

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Health Care 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 House propose to the Senate that the bill be amended by
6 striking out all after the enacting clause and inserting in lieu thereof the
7 following:

8 Sec. 1. REPORT; INTEGRATION OF SOCIAL SERVICES

9 (a) 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.

16 (b) On or before January 15, 2020, the Agency shall provide an interim
17 status presentation to the House Committees on Health Care and on Human
18 Services and the Senate Committee on Health and Welfare, including an
19 update on the Agency’s progress, the process for the plan’s development, and
20 the identities of any stakeholders with whom the Agency has consulted.

1 Sec. 2. REPORT; EVALUATION OF SOCIAL SERVICE INTEGRATION
2 WITH ACCOUNTABLE CARE ORGANIZATIONS

3 On or before **December 1, 2019**, the Green Mountain Care Board shall
4 submit a report to the House Committees on Health Care and on Human
5 Services and to the Senate Committee on Health and Welfare evaluating the
6 manner and degree to which social services, including services provided by the
7 parent-child center network, designated and specialized service agencies, and
8 home health and hospice agencies are integrated into accountable care
9 organizations (ACOs) certified pursuant to 18 V.S.A. § 9382. **In preparing**
10 **the report, the Board shall consult with individuals receiving social**
11 **services and family members of individuals receiving social services.** The
12 evaluation shall address:

13 (1) the number of social service providers receiving payments through
14 one or more ACOs, if any, and for which services;

15 (2) the extent to which any existing relationships between social service
16 providers and one or more ACOs address childhood trauma or resilience
17 building; and

18 (3) recommendations to enhance integration between social service
19 providers and ACOs, if appropriate.

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

2 § 9382. OVERSIGHT OF ACCOUNTABLE CARE ORGANIZATIONS

3 * * *

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

11 * * *

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

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

17 (P) the extent to which the ACO provides resources to primary care
18 practices to ensure that care coordination and community services, such as
19 mental health and substance use disorder counseling that are provided by
20 community health teams are available to patients without imposing

1 unreasonable burdens on primary care providers or on ACO member
2 organizations.

3 * * *

4 Sec. 3. 33 V.S.A. § 3403 is amended to read:

5 § 3403. DIRECTOR OF TRAUMA PREVENTION AND RESILIENCE
6 DEVELOPMENT

7 * * *

8 (b) The Director shall:

9 (1) provide advice and support to the Secretary of Human Services and
10 facilitate communication and coordination among the Agency's departments
11 with regard to childhood adversity, toxic stress, and the promotion of resilience
12 building;

13 (2) collaborate with both community and State partners, including the
14 Agency of Education and the Judiciary, to build consistency between trauma-
15 informed systems that address medical and social service needs and serve as a
16 conduit between providers and the public;

17 (3) provide support for and dissemination of educational materials
18 pertaining to childhood adversity, toxic stress, and the promotion of resilience
19 building, including to postsecondary institutions within Vermont's State
20 College System and the University of Vermont and State Agricultural College;

1 (4) coordinate with partners inside and outside State government,
2 including the Child and Family Trauma Work Group;

3 (5) evaluate the statewide system, including the work of the Agency and
4 the Agency’s grantees and community contractors, that addresses resilience
5 and trauma-prevention;

6 (6) evaluate, in collaboration with the Department for Children and
7 Families and providers addressing childhood adversity prevention and
8 resilience building services, strategies for linking pediatric primary care with
9 the parent-child center network and other social services; ~~and~~

10 (7) coordinate the training of all Agency employees on childhood
11 adversity, toxic stress, resilience building, and the Agency’s Trauma-Informed
12 System of Care policy and post training opportunities for child care providers,
13 afterschool program providers, educators, and health care providers on the
14 Agency’s website; and

15 (8) serve as a resource in ensuring new models used by community
16 social service providers are aligned with the State’s goals for trauma-informed
17 prevention and resilience.

18 Sec. 4. REPORT; SOCIAL SERVICE PROVIDER AND PEDIATRIC
19 PRIMARY CARE PARTNERSHIP

20 (a) On or before **January 1, 2020**, the Director of Trauma Prevention and
21 Resilience Development established pursuant to 33 V.S.A. § 3403 and the

1 Director of Maternal and Child Health shall submit a report to the House
2 Committees on Health Care and on Human Services and the Senate Committee
3 on Health and Welfare, in consultation with stakeholders, assessing:

4 (1) the model in which a social service provider is embedded within a
5 pediatric primary care practice; and

6 (2) the Strong Families Sustained Home Visiting Programs.

7 **(b) The report required pursuant to subsection (a) of this section shall**
8 **include recommendations for the further development and expansion of**
9 **the models described in subdivisions (a)(1) and (2) of this section in**
10 **coordination with any proposals for reform resulting from the CHINS**
11 **review conducted pursuant to 2018 (Sp. Sess.) Acts and Resolves No. 11,**
12 **Sec. C.106.**

13 Sec. 5. EFFECTIVE DATE

14 This act shall take effect on July 1, 2019.

15
16
17
18 (Committee vote: _____)

19 _____
20 Representative _____

21 FOR THE COMMITTEE