

1

S.241

2

Introduced by Senators Hooker, Balint, Hardy, Pollina and Ram Hinsdale

3

Referred to Committee on

4

Date:

5

Subject: Health; Green Mountain Care Board; Department of Financial

6

Regulation; Agency of Human Services; health insurers; accountable

7

care organizations; health equity

8

Statement of purpose of bill as introduced: This bill proposes to incorporate

9

health equity into Vermont's principles for health care reform. The bill would

10

require that the data that health insurers and accountable care organizations

11

provide to the General Assembly and others be disaggregated based on certain

12

equity criteria. The bill would also direct the Agency of Human Services to

13

enhance its data collection on race and ethnicity for the Medicaid population in

14

order to provide information to the General Assembly regarding disparities in

15

health outcomes among Medicaid beneficiaries.

16

An act relating to achieving health equity across the health care system

1 It is hereby enacted by the General Assembly of the State of Vermont:

2 Sec. 1. 18 V.S.A. § 9371 is amended to read:

3 § 9371. PRINCIPLES FOR HEALTH CARE REFORM

4 The General Assembly adopts the following principles as a framework for
5 reforming health care in Vermont:

6 (1) The State of Vermont must ensure universal access to and coverage
7 for high-quality, medically necessary health services for all Vermonters.
8 Systemic barriers, such as cost, must not prevent people from accessing
9 necessary health care. All Vermonters, whether they reside in an urban or a
10 rural area of the State, must receive affordable and appropriate health care at
11 the appropriate time in the appropriate setting, regardless of their race,
12 ethnicity, gender identity, age, primary language, socioeconomic status,
13 disability, or sexual orientation.

14 * * *

15 Sec. 2. 18 V.S.A. § 9415 is added to read:

16 § 9415. HEALTH INSURER DATA REPORTING; HEALTH EQUITY

17 The Commissioner of Financial Regulation and the Chair of the Green
18 Mountain Care Board shall require that all data provided by a health insurer to
19 the Department, to the Board, or to the General Assembly about its insureds
20 and the health care services they receive be disaggregated based on the
21 following equity criteria:

- 1 (1) rural or urban residency;
- 2 (2) race;
- 3 (3) ethnicity;
- 4 (4) gender identity;
- 5 (5) age;
- 6 (6) primary language;
- 7 (7) socioeconomic status;
- 8 (8) disability; and
- 9 (9) sexual orientation.

10 Sec. 3. 18 V.S.A. § 9574 is added to read:

11 § 9574. ACCOUNTABLE CARE ORGANIZATION DATA REPORTING;

12 HEALTH EQUITY

13 All data provided by an accountable care organization to the General
14 Assembly and, upon request, to another entity in State government shall be
15 disaggregated based on the following equity criteria in order to assure the
16 General Assembly that the accountable care organization is serving all
17 Vermonters equally:

- 18 (1) rural or urban residency;
- 19 (2) race;
- 20 (3) ethnicity;
- 21 (4) gender identity;

1 (5) age;

2 (6) primary language;

3 (7) socioeconomic status;

4 (8) disability; and

5 (9) sexual orientation.

6 Sec. 4. AGENCY OF HUMAN SERVICES; DATA COLLECTION;

7 MEDICAID; HEALTH DISPARITIES

8 The Agency of Human Services shall enhance its data collection on race
9 and ethnicity for the Medicaid population in order to provide the General
10 Assembly with comprehensive information regarding disparities in health
11 outcomes among individuals enrolled in the Medicaid program.

12 Sec. 5. EFFECTIVE DATE

13 This act shall take effect on passage.