

**S.252 - Poirier proposed amendments**

Sec. 8. 33 V.S.A. § 1825 is amended to read:

§ 1825. HEALTH BENEFITS

(a)(1) The benefits for Green Mountain Care shall include primary care, preventive care, chronic care, acute episodic care, and hospital services and shall include at least the same covered services as those included in the benefit package in effect for the lowest cost Catamount Health plan offered on January 1, 2011 consist of the benefits are available in the benchmark plan for the Vermont Health Benefit Exchange.

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**Sec. 9a. GREEN MOUNTAIN CARE FINANCING AND COVERAGE;  
REPORT**

**Notwithstanding the January 15, 2013 date specified in 2011 Acts and Resolves No. 48, Sec. 9, on or before February 1, 2015, the Secretary of Administration shall submit to the House Committees on Health Care and on Ways and Means and the Senate Committees on Health and Welfare and on Finance a proposal recommending the amounts and necessary mechanisms to finance Green Mountain Care and any systems improvements needed to achieve a public-private universal health care system. The proposal shall also identify which Vermont residents should be included and excluded from Green Mountain Care for purposes of health care coverage and financing.**

**\* \* \* Legislative Oversight \* \* \***

**Sec. 10a. LEGISLATIVE HEALTH CARE REFORM OVERSIGHT**

**COMMITTEE**

**(a) There is created a Legislative Health Care Reform Oversight Committee to monitor the implementation of health care reform activities in Vermont during 2014 and 2015 when the General Assembly is not in session. The Committee shall comprise six members:**

**(1) three current members of the House of Representatives, not all from the same political party, who shall be appointed by the Speaker of the House; and**

**(2) three current members of the Senate, not all from the same political party, who shall be appointed by the Committee on Committees.**

**(b) The Legislative Health Care Reform Oversight Committee shall monitor and oversee the implementation of health care reform activities, including receiving reports and updates from the Administration and Green Mountain Care Board.**

**(c) The Committee shall have the administrative, technical, and legal assistance of the Office of Legislative Council and the Joint Fiscal Office.**

**(d)(1) The first member named by the Speaker of the House and by the Committee on Committees shall jointly call the first meeting of the Committee to occur on or before July 1, 2014. The Committee shall select a chair from among its members at the first meeting.**

**(2) The Committee shall cease to exist on December 31, 2015.**

**(e) For attendance at meetings during adjournment of the General Assembly, members of the Committee shall be entitled to per diem compensation and reimbursement of expenses pursuant to 2 V.S.A. § 406 for no more than six meetings.**

Sec. 14. CHRONIC CARE MANAGEMENT; BLUEPRINT; REPORT

On or before October 1, 2014, the Secretary of Administration or designee shall report to the House Committees on Health Care and on Human Services, the Senate Committees on Health and Welfare and on Finance, and the ~~Health Care Oversight Committee~~ **Legislative Health Care Reform Oversight Committee** regarding the efficacy of the chronic care management initiatives currently in effect in Vermont, including recommendations about whether and to what extent to increase payments to health care providers and community health teams for their participation in the Blueprint for Health and whether to expand the Blueprint to include additional chronic conditions such as obesity, mental conditions, and oral health.

Sec. 15. HEALTH INSURER SURPLUS; LEGAL CONSIDERATIONS;

REPORT

The Department of Financial Regulation, in consultation with the Office of the Attorney General, shall identify the legal and financial considerations involved in the event that a private health insurer offering major medical insurance plans, whether for-profit or nonprofit, ceases doing business in this State, including appropriate disposition of the insurer's surplus funds. On or before July 15, 2014, the

Department shall report its findings to the House Committees on Commerce and on Ways and Means, the Senate Committee on Finance, and the ~~Health Care Oversight Committee~~ **Legislative Health Care Reform Oversight Committee.**

Sec. 16. BENCHMARK-EQUIVALENT HEALTH CARE COVERAGE

On or before October 1, 2014, the Secretary of Administration or designee shall provide the House Committee on Health Care, the Senate Committees on Health and Welfare and on Finance, and the **Health Care Oversight Committee Legislative Health Care Reform Oversight Committee** with a recommendation regarding whether it should be the policy of the State of Vermont that all Vermont residents should have health care coverage in effect prior to implementation of Green Mountain Care that is substantially equivalent to coverage available under the benchmark plan for the Vermont Health Benefit Exchange. If the Secretary or designee reports that substantially equivalent coverage for all Vermonters should be the policy of the State, the Secretary or designee shall propose ways to achieve this goal.

Sec. 19. PHARMACY BENEFIT MANAGEMENT

On or before October 1, 2014, the Secretary of Administration or designee shall report to the House Committee on Health Care, the Senate Committees on Health and Welfare and on Finance, and the **Health Care Oversight Committee Legislative Health Care Reform Oversight Committee** regarding the feasibility and benefits to the State of Vermont of the State acting as its own pharmacy benefit manager for the State employees' health benefit plan, Vermont's Medicaid program, Green Mountain

Care, and any other health care plan financed or administered in whole or in part by the State.

Sec. 20. INDEPENDENT PHYSICIAN PRACTICES; REPORT

On or before December 1, 2014, the Secretary of Administration or designee shall report to the House Committee on Health Care, **and** the Senate Committees on Health and Welfare and on Finance, **and the Legislative Health Care Reform Oversight Committee** regarding the policy of the State of Vermont with respect to independent physician practices, including whether the State wishes to encourage existing physician practices to remain independent and whether the State wishes to encourage new independent physician practices to open, and, if it is the policy of the State to encourage these independent physician practices, recommending ways to increase the number of these practices in Vermont. The Secretary or designee shall also consider whether the State should prohibit health insurers from reimbursing physicians in independent practices at lower rates than those at which they reimburse physicians in hospital-owned practices for providing the same services.

Sec. 21. HEALTH INFORMATION TECHNOLOGY AND INTELLECTUAL  
PROPERTY; REPORT

On or before October 1, 2014, the Office of the Attorney General, in consultation with the Vermont Information Technology Leaders, shall report to the House Committees on Health Care, on Commerce and Economic Development, and on Ways and Means, **and** the Senate Committees on Health and Welfare, on Economic Development, Housing and General Affairs, and on Finance, **and the Legislative**

**Health Care Reform Oversight Committee** regarding the need for intellectual property protection with respect to Vermont's Health Information Exchange and other health information technology initiatives, including the potential for receiving patent, copyright, or trademark protection for health information technology functions, the estimated costs of obtaining intellectual property protection, and projected revenues to the State from protecting intellectual property assets or licensing protected interests to third parties.

Sec. 22. MEDICARE INTEGRATION; REPORT

On or before December 1, 2014, the Secretary of Administration or designee shall report to the House Committees on Health Care and on Ways and Means, **and** the Senate Committees on Health and Welfare and on Finance, **and the Legislative Health Care Reform Oversight Committee** regarding the options available to the State of Vermont with respect to ~~the potential integration and coordination of~~ **individuals who are eligible for Medicare with and wish to receive supplemental coverage through or outside of** Green Mountain Care. The report shall include assessments of possible financing and **supplemental** coverage options for Vermont's Medicare population within Green Mountain Care **and as well as** the potential continuation of Medicare supplemental insurance and Medicare Advantage plans.