

Revised Health Care Proposal v.2a

JFO DRAFT/ntl

REVENUES - As passed by Ways & Means - 4/24/15

REVENUE ESTIMATES	SFY '16 REVENUE ESTIMATES		SFY '17 REVENUE ESTIMATES		SFY '18 REVENUE ESTIMATES (very preliminary)	
	Gen. Funds	Ed. Fund	Gen. Funds	Ed. Fund	Gen. Funds	Ed. Fund
Candy	1,600,000	900,000	1,800,000	1,000,000	1,809,000	1,005,000
Softdrinks	5,100,000	2,800,000	5,800,000	3,100,000	5,829,000	3,115,500
Vending (9% Meals Tax)	1,000,000		1,100,000		1,100,000	
Cigarette Tax increase (SFY'16 = \$0.10 / SFY'17 = \$0.33)	800,000		2,500,000		2,414,500	
Other Tobacco Products (snuff/snuz)	300,000		700,000		700,000	
TOTAL	8,800,000		11,900,000		11,852,500	

HOUSE HEALTH CARE REVISED PROPOSAL (3/31/15)

COST ESTIMATES	Start Date	SFY '16 COST ESTIMATES				SFY '17 COST ESTIMATES*				SFY '18 COST ESTIMATES (very preliminary)				Assumptions & Notes
		State \$	Fed \$	Other	Gross (est.) \$	State \$	Fed \$	Gross (est.) \$		State \$	Fed \$	Gross (est.) \$		
Underinsured		2,761,308			2,761,308	5,881,585			5,881,585	6,263,888			6,263,888	
Current cost-sharing subsidies	Existing	761,308			761,308	1,621,585			1,621,585	1,726,988			1,726,988	< Assumes 6.5% growth (1)
Cost sharing subsidies	1/1/2016	2,000,000			2,000,000	4,260,000			4,260,000	4,536,900			4,536,900	< Assumes 6.5% growth (1)
Primary Care - Medicaid reimbursement rate increase	7/1/2015	3,286,655	3,713,345		7,000,000	3,515,930	3,757,070		7,273,000	3,677,232	3,879,415		7,556,647	< Assumes 3.9% growth & FMAP changes (2)
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	7/1/2015													< Increases base from \$1.50 to \$2.25 PMPM
Increase Primary care med home payments	7/1/2015													< 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	1,283,280	330,943	329,843	577,226	1,238,012	
All-payer waiver / Rate-setting process	7/1/2015	285,717	123,693	393,357	802,767	281,354	342,518	599,407	1,223,280	270,943	329,843	577,226	1,178,012	
VITL Oversight **				60,000	60,000			60,000	60,000	60,000			60,000	
AHEC	7/1/2015	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	7/1/2015	200,000			200,000									< Report due 10/15/15
Health Care Advocate	7/1/2015	40,000			40,000									
TOTAL		8,711,076	6,485,468	453,357	15,649,901	11,892,000	6,713,142	659,407	19,264,549	12,517,663	6,831,610	577,226	19,926,498	
	HIT FUND			60,000				60,000						
To be financed		8,711,076	6,485,468	393,357	15,649,901	11,892,000	6,713,142	599,407	19,264,549	12,517,663	6,831,610	577,226	19,926,498	
Difference		88,924				8,000				-665,163				

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.