

H.528

An act relating to the Rural Health Services Task Force

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

Sec. 1. RURAL HEALTH SERVICES TASK FORCE; REPORT

(a) Creation. There is created the Rural Health Services Task Force to evaluate the current state of rural health care in Vermont and identify ways to sustain the system and to ensure it provides access to affordable, high-quality health care services.

(b) Membership. The Rural Health Services Task Force shall be composed of the following members:

(1) the Secretary of Human Services or designee;

(2) the Chair of the Green Mountain Care Board or designee;

(3) the Chief Health Care Advocate from the Office of the Health Care Advocate or designee;

(4) two representatives of rural Vermont hospitals, selected by the Vermont Association of Hospitals and Health Systems, who shall represent hospitals that are located in different regions of the State and that face different levels of financial stability;

(5) one representative of Vermont's federally qualified health centers, who shall be a Vermont-licensed health care professional, selected by Bi-State Primary Care Association;

(6) one Vermont-licensed physician from an independent practice located in a rural Vermont setting, selected jointly by the Vermont Medical Society and HealthFirst;

(7) one representative of Vermont's designated agencies, selected by Vermont Care Partners;

(8) one Vermont-licensed mental health professional from an independent practice located in a rural Vermont setting, selected by the Commissioner of Mental Health;

(9) one representative of Vermont's home health agencies, selected jointly by the VNAs of Vermont and Bayada Home Health Care; and

(10) one representative of long-term care facilities, selected by the Vermont Health Care Association.

(c) Powers and duties. The Rural Health Services Task Force shall consider issues relating to rural health care delivery in Vermont, including:

(1) the current system of rural health care delivery in Vermont, including the role of rural hospitals in the health care continuum;

(2) how to ensure the sustainability of the rural health care system, including identifying the major financial, administrative, and workforce barriers;

(3) ways to overcome any existing barriers to the sustainability of the rural health care system, including prospective ideas for the future of access to health care services in rural Vermont across the health care continuum; and

(4) the potential consequences of the failure of one or more rural Vermont hospitals.

(d) Assistance. The Rural Health Services Task Force shall have the administrative, technical, and legal assistance of the Agency of Human Services and the Green Mountain Care Board.

(e) Report. On or before December 31, 2019, the Rural Health Services Task Force shall submit a written report to the House Committees on Health Care and on Human Services and the Senate Committee on Health and Welfare with its findings and recommendations, including any recommendations for legislative action.

(f) Meetings.

(1) The Secretary of Human Services or designee shall call the first meeting of the Rural Health Services Task Force to occur on or before July 1, 2019.

(2) The Task Force shall select a chair from among its members at the first meeting.

(3) A majority of the membership of the Task Force shall constitute a quorum.

(4) The Task Force shall cease to exist following submission of its report or on December 31, 2019, whichever occurs first.

Sec. 2. EFFECTIVE DATE

This act shall take effect on passage.