

1 H.914

2 Introduced by Committee on Health Care

3 Date:

4 Subject: Health; Department of Vermont Health Access; accountable care
5 organizations

6 Statement of purpose of bill as introduced: This bill proposes to require the
7 Department of Vermont Health Access to provide quarterly reports to the
8 Health Reform Oversight Committee, the legislative committees of
9 jurisdiction, the Green Mountain Care Board, and the Office of the Health
10 Care Advocate regarding implementation of the second year of the Vermont
11 Medicaid Next Generation ACO Pilot Project. It would also direct the Green
12 Mountain Care Board to keep the same parties apprised of its progress in
13 implementing the All-Payer Model and regulating accountable care
14 organizations.

15 An act relating to reporting requirements for the second year of the
16 Vermont Medicaid Next Generation ACO Pilot Project

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

18 Sec. 1. VERMONT MEDICAID NEXT GENERATION ACO PILOT

19 PROJECT REPORTS

(a) On or before June 15, September 15, and December 15, 2018, the

Department of Vermont Health Access shall provide to the House Committees on Appropriations, on Human Services, and on Health Care, the Senate Committees on Appropriations and on Health and Welfare, the Health Reform Oversight Committee, the Green Mountain Care Board, *the Medicaid and Exchange Advisory Committee*, and the Office of the Health Care Advocate written updates on the implementation of the Vermont Medicaid Next Generation ACO Pilot Project (Pilot Project). The updates shall include the following information:

1 (1) the amount of Medicaid funds provided by the Department to the
2 accountable care organization (ACO) in each of the three months preceding the
3 month of the report; the June report shall also include the amounts for January
4 and February 2018 and the total amount of Medicaid funds provided since the
5 beginning of the Pilot Project;

6 (2) the amount of funds expended by the accountable care organization
7 on behalf of attributed Medicaid beneficiaries in each of the three months
8 preceding the month of the report; the June report shall also include the
9 amounts for January and February 2018 and the total amount of funds
10 expended on behalf of attributed Medicaid beneficiaries since the beginning of
11 the Pilot Project;

12 (3) the extent to which the accountable care organization has met the
13 quality indicators specified in the Vermont Medicaid Next Generation ACO

1 Pilot Project agreement signed on February 1, 2017, using both annual data
2 and quarterly data for those indicators for which quarterly data are available;

3 (4) the extent to which the Department and the accountable care
4 organization have met the reporting benchmarks identified in the Department's
5 Vermont Medicaid Next Generation ACO Pilot Project Year 2 (2018)
6 Operational Timeline;

7 (5) to the extent data are available, a comparison of:

8 (A) utilization of health care services by service category and by care
9 management level for the Medicaid population attributed to the ACO during
10 the second year of the Pilot Project with the utilization of services for the same
11 population in prior years; and

12 (B) utilization of health care services by service category and by care
13 management level for the Medicaid population attributed to the ACO during
14 the second year of the Pilot Project with the utilization of services for
15 Medicaid beneficiaries not attributed to the ACO;

16 (6) statistical information regarding the numbers and topics of patient
17 and provider complaints, grievances, and appeals for attributed Medicaid
18 beneficiaries and participating providers, as well as any available information
19 regarding patient and provider satisfaction with the Pilot Project;

20 (7) current information on the size of the participating provider network
21 since the beginning of the Pilot Project and since the previous report; and

1 (8) any change in the size of the Medicaid population attributed to the
2 ACO since the beginning of the Pilot Project and since the previous report.

3 (b) In addition to the written updates required by subsection (a) of this
4 section, the Department of Vermont Health Access shall provide testimony on
5 implementation of the Vermont Medicaid Next Generation ACO Pilot Project
6 at a meeting of the Health Reform Oversight Committee at least once every
7 two months or more frequently if so requested by the Committee. The
8 testimony shall include the information specified in subsection (a) of this
9 section, as well as any other information the Department deems relevant to the
10 Committee's oversight of the Pilot Project in 2018 after adjournment of the
11 General Assembly. The Committee shall also provide an opportunity for the
12 Office of the Health Care Advocate to testify at the same meetings as the
13 Department regarding issues related to the Pilot Project, including information
14 on complaints, grievances, and appeals reported to or requiring investigation
15 or other action by the Office.

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

17 ORGANIZATION REPORTS

(a) On or before June 15, September 15, and December 15, 2018, the
Green Mountain Care Board shall provide to the House Committees on
Appropriations, on Human Services, and on Health Care, the Senate
Committees on Appropriations and on Health and Welfare, the Health Reform

Oversight Committee, *the Medicaid and Exchange Advisory Committee*, and the Office of the Health Care Advocate written updates on the Board's progress in meeting the benchmarks identified in the Board's Year 1 (2018) All-Payer ACO Model Timeline regarding implementation of the All-Payer Model and the Board's regulation of accountable care organizations.

1 (b) The Board shall also provide to the committees and office described in
2 subsection (a) of this section, to the extent permitted under federal law, the
3 analysis of health care spending required by the Vermont All-Payer ACO
4 Agreement, including:

5 (1) on or before August 1, 2018, information regarding whether the
6 number of attributed lives is consistent with the scale targets in the All-Payer
7 Model ACO Agreement; and

8 (2) on or before November 1, 2018, quality and financial performance
9 information.

10 Sec. 3. EFFECTIVE DATE

11 This act shall take effect on passage.