## 1 TO THE HONORABLE SENATE: 2 The Committee on Health and Welfare to which was referred Senate Bill 3 No. 203 entitled "An act relating to systemic improvements of the mental 4 health system" respectfully reports that it has considered the House Proposal of 5 Amendment and recommends that the Senate concur with further proposal of 6 amend as follows: 7 First: In Sec. 1, legislative intent, in subdivision (b)(1), after "capacity" and 8 before the semicolon, by inserting the phrase and which may be State operated 9 and in subdivision (b)(2), after the word "State" and before the semicolon, by 10 inserting the phrase, including consideration of maintaining the current State-11 owned Vermont Psychiatric Care Hospital as an acute inpatient facility 12 Second: By striking out the reader assistance heading before Sec. 4 and 13 inserting in lieu thereof: \* \* \* Waiver of Certificate of Need Requirements \* \* \* 14 Third: By striking out Sec. 4 in its entirety and inserting in lieu thereof as 15 16 follows: 17 Sec. 4. WAIVER OF CERTIFICATE OF NEED REQUIREMENTS 18 Notwithstanding any provisions of 18 V.S.A. chapter 221, subchapter 5 to 19 the contrary: 20 (1) the implementation of renovations at the Brattleboro Retreat as 21 authorized in the fiscal year 2019 capital budget adjustment bill shall not be

1	considered a "new heath care project" for which a certificate of need is		
2	required; and		
3	(2) the proposal by the University of Vermont Health Network to		
4	expand psychiatric inpatient capacity at the Central Vermont Medical Center		
5	campus shall be exempt from the requirement to secure a conceptual		
6	development phase certificate of need pursuant to 18 V.S.A. § 9434(c).		
7	Fourth: By striking out Sec. 8 in its entirety and inserting in lieu thereof the		
8	following:		
9	Sec. 8. RATES OF PAYMENTS TO DESIGNATED AND		
10	SPECIALIZED SERVICE AGENCIES		
11	The community-based services provided by designated and specialized		
12	service agencies are a critical component of Vermont's health care system.		
13	The ability to recruit and retain qualified employees is necessary for delivery		
14	of mental health services. In recognition of the importance of the designated		
15	and specialized service agencies, the Agency of Human Services shall:		
16	(1) Conduct ongoing financial, service delivery, and quality review		
17	processes, which shall consider changes in operating costs over time, caseload		
18	trends, changes in programs and practices, geographic differences in labor		
19	markets, and the fiscal health of each designated and specialized service		
20	agency. The review shall inform payment rates, the performance grant		
21	processes, and payment reform work by drawing upon and combining current		

1	review processes and not creating duplicate or redundant reporting processes			
2	for either the Agency or the designated and specialized service agencies.			
3	(2) On or before January 15, 2019, present a proposal, in conjunction			
4	with the Green Mountain Care Board and the designated and specialized			
5	service agencies, for providing the designated and specialized service agency			
6	budgets to the Board for informational purposes for its work on health care			
7	system costs to the House Committees on Appropriations, on Health Care, and			
8	on Human Services and to the Senate Committees on Appropriations and on			
9	Health and Welfare. The presentation shall be consistent with the long-term			
10	goals of payment reform to address the potential for a review process of the			
11	designated and specialized service agency budgets by the Board as part of an			
12	integrated health care system.			
13	Fifth: In Sec. 9, amending 2017 Acts and Resolves No. 82, Sec. 3(c), by			
14	striking out the third sentence and inserting in lieu thereof the following:			
15	The evaluation process shall include an examination as to whether the			
16	principles for mental health care reform in 18 V.S.A. § 7251 are reflected in			
17	the current mental health system, and if not, where system gaps exist.			
18	Sixth: In Sec. 10, report; institutions for mental disease, by striking out			
19	subdivision (1) and inserting in lieu thereof the following:			
20	(1) a status update that shall provide possible solutions considered as			
21	part of the State's response to the Centers for Medicare and Medicaid Services'			

1	requirement to begin reducing federal Medicai	d spending due on or before
2	November 15, 2018; and	
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10	(Committee vote:)	
11		
12		Senator
13		FOR THE COMMITTEE

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