

1 H.482

2 Introduced by Committee on Health Care

3 Date:

4 Subject: Health; hospitals; health insurers; Green Mountain Care Board;
5 hospital observer

6 Statement of purpose of bill as introduced: This bill proposes to authorize the
7 Green Mountain Care Board to reduce a health insurer's reimbursement rates
8 to one or more hospitals if the health insurer is at imminent risk of insolvency.
9 The bill would permit the Board to reduce a hospital's budget for the
10 forthcoming fiscal year to account for the hospital's budget overage in the
11 previous fiscal year. The bill would also allow the Board to appoint an
12 independent observer to oversee a hospital and its operations if the Board finds
13 the hospital has made a material misrepresentation or is out of compliance with
14 its budget and the Board believes that appointing an independent observer is in
15 the public interest.

16 An act relating to Green Mountain Care Board authority to adjust a
17 hospital's reimbursement rates and to appoint a hospital observer

18 It is hereby enacted by the General Assembly of the State of Vermont:

19 Sec. 1. 18 V.S.A. § 9384 is added to read:

1 § 9384. REDUCTION OR REALLOCATION OF REIMBURSEMENT

2 RATES; RISKS TO HEALTH INSURER SOLVENCY

3 (a) As used in this section:

4 (1) “Hospital” has the same meaning as in section 9451 of this title.

5 (2) “Hospital network” means a system comprising two or more
6 affiliated hospitals, and may include other health care professionals and
7 facilities, that derives 50 percent or more of its operating revenue, at the
8 consolidated network level, from Vermont hospitals and in which the affiliated
9 hospitals deliver health care services in a coordinated manner using an
10 integrated financial and governance structure.

11 (b) If the Green Mountain Care Board determines, after consultation with
12 the Commissioner of Financial Regulation, that a domestic health insurer faces
13 an acute and immediate threat to its solvency because its risk-based capital
14 level has triggered a regulatory action level event pursuant to 8 V.S.A. § 8304,
15 the Board may order a reduction of the insurer’s reimbursement rates to one or
16 more Vermont hospitals as set forth in subsection (c) of this section until such
17 time as the amount of the insurer’s risk-based capital exceeds the company
18 action level risk-based capital threshold defined in 8 V.S.A. § 8301.

19 (c)(1) The Board shall only order a reduction in the reimbursement rates to
20 a hospital that meets one or both of the following criteria:

(4) reflect budget performances for prior years reconcile any significant deviation in revenue during the previous fiscal year in excess of the budget established for the hospital pursuant to this section, using a methodology established by the Board;

* * *

(f)(1) The Board may, upon application, adjust a budget established under this section upon a showing of need based upon exceptional or unforeseen circumstances in accordance with the criteria and processes established under section 9405 of this title.

(2) The Board may, on its own initiative, adjust the commercial health insurance reimbursement rates payable to a hospital at any time during the hospital's fiscal year in order to ensure that the hospital operates within the budget established under this section.

(g)(1) The Board may request, and a hospital shall provide, information determined by the Board to be necessary to determine whether the hospital is operating within a budget established under this section. For purposes of this subsection, subsection (h) of this section, and subdivision 9454(a)(7) of this title, the Board's authority shall extend to an affiliated corporation or other person in the control of or controlled by the hospital to the extent that such authority is necessary to carry out the purposes of this subsection, subsection (h) of this section, or subdivision 9454(a)(7) of this title. As used in this subsection, a rebuttable presumption of "control" is created if the entity, hospital, or other person, directly or indirectly, owns, controls, holds with the power to vote, or holds proxies representing 20 percent or more of the voting

1 securities or membership interest or other governing interest of the hospital or
2 other controlled entity.

3 (2)(A) The Board may, upon finding that a hospital has made a material
4 misrepresentation in information or documents provided to the Board or that a
5 hospital is materially noncompliant with the budget established by the Board
6 pursuant to this section, appoint an independent observer with respect to any
7 matter related to the Board's review or enforcement under this section if the
8 Board believes that doing so is in the public interest. At the direction of the
9 Board, the independent observer may monitor the hospital's operations, obtain
10 information from the hospital, and report findings and recommendations to the
11 Board.

12 (B) An independent observer appointed pursuant to this subdivision
13 (2) shall have the right to receive copies of all materials related to the Board's
14 review under this section and the hospital shall provide any information
15 requested by the independent observer, including any information regarding
16 the hospital's participation in a hospital network. The independent observer
17 shall share information provided by the hospital with the Board and with the
18 Office of the Health Care Advocate in accordance with subdivision (d)(3) of
19 this section but shall not otherwise disclose any confidential or proprietary
20 information that the independent observer obtained from the hospital.

4 * * *

7 18 V.S.A. § 9456(g)(2) (authority to appoint independent hospital observer)
8 is repealed on January 1, 2030.

10 This act shall take effect on passage.