



## Legislation of Interest:

### The AHEAD Model:

Vermont has agreed to move forward with the AHEAD model for cohort 2, starting January 1st, 2027. The AHEAD model is based on a global payment system developed in Maryland. Several states are debuting this model. The goals are to improve sustainability, control costs, and focus on preventative care.

Policy points of interest:

- **Gap funding** for Blueprint and Onecare is in development. Ensuring gap funding for Blueprint, SASH, and Onecare programs is vital to the health of the Vermont Healthcare System.
- **Waivers:** VNPA favors three additional waivers to the AHEAD model, ensuring that nurse practitioners and advanced practice providers can effectively practice within the system. These waivers have been identified as being helpful in effectively delivering healthcare.
  - **The SNF waiver**, which allows nurse practitioners or physician assistants, when delegated by a physician, to make required visits and perform within the scope of practice as defined by the state of Vermont
  - **The CAH waiver**, which waives the requirement that a physician must be present to provide medical direction, consultation, and supervision for patients. Regulatory language requires that a physician be available by telephone or electronic communication for consultation when needed.
  - **Hospital waivers**, which would allow nurse practitioners and physicians assistance to care for Medicare patients to the greatest extent possible based on their expertise and scope of practice defined by their state.

**House Bill H.31, Sponsored by Representative Black, is an act relating to prior authorization standards and proposes changes to that system.**

Priorities for this bill:

- Provider-neutral language that would ensure that all types of Primary Care Providers within the state of Vermont are exempt from prior authorization requirements.

**Senate Bill S.30, Sponsored by Senators Lyons and Cummings, is a bill that repeals and then recodifies Vermont's health insurance statutes in Title 8, Chapter 107.**

Priorities for this bill:

- Ensuring Provider neutral language when appropriate. Most of the language in this bill specifically names physicians, nurse practitioners, and physician assistants. There are only a few instances where modification needs to be made to include nurse practitioners and physician assistants.
- Clarifying that a nurse with recognized psychiatric specialties is PMHNP