

H.721: An act relating to expanding access to Medicaid and Dr. Dynasaur
Section-by-section summary of bill as introduced
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Sec. 1. Short title

- Act is called the “Medicaid Expansion Act of 2024”

Sec. 2. Findings

- Legislative findings regarding Medicaid and Dr. Dynasaur, uninsured and underinsured Vermonters, and coverage for young adults

Sec. 3. Eligibility expansion for Medicaid and Dr. Dynasaur

- Expands income eligibility for Medicaid (ages 26-64) as follows:
 - 133% FPL (current): through calendar year 2025 (until January 1, 2026)
 - 185% FPL: January 1, 2026 – January 1, 2028
 - 250% FPL: January 1, 2028 – January 1, 2030
 - 312% FPL: January 1, 2030 and after
- Expands Dr. Dynasaur eligibility as follows:
 - All Vermonters up to 26 years of age with income \leq 312% FPL
 - Currently, Vermonters up to 19 years of age with income \leq 312% FPL
 - Pregnant individuals with income \leq 312% FPL
 - Currently, pregnant individuals with income \leq 208% FPL

Sec. 4. Global Commitment investments

- Directs Agency of Human Services (AHS) to report detailed information annually on Global Commitment investments
 - Reporting must be on at least 20% of all investments each year
 - Must report on all investments at least once every five years

Secs. 5–6. Increases to certain Medicaid reimbursement rates

- Requires Department of Vermont Health Access (DVHA) to:
 - Reimburse at 125% or more of Medicare rates for primary care, mental health, substance use disorder treatment, and long-term care services (Sec. 5)
 - Reimburse dental providers at 125% or more of rates paid by largest Vermont commercial dental insurer by covered lives

Sec. 7. Clinical Utilization Review Board (CURB)

- Revises appointments to CURB from all 10 members appointed by Governor to four appointed by Governor and three each appointed by Speaker and Senate President Pro Tem
- Adds CURB duty to consult with DVHA’s Drug Utilization Review Board to coordinate Medicaid prescription drug coverage in connection with covered services
- Requires DVHA Commissioner to report to General Assembly at least annually on which services CURB reviewed, considered, or recommended

- Also requires Commissioner to provide legislative inquiries regarding Medicaid coverage of services to CURB within 30 days following inquiry and include CURB's response in next legislative report

Sec. 8. Coverage expansion for Dr. Dynasaur-like coverage for residents not eligible for Medicaid due to immigration status

- Applies coverage expansion for young adults up to 26 years of age to the Dr. Dynasaur-like coverage available to Vermont residents who have an immigration status for which Medicaid is unavailable and who are otherwise uninsured

Sec. 9. Eligibility for Medicare Savings Programs

- Directs AHS to change eligibility for Medicare Savings Programs as follows:
 - Increase Qualified Medicare Beneficiary (QMB) Program income eligibility threshold to up to 150% FPL
 - Currently up to 100% FPL
 - Eliminate Specified Low-Income Beneficiary (SLMB) Program
 - Currently up to 120% FPL
 - Increase Qualified Individual (QI-1) Program income eligibility threshold to up to 185% FPL
 - Currently up to 135% FPL

Sec. 10. Medicaid coverage of mental health services for children and young adults without a diagnosis

- Directs DVHA to provide coverage for mental health services for children and young adults up to 26 years of age without a specific mental health diagnosis if they have dealt with certain adverse life experiences

Sec. 11. Report on public option for small businesses

- By January 15, 2025, requires AHS to submit a proposal for providing small businesses with the option to purchase Medicaid coverage for their employees

Sec. 12. Report on Medicaid sliding-scale cost-sharing requirements

- By January 15, 2025, requires AHS to submit a proposed schedule for sliding-scale cost-sharing requirements for Medicaid and Dr. Dynasaur
 - Schedule cannot expand co-payments for Medicaid beneficiaries \leq 133% FPL or include prescription drug co-payments for children or young adults on Dr. Dynasaur

Sec. 13. Report on specialty care reimbursement rates

- By January 15, 2025, requires AHS to provide recommendations on changes to specialty care reimbursement rates to increase access for Medicaid and Dr. Dynasaur beneficiaries

Sec. 14. Report on merged insurance markets

- By January 15, 2025, requires AHS report on advantages and disadvantages of merging or unmerging health insurance markets on individuals, small businesses, and large businesses
- Appropriates \$250,000 to AHS for the study

Sec. 15. Medicaid state plan amendments

- Directs AHS to request federal approval to amend Vermont's Medicaid state plan to change the eligibility thresholds for the Medicare Savings Programs set forth in Sec. 9, and any other amendments necessary to implement the act

Sec. 16. Effective dates

- Dr. Dynasaur eligibility expansion: January 1, 2025
- Increased Medicaid reimbursement rates for primary care, mental health, and dental services: January 1, 2026
- Increased eligibility for Medicare Savings Programs: upon federal approval
- Remaining sections: On passage