

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Ways and Means to which was referred Senate Bill No.  
3 252 entitled “An act relating to financing for Green Mountain Care”  
4 respectfully reports that it has considered the same and recommends that the  
5 House propose to the Senate that the bill as amended by the Committee on  
6 Health Care be further amended as follows:

7 First: In Sec. 1, legislative intent; findings; purpose, in subsection (d),  
8 following “accurate data on”, by striking out “how Vermonters currently pay  
9 for health care” and inserting in lieu thereof the direct and indirect costs of the  
10 current health care system

11 Second: In Sec. 1, legislative intent; findings; purpose, by striking out  
12 subsections (f) and (g) in their entirety and inserting in lieu thereof new  
13 subsections (f) and (g) to read as follows:

14 (f) The General Assembly must ensure that Green Mountain Care does not  
15 go forward if the financing is not sufficient, fair, predictable, transparent,  
16 sustainable, and shared equitably.

17 (g) The General Assembly must be satisfied that an appropriate plan of  
18 action is in place in order to accomplish the transitions needed for successful  
19 implementation of Green Mountain Care.

20 Third: By striking out Sec. 2, principles for health care financing, and  
21 inserting in lieu thereof a new Sec. 2 to read as follows:

1       Sec. 2. PRINCIPLES FOR HEALTH CARE FINANCING

2           The General Assembly adopts the following principles to guide the  
3       financing of health care in Vermont:

4           (1) All Vermont residents have the right to high-quality health care.

5           (2) All Vermont residents shall contribute to the financing for Green  
6       Mountain Care through taxes that are levied equitably, taking into account an  
7       individual's ability to pay and the value of the health benefits provided so that  
8       access to health care will not be limited by cost barriers.

9           (3) The financing system shall maximize opportunities to take advantage  
10       of federal tax credits and deductions.

11          (4) As provided in 33 V.S.A. § 1827, Green Mountain Care shall be the  
12       payer of last resort for Vermont residents who continue to receive health care  
13       through plans provided by an employer, by a federal health benefit plan, by  
14       Medicare, by a foreign government, or as a retirement benefit.

15          (5) Vermont's system for financing health care shall raise revenue  
16       sufficient to provide medically necessary health care services to all Vermont  
17       residents, including:

18           (A) ambulatory patient services;

19           (B) emergency services;

20           (C) hospitalization;

21           (D) maternity and newborn care;

- 1           (E) mental health and substance use disorder services, including  
2 behavioral health treatment;  
3           (F) prescription drugs;  
4           (G) rehabilitative and habilitative services and devices;  
5           (H) laboratory services;  
6           (I) preventive and wellness services and chronic care  
7 management; and  
8           (J) pediatric services, including oral and vision care.

9           Fourth: By striking out Sec. 11, 21 V.S.A. § 2003(b), in its entirety and  
10 inserting in lieu thereof a new Sec. 11 to read as follows:

11           Sec. 11. 21 V.S.A. § 2003(b) is amended to read:

12           (b) For ~~any~~ each quarter in fiscal ~~years 2007 and 2008~~ year 2015, the  
13 amount of the Health Care Fund contribution shall be ~~\$91.25~~ \$133.30 for each  
14 full-time equivalent employee in excess of ~~eight~~ four. For each fiscal year  
15 after fiscal year 2008, ~~the number of excluded full-time equivalent employees~~  
16 ~~shall be adjusted in accordance with subsection (a) of this section, and~~ 2015,  
17 the amount of the Health Care Fund contribution shall be adjusted by a  
18 percentage equal to any percentage change in premiums for the second lowest  
19 cost silver-level plan in the Vermont Health Benefit Exchange.

1        Fifth: By striking out Sec. 26, Green Mountain Care financing and  
2 coverage; report, in its entirety and inserting in lieu thereof a new Sec. 26 to  
3 read as follows:

4        Sec. 26. GREEN MOUNTAIN CARE FINANCING AND COVERAGE;  
5                REPORT

6                (a) Notwithstanding the January 15, 2013 date specified in 2011 Acts and  
7 Resolves No. 48, Sec. 9, no later than January 15, 2015, the Secretary of  
8 Administration shall submit to the House Committees on Health Care and on  
9 Ways and Means and the Senate Committees on Health and Welfare and on  
10 Finance a proposal to transition to and fully implement Green Mountain Care.  
11 The report shall include the following elements, as well as any other topics the  
12 Secretary deems appropriate:

13                (1) a detailed analysis of the direct and indirect financial impacts of  
14 moving from the current health care system to a publicly financed system,  
15 including the impact by income class and family size for individuals and by  
16 business size, economic sector, and total sales or revenue for businesses, as  
17 well as the effect on various wage levels and job growth;

18                (2) recommendations for the amounts and necessary mechanisms to  
19 finance Green Mountain Care, including:

20                (A) proposing the amounts to be contributed by individuals and  
21 businesses;

1           (B) recommending financing options for wraparound coverage for  
2           individuals with other primary coverage, including evaluating the potential for  
3           using financing tiers based on the level of benefits provided by Green  
4           Mountain Care; and

5           (C) addressing cross-border financing issues;

6           (3) wraparound benefits for individuals for whom Green Mountain Care  
7           will be the payer of last resort pursuant to 33 V.S.A. § 1827(f), including  
8           individuals covered by the Federal Employees Health Benefit Program,  
9           TRICARE, Medicare, retiree health benefits, or an employer health plan;

10          (4) recommendations for addressing cross-border health care delivery  
11          issues;

12          (5) establishing provider reimbursement rates in Green Mountain Care;

13          (6) developing estimates of administrative savings to health care  
14          providers and payers from Green Mountain Care; and

15          (7) information regarding Vermont's efforts to obtain a Waiver for State  
16          Innovation pursuant to Section 1332 of the Patient Protection and Affordable  
17          Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education  
18          Reconciliation Act of 2010, Pub. L. No. 111-152, including submission of a  
19          conceptual waiver application as required by Sec. 10 of this act.

20          (b) If the Secretary of Administration does not submit the Green Mountain  
21          Care financing and coverage proposal required by this section to the General

1 Assembly by January 15, 2015, no portion of the unencumbered funds  
2 remaining as of that date in the fiscal year 2015 appropriation to the Agency of  
3 Administration for the planning and the implementation of Green Mountain  
4 Care shall be expended until the Secretary submits the required proposal.

5 Sixth: By striking out Sec. 29, transition plan for union employees, in its  
6 entirety and inserting in lieu thereof a new Sec. 29 to read as follows:

7 Sec. 29. TRANSITION PLAN FOR UNION EMPLOYEES

8 The Commissioners of Labor and of Human Resources; one representative  
9 each from the Vermont League of Cities and Towns, the Vermont School  
10 Boards Association, and the Vermont School Board Insurance Trust; and five  
11 representatives from a coalition of labor organizations active in Vermont, in  
12 consultation with other interested stakeholders, shall develop a plan for  
13 transitioning employees with collectively bargained health benefits from their  
14 existing health insurance plans to Green Mountain Care, with the goal that  
15 union employees shall be enrolled in Green Mountain Care upon  
16 implementation, which is currently targeted for 2017. The transition plan shall  
17 be consistent with State and federal labor relations laws and public and private  
18 sector collective bargaining agreements and shall ensure that total employee  
19 compensation does not decrease significantly, nor financial costs to employers  
20 increase significantly, as a result of the transition of employees to Green  
21 Mountain Care.



1        Eighth: In Sec. 36, effective dates, by inserting a new subdivision (1) to  
2 read as follows:

3            (1) Sec. 11, 21 V.S.A. § 2003(b), shall apply to the calculation of the  
4 Health Care Fund contributions payable in the first quarter of fiscal year 2015,  
5 which shall be based on the number of an employer’s uncovered employees in  
6 the fourth quarter of fiscal year 2014.

7 and by renumbering the remaining subdivisions to be numerically correct.

8  
9

10        (Committee vote: \_\_\_\_\_)

11  
12  
13

\_\_\_\_\_  
Representative \_\_\_\_\_  
FOR THE COMMITTEE