

Green Mountain Care Board
Detail Draft Cost Estimates for S.53 As Passed by Senate as of 04/02/18

	Notes	Contract Expense	FTE Staff
Sec. 1. Universal Coverage for Primary Care; Report			
(a) Convene interested stakeholders			
(1) Specific services, including mental health & substance use disorder services, and providers that constitute primary care.		\$ 10,000	1-2 FTE at \$90,000 per FTE per year
(2) How to achieve UPC services, whether the services are publicly financed or covered by health insurance or other means.	Needed: expectation setting/broad stakeholder group. GMCB could re-summarize legislative decision points for universal insurance from two previous reports	\$ -	
Different from prior UPC scopes: If VT can achieve UPC through health insurance	Estimate for a less nuanced analysis to develop trends. Note: contract expense because this was not covered in prior two reports	\$ 25,000	
(3) How to make coverage for primary care services affordable, such as through income-sensitized, State-funding cost -sharing assistance.	Estimated cost to update model - depending on specificity and if GMCB needs help convening the stakeholder group.	\$ 75,000	
(4) How to resolve coordination of benefits issues for individuals with >1 form of health coverage & for health care services not considered primary care.			
(b) AG & DFR shall cooperate with and provide legal assistance to GMCB in identifying and analyzing any potential legal issues and in developing proposals to address issues identified.			
(c) GMCB provide updates to HROC every two months beginning 7/1/18			

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(d) On or before 1/15/19 GMCB & stakeholders shall provide the recommendations and proposals developed pursuant to this section and any proposals for legislative action.			
Sec. 2. Universal Coverage for Primary Care; Draft Operational Plan			
(a) If GMCB determines that achieving UPC is feasible and that the benefits to VT residents outweigh the estimated financial costs, GMCB, in consultation with AHS and other interested stakeholders shall prepare a draft operational plan for achieving UPC...	Operations Plan would be required. The Exchange cost many millions of dollars. GMCB would need to hire a contractor to determine how to modify Vermont Health Connect so people could enroll via it- or create a separate system. Also, as noted in S.53, AHS DVHA's engagement would be crucial.	\$ 300,000	
(b) On or before 10/15/19, GMCB shall provide the preliminary draft operational plan pursuant to this section, if any, to HROC. On or before 1/15/20, GMCB shall provide the final draft operational plan to HAC, HHC, SAC, SHW & SF.			
Total Sec. 1 & 2	Stakeholder support AND	\$ 410,000 & over 2 years would total	1-2 FTE
		Stakeholder support AND \$590,000 to \$770,000	