



Legislative Update – VMS Board
2/7/24

Practice Sustainability & Reducing Administrative Burden

- **H.766** – **Prior authorization and step therapy requirements, health insurance claims, provider contracts, and collection of cost sharing amounts.** This bill would:
 - Propose changes in time frames for health plans to respond to prior authorization requests.
 - Limit the occasions for reauthorization of previously approved treatments and medications.
 - Require health plans to grant exceptions to prescription drug step-therapy under specific conditions.
 - Prohibit step-therapy protocols that require documented trials for the treatment of substance use disorder.
 - Modify provisions related to contracts between health insurers and healthcare providers.
 - Direct health insurers, not healthcare providers, to collect cost-sharing amounts from patients.
 - Mandate adherence to coding standards and guidelines for processing healthcare claims.

This bill aims to enhance the efficiency and fairness of health insurance processes in Vermont. It has received several hearings in the House Health Care Committee and most sections are likely to advance.

- **S.151** - **Increasing support for primary care & prevention.** This priority bill for the VMS would:
 - Increase Gold Card programs to exempt clinicians from prior authorization;
 - require commercial payers to increase the percent of health care dollars directed to primary care spending; and
 - increase Medicaid payments for primary care services
 - Allow minors to consent to prevention services for STIs
 - Update the insurance requirements for colorectal cancer screening.

This bill had a hearing in the Senate Health and Welfare Committee last week, incorporated with another bill addressing health care reform, S. 211.

- **H.721** - **Expanding Medicaid access.** This bill would:
 - gradually expand the income eligibility for Medicaid to 312% of the FPL by 2030;
 - increase the age of eligibility for Dr. Dynasaur up to age 26;
 - increase in Medicaid reimbursement for primary care, with a floor of 125% of Medicare; and
 - expand eligibility for the Medicare Savings Program (MSP), which helps low-income Vermonters afford Medicare premiums and out of pocket costs.

VMS supports expanding the MSP and is open to Medicaid expansion if payment rates are raised for both primary and specialty care services. This bill is being championed by Chair of House Health Care, Lori Houghton, D-Essex. The House Health Care Committee is considering edits to the bill that will move much of the expanded coverage and reimbursement changes into a study. VMS has provided input on study language.

- State Fiscal Year 2025 Budget: **Ensuring adequate Medicaid reimbursement**
 - The Scott Administration-proposed 2025 Budget (which begins June 2024) includes decreased spending due to reduced Medicaid caseload and proposed increases for skilled nursing facilities, a new nursing home to serve high complexity patients, and a 4.5% inflationary increase to FQHCs and other changes. It does not currently contain an inflationary increase for Medicaid professional services.
 - VMS [commented](#) in opposition to a slight decrease in the Medicaid professional fee schedule that was effective Jan. 1 but is now focused on addressing the issue in the State Fiscal Year 2025 budget, including seeking a yearly inflationary increase for Medicaid.

Supporting Public Health

- [S.18](#) – **Ending the sale of all flavored tobacco products in Vermont**
 - kids age 12-17 are the highest users of menthol cigarettes, and 54% of youth smokers start by using menthol;
 - must prevent kids from ever starting on these highly addictive and deadly products;
 - Other states, including our neighbors in Massachusetts, have done this successfully.

This bill passed the Senate last year and was voted out of the House Human Service committee last week. It is now in the House Ways and Means committee.

- [H.612](#) - **Public health protections for cannabis sales**
 - VMS Strongly opposes removing THC potency caps;
 - potency limits are an important factor to protect public health. The risks of physical dependence and addiction increase with exposure to high concentrations of THC
 - Support the CCB’s Report recommendation authorizing a non-legislative entity to recommend / approve new qualifying conditions for medical cannabis (not in H.612)
 - VMS believes a Review Board could alleviate the current legislative burden of making determinations on qualifying conditions and could be used to review the most up to date, evidence-based data on the use of cannabis for symptom relief
 - Urges the development of a new protocol and review process for adding conditions before adding ulcerative colitis or any other condition;

This bill has received a hearing in the House Government Operations Committee and will be taken up again this week.

- [S.233](#) – **Amendments to the scope of practice for optometrists.** This bill would:
 - Would allow optometrists holding a specialty endorsement license to perform advanced therapeutic procedures, including certain surgical and laser procedures, injections, and vaccinations.

This bill, introduced in the Senate Health & Welfare Committee, aims to update and expand the scope of practice for optometrists in the state of Vermont. VMS opposes this bill. It has not yet been taken up by the Committee.

- **Protecting Consumer Health Data**
 - Two bills have been introduced, both aimed at protecting data that consumers share with businesses, including apps and websites, from sale or misuse.
 - [H. 121](#) focuses on all consumer data and is supported by the Attorney General’s Office.
 - [S. 173](#) focuses on health care data, including reproductive and gender affirming care data
 - Both bills currently include exceptions for health care providers complying with HIPAA. VMS is focused on providing technical input on the bill language.

- **[H.765/S.164](#) – This bill would require health insurance to provide comprehensive coverage of treatment for obesity including;**
 - requiring insurance coverage of medically necessary obesity medications;
 - access to lifestyle interventions; and
 - Surgery.

This bill has received a hearing in the Senate Finance Committee and received media coverage from Vermont Public featuring VMS members: <https://www.vermontpublic.org/local-news/2024-01-31/some-doctors-want-vermont-to-require-insurers-to-cover-weight-loss-drugs-like-ozempic>

- **Increase pediatric and adult mental health care services**
 - Including programs like alternatives to EDs, mobile crisis intervention, embedded MH/SUD services in primary care

The House Health Care Committee received updates from the Department of Mental Health and VMS member Gretta Spottswood, MD, regarding the Vermont Child Psychiatry Access Program.