

Vermont Medicaid and Exchange Advisory Committee Meeting Agenda

1.	10:00	Call to Order	Mary Kate Mohlman & Sharon Henault, Co-Chairs
2.	10:05	Roll Call Establish Quorum Approve Previous Minutes	Jennifer Rotblatt, Administrative Services Coordinator (Department of Vermont Health Access, "DVHA")
3.	10:10	Legislative wrap-up	Alex McCracken, Director of Communications & Legislative Affairs (DVHA) Dani Fuoco, Senior <u>Policy</u> and Implementation Analyst (DVHA)
4.	10:40	Co-Chair Vote	Mary Kate Mohlman & Sharon Henault, Co-Chairs
5.	10:55	MEAC Budget Letter Draft Review	Mary Kate Mohlman & Sharon Henault, Co-Chairs
6.	11:15	Medicaid Renewals/ Disenrollment Survey	Adaline Strumolo, Acting Commissioner (DVHA)
7.	11:30	Commissioner's Office Update	Adaline Strumolo, Acting Commissioner (DVHA)
8.	11:40	Public Comment	Mary Kate Mohlman & Sharon Henault, Co-Chairs
9.	11:50	Final Committee Discussion	Mary Kate Mohlman & Sharon Henault, Co-Chairs
10.	12:00	Adjourn	Mary Kate Mohlman & Sharon Henault, Co-Chairs

May 20, 2024
10:00 am - 12:00 pm

Roll Call, Quorum, March 25, 2024 Meeting Minutes

Jennifer Rotblatt, Administrative Services Coordinator (DVHA)

2024 Legislative Session Overview

Alex McCracken, Director of Communications & Legislative Affairs (DVHA)

Dani Fuoco, Senior Policy and Implementation Analyst (DVHA)

2024 Legislative Session Overview

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DVHA testified on multiple bills and topics of legislative interest
Focus on **access** and **affordability** for Vermonters

1. Bill status
2. Bill detail
3. Additional testimony topics
4. Next steps
5. Medicare Savings Program (MSP) expansion

What made it?

Passed both Chambers:

- **S.98:** An act relating to Green Mountain Care Board authority over prescription drug costs and the Green Mountain Care Board nomination and appointment process
- **S.183:** An act relating to re-envisioning the Agency of Human Services
- **H.233:** An act relating to licensure and regulation of pharmacy benefit managers
- **H.622:** An act relating to emergency medical services
- **H.766:** An act relating to prior authorization and step therapy requirements, health insurance claims, and provider contracts
- **H.883:** An act relating to making appropriations for the support of government

What made it?

Signed by the Governor (as of 5/16/24):

- **S.109 (Act 97):** An act relating to Medicaid coverage for doula services
- **H.621 (Act 94):** An act relating to health insurance coverage for diagnostic breast imaging
- **H.741 (Act 95):** An act relating to health insurance coverage for colorectal cancer screening
- **H.861:** An act relating to reimbursement parity for health care services delivered in person, by telemedicine, and by audio-only telephone and extending time for flood abatement reimbursement

What didn't?

Did not pass Senate Finance Committee:

- **S.164:** An act relating to health insurance coverage for obesity care
- **H.721:** An act relating to expanding access to Medicaid and Dr. Dynasaur

H.883 “The Big Bill”

State Budget for Fiscal Year 2025

One-time appropriations for:

- Global Hospital Payment Pilot Program (\$9.2m Global Commitment Fund)
- Technical analysis of health insurance marketplace (\$150k General Fund)
- Implementation of MSP expansion (\$100k General Fund)

H.883 “The Big Bill”

Additional Language:

- Report on payment methodology for nonemergency medical transportation for 2025 BAA.
- Special education school-based Medicaid services funding
- Dr. Dynasaur premium suspension
- Technical Analyses: insurance marketplace and rate analysis
- ABLE Accounts
- Estate recovery/probate timeline
- MSP Expansion & VPharm - **further discussion at end of presentation**

Passed Both Chambers

- **S.98:** An act relating to Green Mountain Care Board authority over prescription drug costs and the Green Mountain Care Board nomination and appointment process
 - Directs GMCB to conduct a study regarding prescription drug pricing
 - Adds two additional staff positions for this work
 - Clarifies and streamlines GMCB nomination and appointment process
- **S.183:** An act relating to reenvisioning the Agency of Human Services
 - Directs AHS to explore potential Agency restructuring options

Passed Both Chambers

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- **H.233:** An act relating to licensure and regulation of pharmacy benefit managers
 - Requires licensure of pharmacy benefit managers
 - Mandates that any paid amount, including discounts, coupons, and financial assistance programs, account toward deductible and out-of-pocket limits for prescription drugs.
 - Eliminates spread pricing
- **H.622:** An act relating to emergency medical services
 - Expands Medicaid reimbursement for treatment without transport for EMS providers.

Passed Both Chambers

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- **H.766:** An act relating to prior authorization and step therapy requirements, health insurance claims, and provider contracts
 - Removes all prior authorization requirements (outside of prescription drugs) for services performed by primary care providers.
 - Introduces regulations in step-therapy and claims processing for commercial carriers.

Bills Signed by the Governor

- **S.109 (Act 97):** An act relating to Medicaid coverage for doula services
 - Directs DVHA and Office of Professional Regulation to determine best practices for payment methodology and certification/registration for doulas.
- **H.621 (Act 94):** An act relating to health insurance coverage for diagnostic breast imaging
 - Expands commercial health insurance coverage requirements for diagnostic breast imaging.

Bills Signed by the Governor

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- **H.741 (Act 95):** An act relating to health insurance coverage for colorectal cancer screening
 - Expands commercial health insurance coverage requirements for colorectal cancer screening.
- **H.861:** An act relating to reimbursement parity for health care services delivered in person, by telemedicine, and by audio-only telephone and extending time for flood abatement reimbursement
 - Mandates coverage of audio-only telehealth services by commercial insurers.
 - Sets provider reimbursement rate at parity for in-person services.
 - Extends timeline for municipalities to apply for flood related tax abatement.

Additional Testimony Topics

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[Medicaid Redetermination and Renewals \(Unwind\) Update](#)

[Change Healthcare Cyberattack Situation Update](#)

[Integrated Eligibility and Enrollment Modernization Update](#)

Implementation of legislative actions:

- MSP Expansion
- Global Hospital Payment Program

Studies and reports:

- Doula payment methodologies
- Insurance marketplace analysis
- Rate analysis
- Non-emergency medical transportation
- Future of VPharm

MSP Expansion in 2026

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Qualified Medicare Beneficiary (QMB) program eligibility raised from 100% of Federal Poverty Level (FPL) to **145% FPL**

Specified Low-Income Medicare Beneficiary (SLMB) program subsumed by QMB (effectively eliminated)

Qualifying Individual (QI-1) program eligibility raised from 135% FPL to **190% FPL**

DVHA to provide recommendations on VPharm following MSP expansion.

Thank you!

Please feel free to reach out with any questions.

Alex McCracken

Director of Communications and Legislative Affairs,
Department of Vermont Health Access

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Co-Chair Vote

Mary Kate Mohlman & Sharon Henault , Co-Chairs

MEAC Budget Letter Draft Review

Mary Kate Mohlman & Sharon Henault , Co-Chairs

Medicaid Renewals/ Disenrollment Survey

Adaline Strumolo, Acting Commissioner (DVHA)

Medicaid Renewal Dashboards – Discussion

<https://dvha.vermont.gov/unwinding/renewal-dashboard>

Commissioner's Office Update

Adaline Strumolo, Acting Commissioner (DVHA)

Public Comment & Final Committee Discussion

Adjourn

Mary Kate Mohlman & Sharon Henault , Co-Chairs