#### S 54

This act requires that, for plan years 2024 and 2025, a health insurance carrier offer separate health benefit plans to individuals and families in the individual market and to small group employers in the small group market and requires that the carrier calculate the premiums for the individual market and the small group market separately.

### S 65 (see companion bill H 11)

this bill proposes to require commercial insurance plans provide coverage for epinephrine auto-injectors without any deductible, coinsurance, co-payment, or other cost-sharing requirement

## H 11 (see companion bill S 65)

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# S 74 (see companion bill H 156)

this bill proposes to implement Green Mountain Care, a publicly financed health care program for all Vermont residents, over time, starting with primary care in the first year, adding preventive dental and vision care in the second year, and incorporating additional health care services in later years.

### H 156 (see companion bill S 74)

this bill proposes to implement Green Mountain Care, a publicly financed health care program for all Vermont residents, over time, starting with primary care in the first year, adding preventive dental and vision care in the second year, and incorporating additional health care services in later years.

#### S 98

This bill proposes to authorize and direct the Green Mountain Care Board to evaluate the costs of certain high-cost

prescription drugs and recommend methods for addressing those costs, including setting limits on what Vermonters would be expected to pay for some high-cost drugs. The bill would also require the Board to submit a report on generic drugs and generic drug prices.

#### H 233

This bill proposes to require pharmacy benefit managers to obtain licensure from, rather than register with, the Department of Financial Regulation. It would establish a detailed regulatory framework for regulating pharmacy benefit managers and would prohibit or restrict a number of pharmacy benefit management activities. The bill would recodify most of the existing statutory provisions relating to pharmacy benefit managers in a single chapter, with some revisions. It would limit direct solicitation to consumers by pharmacies and pharmacy benefit managers. The bill would also require the Agency of Human Services to select a wholesale drug distributor through a competitive bidding process to be the sole source to distribute prescription drugs to pharmacies for dispensing to Medicaid beneficiaries.

### H 290

This bill proposes to expand the pharmacist scope of practice to allow a pharmacist to test for and treat certain health conditions.

#### H 406

This bill proposes to revise 7 provisions relating to the delivery of health care services through telemedicine 8 and by store-and-forward means.

#### **HB 80**

It would require prenatal, maternity, postpartum, and newborn coverage under health insurance plans and Medicaid to include birth center services and fees and would specify that birth centers are not subject to certificate of need review.