



### **For the Week Ending April 17, 2009**

Signs that the 2009 session of the Vermont legislature is nearing adjournment are becoming more visible by the day at the State House. Senate morning committees closed down last week, leaving additional time for afternoon money committees to resolve critical budget and revenue issues in time for the May 8 adjournment target date set by legislative leaders early in the session.

The afternoon Senate Health and Welfare Committee held hearings last week on a Senate bill (S.81) to require health benefit plans to cover oral cancer medicines on a financial basis that is no less favorable than intravenously administered or injected medications covered under the insured's plan. The committee heard from insurers and proponents of the bill on Thursday and will hold additional hearings this Wednesday afternoon.

The Health and Welfare Committee last week also heard about a government health care administration restructuring proposal from Senator Jane Kitchel, a former Agency of Human Services secretary. Kitchel distributed an organizational chart of a restructured agency. Her proposal would transfer key activities of the current health care administration division of BISHCA to the human services agency. Certificate of need applications, hospital budget reviews, HIPAA compliance, and grievance and appeal designations would all be transferred from BISHCA to AHS under Kitchel's plan. Financial regulation of private health insurance would remain with BISHCA.

The Senate Committee had time to consider those issues last week because it is awaiting the omnibus House health care bill (H.444) which easily passed the House without amendment by a 130-2 vote on Friday. The bill proposes to expand eligibility standards for the Catamount Health plan to include self-employed persons who cannot lose private coverage because they cannot afford it, lower from \$10,000 to \$7,500 the deductible threshold that enables insured persons to leave private coverage without complying with the Catamount 12-month waiting period, and allow depreciation to be considered in the financial calculation for state subsidies. The bill also contains provisions intended to position the state to more easily capture any available federal stimulus funds, as well as a variety of other measures described in previous editions of this report.

Also last week, the House Health Care Committee began its review of a Senate-passed bill (S.129) proposing to study variations in health care, payer administrative costs, and shared-decision making. The House committee is preparing to add elements of S.123 to

the bill that would make changes to the state's certificate of need process. The committee is also preparing to add provisions to assemble a work group of stakeholders to prepare for a pilot project in one or more regions of the state to study accountable care organizations (ACOs).

This week, the House Committee will turn its attention to a bill (S.48) related to marketing of prescription drugs once it has completed its work on S.129. The Senate committee will hold hearings on a variety of bills, including palliative care (H.435), single-payer health care (S.88), and the omnibus health bill from the House (H.444).

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)