
DELIVERED ELECTRONICALLY

February 24, 2026

Rep. Trevor Squirrel, Chair
Legislative Committee on Administrative Rules
Vermont State House
Montpelier, Vermont

Dear Representative Squirrel and Committee Members:

On behalf of the Green Mountain Care Board (GMCB) I am writing with a summary of revisions made to Proposed Rule # 25P042 (GMCB Rule 5.000: Oversight of Accountable Care Organizations) between the initial filing, submitted January 28, 2026, and the amended filing, submitted today. The GMCB made these revisions to address requests from legislative counsel received on February 13, 2026. As discussed below, we believe that these revisions clarify sections of the proposed rule and ensure that the rule's effective date is consistent with the intent of Act 62 (2025). We appreciate the comments received from legislative counsel and the opportunity to provide these requested revisions.

Summary of Revisions Made to the Final Proposed Rule

In response to legislative counsel's requests of February 13, 2026, the following sections and subsections of this proposed rule have been revised:

1. Sec. 5.104

This section concerns the applicability of this proposed rule, which revises the GMCB's current Rule 5.000 (adopted 2017). Originally, this section stated that the rule applied to ACOs seeking certification that will take effect on or after January 1, 2027. As described at Sec. 5.604, this rule will take effect on July 1, 2026. This means that the original proposed rule did not address the potential that an ACO might seek to obtain certification that would take effect before January 1, 2026.

On request of legislative counsel, this section has been revised by adding subsection (a). This subsection limits the application of this rule to ACO certifications that will take effect on or after January 1, 2027. This subsection states that the rule will not apply to an ACO seeking certification that would take effect prior to January 1, 2027. For an ACO seeking such certification, the GMCB's current Rule 5.000 will continue to apply. That current rule, found on the GMCB website,¹ provides certification requirements and procedures for ACOs that wish to contract with Vermont Medicaid or Vermont commercial insurers.

¹ <https://gmcboard.vermont.gov/publications/rules-statutes>



We believe that this revision is consistent with the legislative intent of Act 62 (2025), which amends the GMCB's ACO certification criteria effective January 1, 2027. *See* 18 V.S.A. § 9382(a). Prior to January 1, 2027, GMCB certification applies only to ACOs contracting with Vermont Medicaid and Vermont commercial insurers. Starting January 1, 2027, certification will apply to all ACOs operating in Vermont. With this revision to Sec. 5.104 an ACO seeking certification that would take effect before January 1, 2026, can take appropriate action under the original Rule 5.000.

2. Sec. 5.106(g)

This section concerns the GMCB's requirements when reviewing ACO confidentiality requests. Originally, this subsection stated that the GMCB may disclose confidential materials to state and federal agencies, offices, and departments, subject to any confidentiality order, agreement, or other protections deemed appropriate by the GMCB. This is the current language of GMCB Rule 5.000 and was not altered by the GMCB when working on this proposed rule.

On request of legislative counsel, this subsection has now been revised to state that the GMCB may disclose confidential materials only "as required by law." The purpose of this revision is to clarify GMCB intent to only disclose confidential ACO material if required by law and not for other reasons. This revision is consistent with actual practice at the GMCB since the adoption of Rule 5.000 in 2017.

3. Sec. 5.202(b)

This subsection concerns the requirement that an ACO's governing body include Enrollee members. Under the original rule, this subsection stated that "[n]otwithstanding" three payer-specific requirements, an ACO's governing body must have a certain number of Enrollee members. This is the current language of GMCB Rule 5.000 and was not altered by the GMCB when working on this proposed rule.

On request of legislative counsel, the subordinate "notwithstanding" clause has been removed. The purpose of this revision is to clarify that the general Enrollee requirement exists alongside the three payer-specific requirements, rather than "notwithstanding" these payer-specific requirements.

4. Sec. 5.207(e)

This section states that an ACO may not prohibit "any individual or organization" from reporting any ACO act or practice that could reasonably jeopardize patient health or welfare. This is the current language of GMCB Rule 5.000 and was not altered by the GMCB when working on this proposed rule.

On request of legislative counsel, we have revised this subsection to state that "individual or organization" includes any Provider, Participant, or Enrollee. The purpose of this revision is to ensure that this subsection cannot be read to exclude these protections for Providers, Participants, or Enrollees, which are all defined terms at Sec. 5.103.

We appreciate the opportunity to provide an explanation for these requested revisions.

Sincerely,


Mark Hengstler, Staff Attorney



Green Mountain Care Board

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