

January 18, 2022

H. 654 - An act relating to extending COVID-19 health care regulatory flexibility

Dear Members of the House Health Care Committee,

During your consideration of H.654 extending the emergency COVID-19 health care provisions (2021 Act No. 6), we would like you to reconsider certain sections that are applicable to health insurance: early refills and relaxed provider credentialling. The pandemic has evolved beyond the “lock-down” phase faced by Vermonters in early 2020 and now we face a new set of challenges and are assimilating the different regulatory approaches as the pandemic evolves.

Early Refills

Act 6 Section 9 allows for early refills for maintenance medications to enable members to maintain a 30-day supply. While this was an important access issue during the lock-down period of the pandemic, now pharmacies are open and home delivery of medications is broadly available. Our data shows that this provision is not being commonly used, but where it is, the flexibility is now used differently than intended. Instead of obtaining two fills of a prescription, this emergency provision is being used to avoid quantity limits and to get around “refill too soon” rules for medications. These limits are designed to promote appropriate and efficient drug use, enhance patient safety and discourage misuse, waste and abuse. These are based on generally accepted pharmaceutical guidelines, FDA labeling, efficient dosing regimens and dosing recommendations. In your review of this emergency provision, please consider the balance between emergency access and these goals.

Relaxed Provider Credentialling

Act 6 Section 6 allows the Department of Financial Regulation to relax provider credentialling requirements for health insurance plans. While health care workforce issues are clearly ongoing, appropriate credentialling of providers is an important patient safeguard, and is also necessary for health plans to comply with federal law and applicable accreditation standards of the National Committee for Quality Assurance (NCQA). Blue Cross typically processes credentialling within 30-days and in urgent circumstances within a week. Allowing this provision to expire at the end of the federal emergency period would be an appropriate end point.

Thank you for your careful consideration of our concerns as we work together to ensure the highest quality care while being mindful of the impact on the rising cost of care.

Sincerely,
Sara Teachout
Director, Government and Media Relations