

REVIEW OF ACT 48 PRINCIPLES

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Act 48 of 2011, Sec. 1a* begins:

The General Assembly adopts the following principles as a framework for reforming health care in Vermont:

*These principles are also codified at 18 V.S.A. § 9371, the first section of the Green Mountain Care Board chapter

Act 48 Principle #1

The State of Vermont must ensure universal access to and coverage for high-quality, medically necessary health services for all Vermonters. Systemic barriers, such as cost, must not prevent people from accessing necessary health care. All Vermonters must receive affordable and appropriate health care at the appropriate time in the appropriate setting.

Act 48 Principle #2

Overall health care costs must be contained, and growth in health care spending in Vermont must balance the health care needs of the population with the ability to pay for such care.

Act 48 Principle #3

The health care system must be transparent in design, efficient in operation, and accountable to the people it serves. The State must ensure public participation in the design, implementation, evaluation, and accountability mechanisms of the health care system.

Act 48 Principle #4

Primary care must be preserved and enhanced so that Vermonters have care available to them, preferably within their own communities. The health care system must ensure that Vermonters have access to appropriate mental health care that meets the Institute of Medicine's triple aims 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 missions of the State's academic medical center and other postsecondary educational institutions, the nonprofit missions of the community hospitals, and the critical access designation of rural hospitals, must be supported in such a way that all Vermonters, including those in rural areas, have access to necessary health services and that these health services are sustainable.

Act 48 Principle #5

Every Vermonter should be able to choose his or her health care providers.

Act 48 Principle #6

Vermonters should be aware of the costs of the health services they receive. Costs should be transparent and easy to understand.

Act 48 Principle #7

Individuals have a personal responsibility to maintain their own health and to use health resources wisely, and all individuals should have a financial stake in the health services they receive.

Act 48 Principle #8

The health care system must recognize the primacy of the relationship between patients and their health care practitioners, respecting the professional judgment of health care practitioners and the informed decisions of patients.

Act 48 Principle #9

Vermont's health delivery system must seek continuous improvement of health care quality and safety and of the health of the population and promote healthy lifestyles. The system therefore must be evaluated regularly for improvements in access, quality, and cost containment.

Act 48 Principle #10

Vermont's health care system must include mechanisms for containing all system costs and eliminating unnecessary expenditures, including by reducing administrative costs and by reducing costs that do not contribute to efficient, high-quality health services or improve health outcomes. Efforts to reduce overall health care costs should identify sources of excess cost growth.

Act 48 Principle #11

The financing of health care in Vermont must be sufficient, fair, predictable, transparent, sustainable, and shared equitably.

Act 48 Principle #12

The system must consider the effects of payment reform on individuals and on health care professionals and suppliers. It must enable health care professionals to provide, on a solvent basis, effective and efficient health services that are in the public interest.

Act 48 Principle #13

Vermont's health care system must operate as a partnership between consumers, employers, health care professionals, hospitals, and the State and federal government.

Act 48 Principle #14

State government must ensure that the health care system satisfies the principles expressed in this section.

Statutory references to Act 48 principles

- ❖ Green Mountain Care Board duties – 18 V.S.A. § 9375
 - Board must execute its duties consistent with Act 48 principles
 - Board must review and approve statewide Health Information Technology Plan to ensure that necessary infrastructure is in place to enable State to achieve Act 48 principles
 - Board's annual report must identify how the Board's work comports with Act 48 principles
- ❖ Green Mountain Care Board payment reform pilots – 18 V.S.A. § 9377
 - Expresses legislative intent to achieve Act 48 principles; in order to achieve that goal and ensure success of health care reform, expresses legislative intent that payment reform be implemented and carried out as described in the section

More statutory references to Act 48 principles

- ❖ Qualifications for nominees to the Green Mountain Care Board – 18 V.S.A. § 9392
 - Nominating Committee must assess candidates using specific criteria, including commitment to Act 48 principles
- ❖ Health Resource Allocation Plan (HRAP) – 18 V.S.A. § 9405(b)
 - In developing HRAP, Green Mountain Care Board must consider Act 48 principles
- ❖ All-payer model – 18 V.S.A. § 9551
 - In order to implement an all-payer model, Green Mountain Care Board and Agency of Administration must ensure model maintains consistency with the Act 48 principles
- ❖ (Additional reference in Green Mountain Care implementation statute – 33 V.S.A. § 1822)