



## **For the Week Ending February 13, 2009**

A proposal to limit out-of-pocket costs for colorectal cancer screenings received House approval last week after hours of contentious floor debate over costs. H.24 would mandate colorectal cancer screening benefits in private health insurance plans and limit member out-of-pocket costs to \$25 or less.

An amendment proposed by Rep. Anne Donahue (R-Northfield) to tie provider and facility charges for colorectal screenings to the same Medicare plus 10 percent rates used by the Catamount Health insurance program for the uninsured failed. However, another Donahue amendment to extend the co-pay limitation to Medicare beneficiaries, if approved by the federal government, was approved by the assembly and added to the bill.

The House gave its final approval to H.24 as amended by a 104 to 35 vote. The bill will now be considered by the Senate.

The House Health Care Committee last week focused on two issues: an administration proposal to make Catamount Health more sustainable by reducing its cost to the state, and a workers' compensation bill (H.162) to create a process for providers to submit, dispute and collect payment for workers compensation injury claims.

The committee is sorting through the administration's Catamount proposals by hearing from a variety of interests, including the health plans that administer the plans, consumers and administration officials.

A provision in the workers compensation proposal (H.162) to prohibit health insurers from recovering payments paid to providers for treatments that are later discovered to be work related is proving to be controversial. Blue Cross and Blue Shield of Vermont testified Friday that the provision would add costs to the health care system. Health plans pay providers more than workers compensation insurers, yet under the proposal, health plans that have paid providers at the higher rate would only be able to recover at the lower workers compensation rates. Furthermore, providers would benefit by becoming less vigilant about screening patients to determine work related injuries because they could bill health insurers at the higher rate and not have to give the money back.

This week, the annual Budget Adjustment Act and a highly-publicized sex offender bill are expected to consume a lot of House floor time. The House Health Care Committee

will return to the Catamount and workers compensation issues and the Senate Health and Welfare Committee will take up a joint resolution (J.R.S.18) relating to prescription drug pricing, and department for children and families and Medicaid budgets.

**New Bills of Interest:**

**S.81** Introduced by Senators Mullin and Campbell

This bill proposes to require health insurers to provide coverage for orally administered anticancer medications to at least the same extent that they provide coverage for traditional chemotherapy.

**S.88** Introduced by Senator Flanagan and others

This bill proposes to establish the goal of universal access to essential health services in Vermont through a publicly financed, integrated, and regional health delivery system.

**H.189** Introduced by Representative Ancel of Calais

This bill proposes to introduce a new health insurance, Catamount Primary, which would be similar to Catamount Health but would provide coverage only for primary and preventive care and chronic care management.

**H.190** Introduced by Representative Donahue of Northfield and others

This bill proposes to amend the certificate of need program to require that criteria for approval include findings that a project addresses urgent priorities identified in the health resource allocation plan and has considered priority needs in the statewide system of care for mental health.

**H.196** Introduced by representative McFaun of Barre Town

This bill would provide access to and coverage for health services in hospitals, build on catamount Health, and offer opportunities for premium relief to all Vermonters.

**H.207** Introduced by Representative Howrigan of Fairfield and others

This bill proposes to require health insurers to provide coverage for the diagnosis and treatment of Lyme disease. It would also promote education about Lyme disease, and require the agency of agriculture to create a process for members of the public to submit ticks to the state for testing.

**H.218** Introduced by Representative O'Donnell of Vernon

This bill proposes to exempt insurers offering Medicare supplemental insurance policies from providing claims data to the department of banking, insurance, securities, and health care administration.

**H.219** Introduced by Representatives Koch of Barre Town and McFaun of Barre Town

This bill proposes to add hydrocephalus to the list of specified health conditions included in the statewide birth information network.

**H.220** Introduced by Representatives Maier of Middlebury and Milkey of Brattleboro

This bill proposes to establish standards for processing claims for health care services submitted to health plans by health care providers and to establish standards for disclosure of payment methodologies, regulation of rental networks, and prohibitions on

the use of “most favored nation” and “all-products” clauses in health care provider contracts.

**H.230** Introduced by representative Mook of Bennington and others

This bill proposes to require health insurers to provide coverage for orally administered anticancer medications to at least the same extent that they provide coverage for traditional chemotherapy.

If you are interested in this week’s Legislative Committee Meeting schedules, agendas, and a listing of other meetings and activities, please visit the Vermont Legislature’s website at <http://www.leg.state.vt.us/schedule/schedule2.cfm> Committee meetings are normally updated daily, and are subject to change without notice. If you plan on attending, you may want to call ahead to verify the agenda.

For more information on legislative proposals, visit the Blue Cross and Blue Shield of Vermont website at [www.bcbsvt.com](http://www.bcbsvt.com) or call Leigh Tofferi at (802) 223-6131 or Kathy Parry at (802) 371-3205. If you wish to discontinue receiving these updates or know of anyone else who would like to receive it, please call Kathy Parry or send an e-mail to [webmail@bcbsvt.com](mailto:webmail@bcbsvt.com)