To: Senate Health and Welfare Committee

From: Health Care Association Provider Coalition Association Members: Vermont Medical Society, Vermont Health Care Association, Vermont Association of Hospitals and Health Systems, VNAs of Vermont, Bi-State Primary Care Association, Vermont Care Partners: VT Council, HealthFirst Independent Practice, Association, Vermont State Dental Society, Vermont Association of Area Agencies on Aging, Vermont Association of Adult Days

Re: H. 411, An act relating to extending COVID-19 health care regulatory flexibility

Date: March 22, 2023

Thank you for taking up H. 411 this morning. Our organizations, collectively representing the spectrum of health care services across Vermont, strongly support the immediate passage of H. 411, before current regulatory flexibilities expire on March 31st.

We are deeply appreciative of the close collaboration between Vermont health care providers, the legislature and numerous state agencies in immediately responding to the COVID-19 pandemic and putting in place the regulatory flexibilities needed to weather the pandemic's unprecedented impacts on our State, health care facilities and residents. While many Vermonters would like to think the days of the pandemic are behind us, many of the demands on the health care system – high patient complexity, delayed care and workforce shortages – are as acute as ever. As we work to learn from the pandemic and put permanent regulatory changes in place to continue to meet these new realities, we have the immediate need to continue for the next year several sections of prior COVID flexibility bills.

We support all sections of H. 411 as passed the House. Some of the key flexibilities in the bill include:

- Allowing AHS to permit variances from health care and human service provider rules, which will allow for continuation of operations with reduced workforce and flexible staffing arrangements;
- Allowing paths towards more rapid licensure of health care professionals, and corresponding enrollment with health insurers, necessary for quickly filling vacant positions;
- Continuing temporary telehealth registration until permanent rulemaking is complete by the Office of Professional Regulation and the Board of Medical Practice, necessary to continue to provide patients access to out of state telehealth providers;
- Continuing remote witnessing of Advance Directives until permanent provisions are put in place.

We would be happy to testify more in-depth regarding the need for any section of the bill. We also understand that a number of other entities such as the Department of Financial Regulation, Office of Professional Regulation, Board of Medical Practice and Green Mountain Care Board have submitted written statements indicating their comfort with the language of the bill as passed the House. We appreciate their ongoing partnership in meeting the needs brought about by the COVID-19 pandemic.

We thank the committee for taking the bill up in a time sensitive manner and would be happy to answer any additional questions.