

**Green Mountain Care – Key Implementation Steps
Draft March 2014
Robin Lunge, Director of Health Care Reform, AOA**

	Executive Branch	Green Mountain Care Board (suggested)	Legislature (suggested)
<p>GMC benefits</p> <p>Related issues:</p> <ul style="list-style-type: none"> • Impacts cost & financing • Input to Sec. 1332 ACA & Sec. 1115 Medicaid waivers 	<ul style="list-style-type: none"> • Continue development of proposal (including cost estimates) –in progress • Public Input on proposal – Q4 2014 • Submit proposal to GMCB – Q1 2015 	<ul style="list-style-type: none"> • Receive administration proposal - Q1 2015 • Public input process & testimony • Make decision on benefit design & determine benefits meet 80% AV (trigger A) 	<ul style="list-style-type: none"> • Consider any cost impacts on financing – 2015 session
<p>GMC Financing</p> <p>Related issues:</p> <ul style="list-style-type: none"> • Input to GMCB trigger analysis • Input to waivers prior to finalization in 2016 	<ul style="list-style-type: none"> • Continue refinement of cost estimates and development of financing options, including economic analysis – ongoing • Continue input from Partners for Health Care Reform, Governor’s Business Advisory Council & Consumer Advisory Council –ongoing • Continue analysis of how Vermonters pay for health care now – ongoing • Propose financing to general assembly - Q1 2015 • Modify cost estimates & 	<ul style="list-style-type: none"> • Determine process and requirements for evaluating sustainability– 2015 • Evaluate sustainability prior to implementation of GMC (trigger C) – 2016 	<ul style="list-style-type: none"> • Determine what type of analysis general assembly would like to do by consensus process or separately from the administration – 2014 session • Receive proposal and report from the Governor –

**Green Mountain Care – Key Implementation Steps
Draft March 2014
Robin Lunge, Director of Health Care Reform, AOA**

	Executive Branch	Green Mountain Care Board <i>(suggested)</i>	Legislature <i>(suggested)</i>
	financing proposal based on benefits decisions -Q1 2015		2015 session • Analyze proposal and determine financing – 2015-2016 sessions
Waivers Related issues: <ul style="list-style-type: none"> • Interested federal HHS – Q4 2016 • IRS data available – Q3-Q4 2015 • Benefits decided prior to application • Financing decided prior to finalization • Input to GMCB trigger analysis 	<ul style="list-style-type: none"> • CMMI All-Payer Rate Setting waiver (w/ GMCB) <ul style="list-style-type: none"> ○ Analysis and planning – in progress ○ Application & negotiation – Target Q3 2015 to begin • Section 1332 ACA waiver <ul style="list-style-type: none"> ○ Continued outreach with CMS re: process – ongoing ○ Application & negotiation – Target Q4 2015 to begin • Section 1115 Medicaid waiver renewal (combined with 	<ul style="list-style-type: none"> • CMMI All-Payer Rate Setting waiver (w/admin) <ul style="list-style-type: none"> ○ Analysis and planning – in progress ○ Application & negation – Target Q3 2015 to begin 	<ul style="list-style-type: none"> • Ongoing oversight - 2015-2016 sessions

**Green Mountain Care – Key Implementation Steps
Draft March 2014
Robin Lunge, Director of Health Care Reform, AOA**

	Executive Branch	Green Mountain Care Board <i>(suggested)</i>	Legislature <i>(suggested)</i>
	above) ○ Application & negotiation – Target Q4 2015 to begin		
GMC Provider Reimbursement & Administrative Costs	<ul style="list-style-type: none"> Continue workgroups with Partners for Health Care Reform & modify assumptions as needed – ongoing 	<ul style="list-style-type: none"> Create process for regulation of GMC provider contracts & determination of sufficiency 	<ul style="list-style-type: none"> Receive updates and information – ongoing
Related issues:			
<ul style="list-style-type: none"> Waivers & tax revenue create total budget amount for GMC Impacts final contracts with providers 	<ul style="list-style-type: none"> Provide updates to the GMCB - ongoing Submit proposed GMC reimbursement and administrative costs to GMCB - 2016 	<ul style="list-style-type: none"> Develop methodology for GMC provider reimbursement – 2014 Rulemaking & public input process – 2015 Review proposed GMC reimbursement & determine sufficiency (trigger F) – 2016 Review proposed system administrative costs & determine if will be reduced from 2011 levels (trigger D) - 2016 Evaluate cost-containment efforts - (trigger E) – 2016 	