February 13, 2019

Senate Health and Welfare Committee
State of Vermont
115 State Street
Montpelier, VT 05633

Sent via email to msuttonsmith@leg.state.vt.us

Re: S. 43 and proposed amendments

Dear Chair Lyons and Committee Members,

Bi-State Primary Care Association appreciates the opportunity to provide comment on S. 43, Removing Barriers to Medication-Assisted Treatment.

Established in 1986, Bi-State is a nonpartisan, nonprofit 501(c)(3) charitable organization that promotes access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire. Bi-State’s Vermont membership includes 12 Federally-Qualified Health Centers (FQHCs) delivering primary care at 68 sites and serving over 177,000 Vermonters.

As you may know, all of Vermont’s FQHCs provide Medication-Assisted Treatment (MAT) services to Vermonter as “Spokes”. These services are invaluable in combating opioid addiction and caring for these Vermonters in their communities. As front-line clinicians, they see firsthand the challenges and barriers that Vermonters face when seeking treatment for opioid, and any, addiction. Any effort to minimize or remove those barriers is greatly appreciated. We would also note that prior authorizations, like any administrative tasks, take a toll on treating clinicians. This increases provider burnout and decreases job satisfaction impacting Vermont’s health care workforce.

We support S. 43, and the proposed changes outlined by the Vermont Medical Society in their testimony provided on February 12th. We greatly appreciate the work by DVHA, the commercial carriers, and VMS to eliminate these barriers to necessary treatment and reduce the unnecessary administrative burden on our treating clinicians.

We also appreciate the effort to reduce the cost of these medications for the individual by ensuring at least one drug per class is available on the lowest-cost drug tier in the commercial formulary. Our FQHCs offset copays, coinsurance, and other cost-sharing burdens on Vermonters through their Sliding Fee Scales. Any reduction in that cost-sharing burden stretches those dollars further to help more Vermonters with access to care.

Increased access to these services will ensure that Vermonters get the treatment they need, when they need it. Thank you for your consideration and please let me know if you have any questions.

Sincerely,

Georgia J. Maheras, Esq.
Vice President, Policy and Programs
Bi-State Primary Care Association