

H.912 - Possible language additions from Senator Ayer

* * * Regulation of Freestanding Health Care Facilities * * *

Sec. ____ . REGULATION OF FREESTANDING HEALTH CARE FACILITIES; WORKING GROUP; REPORT

(a) The Blueprint for Health shall convene a working group to develop recommendations for the regulation of freestanding health care facilities and their role in a coordinated and cohesive health care delivery system. The recommendations shall address:

(1) whether and how the State should license and regulate ambulatory surgical centers, freestanding birth centers, urgent care clinics, retail health clinics, and other freestanding health care facilities;

(2) whether and to what extent these facilities should participate in and contribute to the support of Vermont's health care reform initiatives, including financial support for the work of the Green Mountain Care Board, the Office of the Health Care Advocate, and the Vermont Program for Quality in Health Care, Inc.; and

(3) whether and to what extent the State should impose a provider tax on these facilities to support the Medicaid program, if such a tax is permitted under federal law.

(b) The working group shall comprise representatives of ambulatory surgical centers, urgent care clinics, hospitals, the Green Mountain Care Board, the Department of Vermont Health Access, the Department of Health, the Office of the Health Care Advocate, the Vermont Program for Quality in Health Care, Inc., and other interested stakeholders.

(c) On or before December 1, 2018, the working group shall provide its recommendations to the House Committees on Health Care and on Ways and Means, the Senate Committees on Health and Welfare and on Finance, and the Health Reform Oversight Committee.

Sec. ____ 33 V.S.A. § 1803(e) is added to read:

(e) The Vermont Health Benefit Exchange shall ensure that all materials mailed to applicants for and enrollees in qualified health benefit plans are sent in an envelope bearing a return address and that the outside of any envelope containing a grace period notice clearly indicates that the materials enclosed relate to the status of the enrollee's health insurance coverage.