

Green Mountain Care Board

H.498

Section 1: Report on the Impact of Prescription Drug Costs on Premiums - 18 V.S.A. § 4636

- **Problems:** The GMCB must publish a report by January 1 of each year on the impact of prescription drug costs on insurance premiums. However, data regarding prescription drug costs is not available to the Board until April 1 (for the prior calendar year).
- **Solutions:** Align the dates in the statute with the dates that the data is available (April 1) and the date the report can be prepared (June 1).

Sections 2 – 3: GMCB Nomination and Appointment - 18 V.S.A. §§ 9374(b), 9391

- **Problems:** Existing language is unclear regarding the process that applies to incumbent GMCB members that wish to be reappointed at the expiration of their term. Clean up outdated language from when the GMCB was created regarding the initial terms of members.
- **Solutions:** Clarify the process that applies to incumbent GMCB members seeking reappointment by aligning with the Public Utility Commission (PUC) statutes. Clean up outdated language.
 - **Potential Revision:** After further review, aligning the GMCB statutes with the PUC statutes may simply require clarifying that an incumbent GMCB member other than the Chair may be reappointed by the Governor, subject to the advice and consent of the Senate, without going through the nomination process.

Section 4: GMCB Billback - 18 V.S.A. § 9374(h)

- **Problems:** The GMCB's billback statute allows the GMCB to assess regulated entities in a way that the GMCB does not believe is consistent with legislative intent.
- **Solutions:** Better align the statutory language with the way in which the GMCB implements the billback and the way in which the Legislature intended it to function.

Section 5: Expenditure Analysis - 18 V.S.A. § 9383(c)

- **Problems:** The GMCB is unable to meet the current deadline for submission of the expenditure analysis (January 15) due to data availability.
- **Solutions:** Align the deadline for submission of the expenditure analysis with the date it can be submitted (April 30).

Section 6: Health Care Database - 18 V.S.A. § 9410

- **Problems:** Existing law limits ability to analyze clinical data and claims together, resulting in potentially duplicative data collection and limiting use for delivery system reform. Collecting secure and protected identifiable data would allow the GMCB to bring the data together at a patient level to better carry out the purposes of the statute. Patient protections remain and personal information would not be disclosed consistent with current law.
- **Solutions:** Remove the prohibition on collecting identifiable data but retain the existing protections for the data and prohibitions on disclosure of direct identifiers. This process is used by many states with newer all-payer claims databases and this is how the GMCB currently collects Medicare data.

7: Conditional Approval of Hospital Budgets - 18 V.S.A. § 9456(d)

- **Problems:** To carry out the purposes of the hospital budget statutes, the GMCB must be able to impose conditions on its approval of a hospital's budget. However, hospitals have pushed back on the GMCB's authority to impose reasonable budget conditions.
- **Solutions:** Make explicit the GMCB's implied authority to impose conditions on hospitals in furtherance of the purposes of the hospital budget statutes.