

FY16 Budget				Annualized - not FY17 bud prop		
0.7% Payroll Tax - 5.5 Months of Collections				90.42		
41.44						
FY 2016 Health Care Reform Related Expenditures	State Funds	Federal Funds	Total	State Funds	Federal Funds	Total
One-time Costs						
Tax Department Implementation ²	3.47	0	3.47	0.59	0	0.59
Costs Starting July 1, 2015						
Nursing Home Statutory Rate Increase	1.44	1.76	3.2	1.48	1.81	3.30
* Caseload & Utilization Increase for New Adults	4.48	9.21	13.69	4.61	9.49	14.10
* Caseload & Utilization Incr. for ABD, Kids, Gen. Adults	6.89	8.44	15.33	7.10	8.69	15.79
GMCB All Payer Waiver and Utility Analysis Costs ³	1.08	0.43	1.51	1.15	0.43	1.57
Costs Starting in January 1, 2016						
State Payroll Tax Liability	1.94	0	1.94	4.24	0.00	4.24
Strengthening the Blueprint	2.03	2.48	4.51	4.06	4.96	9.02
Home Health Increase	0.56	0.69	1.25	1.12	1.38	2.50
* Increased Reimbursement Rates ⁴	11.44	14.06	25.5	23.42	27.58	51.00
2.5% Medicaid Provider Increases	2.55	3.12	5.67	5.09	6.23	11.32
Health Home Expansions ⁶	0.5	4.5	5	1.00	9.00	10.00
Increase Cost Sharing Reduction Program	2.00	0	2	4.00	0.00	4.00
* Continued Cost Shift investments ⁸				29.49	29.52	59.01
Total Health Care Reform Proposal	38.38	44.69	83.07	87.36	99.08	186.44
Other Caseload and Utilization Pressures	3.06	0	3.06	3.06	0.00	3.06
TOTAL	41.44	44.69	86.13	90.42	99.08	189.50
Investments Available to Impact Private Premiums (Cost Shift) *						
Caseload & Utilization Increase for New Adults	4.48	9.21	13.69	4.61	9.49	14.10
Caseload & Utilization Incr. for ABD, Kids, Gen. Adults	6.89	8.44	15.33	7.10	8.69	15.79
* Increased Reimbursement Rates	11.44	14.06	25.5	23.42	27.58	51.00
* Continued Cost Shift investments ⁸	0	0	0	29.49	29.52	59.01
Total Available to Impact Private Premiums	22.81	31.71	54.52	64.63	75.27	139.90
Steady State Budget Pressures						
Nursing Home Statutory Rate Increase	1.44	1.76	3.2	1.44	1.81	3.25
Caseload & Utilization Increase for New Adults	4.48	9.21	13.69	4.48	9.49	13.97
Caseload & Utilization Incr. for ABD, Kids, Gen. Adults	6.89	8.44	15.33	6.89	8.69	15.58
Remaining Revenue for Other Budget Pressures	3.06	0	3.06	3.06	0.00	3.06
Total	15.87	19.41	35.28	15.87	19.99	35.86
GMCB All Payer Waiver and Utility Analysis Costs ³	1.08	0.43	1.51	1.15	0.43	1.57
Total Including Funding GMCB All Payer Waiver	16.95	19.84	36.79	17.02	20.42	37.43

- 1 - Annualized assumptions; not the FY2017 Budget Proposal
- 2 - Includes ongoing annual operating cost of \$592K
- 3 - GMCB State funds include the match for GC, the Bill back fund, and other non-matchable GF needs; total only includes Federal and General funds
- 4 - Reimbursement rates include in-state outpatient, primary care services, Dartmouth-Hitchcock, and professional services (included psychologists, specialists, and chiropractors across all settings of care)
- 5 - Medicaid provider increase for providers not reimbursed through the Department of Vermont Health Access Global Commitment, State Only, and Non-DVHA Waiver Appropriations
- 6 - 10/90 Match rate
- 7 - Assume 3% Medicaid Growth and the FY2016 FMAP assumptions for New Adults and traditional Medicaid
- 8 - Investments could include further reduction in the uninsured, Medicaid/Vermont Premium Assistance/Cost Sharing Reduction, additional investment in rates, and Provider Reimbursement Inflation