

Sec. X. GREEN MOUNTAIN CARE FINANCING AND COVERAGE; REPORT

Notwithstanding the January 15, 2013 date specified in 2011 Acts and Resolves No. 48, Sec. 9, on or before January 15, 2015, the Secretary of Administration shall submit to the House Committees on Health Care and on Ways and Means and the Senate Committees on Health and Welfare and on Finance a proposal to transition to and fully implement Green Mountain Care. Beyond the elements deemed necessary by the Secretary of Administration, the report shall include the following elements:

- (1) the average percentage of income spent by Vermont residents on health care premiums;**
- (2) the average percentage of payroll spent by Vermont businesses on employee health care;**
- (3) recommendations for the amounts and necessary mechanisms to finance Green Mountain Care, including financing options for individuals covered by the Federal Employees Health Benefits Program, TRICARE, Medicare, retiree health benefits, or an employer health plan and addressing cross-border financing issues;**
- (4) details on integration of individuals covered by another health plan into Green Mountain Care coverage, including individuals covered by the Federal Employees Health Benefits Program, TRICARE, Medicare, retiree health benefits, or an employer health plan;**
- (5) recommendations addressing cross-border health care delivery issues;**
- (6) Vermont's efforts to obtain a Waiver for State Innovation pursuant to Sec. 1332 of the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L., including a conceptual waiver application expressing the intent of the State of Vermont to pursue a Waiver of State Innovation and the State's interest in commencing the application process submitted to the federal Center for Consumer Information and Insurance Oversight on or before November 15, 2014;**

(8) a strategy for replacing the disproportionate share hospital funding lost with the decrease in uncompensated care provided as the result of the Affordable Care Act.

Sec. X. INCREASING MEDICAID RATES; REPORT

On or before January 15, 2015, the Secretary of Administration or designee, in collaboration with the Green Mountain Care Board, shall report to the House Committees on Health Care and on Ways and Means and the Senate Committees on Health and Welfare and on Finance regarding the impact of increasing Medicaid reimbursement rates to providers to match Medicare rates. The issues to be addressed in the report shall include:

(1) the amount of State funds needed to effect the increase;

(2) the level of payroll tax that would be necessary to generate the revenue needed for the increase;

(3) the projected impact of the increase on health insurance premiums; and

(4) to the extent that premium reductions would likely result in a decrease in the aggregate amount of federal premium tax credits for which Vermont residents would be eligible, whether there are specific timing considerations for the increase as it relates to Vermont's application for a Waiver for State Innovation pursuant to Section 1332 of the Patient Protection and Affordable Care Act.