

**Green Mountain Care – Key Implementation Steps  
September 2014**

**Robin Lunge, Director of Health Care Reform, AOA**

*Bold Italic represent changes from March 2014 version*

	<b>Executive Branch</b>	<b>Green Mountain Care Board (suggested)</b>	<b>Legislature (suggested)</b>
<b>GMC Benefits</b>  <b>Related issues:</b> <ul style="list-style-type: none"> <li>• Impacts cost &amp; financing</li> <li>• Input to Sec. 1332 ACA &amp; Sec. 1115 Medicaid waivers</li> </ul>	<ul style="list-style-type: none"> <li>• Continue development of proposal (including cost estimates) –in progress</li> <li>• Public Input on proposal – Q4 2014</li> <li>• Submit proposal to GMCB – Q1 2015</li> </ul>	<ul style="list-style-type: none"> <li>• Receive administration proposal – Q1 2015</li> <li>• Public input process &amp; testimony</li> <li>• Make decision on benefit design &amp; determine benefits meet 80% AV (trigger A)</li> </ul>	<ul style="list-style-type: none"> <li>• Consider any cost impacts on financing – 2015 session</li> </ul>
<b>GMC Financing</b>  <b>Related issues:</b> <ul style="list-style-type: none"> <li>• Input to GMCB trigger analysis</li> <li>• Input to waivers prior to finalization in 2016</li> </ul>	<ul style="list-style-type: none"> <li>• Continue refinement of cost estimates and development of financing options, including economic analysis – ongoing</li> <li>• Continue input from Partners for Health Care Reform, Governor’s Business Advisory Council &amp; Consumer Advisory Council –ongoing</li> <li>• Continue analysis of how Vermonters pay for health care now – ongoing</li> <li>• Propose financing to general assembly - Q1 2015</li> <li>• Modify cost estimates &amp;</li> </ul>	<ul style="list-style-type: none"> <li>• Determine process and requirements for evaluating sustainability– 2015</li> <li>• Evaluate sustainability prior to implementation of GMC (trigger C) – 2016</li> </ul>	<ul style="list-style-type: none"> <li>• <b><i>[Removed: determine type of analysis desired &amp; process – 2014 session]</i></b></li> <li>• <b><i>Rand Analysis Released – Q4 2014</i></b></li> <li>• Receive proposal and report from the Governor – 2015 session</li> <li>• Analyze</li> </ul>

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	financing proposal based on benefits decisions -Q1 2015		proposal and determine financing – 2015-2016 sessions
<b>Waivers</b>	<ul style="list-style-type: none"> <li>• CMMI All-Payer Rate Setting waiver (w/ GMCB)               <ul style="list-style-type: none"> <li>○ Analysis and planning – in progress</li> <li>○ <b>Begin CMMI discussions – in progress</b></li> <li>○ Application &amp; negotiation – Target Q3 2015 to begin</li> </ul> </li> <li>• Section 1332 ACA waiver               <ul style="list-style-type: none"> <li>○ Continued outreach with CMS re: process – ongoing</li> <li>○ <b>Outreach with OMB, Treasury, CCIIO, and CMCS – in progress</b></li> <li>○ Application &amp;</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• CMMI All-Payer Rate Setting waiver (w/admin)               <ul style="list-style-type: none"> <li>○ Analysis and planning – in progress</li> <li>○ Application &amp; negotiation – Target Q3 2015 to begin</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing oversight - 2015-2016 sessions</li> </ul>
<b>Related issues:</b>			
<ul style="list-style-type: none"> <li>• Interested federal HHS – Q4 2016</li> <li>• IRS data available – Q3-Q4 2015</li> <li>• Benefits decided prior to application</li> <li>• Financing decided prior to finalization</li> <li>• Input to GMCB trigger analysis</li> </ul>			

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	negotiation – Target Q4 2015 to begin  <ul style="list-style-type: none"> <li>Section 1115 Medicaid waiver renewal (combined with above)               <ul style="list-style-type: none"> <li>Application &amp; negotiation – Target Q4 2015 to begin</li> </ul> </li> </ul>		
<b>GMC Provider Reimbursement &amp; Administrative Costs</b>  <b>Related issues:</b> <ul style="list-style-type: none"> <li>Waivers &amp; tax revenue create total budget amount for GMC</li> <li>Impacts final contracts with providers</li> </ul>	<ul style="list-style-type: none"> <li>Continue workgroups with Partners for Health Care Reform &amp; modify assumptions as needed – <b><i>baseline finished</i></b></li> <li><b><i>Develop methodology for GMC provider reimbursement for modeling –in process</i></b></li> <li>Provide updates to the GMCB - ongoing</li> <li>Submit proposed GMC reimbursement and administrative costs to GMCB - 2016</li> </ul>	<ul style="list-style-type: none"> <li>Create process for regulation of GMC provider contracts &amp; determination of sufficiency</li> <li>Develop methodology for GMC provider reimbursement – 2014 -<b>2015</b></li> <li>Rulemaking &amp; public input process – 2015</li> <li>Review proposed GMC reimbursement &amp; determine sufficiency (trigger F) – 2016</li> <li>Review proposed system administrative costs &amp; determine if will be reduced from 2011 levels (trigger D) -</li> </ul>	<ul style="list-style-type: none"> <li>Receive updates and information – ongoing</li> </ul>

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2016

- Evaluate cost-containment efforts - (trigger E) – 2016

<b><i>GMC Operations Planning</i></b>	<ul style="list-style-type: none"> <li>• <b><i>Business operations planning - in progress</i></b></li> <li>• <b><i>Budget &amp; Staffing requirements – under development</i></b></li> <li>• <b><i>Report due January 15, 2015</i></b></li> </ul>	<ul style="list-style-type: none"> <li>• <b><i>Review report – 2015 session</i></b></li> </ul>
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