

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Human Services to which was referred Senate Bill No. 7
3 entitled “An act relating to social service integration with Vermont’s health
4 care system” respectfully reports that it has considered the same and
5 recommends that the report of the House Committee on Health Care be
6 amended as follows:

7 First: In Sec. 1, by striking out subdivision (a)(1) in its entirety and
8 inserting in lieu thereof a new subdivision (a)(1) to read as follows:

9 (a)(1) On or before January 1, 2021, the Agency of Human Services, in
10 collaboration with the Green Mountain Care Board, shall submit to the House
11 Committees on Appropriations, on Health Care, and on Human Services and
12 the Senate Committees on Appropriations and on Health and Welfare a plan to
13 coordinate the financing and delivery of Medicaid mental health services and
14 Medicaid home- and community-based services with the all-payer financial
15 target services, including future plans for the integration of long-term care
16 services with the ACO.

17 Second: By striking out Sec. 2a in its entirety and inserting in lieu thereof a
18 new Sec. 2a to read as follows:

19 Sec. 2a. 18 V.S.A. § 9382 is amended to read:

20 § 9382. OVERSIGHT OF ACCOUNTABLE CARE ORGANIZATIONS

21 * * *

1 (b)(1) The Green Mountain Care Board shall adopt rules pursuant to
2 3 V.S.A. chapter 25 to establish standards and processes for reviewing,
3 modifying, and approving the budgets of ACOs with 10,000 or more attributed
4 lives in Vermont. To the extent permitted under federal law, the Board shall
5 ensure the rules anticipate and accommodate a range of ACO models and sizes,
6 balancing oversight with support for innovation. In its review, the Board shall
7 review and consider:

8 * * *

9 (N) the effect, if any, of Medicaid reimbursement rates on the rates
10 for other payers; ~~and~~

11 (O) the extent to which the ACO makes its costs transparent and easy
12 to understand so that patients are aware of the costs of the health care services
13 they receive; and

14 (P) the extent to which the ACO provides resources to primary care
15 practices to ensure that care coordination and community services, such as
16 mental health and substance use disorder counseling that are provided by
17 community health teams are available to patients without imposing
18 unreasonable burdens on primary care providers or on ACO member
19 organizations; recognizing that recommendations to enhance integration
20 between social service providers and the ACO so that, if care coordination and
21 Unified Community Collaborative activities are provided in collaboration with

1 a designated or specialized service agency, the agency shall be paid by the
2 ACO for those services.

3 Third: By striking out Sec. 4, report; Social Service Provider and Pediatric
4 Primary Care Partnership, in its entirety and by renumbering the remaining
5 section to be numerically correct

6

7 (Committee vote: _____)

8

9

Representative _____

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FOR THE COMMITTEE