

Bill/§	Subject	Purpose	Due Date
H. 761: Performance Measures Report	Performance Measures	Produce an Alignment Plan across all programs that impact primary care	January 15,2017
S. 245 Sec. 4: Provider Reimbursement; Report	Provider Parity	Consider the advisability and feasibility of expanding to commercial health insurers the prohibition on any increased reimbursement rates or provider based billing for health care providers newly transferred to or acquired by a hospital. GMCB shall include its recommendations for the process and timing of implementation of any reimbursement restrictions.	February 15,2017
S.245 Sec 5: Reducing payment differentials; Guidance and Implementation Report	Provider Parity	On or before July 15, 2016 the GMCB shall provide a copy of each implementation plan to the Committees of Jurisdiction for providing fair and equitable reimbursement per Act 54 sec.23(b) of 2015.	July 15, 2016
S.216 Sec 2: Pharmaceutical Cost Transparency	Prescription Drug List	Requires the GMCB, in collaboration with DVHA, to identify annually up to 15 prescription drugs on which the State spends significant health care dollars and for which the wholesale acquisition cost has increased by 50 percent or more over the past five years or by 15 percent or more over the past 12 months, creating a substantial public interest in understanding the development of the drugs' pricing.	No due date, but the AG's must report to the GA by December 1, 2016.

		The Board shall provide to the Office of the AG the list of the Rx drugs and the percentage of the wholesale acquisition cost increase for each drug and shall post this information on the GMCB website.	
H.812 Sec.10: Primary Care Professional Advisory Group	Primary Care Advisory Group	The GMCB shall establish a primary care advisory group to provide input and recommendations to the Board. The Board shall provide an update on the advisory group’s work in the annual report.	January 15,2017
H.812 Sec. 6: Update on Rulemaking	ACO budget Rulemaking	Provide an update on the rulemaking process and its vision for GMCB implementation to the Committees of Jurisdiction	January 15,2017
H.812 Sec. 9 -10 Reducing administrative burden on providers	Administrative burden on providers	Sec. 9 - to extent funds are available, GMCB may examine effectiveness of existing requirements for health care professionals and evaluate alternatives Sec. 10 - directs GMCB to establish a primary care professional advisory group to help the GMCB address the administrative burden on primary care professionals o GMCB will provide an update on the group in its annual report o Per diem and reimbursement of expenses up to \$5,000 per year o Advisory group sunsets on July 1, 2018	
H.812 Sec. 11: AHS Contracts Report	AHS Contracts	AHS in consultation with Vermont Care Partners and preferred providers shall submit a report to Committees of Jurisdiction addressing: the amount and type of performance measures and other evaluations used in FY 2016 and 2017 AHS contracts with designated	January 1, 2017

		agencies, specialized service agencies, and preferred partners how AHS funding of these service providers affects access and quality how AHS funding for these service providers affects staff compensation in relation to public and private sector pay for the same services, Report must include a plan developed with stakeholders to implement value-based payments for service providers that improve access and quality of care, including long-term financial sustainability, must describe interaction of value-based Medicaid payments to service providers from AHS with Medicaid payments to these providers from ACOs	
H. 812 Sec. 13: Medicaid Advisory Rate Case	Medicaid Advisory Rate Case	Must review by 12/31/16 any all-inclusive population based payment arrangement between DVHA and an ACO for calendar year 2017 Specific elements of GMCB's review, review is non-binding on AHS	December 31, 2016
H.812 Sec. 14: Multiyear Budgets ACOs Report	Multiyear ACO Budgets	Directs GMCB to consider appropriate role, if any, of multi-year budgets for ACOS, report findings and recommendations	January 15, 2017
H.812 Sec. 16 APM; Alignment	All-Payer Model Alignment	Requires GMCB to present information to legislative committees on status of efforts to achieve alignment between the payers	January 15, 2017