

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Human Services to which was referred Senate Bill No.
3 43 entitled “An act relating to prohibiting prior authorization requirements for
4 medication-assisted treatment” respectfully reports that it has considered the
5 same and recommends that the House propose to the Senate that the bill be
6 amended by striking out all after the enacting clause and inserting in lieu
7 thereof the following:

8 Sec. 1. 8 V.S.A. § 4089b is amended to read:

9 § 4089b. HEALTH INSURANCE COVERAGE, MENTAL HEALTH, AND
10 SUBSTANCE ABUSE USE DISORDER

11 * * *

12 (b) As used in this section:

13 (1) “Health insurance plan” means any health insurance policy or health
14 benefit plan offered by a health insurer, as defined in 18 V.S.A. § 9402, except
15 a benefit plan providing coverage for a specific disease or other limited benefit
16 coverage. Health insurance plan includes any health benefit plan offered or
17 administered by the State, or any subdivision or instrumentality of the State.

18 * * *

19 (c) A health insurance plan shall provide coverage for treatment of a mental
20 condition and shall:

1 Sec. 2. 18 V.S.A. § 4750 is amended to read:

2 § 4750. ~~DEFINITION~~ DEFINITIONS

3 As used in this chapter, ~~“medication-assisted treatment”~~:

4 (1) “Health insurance plan” has the same meaning as in 8 V.S.A.

5 § 4089b.

6 (2) “Medication-assisted treatment” means the use of U.S. Federal Food
7 and Drug Administration-approved medications, in combination with
8 counseling and behavioral therapies, to provide a whole patient approach to the
9 treatment of substance use disorders.

10 Sec. 3. 18 V.S.A. § 4754 is added to read:

11 § 4754. LIMITATION ON PRIOR AUTHORIZATION

12 A health insurance plan shall not require prior authorization for medication-
13 assisted treatment that is within the U.S. Food and Drug Administration’s
14 dosing recommendations.

15 Sec. 4. PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED

16 TREATMENT; MEDICAID; REPORTS

17 On or before February 1, 2020, 2021, and 2022, the Department of Vermont
18 Health Access shall report to the House Committees on Health Care and on
19 Human Services and the Senate Committee on Health and Welfare regarding
20 prior authorization processes for medication-assisted treatment in Vermont’s
21 Medicaid program during the previous calendar year, including which

1 medications required prior authorization; how many prior authorization
2 requests the Department received and, of these, how many were approved and
3 denied; and the average and longest lengths of time the Department took to
4 process a prior authorization request.

5 Sec. 5. EFFECTIVE DATES

6 (a) This section and Secs. 2 (18 V.S.A. § 4750) and 4 (prior authorization
7 for medication-assisted treatment; Medicaid; reports) shall take effect on July
8 1, 2019.

9 (b) Secs. 1 (8 V.S.A. § 4089b) and 3 (18 V.S.A. § 4754) shall take effect
10 on January 1, 2020 and shall apply to health insurance plans on or after
11 January 1, 2020 on such date as a health insurer issues, offers, or renews the
12 health insurance plan, but in no event later than January 1, 2021.

13 and that after passage the title of the bill be amended to read: “An act
14 relating to limiting prior authorization requirements for medication-assisted
15 treatment”

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18 (Committee vote: _____)

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Representative _____

FOR THE COMMITTEE