



State of Vermont
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July 1, 2009

Dear Vermonters:

Pursuant to Title 18, Chapter 221, of the Vermont Statutes Annotated, I adopt this 2009 Health Resource Allocation Plan (HRAP). This document builds on lessons learned and feedback received from stakeholders following the first HRAP adopted on August 3, 2005. For the last four years, the 2005 HRAP has guided policymakers and influenced Vermont's health care investment priorities through the certificate of need process. Much important work has been done. Currently at the national level, a great deal of discussion centers around health care reform and in these discussions Vermont is recognized as a leader in innovative, collaborative approaches to addressing health care challenges.

The 2009 HRAP is intended to advance the valuable work accomplished with the first HRAP and build on our successes. The 2009 HRAP supports Vermont's most important health policy goals, including: enhancing chronic care management; promoting wellness; focusing on cost-effective health services; and integrating mental health and substance abuse services with other health services. We still have much work to do. The document draws together a diversity of recommendations and implementation options to inform and fuel further discussion. There is no presumption that all the options within the document should be or can be jointly acted upon. We hope that this will serve as a valuable resource in furthering our efforts to provide accessible, affordable, high quality health care to all Vermonters.

Sincerely,

Paulette J. Thabault, Commissioner
Department of Banking, Insurance,
Securities and Health Care Administration



Statement of Principles

- All residents shall have access to quality health services at costs that are affordable. To achieve this policy, the state shall oversee the quality of health care services provided in Vermont and cost containment.
- Vermont should maintain and improve the quality of health care services offered to Vermonters.
- Vermont should promote planning, market and other mechanisms that contain or reduce increases in the cost of delivering health care services to Vermonters so that such expenses do not consume a disproportionate share of Vermonters' incomes or the moneys available for other services required to insured health, safety and welfare.
- Vermont should encourage regional and local participation in decisions about health care delivery, financing and provider supply.
- Vermont should promote market, planning or other mechanisms that will achieve rational allocation of health care resources in Vermont.
- Vermont should facilitate universal access to preventive and medically necessary health care.
- All new health care projects in Vermont should be offered or developed in a manner which avoids unnecessary duplication and contains or reduces increases in the cost of delivering service, while at the same time maintaining and improving the quality of and access to health care services and promoting rational allocation of health care resources.
- The need, cost, type, level, quality and feasibility of providing any new health care project shall be subject to review and assessment prior to any offering or development.