

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20

S.245

Senators Ashe and Sirotkin move that the bill be amended by striking out Sec. 2, effective date, in its entirety and inserting in lieu thereof the following:

Sec. 2. 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 increase a provider’s reimbursement rates for outpatient medical services provided at an off-campus outpatient department of an academic medical center as a result of the provider’s transfer to or acquisition by the medical center.

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

Sec. 3. PROVIDER REIMBURSEMENT; REPORT

The Green Mountain Care Board shall consider the advisability and feasibility of expanding to commercial health insurers the prohibition on increased reimbursement rates for health care providers newly transferred to or acquired by an academic medical center as described in Sec. 2 of this act. On or before December 1, 2016, 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 Finance, including its

1 recommendations for the process and timing of implementation of the  
2 reimbursement restrictions.

3 Sec. 4. REDUCING PAYMENT DIFFERENTIALS; GUIDANCE AND  
4 IMPLEMENTATION; REPORT

5 (a) On or before May 15, 2016, the Green Mountain Care Board shall  
6 report to the Health Reform Oversight Committee regarding the guidance the  
7 Board has provided to health insurers that are required to develop  
8 implementation plans for fair and equitable reimbursement of professional  
9 services provided by academic medical centers and other professionals  
10 pursuant to 2015 Acts and Resolves No. 54, Sec. 23(b).

11 (b) On or before July 15, 2016, the Green Mountain Care Board shall  
12 provide an update to the Health Reform Oversight Committee summarizing the  
13 contents of the implementation plans submitted to the Board by health insurers  
14 for providing fair and equitable reimbursement amounts for professional  
15 services provided by academic medical centers and other professionals  
16 pursuant to 2015 Acts and Resolves No. 54, Sec. 23(b).

17 (c) No later than one month following the Board's approval of each  
18 implementation plan pursuant to 2015 Acts and Resolves No. 54, Sec. 23(b)  
19 but in no event later than December 1, 2016, the Board shall report to the  
20 Health Reform Oversight Committee on its progress toward achieving fair and  
21 equitable reimbursement amounts for professional services provided by

1 academic medical centers and other professionals without increasing health  
2 insurance premiums or public funding of health care, as required by 2015 Acts  
3 and Resolves No. 54, Sec. 23(b).

4 Sec. 5. EFFECTIVE DATES

5 (a) Sec. 1 (notice to patients of new affiliation) shall take effect on July 1,  
6 2016.

7 (b) Sec. 2 (33 V.S.A. § 1905a) shall take effect on July 1, 2016 and shall  
8 apply to all physicians transferred to or acquired by an academic medical  
9 center on or after the date of passage of this act.

10 (c) Secs. 3 and 4 (Green Mountain Care Board reports) and this section  
11 shall take effect on passage.