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 recommen	
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 the following	
14	services provided pursuant to Vermont's Global Commitment to Health	
15	Section 1115 Medicaid demonstration or a successor program:	
16	(A) long-term services and supports provided to older adults and	
17	adults with physical disabilities in a home or community setting other than a	
18	nursing home, including enhanced residential care services;	
19	(B) home health and hospice services, adult day rehabilitation	
20	services, and assistive community care services, and services for individuals	
21	with traumatic brain injury; and	

1	(C) short- and long-term services and supports provided to		
2	individuals with mental conditions, individuals with substance use disorders,		
3	and individuals with developmental or intellectual disabilities, and individuals		
4	with a brain injury in a home or community setting for which the		
5	Medicaid rates are not otherwise established pursuant to statute or rule.		
6	Sec. 2. 33 V.S.A. § 911 is added to read:		
7	§ 911. PAYMENT RATES FOR PROVIDERS OF HOME- AND		
8	COMMUNITY-BASED SERVICES		
9	(a) The Secretary of Human Services shall determine payment rates for		
10	providers of home- and community-based services that are reasonable and		
11	adequate to achieve the required outcomes for the populations they serve.		
12	When determining these payment rates, the Secretary shall adjust the rate		
13	amounts to take into account factors that include:		
14	(1) the reasonable cost of any governmental mandate that has been		
15	enacted, adopted, or imposed by any State or federal authority; and		
16	(2) a cost adjustment factor to reflect changes in reasonable costs of		
17	goods to and services of providers of home- and community-based services,		
18	including those attributed to inflation and labor market dynamics.		
19	(b) When determining reasonable and adequate rates of payment for		
20	providers of home- and community-based services, the Secretary may consider		

1	geographic differences in wages, benefits, housing, and real estate costs in		
2	each region of the State.		
3	(c) The Secretary shall adopt rules setting forth the establish a		
4	methodology for determining payment rates for providers of home- and		
5	community-based services in accordance with this section. The rules		
6	methodology shall:		
7	(1) provide a schedule for conducting studies of the Medicaid		
8	reimbursement rates paid to the providers of home- and community-based		
9	services, including the rates' adequacy and their underlying methodologies,		
10	that includes studying the rates paid to providers for each type of service at		
11	least once every five years;		
12	(2) set forth a predictable timeline for redetermination of base rates;		
13	(3) include a process for determining an annual inflationary rate		
14	adjustment;		
15	(4) to the extent permitted by the Centers for Medicare and		
16	Medicaid Services, take into account the financial needs of providers		
17	whose reimbursements may be negatively affected by client absences;		
18	(5) include a process by which a provider whose financial condition		
19	places it at imminent risk of closure may seek extraordinary financial		
20	relief from the Agency; and		
21	(6) use Vermont labor market rates and Vermont costs of operation.		

1	(d) The Secretary shall redetermine the payment rates for providers of	
2	home- and community-based services in accordance with this section at least	
3	annually and shall report those rates, and the amounts necessary to fund them,	
4	to the House Committees on Appropriations, on Human Services, and on	
5	Health Care and the Senate Committees on Appropriations and on Health and	
6	Welfare annually as part of the Agency's budget presentation.	
7	Sec. 3. 18 V.S.A. § 8914 is amended to read:	
8	§ 8914. RATES OF PAYMENTS TO DESIGNATED AND SPECIALIZED	
9	SERVICE AGENCIES	
10	(a) The Secretary of Human Services shall have sole responsibility for	
11	establishing determine the Departments of Health's, of Mental Health's, and of	
12	Disabilities, Aging, and Independent Living's rates of payments for designated	
13	and specialized service agencies that are reasonable and adequate to achieve	
14	the required outcomes for designated populations in accordance with 33 V.S.A	
15	§ 911. When establishing rates of payment for designated and specialized	
16	service agencies, the Secretary shall adjust rates to take into account factors	
17	that include:	
18	(1) the reasonable cost of any governmental mandate that has been	
19	enacted, adopted, or imposed by any State or federal authority; and	

1	(2) a cost adjustment factor to reflect changes in reasonable costs of	
2	goods and services of designated and specialized service agencies, including	
3	those attributed to inflation and labor market dynamics.	
4	(b) When establishing rates of payment for designated and specialized	
5	service agencies, the Secretary may consider geographic differences in wages,	
6	benefits, housing, and real estate costs in each region of the State.	
7	Sec. 4. PAYMENT RATES FOR PROVIDERS OF HOME- AND	
8	COMMUNITY-BASED SERVICE <mark>S</mark> PROVIDER; UPDATE ON	
9	IMPLEMENTATION; RATE STUDY; REPORT	
10	On or before January 15, 2026, the Agency of Human Services shall	
11	report to the House Committees on Human Services and on Health Care	
12	and the Senate Committee on Health and Welfare with an update on the	
13	Agency's implementation of 33 V.S.A. § 911, as added by Sec. 2 of this act,	
14	including the Agency's proposed schedule for Medicaid rate studies and	
15	the methodology the Agency developed for determining payment rates for	
16	providers of home- and community-based services.	
17	(a) The Department of Vermont Health Access, in collaboration with the	
18	Departments of Disabilities, Aging, and Independent Living, of Health, and of	
19	Mental Health, shall conduct a rate study of the Medicaid reimbursement rates	
20	paid to providers of home- and community-based services, as defined in	
21	33 V.S.A. § 900, and providers of substance use disorder treatment services.	

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

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3		
4	(Committee vote:)	
5		
6		Representative

(Draft No. 3.3 – H.13)

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Page 7 of 7

FOR THE COMMITTEE