

2017 Legislative Session: New Health Care Laws



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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 Zukerman (P/D)
- President Pro Tempore: Tim Ashe (D)
- Majority Leader: Becca Balint (D)
- Minority Leader: Dustin Degree (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](#)
- [House Ways & Means](#)
- [Senate Appropriations](#)
- [Senate Finance](#)
- [Senate Government Operations](#)
- [Senate Health & Welfare](#)
- [Senate Judiciary](#)

Health-Care Related Bills

- 120 Introduced and tracked by VMS
 - <http://www.vtmd.org/sites/default/files/legislation3.24.17.pdf>
- 21 Reported in legislative wrap-up
 - <http://www.vtmd.org/2017-vms-legislative-wrap>
- Bills not taken up/passed in 2017 will remain in consideration
- This presentation highlights bills that impact day to day practice
- Topics:
 - Mental Health
 - Practice of Medicine
 - Professional Regulation/Scope of Practice
 - Public Health
 - Health Financing/Health Reform
 - Administrative Rules

Mental Health

S. 3/Act 51 Duty to Warn

- What “duty to warn” applies to psychiatrists and other mental health professionals if a patient poses a threat to a third party
- Negates *Kuligoski v. Brattleboro Retreat* (2016)
- *Peck v Counseling Service of Addison County* (1985) establishes the duty to warn in Vermont:
 - A mental health professional who knows or, based upon the standards of the mental health profession, should know that his or her patient poses a serious risk of danger to an identifiable victim has a duty to exercise reasonable care to protect him or her from that danger

Mental Health

H. 230/Act 35, Minor Consent for Mental Health Care

- Allows minors to consent to receive any legally authorized outpatient treatment from a mental health professional
 - See definition in 18 VSA § 1701: a person with professional training, experience, and demonstrated competence in the treatment of mental illness, who shall be a physician, psychologist, social worker, mental health counselor, nurse, or other qualified person
 - Includes psychotherapy and counseling services, but not drugs
- Effective January 1, 2018.

Mental Health

S. 133, Mental Health Care & Care Coordination

- Creates a number of studies of the mental health system by AHS, GMCB, OPR including:
 - Overall structure, funding, gaps in MH system
 - Study of use of involuntary treatment & medication
 - How to best integrate care and incorporate into ACO
 - Workforce recruiting, training, retention
 - Funding of DA system

H. 184/Act 34, Evaluation of Suicide Profiles

- Secretary of AHS to report on trends and patterns of suicide deaths; risk factors for preventable deaths; gaps in systematic responses

Practice of Medicine

S. 14/Act 39, Expanding the Vermont Practitioner Health Program

- Authorizes VPHP to serve all Board of Medical Practice licensees (MDs, PAs, RAs, AAs, Podiatrists) who are, or are potentially, unable to practice medicine with reasonable skill and safety
- Currently limited to serving licensees with substance use disorder
- Provides evaluation, coordination of care and monitoring services
- Can self-refer or be referred by Board, Employer, Others
- Anticipate services beginning by Jan 1, 2018
- **Confidential Phone: 802-223-0400**

Practice of Medicine

S. 50/Act 64, Telemedicine

- Requires comparable reimbursement for telemedicine as in-person services
- Expands existing coverage mandate from pt being in a facility to a patient located in any setting (such as home, work)
- Expands coverage to any Vermont-licensed provider contracted with the insurer
- Requires an informed consent that covers:
 - Opportunities and limitations of telemedicine
 - If any others are participating/observing
 - Security measures/HIPAA compliance
 - And meets [Board of Medicine requirements](#)

Practice of Medicine

S. 16/ Act 65, Medical Marijuana

- Adds to qualifying conditions PTSD, Crohn's disease & Parkinson's disease
 - For PTSD, DPS must also confirm pt is in counseling or therapy with a licensed mental health provider
- Eliminates the 3 mo. prof relationship if pt is referred to a specialist in treating one of the qualifying conditions
- No longer requires professional to attest that reasonable medical efforts have been made over time without success to relieve symptoms;
- Adds to medical verification form a statement that the form is not considered a prescription and the only purpose of the form is to confirm that the applicant has a debilitating medical condition.

Practice of Medicine

H. 111/Act 46, Vital Records

- Updates & modernizes Vermont's vital records laws
 - E.g. one Statewide Registration System to be the repository for all birth and death certificates
- Clarifies that the attending physician or designee have five business days to submit a report of birth (rather than five calendar days)
 - report will be submitted to the State Registrar in the Department of Health

Practice of Medicine

Select Bills Still in Committee

- [S. 45](#), Gift Ban Bill
 - Passed Senate, Still in Committee in House
 - Allows clinicians to accept food paid for by industry at a continuing education conference, if accompanying content is CME-accredited or free from industry influence
- [H. 92](#), Interchangeable Biologics
 - Passed Senate, Still in Committee in House
 - allows pharmacists to substitute biological products deemed “interchangeable” by the FDA

Professional Regulation/Scope

H. 506/Act 48, Office of Professional Regulation

- Section 34 – APRN Scope in Nursing Homes
 - APRNs may provide state- and federally-defined “physician services” in the nursing home setting
 - E.g. reviewing the resident’s care plan and performing periodic in-person visits
- Sec. 35 – Board of Medical Practice
 - Directs OPR & relevant State agencies / departments to analyze all professions that are located outside the jurisdiction of OPR
 - Senate Gov Ops strongly interested in Board of Medical Practice moving from Dept of Health to OPR

Professional Regulation/Scope

Select Bills Still in Committee

- [H. 496](#), Regulation of Medical Assistants
 - Directs OPR to complete a “[sunrise review](#),” or a preliminary assessment and recommendation as to whether or not MAs should be licensed or regulated
 - OPR to report back next session regarding how other states regulate MAs
 - VMS seeking feedback from leadership/members
- [S. 71](#), Pharmacist Administration of Vaccinations
- [H. 280](#), Prescribing by Psychologists

Public Health

H. 508/Act 43 – Adverse Childhood Experiences

- Creates legislative Adverse Childhood Experiences Working Group
- To investigate, catalogue and analyze existing resources to mitigate childhood trauma, identify the populations served, and examine structures to build resiliency
- To begin meeting by September 1, present recommended legislation by November 1

Public Health

[H. 170](#)/[H. 167](#)/[S.22](#), Marijuana Legalization

- S. 22 Vetoed by Governor Scott
- Remains under discussion for veto session today (June 21) and tomorrow
- VMS & AAPVT have focused on youth access/impact

Public Health

S. 88, Increasing Smoking Age from 18 – 21 (Failed)

- Defeated in Senate by vote of 13-16
- VMS will continue to advocate for passage

H. 34, Baby Bumper Pads (Still in Committee)

- proposes to prohibit the manufacture, sale, or transfer of crib bumper pads in the state

Rules Adopted

Opioid & VPMS Rules (VDH)

- Effective July 1, 2017
- <http://www.vtmd.org/opiate-prescribing-substance-use-disorder-information>

Medication Assisted Therapy Rule (VDH)

- Increases cap of patients from 100-275; expands eligible providers to PAs and APRNs
- <http://www.healthvermont.gov/alcohol-drugs/professionals/medication-assisted-treatment-resources>

Board of Radiologic Technology (OPR)

- Updates training requirements for clinicians who apply ionizing radiation
- Applies to renewal beginning May 2019
- Will be posted to: <https://www.sec.state.vt.us/professional-regulation/list-of-professions/radiologic-technology/statutes-rules.aspx>

Become an Advocate

How to Follow & Assist with Legislative Efforts

- Contact legislators
 - Get to know your local legislator at the beginning of the session 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>

Questions?

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<http://www.vtmd.org/advocacy-and-policy>



Thank you!