - Board of Medical Practice
44		Workforce planning data collection
45	8 V.S.A. § 11(a)	Revisions to DFR’s health care jurisdiction
46	33 V.S.A. § 1901(h)	Medicaid/SCHIP payment reform antitrust provision
46a		Study of fees for copies of electronic medical records
47	33 V.S.A. § 1901b	Deletes VermontRx enrollment caps
48		Tech correction (fixes session law typo)
49		Tech correction (fixes session law typo)
49a-49c	Various	Corrects references in CON laws to DFR instead of GMCB
50		Transfer of positions
51		Emergency rulemaking for Exchange rules
52		Repeals
53		Effective Dates (amended for new provisions)