Vermont Medical Society

Not for Ourselves do we Labor

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New Health Care Laws for 2018

VMS Wednesday Webinar
June 20, 2018
CME DISCLAIMER

In support of improving patient care, this activity has been planned and implemented by the Robert Larner College of Medicine at the University of Vermont and the Vermont Medical Society. The University of Vermont is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

The University of Vermont designates this live activity for a maximum of 1 AMA PRA category 1 credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Please watch your email for a link from the Vermont Medical Society to claim your CME credit. CME credit must be claimed within 30 days of participating in the event.
VMS Wednesday Webinar Series
New Health Care Laws for 2018

Speakers:
VMS Advocacy Staff
Jessa Barnard, Executive Director
Stephanie Winters, Deputy Executive Director

Planning Committee Members:
Jessa Barnard, ESQ, Wendy Davis, M.D., FAAP & Stephanie Winters

Purpose Statement/Goal of This Activity:
To discuss the new Health Care Laws for 2018 and how they effect health care practices in Vermont.

Learning Objectives:
To understand how the Health Care Laws of 2018 may impact your practice.

Disclosures:
Is there anything to Disclose? Yes □ No □

Did this activity receive any commercial support? Yes □ No □

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ABOUT US

• 501(c)(6) nonprofit member service organization founded in 1784

• 2416 members
  – MDs, DOs, PAs, medical students and residents
  – Represents approx. 60% of practicing physicians & PAs in Vermont
  – All specialties and practice settings
LEADERSHIP

President:
Trey Dobson, MD (Emergency Medicine, CMO, Southwestern Vermont Medical Center)

President-Elect:
Stephen Leffler, MD (Emergency Medicine, Chief Population Health & Quality Officer, UVM-HN)

Vice President:
Catherine Schneider, MD (Surgery, Mt. Ascutney)

Immediate Past-President:
Wendy Davis, MD (Pediatrician, VCHIP)

Secretary-Treasurer:
Howard Schapiro, MD (UVM Health Network)
WHAT WE DO: ADVOCACY

“Maintaining a strong, unified voice for physicians and medicine”

“Strength in numbers”

“Best voice to educate the legislature on health care issues”

“Having someone stand up for our desires for a better work/life balance”

“Giving Vermont’s physicians a voice in the nation”

Quotes from Vermont Medical Society 2017 Physician & Physician Assistant Survey
WHAT WE DO: ADVOCACY

Leading voice for all physicians before the Vermont legislature, administration and administrative agencies

- Administrative Burdens
- Health Reform & Reimbursement
- Professional Regulation
- Workforce
- Mental Health
- Liability Reform
- Public Health
VMS’ Top 5 Legislative Successes of 2018:

• **New fair Medicaid practices required** *(Act 116)*
  – Must enroll new providers within 60 days; must examine fraud and abuse practices

• **Strengthened the physician workforce**
  – Vermont to join Interstate Licensing Compact in 2020 *(Act 115)*

• **Preserved primary care funding** *(FY19 budget)*
  – $2.2 million restored for PMPM payments
  – AHEC Loan Repayment Funding fully restored

• **Protected patient safety**
  – New APRN graduates must maintain relationship with experienced clinicians
  – No new providers can prescribe psychiatric medication

• **Improved public health**
  – Sweeping gun safety protections enacted
  – Medical marijuana limited to listed conditions

• For our complete [2018 VMS Legislative Bulletin](#) click here
Become an Advocate
How to Follow & Assist with Legislative Efforts

• Contact legislators
  – Get to know your local legislator before you have an “ask”
  – Find your legislator

• Follow legislation of interest
  – Subscribe to the weekly VMS Rounds
  – Track a bill
  – Contact your legislator and/or members of key legislative committees following the bill to express your opinion.

• Contribute to VMSPAC

• Write a letter to the editor of your hometown newspaper

• Inform VMS of your willingness to testify or visit the statehouse

• Increase your leadership/advocacy skills
  – VMS Leadership courses: http://www.vmsfoundation.org/vpli/overview
Vermont Legislature: Structure

– 30-member Senate (21 D, 7 R, 2 P)
  • Elected from 13 Senate districts

– 150-member House (83 D, 53 R, 7 P, 7I)
  • Represent 66 1-member districts; 42 2-member districts (an average of 4,172 residents)

– All members elected every two years
Vermont Legislature: Leadership

Senate
- Senate President/Lt. Gov: David Zuckerman (P/D)
- President Pro Tempore: Tim Ashe (D/P)
- Majority Leader: Becca Balint (D)
- Minority Leader: Joe Benning (R)

House
- House Speaker: Mitzi Johnson (D)
- Majority Leader: Jill Krowinski (D)
- Minority Leader: Donald Turner (R)
Vermont Legislature: Key Committees

The following committees have jurisdiction over some portion of health care policy or financing:

- House Appropriations
- House Government Operations
- House Health Care
- House Human Services
- House Judiciary
- Senate Appropriations
- Senate Finance
- Senate Government Operations
- Senate Health & Welfare
- Senate Judiciary
2018 Advocacy

VMS Weekly Rounds:
http://www.vtmd.org/vms-rounds-archives

Final Legislative Bulletin:
http://www.vtmd.org/legislativebulletins
2018 Advocacy

• Health System Reform
  – Implementation of All-Payer Model
2018 Advocacy

• Health System Reform
  – Green Mountain Care Board Membership
    • Requiring a currently or recently-practicing health care professional to have a seat on the Green Mountain Care Board (GMCB) at the next vacancy - failed in House
  – S. 53, Universal Primary Care
    • Bill to further study/create operational plan
    • Passed Senate, stalled in House Appropriations
  – H. 901/Act 187, “VITL” Bill
    • Requires timely responses to 2017 consultant report
  – H. 912/Act 167
    • Work group to examine regulation of ASCs, urgent care & other freestanding health care facilities
2018 Advocacy

• Reduce Administrative Burdens
  – S. 282/Act 116, Section 2: Medicaid Recoupment Practices
    • Requires DVHA to gather practice input regarding the Medicaid program and its administration, to evaluate the state and federal fraud and abuse programs and assess the feasibility of exceptions to recoupment (signed by Governor)
  – H. 653, GMCB Primary Care Advisory Group
    • Continuing without legislation needed
    • Transition to Technical Advisory Group
2018 Advocacy

- Medicaid Practices & Reimbursement
  - FY 19 Budget
    - Achieved 2/3 restoration of the $2.50 Primary Care Case Management PMPM payment ($2.2 million, to be included in Blueprint for Health monthly payments)
  - S. 282, Section 1, Medicaid Enrollment
    - Requires that by July 1, 2019 new providers to Vermont Medicaid be enrolled with the program within 60 days of receiving a complete application
    - Signed by Governor 5/1/18, Act 116
2018 Advocacy

• Commercial Insurance Coverage
  
  – H. 639, Breast Imaging Copays
    • Screening by ultrasound for a patient for whom the results of a screening mammogram were inconclusive or who has dense breast tissue, or both will be covered at no copay, coinsurance or deductible - After 1/1/19
  
  – H. 696, Individual Mandate
    • Requires insurance coverage effective 1/1/20 with work group meeting to establish penalties
  
  – S. 224/S.1, Chiropractor & PT Copays
    • Copayments for chiropractic & PT equal to primary care in 2019; to 140-160% of primary care in 2020
2018 Advocacy

• Commercial Insurance Coverage
  – H. 892/Act 131, Short Term Health Insurance & Association Health Plans
    • Limits the duration of the coverage to less than 3 months, prohibits renewal, requires prominent disclosures; authorizes regulation of association plans
  – Act 88, “Silver Solution”
    • Response to loss of federal cost-sharing reduction payments – silver plans can be sold off exchange – may be better option for some patients
2018 Advocacy

• Workforce
  – FY2019 Budget – Loan Repayment
    • Achieved full restoration of $667,000 proposed cut to the AHEC loan repayment program
  – S. 253/Act 115, Interstate Medical Licensure Compact
    • Creates a new, voluntary expedited pathway to licensure for qualified physicians who wish to practice in multiple states
    • Becomes effective Jan 1, 2020 for MDs and DOs
2018 Advocacy

- **Professional Regulation**
  - S. 243, Reporting of Disciplinary Actions
    - Failed to pass out of Senate Health & Welfare
  - H. 684/Act 144, APRN Regulation
    - Removes requirements for filing practice guidelines
    - Maintains current 2 year period of collaboration with a more experienced clinician (physician or APRN)
  - S. 208, Psychologist Prescribing
    - Failed to receive hearing in Senate
2018 Advocacy

• Mental Health
  – S. 203/Act 200
    • Supports work with UVM-HN & Brattleboro Retreat to pursue additional in-patient beds, including waiving CON requirements
    • Creates study of non-hospitalization orders; additional data and reports on ED & in-patient lengths of stay in ED
    • Requires ongoing reports on federal spending (IMD restriction)
2018 Advocacy

• Pharmacy & Prescription Drugs
  – S. 92/Act 193, Biosimilar Substitution
    • Requires pharmacist who receives rx for a biological pharmaceutical to select the lowest priced interchangeable biological product & notify prescriber within 5 days; Notification will be electronic unless prescriber indicates otherwise on prescription
  – S. 164/Act 114, Drug Repository Report
    • AHS to report on feasibility of accepting and dispensing donated prescription drugs
  – S. 175/Act 113, Reimportation
    • AHS must design plan to import from Canada; request waiver from CMS by July 1, 2019
2018 Advocacy

- Public Health
  - Gun Safety
    - **S.221/Act 97**: Temporarily removes guns in cases of "extreme risk"
    - **S. 55/Act 94**: Universal background checks, raises the minimum age for gun purchase from 16 to 21 years of age, bans bump stocks and high-capacity magazines
    - **H. 422/Act 92**: Temporarily removes guns in cases of domestic violence
    - Signed by Governor
2018 Advocacy

• Public Health
  – Opioid epidemic
    • S. 225/Act 159, MAT Pilot Program: pilot programs for commercial insurers to contribute additional funding to “spoke” practices offering MAT (signed by Governor)
    • Act 176 & Act 153, Expanded Access to MAT for Inmates: requires screening of inmates for SUD; inmates taking MAT to continue to receive treatment; access to MAT for inmates who screen positive (signed by Governor)
    • Funding: $28 m unexpected tobacco settlement may at least in part be spent on opiate crisis
    • Tax proposal based on MME by manufacturer
2018 Advocacy

• Public Health
  – S. 216, Medical marijuana
    • Proposed to expand access for patients with all “Other diseases, conditions, or treatments”
    • Prohibited use of marijuana from being the sole factor disqualifying the patient from medical treatment
    • Successfully removed provisions from final bill
  – H. 511, Legalization of Non-Medical Marijuana
  – S. 261/Act 204, Adverse Childhood Experiences
    • Creates opportunities to build child and family resilience for all families throughout the State; clinicians responsible for assessing trauma
THANK YOU!

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