

1 TO THE HONORABLE SENATE:

2 The Committee on Health and Welfare to which was referred Senate Bill
3 No. 43 entitled “An act relating to prohibiting prior authorization requirements
4 for medication-assisted treatment” respectfully reports that it has considered
5 the same and recommends that the bill be amended by striking out all after the
6 enacting clause and inserting in lieu thereof the following:

7 Sec. 1. 8 V.S.A. § 4089b is amended to read:

8 § 4089b. HEALTH INSURANCE COVERAGE, MENTAL HEALTH, AND
9 SUBSTANCE ABUSE USE DISORDER

10 * * *

11 (c) A health insurance plan shall provide coverage for treatment of a mental
12 condition and shall:

13 (1) not establish any rate, term, or condition that places a greater burden
14 on an insured for access to treatment for a mental condition than for access to
15 treatment for other health conditions, including no greater co-payment for
16 primary mental health care or services than the co-payment applicable to care
17 or services provided by a primary care provider under an insured’s policy and
18 no greater co-payment for specialty mental health care or services than the co-
19 payment applicable to care or services provided by a specialist provider under
20 an insured’s policy;

1 counseling and behavioral therapies, to provide a whole patient approach to the
2 treatment of substance use disorders.

3 Sec. 3. 18 V.S.A. § 4754 is added to read:

4 § 4754. PROHIBITION ON PRIOR AUTHORIZATION

5 A health insurance plan shall not require prior authorization for medication-
6 assisted treatment that is within the U.S. Food and Drug Administration's
7 dosing recommendations.

8 Sec. 4. PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED
9 TREATMENT; MEDICAID; REPORTS

10 On or before February 1, 2020, 2021, and 2022, the Department of Vermont
11 Health Access shall report to the House Committees on Health Care and on
12 Human Services and the Senate Committee on Health and Welfare regarding
13 prior authorization processes for medication-assisted treatment in Vermont's
14 Medicaid program during the previous calendar year, including which
15 medications required prior authorization; how many prior authorization
16 requests the Department received and, of these, how many were approved and
17 denied; and the average and longest lengths of time the Department took to
18 process a prior authorization request.

1 Sec. 5. EFFECTIVE DATES

2 (a) This section and Secs. 2 (18 V.S.A. § 4750) and 4 (prior authorization
3 for medication-assisted treatment; Medicaid; reports) shall take effect on July
4 1, 2019.

5 (b) Secs. 1 (8 V.S.A. § 4089b) and 3 (18 V.S.A. § 4754) shall take effect
6 on January 1, 2020 and shall apply to health insurance plans on or after
7 January 1, 2020 on such date as a health insurer issues, offers, or renews the
8 health insurance plan, but in no event later than January 1, 2021.

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15 (Committee vote: _____)

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Senator _____

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FOR THE COMMITTEE