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S.245

Representative Pearson of Burlington moves that the House propose to the Senate that the bill be amended as follows:

First: By adding two new sections to be Secs. 3 and 4 to read as follows:

Sec. 3. 33 V.S.A. § 1905a is added to read:

§ 1905a. MEDICAID REIMBURSEMENTS TO CERTAIN OUTPATIENT

PROVIDERS

(a) The Department of Vermont Health Access shall not use provider-based billing for outpatient medical services provided at an off-campus outpatient department of a hospital as a result of the provider’s transfer to or acquisition by the hospital.

(b) As used in this section, “off-campus” means a facility located more than 250 yards from the main hospital campus.

Sec. 4. PROVIDER REIMBURSEMENT; REPORT

The Green Mountain Care Board shall consider the advisability and feasibility of expanding to commercial health insurers the prohibition on any increased reimbursement rates or provider-based billing for health care providers newly transferred to or acquired by a hospital as described in Sec. 3 of this act. On or before February 1, 2017, the Green Mountain Care Board shall report its findings and recommendations to the House Committee on Health Care and the Senate Committees on Health and Welfare and on

1 Finance, including its recommendations for the process and timing of
2 implementation of any recommended reimbursement restrictions.

3 And by renumbering the existing Sec. 3, reducing payment differentials;
4 guidance and implementation; report, to be Sec. 5 and the existing Sec. 4,
5 effective dates, to be Sec. 6

6 Second: In the newly renumbered Sec. 6, effective dates, by striking out
7 subsection (b) in its entirety and inserting in lieu thereof two new subsections
8 to be subsections (b) and (c) to read as follows:

9 (b) Sec. 3 (33 V.S.A. § 1905a) shall take effect on July 1, 2016 and shall
10 apply to all providers transferred to or acquired by a hospital on or after that
11 date.

12 (c) Secs. 4 and 5 (Green Mountain Care Board reports) and this section
13 shall take effect on passage.