

JFO DRAFT/ntl

REVENUES	0.50%	0.50%	
REVENUE ESTIMATES	SFY '16 REVENUE ESTIMATES	SFY '17 REVENUE ESTIMATES	SFY' 18 REVENUE ESTIMATES (very preliminary)
	Gen. Funds	Gen. Funds	Gen. Funds
Claims assessment - collection change	7,140,000	N/A	
Claims assessment		9,103,500	9,285,570
Cigarette Tax increase - \$1.00	6,300,000	6,085,800	5,878,883
TOTAL	13,440,000	15,189,300	15,164,453

COST ESTIMATES	SFY '16 COST ESTIMATES				SFY' 17 COST ESTIMATES*				SFY' 18 COST ESTIMATES (very preliminary)				Assumptions & Notes
	State \$	Fed \$	Other	Gross \$	State \$	Fed \$	Other	Gross \$	State \$	Fed \$	Other	Gross \$	
Cost Sharing Subsidies (restore)	761,308			761,308	1,621,585			1,621,585	1,726,988			1,726,988	< Assumes 6.5% growth (1)
Medicaid Rate Increases	9,943,155	11,616,501		21,559,656	10,642,305	11,758,178		22,400,483	11,131,832	12,142,270		23,274,101	< Assumes 3.9% growth & FMAP changes (2)
Primary Care	3,756,178	4,243,822		8,000,000	4,018,205	4,293,795		8,312,000	4,202,551	4,433,617		8,636,168	
Professional Services	2,112,850	2,387,150		4,500,000	2,260,241	2,415,259		4,675,500	2,363,935	2,493,909		4,857,845	
2% Other providers	4,074,127	4,985,529		9,059,656	4,363,859	5,049,124		9,412,983	4,565,346	5,214,743		9,780,089	
Blueprint for Health	1,837,396	2,248,430		4,085,826	1,913,131	2,213,553		4,126,684	1,945,600	2,222,352		4,167,951	< Assumes 1% Medicaid population growth (3)
Increase CHT payments													< Increases base from \$1.50 to \$2.25 PMPM
Increase Primary care med home payments													< Increases base from \$2 to \$3.5 + \$1.50 for P4P payments.
Green Mountain Care Board	285,717	123,693	453,357	862,767	281,354	342,518	659,407	1,283,279	330,943	329,843	577,226	1,238,012	
All-payer waiver / Rate-setting process	285,717	123,693	393,357	802,767	281,354	342,518	599,407	1,223,279	270,943	329,843	577,226	1,178,012	
VITL Oversight **			60,000	60,000			60,000	60,000	60,000			60,000	
AHEC	300,000	400,000		700,000	300,000	400,000		700,000	300,000	400,000		700,000	< Restores cut from Admin's proposal
Universal Primary Care Study (JFO)	200,000			200,000									< Report due 10/15/15
Health Care Advocate	40,000			40,000									
TOTAL	13,367,576	14,388,624	453,357	28,209,557	14,758,374	14,714,249	659,407	30,132,031	15,435,362	15,094,464	577,226	31,107,053	
HIT FUND			60,000				60,000						
To be financed	13,367,576	14,388,624	393,357	28,209,557	14,758,374	14,714,249	599,407	30,132,031	15,435,362	15,094,464	577,226	31,107,053	
Difference (Rev - Cost)	72,424				430,926				(270,909)				
Cumulative					503,350				232,440				

NOTES:
 * SFY'17 assumes annualized costs. Also assumes both loss of Leahy bump and modest decrease in federal match.
 ** VITL Oversight -- proposes using HIT fund dollars for the state share of billback. HIT Fund sunsets at end of SFY'17 so assumes this would be GF in SFY'18.

Growth Trends
 (1) Cost sharing subsidies - Assumes private insurance growth of 6.5%. Note: '16-'17 RAND/Admin consensus = 7.7%; CMS = 5.4%; used midpoint of 6.5%.
 (2) Medicaid Reimbursement rates - Assumes 3.9% growth in Medicaid based on RAND/Admin consensus estimates for '16-'17. CMS = 6.8%
 (3) Blueprint for Health - Growth tied to estimated Medicaid population growth. FY'11-'14 traditional populations grew at 1.4%. Est. '15-'16 growth = .5%. Used 1% for '17' & '18.