
This act summary is provided for the convenience of the public and members of the General Assembly. It is intended to provide a general summary of the act and may not be exhaustive. It has been prepared by the staff of the Office of Legislative Counsel without input from members of the General Assembly. It is not intended to aid in the interpretation of legislation or to serve as a source of legislative intent.

Act No. 62 (S.63). An act relating to modifying the regulatory duties of the Green Mountain Care Board

Subjects: Health; Green Mountain Care Board; accountable care organizations; hospital budgets; health information technology

This act eliminates certain regulatory duties of the Green Mountain Care Board (GMCB), including duties to review and approve the statewide Health Information Technology Plan, the criteria for health care providers to create or maintain connectivity to the State's health information exchange network, and the annual budget of the Vermont Information Technology Leaders. The act modifies the GMCB billback formula to eliminate the eight percent allocation for accountable care organizations (ACOs) and to increase the allocations for hospitals and health insurers accordingly. The act expands the scope of ACOs that must be certified in order to operate in Vermont from only those that receive payments from Medicaid or commercial insurance through a payment reform program to any ACO that operates in Vermont. It modifies and simplifies the criteria that must be met for the GMCB to certify an ACO and allows the GMCB to adopt rules creating a streamlined certification process for Medicare-only ACOs. The act also eliminates existing ACO budget review provisions, creates new budget review criteria for ACOs that accept payments from Medicaid or commercial insurance, or both, and establishes fees for ACO certification and budget review.

The act allows private psychiatric hospitals to operate on a fiscal year that aligns with the calendar year, rather than the October 1 to September 30 fiscal year that applies to other hospitals. The act specifies that the GMCB's review, establishment, and enforcement of hospital budgets should not be construed to be a contested case under the Administrative Procedures Act, but that anyone aggrieved by a final GMCB action, order, or determination, including an enforcement decision, may appeal pursuant to the GMCB's existing appeal statute. The act also modifies the scope of requirements regarding meetings of an ACO's governing body to apply only to an ACO that contracts with Vermont Medicaid and it eliminates a requirement that the GMCB annually review any all-inclusive population-based payment arrangement between the Department of Vermont Health Access and an ACO and issue an advisory opinion.

Multiple effective dates, beginning on June 12, 2025