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1	TO THE HOUSE OF REPRESENTATIVES:
2	The Committee on Government Operations to which was referred House
3	Bill No. 358 entitled "An act relating to technical corrections" respectfully
4	reports that it has considered the same and recommends that the bill be
5	amended as follows:
6	First: By striking out Sec. 52, 18 V.S.A. § 7304, in its entirety and inserting
7	in lieu thereof the following:
8	Sec. 52. [Deleted.]
9	Second: By striking out Secs. 53–59 in their entirety and inserting in lieu
10	thereof new Secs. 53–59 to read:
11	Sec. 53. 18 V.S.A. § 9371 is amended to read:
12	§ 9371. PRINCIPLES FOR HEALTH CARE REFORM
13	* * *
14	(4) Primary care must be preserved and enhanced so that Vermonters have
15	care available to them, preferably within their own communities. The health
16	care system must ensure that Vermonters have access to appropriate mental

missions of the State's academic medical center and other postsecondary

health care that meets the Institute of Medicine's triple aims standards of

quality, access, and affordability and that is equivalent to other components of

health care as part of an integrated, holistic system of care. Other aspects of

Vermont's health care infrastructure, including the educational and research

1	educational institutions, the nonprofit missions of the community hospitals,
2	and the critical access designation of rural hospitals, must be supported in such
3	a way that all Vermonters, including those in rural areas, have access to
4	necessary health services and that these health services are sustainable.
5	* * *
6	Sec. 54. 18 V.S.A. § 9382 is amended to read:
7	§ 9382. OVERSIGHT OF ACCOUNTABLE CARE ORGANIZATIONS
8	(a) In order to be eligible to receive payments from Medicaid or
9	commercial insurance through any payment reform program or initiative,
10	including an all-payer model, each accountable care organization shall obtain
11	and maintain certification from the Green Mountain Care Board. The Board
12	shall adopt rules pursuant to 3 V.S.A. chapter 25 to establish standards and
13	processes for certifying accountable care organizations. To the extent
14	permitted under federal law, the Board shall ensure these rules anticipate and
15	accommodate a range of ACO models and sizes, balancing oversight with
16	support for innovation. In order to certify an ACO to operate in this State, the
17	Board shall ensure that the following criteria are met:
18	* * *
19	(2) The ACO has established appropriate mechanisms and care models
20	to provide, manage, and coordinate high-quality health care services for its
21	patients, including incorporating the Blueprint for Health, coordinating

services for complex high-need patients, and providing access to health care providers who are not participants in the ACO. The ACO ensures equal access to appropriate mental health care that meets the Institute of Medicine's triple aims standards of quality, access, and affordability in a manner that is equivalent to other aspects components of health care as part of an integrated, holistic system of care.

* * *

Sec. 55. 18 V.S.A. § 9405(a) is amended to read:

(a) The Secretary of Human Services or designee, in consultation with the Chair of the Green Mountain Care Board and health care professionals and after receipt of public comment, shall adopt a State Health Improvement Plan that sets forth the health goals and values for the State. The Secretary may amend the Plan as the Secretary deems necessary and appropriate. The Plan shall include health promotion, health protection, nutrition, and disease prevention priorities for the State; identify available human resources as well as human resources needed for achieving the State's health goals and the planning required to meet those needs; identify gaps in ensuring equal access to appropriate mental health care that meets the Institute of Medicine's triple aims standards of quality, access, and affordability equivalent to other components of health care as part of an integrated, holistic system of care; and identify geographic parts of the State needing investments of additional

- 1 resources in order to improve the health of the population. Copies of the Plan
- 2 shall be submitted to members of the Senate Committee on Health and Welfare
- and the House Committee on Health Care.
- 4 Sec. 56. 18 V.S.A. § 9405a(a) is amended to read:
- 5 (a) Each hospital shall have a protocol for meaningful public participation
- 6 in its strategic planning process for identifying and addressing health care
- 7 needs that the hospital provides or could provide in its service area. Needs
- 8 identified through the process shall be integrated with the hospital's long-term
- 9 planning. Each hospital shall post on its website a description of its identified
- needs, strategic initiatives developed to address the identified needs, annual
- progress on implementation of the proposed initiatives, opportunities for public
- 12 participation, and the ways in which the hospital ensures access to appropriate
- mental health care that meets the Institute of Medicine's triple aims standards
- of quality, access, and affordability equivalent to other components of health
- care as part of an integrated, holistic system of care. Hospitals may meet the
- 16 community health needs assessment and implementation plan requirement
- through compliance with the relevant Internal Revenue Service community
- health needs assessment requirements for nonprofit hospitals.

1	Sec. 57. 18 V.S.A. § 9437 is amended to read:
2	§ 9437. CRITERIA
3	A certificate of need shall be granted if the applicant demonstrates that the
4	project serves the public good and the Board finds:
5	* * *
6	(9) The project will support equal access to appropriate mental health
7	care that meets the Institute of Medicine's triple aims standards of quality,
8	access, and affordability equivalent to other components of health care as part
9	of an integrated, holistic system of care, as appropriate.
10	* * *
11	Sec. 58. 18 V.S.A. § 9456(c) is amended to read:
12	(c) Individual hospital budgets established under this section shall:
13	* * *
14	(6) demonstrate that they support equal access to appropriate mental
15	health care that meets the Institute of Medicine's triple aims standards of
16	quality, access, and affordability equivalent to other components of health care
17	as part of an integrated, holistic system of care.
18	* * *

1	Sec. 59. 18 V.S.A. § 9491 is amended to read:
2	§ 9491. HEALTH CARE WORKFORCE; STRATEGIC PLAN
3	* * *
4	(b) The Director or designee shall collaborate with the area health
5	education centers, the State Workforce Development Board established in
6	10 V.S.A. § 541a, the Prekindergarten-16 Council established in 16 V.S.A.
7	§ 2905, the Department of Labor, the Department of Health, the Department of
8	Vermont Health Access, and other interested parties to develop and maintain
9	the plan. The Director of Health Care Reform shall ensure that the strategic
10	plan includes recommendations on how to develop Vermont's health care
11	workforce, including:
12	* * *
13	(2) the resources needed to ensure that:
14	* * *
15	(C) all Vermont residents have access to appropriate mental health
16	care that meets the Institute of Medicine's triple aims standards of quality,
17	access, and affordability equivalent to other components of health care as part
18	of an integrated, holistic system of care;
19	* * *

1	Third: By striking out Sec. 60, 18 V.S.A. § 9603, in its entirety and
2	inserting in lieu thereof a new Sec. 60 to read:
3	Sec. 60. 18 V.S.A. § 9603(a) is amended to read:
4	§ 9603. DUTIES AND AUTHORITY
5	(a) The Office of the Health Care Advocate shall:
6	* * *
7	(11) Submit to the Governor; the House Committees on Health Care,
8	the House Committee on Ways and Means, and the House and Senate
9	Committees on Appropriations; and the Senate Committees on Health and
10	Welfare, on Finance, and on Appropriations, on or before January 1 of each
11	year, a report on the activities, performance, and fiscal accounts of the Office
12	during the preceding calendar year.
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17	(Committee vote:)
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19	Representative
20	FOR THE COMMITTEE