S.53 - An act relating to a universal, publicly funded primary care system Section by section summary as passed by Senate Health & Welfare

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Sec. 1. Intent

• Expresses legislative intent to create and implement a program of universal, publicly financed primary care for all Vermonters with no cost-sharing

Sec. 2. Findings

• States legislative findings about universal access to primary care and a universal primary care program

Sec. 3. Draft operational model and reporting requirements

- Requires the Green Mountain Care Board (GMCB) to convene accountable care organizations (ACOs), Bi-State Primary Care, and other stakeholders with applicable subject matter expertise to develop a draft operational model for a universal primary care program, which must address:
 - o who would be eligible for services
 - o who would deliver services and in what settings
 - o how funding would move through the health care system
 - how to maintain records showing quality of care without increasing administrative burden
- If permitted under the All-Payer ACO Agreement and Vermont's Medicaid Section 1115 waiver, allows up to \$300,000 in ACO expenses to be funded through delivery system reform payments
- Allows the Senate Health and Welfare Committee to meet up to five times after adjournment in 2018 to provide guidance and receive updates on the draft operational model
- Draft operational model must be submitted to legislative committees by January 1, 2019
- Requires Department of Human Resources and Department of Vermont Health Access to provide their assessments of the draft operational model and recommendations on implementation of the universal primary care program to legislative committees by July 1, 2019
- Requires Department of Financial Regulation (DFR) to provide recommendations on reinsurance and solvency to legislative committees by July 1, 2019

Sec. 4. Legal analysis and report

- Requires the Attorney General's Office, in consultation with GMCB and DFR, to conduct a legal analysis of potential legal issues with implementing a universal primary care program in Vermont
- Legal analysis is due to legislative committees by January 1, 2019

Sec. 5. Scope of services and providers report

• Directs GMCB to convene a working group to develop:

- o recommendations for the specific services and providers to be included in the universal primary care program
- o methods to resolve coordination of benefits issues
- o recommendations for addressing other issues with development and implementation of universal primary care program
- Recommendations due to legislative committees by October 1, 2018

Sec. 6. Implementation timeline and conditions

- The General Assembly adopts an implementation timeline for universal primary care program as follows:
 - By January 1, 2020, Agency of Human Services (AHS) submits a final implementation plan
 - During the 2020 legislative session, the General Assembly enacts funding mechanism(s)
 - o By January 1, 2021, AHS applies to the federal government for all necessary waivers and approvals
 - o By January 1, 2022, coverage of publicly financed primary care services begins
- Implementation will occur only if the program:
 - o will not increase the administration burden on primary care providers
 - o will provide sufficient reimbursement to attract enough participating providers
 - o has appropriate financing in place
 - o will cover basic mental health care
 - o will not cover dental care services
 - o will provide clear information about which services are and are not covered
 - o adheres to the Act 48 principles

Sec. 7. Universal primary care program

- Creates a new subchapter on universal primary care
- Expresses legislative intent that all Vermont residents should receive publicly funded primary care services
- Lists the categories of services that should be included in the universal primary care program when provided by a health care provider in a list of primary care specialty types
- Specifies that Medicare should continue to be the primary payer for Vermonters on Medicare, but that the State should cover any co-payments and deductibles required from Medicare beneficiaries for primary care services
- Establishes the Universal Primary Care Fund to be the single source to finance primary care for Vermont residents
 - the Fund would include monies appropriated by the General Assembly, revenue from any taxes established to finance universal primary care, and federal funds from Medicaid and from Exchange subsidies if allowed by federal waivers

Sec. 8. Effective date

• The act takes effect on passage