

**GMCB Draft Cost Estimatees for S.53
As Passed by Senate Appropriations & Full Senate**

		Contract	FTE Range	Total Cost Range
FY19	Beginning 7/1/18 bi-monthly updates to HROC			
	On/before 1/15/19 GMCB & stakeholders provide recommendations & proposals UPC report	\$335,000	\$90,000 \$180,000	
FY20	On/before 10/15/19 GMCB provide prelim draft operational plan to HROC	\$75,000	\$90,000 \$180,000	
	On/before 01/15/20 GMCB provide final draft op plan to HAC, HHC, SHW & SF			
		<u>\$410,000</u> +	<u>\$180,000</u> <u>\$360,000</u> =	<u>\$590,000 to \$770,000</u>

Notes

- 1.) Contract cost allocation between FY19 & FY20 is very rough estimate based on dates in Fiscal Note.
- 2.) For FTE cost range in FY20 full year cost included as assumed that the work will not end 01/15/20 with report submission.
- 3.) Senate Health & Welfare and JFO asked if billback dollars can be used for this. Per GMCB Legal, the costs we are projecting to do this work would be eligible for billback, but 40% would still need to come from State monies under the billback formula. Also, bill back assessments are an administrative expense of the regulated entities (hospitals, insurers, and ACOs) and we expect that increasing the amount of the bill back will put upward pressure on insurance rates.

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		Contract	FTE Range	GMCB Cost Range
FY19	UPC Scope of Services & Providers Report due 10/1/18	\$250,000		
	GMCB convenes working group to develop services & providers, etc. coordination of benefits, strategies to devel & implement UPC			
FY19	Draft Operational Model Report due 1/1/19	\$400,000	\$90,000 \$180,000	
	GMCB to convene, facilitate & supervise stakholder group to develop draft op UPC model SHW meet <= 5 times to provide guidance & receive updates fm GMCB & stakeholders On/before 1/1/19 GMCB & stakeholders submit draft operational model for UPC to HHC, SHW, DHR & DVHA			
		<u>\$650,000</u> +	<u>\$90,000</u> <u>\$180,000</u> =	<u>\$740,000 to \$830,000</u>

Notes

- 1.) AHS CO, DHVA & Governor's office need to weigh in on: To extent permitted under APM/ACO w CMMS & 1115 waiver, up to \$300k incurred by ACOs to develop draft operational model may be funded through delivery system reform payments.
- 2.) This does not include resources for Tax, DVHA, AHS CO, JFO, AG nor DFR.