

1 TO THE HONORABLE SENATE:

2 The Committee on Health and Welfare to which was referred House Bill
3 No. 528 entitled “An act relating to the Rural Health Services Task Force”
4 respectfully reports that it has considered the same and recommends that the
5 Senate propose to the House that the bill be amended by striking out all after
6 the enacting clause and inserting in lieu thereof the following:

7 Sec. 1. RURAL HEALTH SERVICES TASK FORCE; REPORT

8 (a) Creation. There is created the Rural Health Services Task Force to
9 evaluate the current state of rural health care in Vermont and identify ways to
10 sustain the system and to ensure it provides access to affordable, high-quality
11 health care services.

12 (b) Membership. The Rural Health Services Task Force shall be composed
13 of the following members:

14 (1) the Secretary of Human Services or designee;

15 (2) the Chair of the Green Mountain Care Board or designee;

16 **(3) the Chief of the Office of Rural Health and Primary Care in the**
17 **Department of Health or designee;**

18 (4) the Chief Health Care Advocate from the Office of the Health Care
19 Advocate or designee;

20 (5) two representatives of rural Vermont hospitals, selected by the
21 Vermont Association of Hospitals and Health Systems, who shall represent

1 hospitals that are located in different regions of the State and that face different
2 levels of financial stability;

3 (6) one representative of Vermont’s federally qualified health centers,
4 who shall be a Vermont-licensed health care professional, selected by Bi-State
5 Primary Care Association;

6 (7) one Vermont-licensed physician from an independent practice
7 located in a rural Vermont setting, selected jointly by the Vermont Medical
8 Society and HealthFirst;

9 **(8) one representative of Vermont’s free clinic programs, selected**
10 **by the Vermont Coalition of Clinics for the Uninsured;**

11 (9) one representative of Vermont’s designated **and specialized service**
12 agencies, selected by Vermont Care Partners;

13 **(10) one preferred provider from outside the designated and**
14 **specialized service agency system, selected by the Commissioner of**
15 **Health;**

16 (11) one Vermont-licensed mental health professional from an
17 independent practice located in a rural Vermont setting, selected by the
18 Commissioner of Mental Health;

19 (12) one representative of Vermont’s home health agencies, selected
20 jointly by the VNAs of Vermont and Bayada Home Health Care; and

1 (13) one representative of long-term care facilities, selected by the
2 Vermont Health Care Association.

3 (c) Powers and duties. The Rural Health Services Task Force, in
4 consultation with Vermont-certified accountable care organizations and
5 other interested stakeholders, shall consider issues relating to rural health
6 care delivery in Vermont, including:

7 (1) the current system of rural health care delivery in Vermont,
8 including the role of rural hospitals in the health care continuum;

9 (2) how to ensure the sustainability of the rural health care system,
10 including identifying the major financial, administrative, and workforce
11 barriers;

12 (3) ways to overcome any existing barriers to the sustainability of the
13 rural health care system, including prospective ideas for the future of access to
14 health care services in rural Vermont across the health care continuum;

15 (4) ways to encourage and improve care coordination among
16 institutional and community service providers; and

17 (5) the potential consequences of the failure of one or more rural
18 Vermont hospitals.

19 (d) Assistance. The Rural Health Services Task Force shall have the
20 administrative, technical, and legal assistance of the Agency of Human
21 Services and the Green Mountain Care Board.

1 (e) Report Findings and recommendations. On or before December 31,
2 2019 January 15, 2020, the Rural Health Services Task Force shall submit a
3 written report present its findings and recommendations, including any
4 recommendations for legislative action, to the House Committees on Health
5 Care and on Human Services and the Senate Committee on Health and Welfare
6 with its findings and recommendations, including any recommendations
7 for legislative action.

8 (f) Meetings.

9 (1) The Secretary of Human Services or designee shall call the first
10 meeting of the Rural Health Services Task Force to occur on or before July 1,
11 2019.

12 (2) The Task Force shall select a chair from among its members at the
13 first meeting.

14 (3) A majority of the membership of the Task Force shall constitute a
15 quorum.

16 (4) The Task Force shall cease to exist following submission of its
17 report or on December 31, 2019 the presentation of its findings and
18 recommendations or on January 15, 2020, whichever occurs first.

1 Sec. 2. **DEPARTMENT OF MENTAL HEALTH; ANALYSIS OF**
2 **MENTAL HEALTH NEEDS**

3 **The Department of Mental Health shall determine the mental health**
4 **service and mental health bed needs across the State by geographic area**
5 **and provider type at least monthly during fiscal year 2020. On or before**
6 **January 15, 2020, the Department shall provide to the House Committees**
7 **on Health Care and on Appropriations and the Senate Committee on**
8 **Health and Welfare and on Appropriations its monthly analyses for the**
9 **first half of fiscal year 2020.**

10 **Sec. 3.** EFFECTIVE DATE

11 This act shall take effect on passage.

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(Committee vote: _____)

Senator _____

FOR THE COMMITTEE