

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17

S.7

Senator Lyons moves that the bill be amended as follows:

First: By striking Sec. 1 (Report; Integration of Special Services) in its entirety and inserting in lieu thereof a new Sec. 1 as follows:

Sec. 1. REPORT; INTEGRATION OF SOCIAL SERVICES

(a) On or before November 1, 2020, the Agency of Human Services, in collaboration with the Green Mountain Care Board, shall submit to the House Committees on Appropriations, on Health Care, and on Human Services and the Senate Committees on Appropriations and on Health and Welfare a plan to coordinate the financing and delivery of Medicaid Behavioral Health Services and Medicaid Home- and Community-Based Services with the All-Payer Financial Target Services.

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

1 Second: By inserting Sec. 2a after Sec. 2 (Report; Evaluation of Social
2 Service Integration with Accountable Care Organizations) to read as follows:

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

4 § 9382. OVERSIGHT OF ACCOUNTABLE CARE ORGANIZATIONS

5 * * *

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

13 * * *

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

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

19 (P) The extent to which the ACO provides resources to primary care
20 practices to ensure that care coordination and community services, such as
21 mental health and substance use disorder counseling that are provided by

1 community health teams are available to patients without imposing
2 unreasonable burdens on primary care providers or on ACO member
3 organizations.

4 * * *