

1 S.282

2 Introduced by Senator Ayer

3 Referred to Committee on Health and Welfare

4 Date: January 3, 2018

5 Subject: Health; Department of Vermont Health Access; Medicaid; health care
6 provider screening and enrollment; Medicaid fraud

7 Statement of purpose of bill as introduced: This bill proposes to require the
8 Department of Vermont Health Access to complete the screening and
9 enrollment for an applicant to be a participating provider in the Medicaid
10 program within 60 days after receiving the application. It would also direct
11 the Department to identify and report on the main concerns of participating
12 providers and to make recommendations for any necessary changes to the
13 Medicaid fraud and abuse statutes.

14 An act relating to health care providers participating in Vermont's Medicaid
15 program

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

17 Sec. 1. MEDICAID PROVIDER SCREENING AND ENROLLMENT

18 (a) Beginning on or before July 1, 2019, the Department of Vermont
19 Health Access shall conclude the screening and enrollment process for each
20 health care provider applying to participate in the Medicaid program within

1 60 calendar days following receipt of the provider's completed application.

2 An application shall be considered complete when the Department has
3 received all information and documentation necessary to conduct the screening
4 and enrollment.

5 ~~(b) In the event that the Department of Vermont Access will be unable to~~
6 ~~meet the 60-day time frame required by subsection (a) of this section by July~~
7 ~~1, 2019, the Commissioner of Vermont Health Access shall submit a report by~~
8 ~~February 1, 2019 to the House Committee on Health Care, the Senate~~
9 ~~Committee on Health and Welfare, and the Health Reform Oversight~~
10 ~~Committee regarding the status of the Department's provider screening and~~
11 ~~enrollment efforts, including identifying the remaining barriers and any~~
12 ~~additional resources needed for the Department to be able to process~~
13 ~~applications within 60 days of receipt and providing an alternative date by~~
14 ~~which the Department expects to begin meeting the 60-day time frame~~
15 ~~requirement.~~

(b) In the event that the Department of Vermont Health Access will be
unable to meet the 60-day time frame required by subsection (a) of this section
by July 1, 2019, the Commissioner of Vermont Health Access shall convene a
meeting of interested stakeholders, including organizations representing health
care providers and health care facilities, on or before February 1, 2019, to
provide an update regarding the status of the Department's provider screening
and enrollment efforts, including identifying the remaining barriers and any
additional resources needed for the Department to be able to process
applications within 60 days following receipt and providing an alternative date
by which the Department expects to begin meeting the 60-day time frame
requirement.

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1 Sec. 2. MEDICAID PARTICIPATING PROVIDER CONCERNS; ~~REPORT~~

2 (a) The Department of Vermont Health Access shall consult with providers
3 participating in Vermont's Medicaid program to identify their main concerns
4 related to the Medicaid program and its administration. In addition, the
5 Department shall evaluate, in consultation with the Office of the Attorney
6 General, its implementation of State and federal Medicaid fraud and abuse
7 provisions as they relate to participating providers, including the audit and
8 recoupment timelines, processes, and procedures. The Department shall also
9 assess the feasibility of creating an exception to recoupment for cases
10 involving good-faith interpretations of ambiguous statutes, rules, and guidance
11 and for claims filed in good-faith reliance on information provided by
12 employees of the Department of Vermont Health Access, the Agency of
13 Human Services, or their contractors.

14 ~~(b) On or before January 15, 2019, the Commissioner of Vermont Health~~
15 ~~Access shall submit to the House Committee on Health Care and the Senate~~
16 ~~Committee on Health and Welfare a report summarizing its findings regarding~~
17 ~~participating providers' concerns and providing the Department's responses to~~
18 ~~those concerns; proposing any modifications to the fraud and abuse statutes~~
19 ~~that the Department considers appropriate and that are permissible under~~
20 ~~federal law; and recommending whether to create an exception to recoupment~~
21 ~~as described in subsection (a) of this section.~~

(b) On or before December 15, 2018, the Commissioner of Vermont Health Access shall convene a meeting of interested stakeholders to provide a summary of the Department's responses to participating providers' concerns regarding the Medicaid program and its administration and of the Department's findings regarding the potential for making changes to the Medicaid fraud and abuse statutes and for creating an exception to recoupment as described in subsection (a) of this section.

1 Sec. 3. EFFECTIVE DATE

2 This act shall take effect on passage.