

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21

H.507

Senators Sirotkin, Ashe and Mullin move that the Senate propose to the House that the report of the Committee on Health and Welfare be amended in Sec. 3, 2016 Acts and Resolves No. 165, Sec. 6, as follows:

First: In subsection (e), by striking out subdivision (2) in its entirety and inserting in lieu thereof the following:

(2) Prior to reenrolling an individual in a plan pursuant to subdivision (1) of this subsection, the health insurer shall notify the individual of the insurer’s intent to reenroll ~~automatically~~ the individual automatically in a bronze-level qualified health benefit plan for the forthcoming plan year ~~2018~~ with an out-of-pocket prescription drug limit at or below the limit established in 8 V.S.A. § 4089i unless the individual contacts the insurer to select a different plan, and of the availability of bronze-level plans with higher out-of-pocket prescription drug limits. The health insurer shall collaborate with the consumer organization members of the advisory group established in subsection (a) of this section as to the notification’s form and content.

Second: In subdivision (h), by striking out subdivision (2) in its entirety and inserting in lieu thereof the following:

(2) recommendations from the advisory group established pursuant to subsection (a) of this section regarding ~~continuation of the out-of-pocket prescription drug limit established in 8 V.S.A. § 4089i;~~

1

2

(A) whether there is a need for flexibility in the design of bronze-level plans on the Vermont Health Benefit Exchange for plan years after plan year 2019; and

3

4

(B) if there is a continued need for flexibility in the design of bronze plans, options for enabling that flexibility without limiting or eroding the value or availability of the protection afforded by the out-of-pocket prescription drug limit established in 8 V.S.A. § 4089i.

5

6

7

8