

1 H.507

2 Introduced by Committee on Health Care

3 Date:

4 Subject: Health; Medicaid; accountable care organizations; reports

5 Statement of purpose of bill as introduced: This bill proposes to require the  
6 Department of Vermont Health Access to provide periodic reports to the  
7 Health Reform Oversight Committee, the legislative committees of  
8 jurisdiction, and the Office of the Health Care Advocate regarding  
9 implementation of a one-year pilot project agreement between the Department  
10 and an accountable care organization. It would also direct the Green Mountain  
11 Care Board to keep the same parties apprised of its progress in implementing  
12 the All-Payer Model and preparing to regulate accountable care organizations.

13 An act relating to Next Generation Medicaid ACO pilot project reporting  
14 requirements

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

16 Sec. 1. NEXT GENERATION MEDICAID ACO PILOT PROJECT

17 REPORTS

18 (a) On or before June 15, September 15, and December 15, 2017, the  
19 Department of Vermont Health Access shall provide to the House Committees  
20 on Appropriations and on Health Care, the Senate Committees on

1 Appropriations and on Health and Welfare, the Health Reform Oversight  
2 Committee, and the Office of the Health Care Advocate written updates on the  
3 implementation of the Next Generation Medicaid ACO pilot using a reporting  
4 template developed by the Department in consultation with the Office of  
5 Legislative Council and the Joint Fiscal Office. The updates shall include the  
6 following information:

7 (1) the amount of Medicaid funds provided by the Department to the  
8 accountable care organization in each of the three months preceding the month  
9 of the report, except that for the June report, the Department shall report the  
10 amount of Medicaid funds provided in each month since the beginning of the  
11 pilot;

12 (2) the amount of funds expended by the accountable care organization  
13 on behalf of attributed Medicaid beneficiaries in each of the three months  
14 preceding the month of the report, except that for the June report, the  
15 Department shall report the amount of funds expended on behalf of attributed  
16 Medicaid beneficiaries in each month since the beginning of the pilot;

17 (3) the extent to which the accountable care organization has met the  
18 quality indicators specified in the Next Generation Medicaid ACO pilot project  
19 agreement signed on February 1, 2017;

1           (4) the extent to which the Department and the accountable care  
2           organization have met the reporting benchmarks identified in the Department's  
3           Next Generation Medicaid ACO Year 1 (2017) Operational Timeline;

4           (5) to the extent data is available, a comparison of:

5           (A) utilization of health care services by service category and by care  
6           management level for the Medicaid population attributed to the ACO during  
7           the pilot year with the utilization of services for the same population in prior  
8           years; and

9           (B) utilization of health care services by service category and by care  
10          management level for the Medicaid population attributed to the ACO during  
11          the pilot year with the utilization of services for Medicaid beneficiaries not  
12          attributed to the ACO;

13          (6) statistical information regarding the numbers and topics of patient  
14          and provider complaints, grievances, and appeals for attributed Medicaid  
15          beneficiaries and participating providers, as well as any available information  
16          regarding patient and provider satisfaction with the pilot;

17          (7) current information on the size of the participating provider network  
18          since the beginning of the pilot and since the previous report, if applicable; and

19          (8) any change in the size of the Medicaid population attributed to the  
20          ACO since the beginning of the pilot and since the previous report, if  
21          applicable.

1       (b) In addition to the written updates required by subsection (a) of this  
2       section, the Department of Vermont Health Access shall provide testimony on  
3       implementation of the Next Generation Medicaid ACO pilot project at a  
4       meeting of the Health Reform Oversight Committee at least once every two  
5       months or more frequently if so requested by the Committee. The testimony  
6       shall include the information specified in subsection (a) of this section, as well  
7       as any other information the Department deems relevant to the Committee's  
8       oversight of the pilot project during the 2017 legislative interim. The  
9       Committee shall also provide an opportunity for the Office of the Health Care  
10       Advocate to testify at the same meetings as the Department regarding issues  
11       related to the pilot project, including information on complaints, grievances,  
12       and appeals reported to or requiring investigation or other action by the Office.

13       Sec. 2. ALL-PAYER MODEL AND ACCOUNTABLE CARE

14               ORGANIZATION REPORTS

15       On or before June 15, September 15, and December 15, 2017, the Green  
16       Mountain Care Board shall provide to the House Committees on  
17       Appropriations and on Health Care, the Senate Committees on Appropriations  
18       and on Health and Welfare, the Health Reform Oversight Committee, and the  
19       Office of the Health Care Advocate written updates on the Board's progress in  
20       meeting the benchmarks identified in the Board's Year 0 (2017) All-Payer

1 ACO Model Timeline regarding implementation of the All-Payer Model and  
2 the Board's preparations for regulating accountable care organizations.

3 Sec. 3. EFFECTIVE DATE

4 This act shall take effect on passage.