



	FY16 Budget					Annualized - not FY17 bud prop		
	7% Payroll Tax - 5.5 Months of Collections 41.44					90.42		
	FY 2016 Health Care Reform Related Expenditures	State Funds	Federal Funds	Tot	tal	State Funds	Federal Funds	Total
	One-time Costs							
	Tax Department Implementation2	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 Costs₃	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 Rates4	11.44	. 1	4.06	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 Expansion6	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	4	4.69	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	4	4.69	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	1	4.06	25.5	23.42	27.58	51.00
	Continued Cost Shift investments 8	0	l	0	0	29.49	29.52	59.01
	Total Available to Impact Private Premiums	22.81	. 3	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	1	9.41	35.28	15.87	19.99	35.86
	GMCB All Payer Waiver and Utility Analysis Costs₃	1.08		0.43	1.51	1.15	0.43	1.57
	Total Including Funding GMCB All Payer Waiver	16.95	1	9.84	36.79	17.02	20.42	37.43
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- 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