



STATE OF VERMONT
GENERAL ASSEMBLY
HOUSE COMMITTEE ON HEALTH CARE

REP. WILLIAM J. LIPPERT, CHAIR
REP. ANNE B. DONAHUE, VICE CHAIR
REP. LORI HOUGHTON, RANKING MEMBER
REP. ANNMARIE CHRISTENSEN, CLERK
REP. BRIAN CINA
REP. MARI CORDES
REP. DAVID DURFEE
REP. WOODMAN PAGE
REP. PETER REED
REP. LUCY ROGERS
REP. BRIAN SMITH

MEMORANDUM

To: Representative Kitty Toll, Chair, House Committee on Appropriations
From: Representative Bill Lippert, Chair, House Committee on Health Care
Date: February 4, 2020
Subject: Senate Proposal of Amendment to H.760, the FY2020 Budget Adjustment Act

Thank you for the opportunity to respond to the health care-related language in the Senate proposal of amendment to H.760, An act relating to fiscal year 2020 budget adjustments.

In our January 16 memo to the House Committee on Appropriations, the House Committee on Health Care recommended language encouraging further collaboration between the Agency of Human Services, its departments, and OneCare, and we appreciate your inclusion of our language in H.760 as introduced and as passed by the House. In our January 16 memo we also expressed our concerns about continuing to use the budget adjustment process as the vehicle to appropriate funds for delivery system-related (DSR) investments in the All-Payer ACO Model that have already been contracted for, and expended, during the previous calendar year. Despite our concerns, however, the House Committee on Health Care believed that the General Assembly should fulfill the commitments made to the Agency of Human Services and others during last year's budget process regarding the timing of the FY2020 appropriations for DSR investments.

Since there do not appear to be substantial differences between the language in Sec. 54 of the House-passed version of H.760 and the Sec. 54 language in the Senate proposal of amendment, the House Committee on Health Care recommends that the House Committee on Appropriations concur in the Senate proposal of amendment to Sec. 54.

However, the recommendation by the Senate not to fully fund the contracted CY2019 DSR investment in the RiseVT program is inconsistent both with the assurances made to the Agency of Human Services and others during the FY2020 budget process and with the agreements entered into between the Agency and OneCare since then that were made in reliance on those assurances. While some members of the House Committee on Health Care share the concern about proposals to expand implementation of RiseVT during the next fiscal year, we believe that the FY2021 budget bill, not the FY2020 budget adjustment bill, is the appropriate setting for a comprehensive evaluation of the vision for the RiseVT program.

The House Committee on Health Care encourages the House Committee on Appropriations to take our concerns into consideration as you work to resolve the differences between the House and Senate on H.760.