

1 H.796

2 Introduced by Representative Browning of Arlington

3 Referred to Committee on

4 Date:

5 Subject: Health; physicians; Green Mountain Care Board; salaries and  
6 compensation

7 Statement of purpose of bill as introduced: This bill proposes to hire an  
8 independent auditor to monitor patient access to primary care and would hold  
9 the Green Mountain Care Board financially accountable for reductions in  
10 access to care.

11 An act relating to Green Mountain Care Board accountability for access to  
12 health care

13 It is hereby enacted by the General Assembly of the State of Vermont:

14 Sec. 1. 18 V.S.A. § 9382 is added to read:

15 § 9382. ACCOUNTABILITY FOR REDUCTIONS IN ACCESS TO CARE

16 (a) The Secretary of Administration shall contract with an independent  
17 auditor to monitor, at least quarterly, on a statewide basis:

18 (1) the average length of time a patient must wait for an appointment  
19 with a primary care provider;

1           (2) the average length of time a patient spends meeting face-to-face with  
2           his or her primary care provider; and

3           (3) the percentage of primary care practices accepting new patients.

4           (b) The annual salary of each member of the Green Mountain Care Board  
5           shall be reduced by:

6           (1) five percent for each month that the average wait time for a patient  
7           to obtain an appointment with a primary care provider increases over the  
8           average wait time in effect for the first quarter of 2015;

9           (2) one percent for each 15-minute reduction in the average length of  
10          face-to-face interaction between a patient and a primary care provider below  
11          the average length of interactions for the first quarter of 2015; and

12          (3) five percent of the average number of Vermont residents who were  
13          unable to access a primary care provider during the preceding calendar year  
14          increased by five percent or more over the number for the first quarter of 2015.

15          (c) Primary care providers shall not receive financial incentives to affect  
16          wait times for appointments or the length of patient visits.

17          Sec. 2. EFFECTIVE DATE

18          This act shall take effect on January 1, 2015, except that the Secretary of  
19          Administration shall issue a request for proposals and enter into a contract with  
20          an independent auditor prior to that date in order to ensure the auditor is able to  
21          collect data beginning on January 1, 2015.