1	TO THE HOUSE OF REPRESENTATIVES:
2	The Committee on Human Services to which was referred House Bill No.
3	13 entitled "An act relating to Medicaid payment rates for home- and
4	community-based service providers and designated and specialized service
5	agencies" respectfully reports that it has considered the same and recommends
6	that the bill be amended by striking out all after the enacting clause and
7	inserting in lieu thereof the following:
8	Sec. 1. 33 V.S.A. § 900 is amended to read:
9	§ 900. DEFINITIONS
10	Unless otherwise required by the context, the words and phrases in this
11	chapter shall be defined as follows As used in this chapter:
12	* * *
13	(7) "Home- and community-based services" means:
14	(A) long-term services and supports provided to older adults and
15	adults with physical disabilities in a home or community setting other than a
16	nursing home, including enhanced residential care services, pursuant to the
17	Choices for Care component of Vermont's Global Commitment to Health
18	Section 1115 Medicaid demonstration or a successor program. "Home and
19	community based services" also includes:

1	(B) non-Choices for Care home health and hospice services, adult
2	day rehabilitation services, assistive community care services, and services for
3	individuals with traumatic brain injury <mark>; and</mark>
4	(C) services provided by designated and specialized service
5	agencies to individuals with mental conditions, individuals with substance
6	use disorders, and individuals with developmental or intellectual
7	disabilities.
8	Sec. 2. 33 V.S.A. § 911 is added to read:
9	§ 911. PAYMENT RATES FOR PROVIDERS OF HOME- AND
10	COMMUNITY-BASED SERVICES
11	(a) The Secretary of Human Services shall determine payment rates for
12	providers of home- and community-based services that are reasonable and
13	adequate to achieve the required outcomes for the populations they serve.
14	When determining these payment rates, the Secretary shall adjust the rate
15	amounts to take into account factors that include:
16	(1) the reasonable cost of any governmental mandate that has been
17	enacted, adopted, or imposed by any State or federal authority; and
18	(2) a cost adjustment factor to reflect changes in reasonable costs of
19	goods to and services of providers of home- and community-based services,
20	including those attributed to inflation and labor market dynamics.

1	(b) When determining reasonable and adequate rates of payment for
2	providers of home- and community-based services, the Secretary may consider
3	geographic differences in wages, benefits, housing, and real estate costs in
4	each region of the State.
5	(c) The Secretary shall adopt rules setting forth the methodology for
6	determining payment rates for providers of home- and community-based
7	services in accordance with this section. The rules shall include a process for
8	determining an annual inflationary rate adjustment, shall set forth a predictable
9	timeline for redetermination of base rates, and shall use Vermont labor market
10	rates and Vermont costs of operation.
11	(d) The Secretary shall redetermine the payment rates for providers of
12	home- and community-based services in accordance with this section at least
13	annually and shall report those rates, and the amounts necessary to fund them,
14	to the House Committees on Appropriations, on Human Services, and on
15	Health Care and the Senate Committees on Appropriations and on Health and
16	Welfare annually as part of the Agency's budget presentation.
17	Sec. 3. 18 V.S.A. § 8914 is amended to read:
18	§ 8914. RATES OF PAYMENTS TO DESIGNATED AND SPECIALIZED
19	SERVICE AGENCIES
20	(a) The Secretary of Human Services shall have sole responsibility for
21	establishing determine the Departments of Health's, of Mental Health's, and of

1	Disabilities, Aging, and Independent Living's rates of payments for designated
2	and specialized service agencies in accordance with 33 V.S.A. § 911. that are
3	reasonable and adequate to achieve the required outcomes for designated
4	populations. When establishing determining these rates of payment for
5	designated and specialized service agencies, the Secretary shall adjust rates the
6	rate amounts to take into account factors that include:
7	(1) the reasonable cost of any governmental mandate that has been
8	enacted, adopted, or imposed by any State or federal authority; and
9	(2) a cost adjustment factor to reflect changes in reasonable costs of
10	goods to and services of designated and specialized service agencies, including
11	those attributed to inflation and labor market dynamics.
12	(b) When establishing determining reasonable and adequate rates of
13	payment for designated and specialized service agencies, the Secretary may
14	consider geographic differences in wages, benefits, housing, and real estate
15	costs in each region of the State.
16	(c) The Secretary shall adopt rules setting forth the methodology for
17	determining the payment rates for services provided by designated and
18	specialized service agencies to individuals with mental conditions, individuals
19	with substance use disorders, and individuals with developmental or
20	intellectual disabilities in accordance with this section. The rules shall include
21	a process for determining an annual inflationary rate adjustment, shall set forth

1	a predictable timeline for redetermination of base rates, and shall use Vermont
2	labor market rates and Vermont costs of operation.
3	(d) The Secretary shall redetermine the payment rates for designated and
4	specialized service agencies in accordance with this section at least annually
5	and shall report those rates, and the amounts necessary to fund them, to the
6	House Committees on Appropriations, on Human Services, and on Health Care
7	and the Senate Committees on Appropriations and on Health and Welfare
8	annually as part of the Agency's budget presentation.
9	Sec. 4. HOME- AND COMMUNITY-BASED SERVICE PROVIDER
10	RATE STUDY; REPORT
11	(a) The Department of Vermont Health Access, in collaboration with the
12	Departments of Disabilities, Aging, and Independent Living, of Health, and of
13	Mental Health, shall conduct a rate study of the Medicaid reimbursement rates
14	paid to providers of home- and community-based services, as defined in
15	33 V.S.A. § 900, and providers of substance use disorder treatment services,
16	including their adequacy and the methodologies underlying the rates. As part
17	of the rate study, the Department of Vermont Health Access shall:
18	(1) delineate a reasonable and predictable schedule for Medicaid rates
19	and rate updates;

1	(2) identify ways to align Medicaid reimbursement methodologies and
2	rates for providers of home- and community-based services with those of other
3	payers, to the extent such other methodologies and rates exist; and
4	(3) determine ways to limit the number of methodological exceptions.
5	(b) On or before January 15, 2026, the Department of Vermont Health
6	Access, in collaboration with the Departments of Disabilities, Aging, and
7	Independent Living, of Health, and of Mental Health, shall report the results of
8	the rate study conducted pursuant to this section and their findings and
9	recommendations to the House Committees on Human Services and on
10	Appropriations, the Senate Committees on Health and Welfare and on
11	Appropriations, and the Secretary of Human Services.
12	Sec. 5. EFFECTIVE DATE
13	This act shall take effect on passage, with the rules adopted by the Secretary
14	of Human Services pursuant to Secs. 2 (33 V.S.A. § 911) and 3 (18 V.S.A.
15	§ 8914) taking effect on or before July 1, 2026.
16	
17	
18	(Committee vote:)
19	
20	Representative
21	FOR THE COMMITTEE