

Vermont's Green Mountain Care Board

Robin J Lunge, JD MHCDS
Board Member

November 8, 2017

Fast Facts

Population: 626,562

Uninsured rate:

2011 – 7%

2017 – 3.7%

Employer Size:

90% of Vermont Businesses with fewer than 50 employees

Provider Community:

- 14 non-profit hospitals
- 2 Accountable Care Organizations
- Designated community mental health agencies
- Broad network of Federally qualified health centers and rural health clinics



Only state capital without a McDonalds!

Medicaid & Insurance:

2011 –

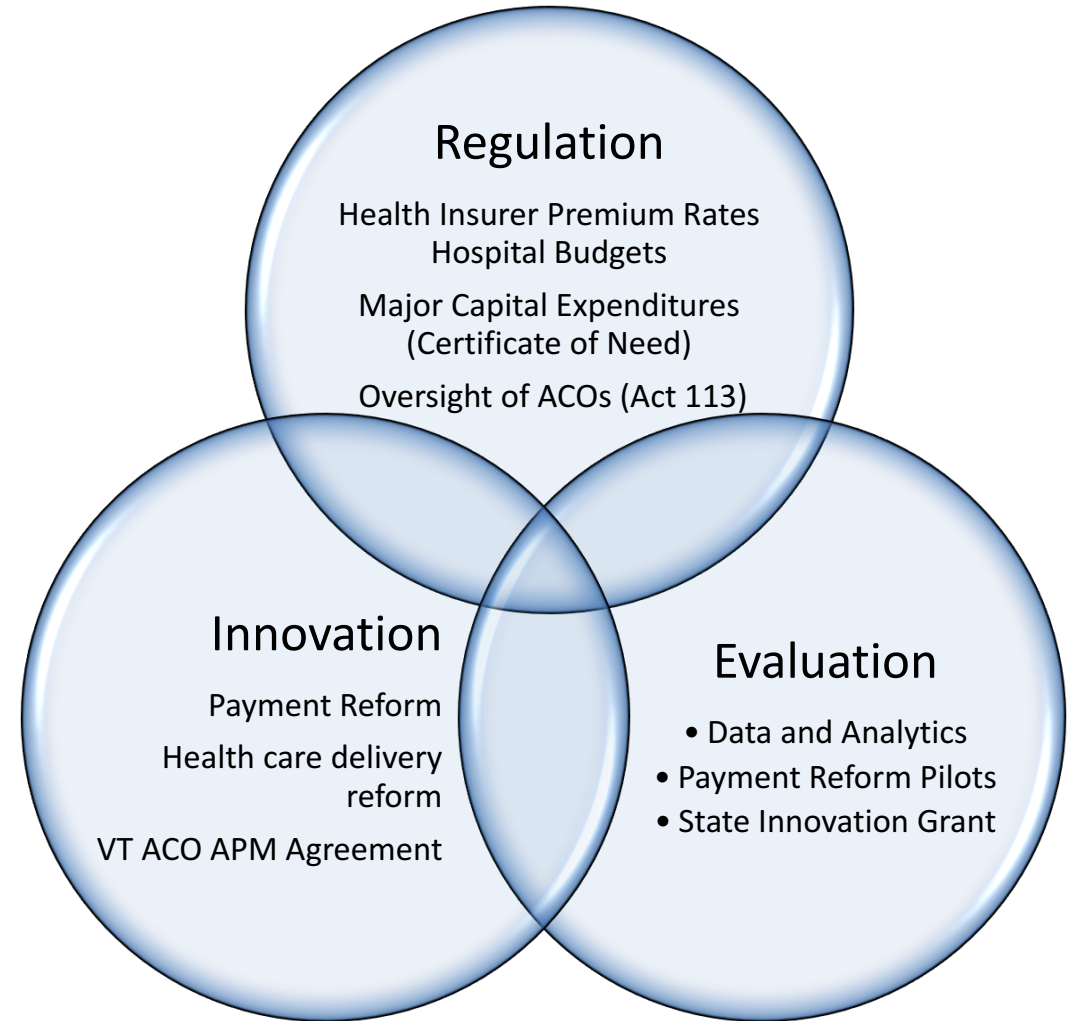
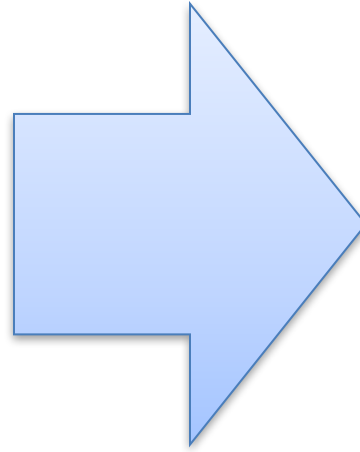
- 1115 waiver programs for kids and single adults
- Medicare Part D State Rx Program
- Expansion of coverage for those with disabilities
- Home & Community Based Services for LTSS

2017 –

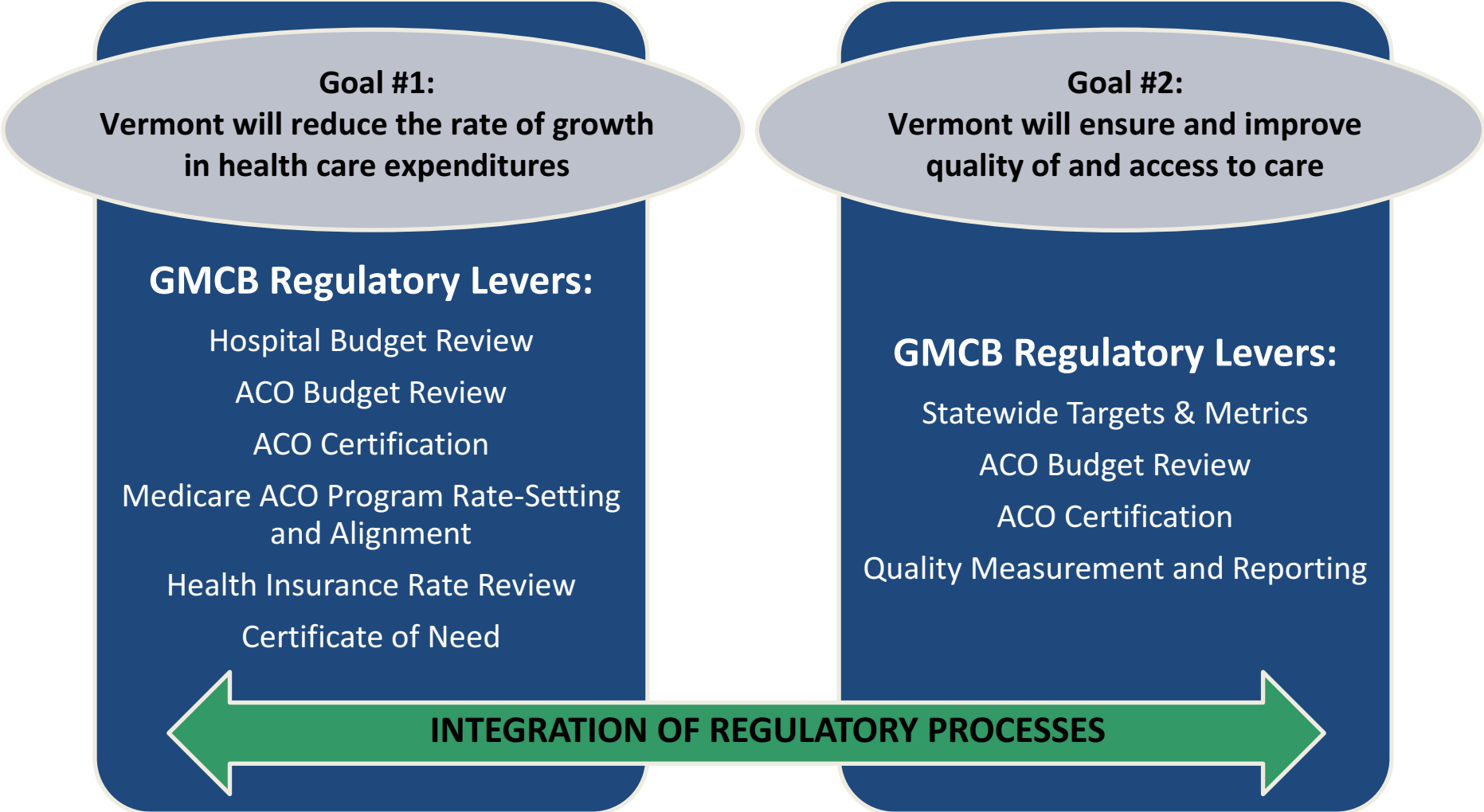
- 135% FPL for Medicaid
- Continued waiver programs for seniors & those with disabilities
- State based marketplace with State premium assistance (Medicaid funded) & state cost sharing reduction with state funds
- Merged individual and small group markets
- Employers with fewer than 100 employees in the small group
- More employers are self-insuring

What is the Green Mountain Care Board?

The **Green Mountain Care Board** is charged with reducing the rate of health care cost growth in Vermont while ensuring that the State of Vermont maintains a high quality, accessible health care system.



GMCB Goals and Regulatory Levers



Who is the Green Mountain Care Board?

Board:

Kevin Mullin

May 2017, Term Ends September 2018

Jessica A. Holmes, Ph.D.

October 2014 – Present, Term Ends September 2020

Robin Lunge, J.D., MHCDS

November 2016 – Present, Term Ends September 2022

Maureen Usifer

May 2017, Term Ends September 2019

Vacant

TBD, Term Ends September 2023

Staff & Budget:

28 Positions across all areas of work

About \$9M/annually

Appointment:

Nominating Committee recommends

Governor appoints

Senate confirms

What is special about the Board?

- Independent
 - 6 year terms
 - Removal for cause
- Public Body
 - Open Meetings

Thank You!

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