

## **Summary of H.203, An act relating to advancing Vermont's health care reform initiatives**

### **Sec. 1 – Purpose**

- The bill sets forth the Administration's health care policy proposals

### **Secs. 2-5 – Green Mountain Care Board authority**

- Provides the Board with the powers of a court of record
- Allows the Board to conduct inquiries into the activities, finances, and budget of entities the Board regulates
- Allows the Board to bill back to the regulated entities for conducting proceedings

### **Sec. 6 – Green Mountain Care Board duties regarding VITL**

- Requires the Board to review and approve criteria for connectivity to the health information exchange
- Directs the Board to annually review and approve VITL's activities and budget

### **Sec. 7 – Public utility model**

- Directs the Green Mountain Care Board to consider using a public utility model to regulate health care reimbursement
- Report due by February 1, 2017

### **Sec. 8 – Provider rate setting**

- Requires the Green Mountain Care Board to start using its rate setting authority for at least one health care sector by January 1, 2017

### **Sec. 9 - Vermont Information Technology Leaders (VITL)**

- Codifies the membership of the VITL board of directors
- Reflects the Green Mountain Care Board's oversight authority
- Allows the Department of Information and Innovation to review VITL's technology

### **Sec. 10 – Reporting on waivers to the Health Reform Oversight Committee**

- Directs the Administration and the Green Mountain Care Board to report to the Health Reform Oversight Committee on the status of efforts to ensure Medicare and Medicaid participation in the Blueprint and other payment reform initiatives

### **Sec. 11 - Increases to exchange cost-sharing subsidies**

- Households 200%–250% FPL: increases from 77% AV to 83% AV
- Households 250%–300% FPL: increases from 73% AV to 79% AV

### **Sec. 12 - Extension of presuit mediation for medical malpractice claims**

- Extends presuit mediation (through February 1, 2018)

### **Sec. 13 – Repeals**

- Repeals HIT fund portion of claims tax (0.199% of health care claims) on July 1, 2015
- Repeals presuit mediation on February 1, 2018