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Bill Back Funding for the Office of the Health Care Advocate
Trinka Kerr, Chief Health Care Advocate
February 17, 2016

The statutory authority for the use of bill back money to fund the HCA expires on June 30, 2016. In SFY 2016, \$350,000 came to the HCA through the Green Mountain Care Board from bill back. The rest of our funding came from seven other sources. Our understanding is that for SFY 2017, the Board replaced the HCA's bill back funding with an equivalent amount in Global Commitment funding.

We are bringing this to your attention so that you can consider whether this is the best way to fund the HCA. In the event you want to reinstate the sunseting bill back authority, here is some proposed language, modeled on the original language in Section 37 d (a) of Act 79 of 2013:

Proposed language: Financial support for the Office of the Health Care Advocate established pursuant to 18 V.S.A. chapter 229 for services related to the Green Mountain Care Board's regulatory and supervisory duties shall be considered expenses incurred by the Board under 18 V.S.A. §9374(h) and shall be an acceptable use of the funds realized pursuant to that section.

HCA Funding for SFY 2017

The Governor's recommend for the HCA is \$1,297,406. In SFY 2016 we received \$1,458,122. The difference of \$160,716 is due to the expiration of two federal grants. In order to maintain current staffing levels, the HCA needs \$1,406,698 for SFY 2017, i.e. we can absorb a \$51,424 cut. This is because Vermont Legal Aid reduced its health care benefits and froze its salary scale for FY 2017. Thus, we need to find an additional \$109,292 to maintain the status quo for the HCA. Bill back funding is a possible source.

The Office of the Health Care Advocate, previously named the Office of Health Care Ombudsman, is a special project of Vermont Legal Aid.