

~~general hospitals licensed under chapter 43 of this title expenses incurred by the Commissioner of Health in administering hospital community reports under section 9405b of this title.~~

~~(2)(A) In addition to the assessment and collection of actual costs pursuant to subdivision (1) of this subsection and except~~ Except as otherwise provided in subdivisions ~~(2)(C) and (3) (1)(C) and (2)~~ of this subsection (h), ~~all other the~~ expenses of the Board shall be borne as follows:

(i) ~~40.0~~ percent by the State from State monies;

(ii) ~~30 28.8~~ percent by the hospitals;

(iii) ~~24 23.2~~ percent by nonprofit hospital and medical service corporations licensed under 8 V.S.A. chapter 123 or 125, health insurance companies licensed under 8 V.S.A. chapter 101, and health maintenance organizations licensed under 8 V.S.A. chapter 139; and

(iv) ~~six 8.0~~ percent by accountable care organizations ~~certified under section 9382 of this title.~~

(B) Expenses under subdivision (A)(iii) of this subdivision ~~(2)(1)~~ shall be allocated to persons licensed under Title 8 based on premiums paid for health care coverage, which for the purposes of this subdivision ~~(2)(1)~~ shall include major medical, comprehensive medical, hospital or surgical coverage, and comprehensive health care services plans, but shall not include long-term care, limited benefits, disability, credit or stop loss, or excess loss insurance coverage.

(C) Expenses ~~incurred by the Board for regulatory duties associated with certificates of need shall be~~ assessed pursuant to the provisions of section 9441 of this title ~~and not shall not be assessed~~ in accordance with the formula set forth in subdivision (A) of this subdivision ~~(2)(1)~~.

~~(3)(2)~~ The Board may determine the scope of the incurred expenses to be allocated pursuant to the formula set forth in subdivision ~~(2)(1)~~ of this subsection if, in the Board's discretion, the expenses to be allocated are in the best interests of the regulated entities and of the State.

~~(4)(3)~~ If the amount of the proportional assessment to any entity calculated in accordance with the formula set forth in subdivision ~~(2)(A)(1)(A)~~ of this subsection would be less than \$150.00, the Board shall assess the entity a minimum fee of \$150.00. The Board shall apply the amounts collected based on the difference between each applicable entity's proportional assessment amount and \$150.00 to reduce the total amount assessed to the regulated entities pursuant to subdivisions ~~(2)(A)(ii)-(iv) (1)(A)(ii)-(iv)~~ of this subsection.

~~(5)(4)(A)~~ Annually on or before September 15, the Board shall report to the House and Senate Committees on Appropriations the total amount of all expenses eligible for allocation pursuant to this subsection (h) during the preceding State fiscal year and the total amount actually billed back to the

regulated entities during the same period. The provisions of 2 V.S.A. § 20(d) (expiration of required reports) shall not apply to the report to be made under this subdivision.

(B) The Board ~~and the Department~~ shall also present the information required by this subsection (h) to the Joint Fiscal Committee annually at its September meeting.

Sec. E.345.1 18 V.S.A. § 9405b is amended to read:

§ 9405b. HOSPITAL COMMUNITY REPORTS AND AMBULATORY  
SURGICAL CENTER QUALITY REPORTS

\* \* \*

(e) The Green Mountain Care Board may assess and collect from general hospitals licensed under chapter 43 of this title expenses incurred by the Commissioner of Health in administering hospital community reports and ambulatory surgical center quality reports under this section.

Sec. E.345.2 GREEN MOUNTAIN CARE BOARD; REFERENCE-BASED  
PRICING; DATA ANALYSIS; REPORT

(a) The funds appropriated to the Green Mountain Care Board in Sec. B.1100(s)(1) of this act shall be for a contract with a qualified entity for a reference-based pricing analysis that will analyze commercial medical claims for all inpatient and outpatient hospital services and supplies incurred by active and retired members and their dependents enrolled in the State Employees' Health Benefit Plan and in the health benefit plans offered by the Vermont Education Health Initiative during calendar years 2018 to the most recent year for which data are available, to determine what savings, if any, could have been realized for that period if a reference-based pricing methodology benchmarked to Medicare rates had been applied.

(b) On or before December 15, 2024, the Green Mountain Care Board shall report to the House Committees on Health Care and on Government Operations and Military Affairs and the Senate Committees on Health and Welfare and on Government Operations with the results of the analysis and any recommendations for legislative action, as well as identifying the other aspects of Vermont's health care system that likely would be affected by the use of reference-based pricing, such as hospital margins, health insurance premiums, and the State's health care reform efforts.

Sec. E.500 EDUCATION; FINANCE AND ADMINISTRATION

(a) The Global Commitment funds appropriated in Sec. B.500 of this act will be used for physician claims for determining medical necessity of individualized education programs. These services are intended to increase access to quality health care for uninsured persons, underinsured persons, and Medicaid beneficiaries.

Sec. E.502 EDUCATION; SPECIAL EDUCATION: FORMULA GRANTS

(a) Of the appropriation authorized in Sec. B.502 of this act, and notwithstanding any other provision of law, an amount not to exceed \$4,329,959 shall be used by the Agency of Education in fiscal year 2025 as funding for 16 V.S.A. § 2967(b)(2)–(6). In distributing such funds, the Secretary shall not be limited by the restrictions contained within 16 V.S.A. § 2969(c) and (d).

(b) Of the appropriation authorized in Sec. B.502 of this act, and notwithstanding any other provision of law, an amount not to exceed \$500,000 shall be used by the Agency of Education in fiscal year 2025 as funding for 16 V.S.A. § 2975. In distributing such funds, the Secretary shall not be limited by the restrictions contained within 16 V.S.A. § 2969(c) and (d).

Sec. E.503 EDUCATION; STATE-PLACED STUDENTS

(a) The Independence Place Program of ANEW Place shall be considered a 24-hour residential program for the purposes of reimbursement of education costs.

Sec. E.504 ADULT EDUCATION AND LITERACY

(a) Of the appropriation in Sec. B.504 of this act, \$3,778,133 General Fund shall be granted to adult education and literacy providers, pursuant to the Adult Education and Secondary Credential Program established in 16 V.S.A. § 945.

Sec. E.504.1 EDUCATION; FLEXIBLE PATHWAYS

(a) Notwithstanding any provision of 16 V.S.A. § 4025 to the contrary, of the appropriation in Sec. B.504.1 of this act, \$2,518,755 Education Fund shall be granted by the Agency of Education to adult education and literacy providers pursuant to the Adult Education and Secondary Credential Program established in 16 V.S.A. § 945.

(b) Notwithstanding 16 V.S.A. § 4025, of the Education Fund appropriation in Sec. B.504.1 of this act, the amount of:

(1) \$921,500 is designated for dual enrollment programs, notwithstanding 16 V.S.A. § 944(f)(2);

(2) \$2,000,000 is designated to support the Vermont Virtual High School;

(3) \$400,000 is designated for secondary school reform grants; and

(4) \$4,600,000 is designated for Early College pursuant to 16 V.S.A. § 946.

(c) Of the General Fund appropriation in Sec. B.504.1 of this act, \$921,500 is designated for dual enrollment programs.

Sec. E.504.2 16 V.S.A. § 945 is amended to read:

§ 945. ~~ADULT DIPLOMA PROGRAM; GENERAL EDUCATIONAL DEVELOPMENT PROGRAM~~ ADULT EDUCATION AND SECONDARY CREDENTIAL PROGRAM

(a) The Secretary shall maintain an Adult Diploma Program (ADP), ~~which shall be an assessment process~~ administered by the Agency through which ~~an individual~~ any Vermont resident who is at least ~~20~~ 16 years of age; who has not received a high school diploma; and who is not enrolled in a public or approved independent school, postsecondary institution, or home study program can receive a local high school diploma granted by one of the Program's participating high schools.

(b) The Secretary shall maintain a General Educational Development (GED) Program, which ~~it~~ the Secretary shall administer jointly with the GED testing service and approved local testing centers and through which ~~an adult individual~~ a Vermont resident who is at least 16 years of age ~~and~~; who has not received a high school diploma; and who is not enrolled in ~~secondary~~ a public or an approved independent school, a postsecondary institution, or a home study program can receive a secondary school equivalency certificate based on successful completion of the GED tests.

(c) The Secretary may provide additional programs designed to address the individual needs and circumstances of adult students, particularly students with the lowest levels of literacy skills.

(d) The diagnostic portion of the Program referenced in subsection 4011(f) of this title shall be used as a tool to evaluate the educational needs of and skills gained by individual students but shall not be used to exclude individuals from the Program or to condition payments to local education and literacy providers.

Sec. E.504.3 REPEAL

16 V.S.A. § 943 (High School Completion Program) is repealed.

Sec. E.504.4 16 V.S.A. § 4011 is amended to read:

§ 4011. EDUCATION PAYMENTS

(a) Annually, the General Assembly shall appropriate funds to pay for statewide education spending and a portion of a base education amount for each adult ~~diploma~~ education and secondary credential program student.

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(f) Annually, the Secretary shall pay to a ~~department or agency~~ local adult education and literacy provider, as defined in section 942 of this title, that provides an adult ~~diploma~~ education and secondary credential program an amount equal to 26 percent of the base education amount for each student who ~~completed~~ completes the diagnostic ~~portion~~ portions of the program, based on