

Language comparison: existing law overlaps to Health Care Delivery Plan  
Anne Donahue/ April 30

“§ 9410. Health care database

(a)(1) The Board shall establish and maintain a unified health care database to enable the Board to carry out its duties under this chapter, chapter 220 of this title, and Title 8, including:

- (A) determining ***the capacity and distribution of existing resources***;
- (B) ***identifying health care needs*** and informing health care policy;
- (C) evaluating the effectiveness of intervention programs on improving patient outcomes;
- (D) comparing costs between various treatment settings and approaches;
- (E) providing information to consumers and purchasers of health care; and
- (F) improving the quality and affordability of patient health care and health care coverage.”

“§ 9405. State Health Improvement Plan;

(a) The Secretary of Human Services, in consultation with the Chair of the Green Mountain Care Board, shall adopt a State Health Improvement Plan that sets forth the health goals and values for the State. The Plan shall include health promotion, health protection, nutrition, and disease prevention priorities for the State; identify available human resources as well as human resources needed for achieving the State’s health goals and the planning required to meet those needs; identify gaps in ensuring equal access to appropriate mental health care that meets standards of quality, access, and affordability equivalent to other components of health care as part of an integrated, holistic system of care; and ***identify geographic parts of the State needing investments of additional resources in order to improve the health of the population.***

Ss 9405(b) HRAP

“(b) The Green Mountain Care Board, in consultation with the Secretary of Human Services or designee, shall publish on its website the Health Resource Allocation Plan ***identifying Vermont’s critical health needs, goods, services, and resources***, which shall be used to inform the Board’s regulatory processes, ***cost containment and statewide quality of care efforts, health care payment and delivery system reform initiatives, and any allocation of health resources within the State.*** The Plan shall identify Vermont residents’ ***needs*** for health care services, programs, and facilities; the ***resources available and the additional resources that would be required to realistically meet those needs*** and to make access to those services, programs, and facilities affordable for consumers; and the ***priorities for addressing those needs on a statewide basis.*** The Board may expand the Plan to include resources, needs, and priorities related to the social determinants of health. The Plan shall be revised periodically but not less frequently than once every four years.

(1) In developing the Plan, the Board shall:

- (A) consider ***the principles in section 9371*** of this title, as well as the purposes enumerated in sections 9401 and 9431 of this title;
- (B) ***identify priorities*** using information from:
  - (i) the State Health Improvement Plan;

- (ii) **emergency medical services resources and needs** identified by the EMS Advisory Committee in accordance with subsection 909(f) of this title;
- (iii) the community health needs assessments required by section 9405a of this title;
- (iv) available health care workforce information;
- (v) materials provided to the Board through its other regulatory processes, including hospital budget review, oversight of accountable care organizations, issuance and denial of certificates of need, and health insurance rate review; and
- (vi) the public input process set forth in this section;
- (C) use existing data sources ***to identify and analyze the gaps between the supply of health resources and the health needs*** of Vermont residents and to identify utilization trends to determine areas of underutilization and overutilization; and
- (D) consider the ***cost impacts of fulfilling any gaps between the supply of health resources and the health needs*** of Vermont residents.

## S.126

### § 9403. STATEWIDE HEALTH CARE DELIVERY PLAN

(b) The Plan shall:

- (1) **Align with** the principles for health care reform expressed in **section 9371** of this title.
- (2) **Promote access to high-quality, cost-effective** acute care, primary care, chronic care, long-term care, and hospital-based, independent, and community-based services across Vermont.
- (3) Strive to make mental health services, substance use disorder treatment services, emergency medical services, nonemergency medical services, and nonmedical services and supports **available in each region of Vermont**.
- (4) Provide **annual targets for the total cost of care** across Vermont's health care system and include reasonable **annual cost growth rates** while excluding from hospital total cost of care targets all revenue derived from a hospital's investments in primary care, mental health care, and substance use disorder treatment services. Using these total cost of care targets, the Plan shall **identify appropriate allocations of health care resources and services across the State that balance quality, access, and cost containment**. The Plan shall also establish targets for the **percentages of overall** health care spending that should reflect spending on primary care services, including mental health services, and preventive care services, which targets shall be aligned with the total cost of care targets.
- (6) **Identify:**
  - (A) **gaps in access to care**, as well as circumstances in which service **closures or consolidations could result in improvements in quality, access, and affordability**;
  - (B) opportunities to **reduce administrative burdens**, such as complexities in contracting and payment terms and duplicative quality reporting requirements; and
  - (C) federal, State, and other **barriers to achieving the Plan's goals** and, to the extent feasible, how those barriers can be removed or mitigated.