

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
JFK Federal Building, Government Center
Room 2275
Boston, Massachusetts 02203



CENTERS for MEDICARE & MEDICAID SERVICES

Division of Medicaid and Children's Health Operations / Boston Regional Office

March 9, 2011

Douglas A. Racine, Secretary
Agency of Human Services
103 South Main Street
Waterbury, Vermont 05671-0204

Dear Mr. Racine:

We are pleased to enclose a copy of approved State plan amendment (SPA) No. 10-017. This SPA is effective October 1, 2010 as requested.

SPA 10-017 transmitted a proposed amendment to your Agency's approved Title XIX State plan to update the organizational structure of the single State agency. Specifically, you proposed to update the departments within the Agency of Human Services and the Attorney General's certification.

If there are questions, please contact Chong Tieng. He can be reached at (617) 565-9157.

Sincerely,

/s/

Richard R. McGreal
Associate Regional Administrator

Enclosure

cc: Susan Besio

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 10--017	2. STATE: VERMONT
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE(S) 10/01/2010	
5. TYPE OF PLAN MATERIAL (CHECK ONE): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR §430.12(c)(ii)		7. FEDERAL BUDGET IMPACT: a. FFY 2010 \$ 0 b. FFY 2011 \$ 0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: ATT 1.1-A, ATT 1.2-A PG 2, 3, 4, 4A, 5 & 6A AND ATT 1.2-B PG 2 & 3		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) ATT 1.1-A, ATT 1.2-A PG 2, 3, 4, 5 & 6A AND ATT 1.2-B PG 2 & 3	
10. SUBJECT OF AMENDMENT: UPDATE ATTORNEY GENERAL'S CERTIFICATION AND DESCRIPTIONS OF AGENCY OF HUMAN SERVICES' DEPARTMENTS.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		<input checked="" type="checkbox"/> OTHER, AS SPECIFIED SIGNATURE OF SECRETARY OF ADMINISTRATION	
12. SIGNATURE OF STATE AGENCY OFFICIAL:		16. RETURN TO:	
13. TYPED NAME: ROBERT HOFMANN		LINDSEY WELLS	
14. TITLE: SECRETARY, AGENCY FOR HUMAN SERVICES		DEPARTMENT OF VERMONT HEALTH ACCESS 312 HURRICANE LANE, SUITE 201 WILLISTON, VT 05495	
15. DATE SUBMITTED: December 30, 2010			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: December 30, 2010		18. DATE APPROVED: March 9, 2011	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: October 1, 2010		20. SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: Richard R. McCreath		22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health Operations	
23. REMARKS: Box 15 was revised to include the date the SPA was submitted.			

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State of VERMONT

ATTORNEY GENERAL'S CERTIFICATION

I certify that:

Agency of Human Services is the single State
agency responsible for:

administering the plan.

The legal authority under which the agency administers the plan on a Statewide
basis is

3 VSA Chapter 53
33 VSA Chapter 4, 19
(statutory citation)

supervising the administration of the plan by local political subdivisions.

The legal authority under which the agency supervises the administration of the
plan on a Statewide basis is contained in

(statutory citation)

The agency's legal authority to make rules and regulations that are binding on the
political subdivisions administering the plan is

(statutory citation)

December 14, 2010
DATE

Signature

Assistant Attorney General

Title

TN No. 10-017

Supersedes

TN No. 86-4

Effective Date: 10/01/10

Approval Date: 03/09/11

Office of Child Support (OCS)

OCS is responsible for establishing, collecting upon, enforcing, and modifying support orders for children who do not live with both parents, is responsible for helping Vermonters establish parentage; establish an order for child and medical support; modify or enforce an existing order for child and medical support; make support payments to the custodial parent; and locate a missing non-custodial parent.

Office of Economic Opportunity (OEO)

OEO's mission is to increase the self-sufficiency of Vermonters, strengthen Vermont communities, and eliminate the causes and symptoms of poverty. OEO manages programs and grants; identifies and develops resources; provides training and technical assistance; advocates for community-based organizations, and connects communities to resources within government and the private sector.

Within the Agency of Human Services, the Department of Disabilities, Aging and Independent Living (DAIL) assists older persons, children and adults with disabilities to live as independently as possible. The DAIL's principal functions and structure are as follows:

Division for the Blind & Visually Impaired (DBVI)

DBVI is the designated state division to provide vocational rehabilitation and independent living services to eligible Vermonters who are blind and visually impaired. DBVI's mission is to support the efforts of Vermonters who are blind and visually impaired to achieve or sustain their economic independence, self reliance, and social integration to a level consistent with their interests, abilities and informed choices.

Division of Disability & Aging Services (DDAS)

DDAS supports older Vermonters and Vermonters with disabilities to live as they choose, pursuing their individual goals and preferences within their chosen communities. DDAS seeks to ensure their basic human and civil rights, health, well-being, and safety. DDAS provides effective leadership for disability and aging policy and services in Vermont. DDAS meets federal state mandates by developing and managing public resources effectively. DDAS is also responsible for all community-based long-term care services for older Vermonters, people with developmental disabilities, people with traumatic brain injuries and people with physical disabilities.

Division of Licensing & Protection (DLP)

DLP enforces federal and state statutes and regulations for providers of health care and investigates cases of alleged abuse, neglect, and exploitation of vulnerable adults.

Division of Vocational Rehabilitation (VocRehab)

VocRehab is responsible for helping Vermonters with disabilities prepare for and find employment.

The Department of Health is the largest component of the Agency of Human Services. Within the Department, the responsibilities of each division are outlined below:

Alcohol and Drug Abuse Programs Division (ADAP)

ADAP is responsible for helping Vermonters prevent and eliminate the problems caused by alcohol and other drug use. In partnership with other public and private organizations, ADAP plans, supports and evaluates a comprehensive system that provides education, prevention, intervention, treatment, recovery, and research services.

Board of Medical Practice (BMP)

The BMP is responsible for licensing physicians and podiatrists and certifying physician assistants and anesthesiologist assistants. The BMP investigates complaints and charges of unprofessional conduct against any holder of a license or certificate within its jurisdiction, and determines whether the charges are substantiated or not.

Health Promotion and Disease Prevention (HPDP)

HPDP promotes health screenings and provides public health promotion and education. All services directed at helping Vermonters adopt healthy behaviors, nutrition and lifestyles to prevent chronic diseases and injuries. HPDP offices and programs include Tobacco Control, Nutrition & Physical Activity, Oral Health, Diabetes, Ladies First, and Cancer Control & Prevention. Each works in close coordination with the Vermont Blueprint for Health, partner organizations, and communities.

Health Surveillance (HS)

HS investigates and monitors reportable diseases. Identifies disease causing agents, and offers testing and follow-up services to prevent the spread of disease. HS develops approaches for prevention, intervention, and early detection and treatment of cancer and other leading causes of death. HS conducts epidemiological studies including monitoring, surveillance and control of chronic diseases and disabling conditions, and collects and analyzes data to determine the health status, morbidity, and mortality of Vermont's population.

Office of Local Health (OLH)

OLH is responsible for providing essential health promotion and disease prevention services to Vermonters through its 12 district offices. Central and district office staff work in partnership with local health care providers, voluntary agencies, schools, businesses and community organizations.

Maternal and Child Health (MCH)

As part of OLH, the focus of MCH is to promote the wellness of Vermont's mothers, children and their families. MCH administers programs such as WIC, and coordinates with state and local programs for clinical and community based MCH services. MCH manages services for children with special health needs, coordinates school health services, promotes injury prevention, supports immunization delivery clinical systems, and works to enhance oral health community-based clinical delivery systems. In addition, MCH coordinates pediatric services with Vermont's Blueprint for Health, and promotes wellness services. MCH actions are driven by state and local indicators and evidence based public health programs.

Office of Public Health Preparedness (OPHP)

OPHP is the development and management body charged with coordinating preparedness and response activities and funding within the Vermont Department of Health. OPHP and its partners manage emergency public health and medical preparedness and response systems at the local, state, interstate and international levels. OPHP is also responsible for Emergency Medical Services (EMS) related regulation and system development, and actively works with other government agencies, communities, hospitals, health care providers and first responders to prepared for and respond to an array of public health and "all-hazard" emergencies including pandemic influenza, extreme weather events, and releases of biological, chemical or radiological agents.

TN No. 10-017

Supersedes

TN No. 04-07

Effective Date: 10/01/10

Approval Date: 03/09/11

The Department of Corrections (DOC), in partnership with the community, supports safe communities by providing leadership in crime prevention, repairing the harm done, addressing the needs of crime victims, ensuring offender accountability for criminal acts, and managing the risk posed by offenders. Within the DOC, responsibilities of each division are outlined below:

Administration

Responsible for central oversight and management of all divisions.

Facilities

Responsible for maintaining and operating nine incarcerative facilities and seventeen community-based facilities.

Program Services

Responsible for a variety of services to the community, the criminal justice system, and offenders. The services provided directly to the community focus on education/ information, victims, and reparative support. The services provided to the criminal justice system includes housing and supervision of offenders, sentencing options/reports, and intelligence information. Treatment programs are designed to meet the needs of sex offenders, violent offenders, substance use, and domestic violence issues.

Restorative and Community Justice

Responsible for involving victims and the community as central elements in a process whereby the focus is on the offender being as held accountable to the victim and community.

Placement Services

Responsible for providing offenders with assistance re-integrating into the community after a period of incarceration.

Field Services

Responsible for the ongoing supervision of offenders in the community and ensuring that offenders under supervision are in compliance with all applicable requirements and conditions of release.

The Department of Mental Health (DMH) promotes and improves the mental health of Vermonters. DMH focus on its vision for self-determination, empowerment and recovery.

Adult Mental Health Services Division

Adult Mental Health Services offers or assures access to mental health services through designated agencies in communities all over the state including; community Rehabilitation and Treatment (CRT): for adults with diagnoses of severe and persistent mental illness (for example, schizophrenia, bipolar disorder, major depression, and others). They also provide Adult Outpatient services: for adults who do not have diagnoses of major mental illnesses but who nevertheless are experiencing serious emotional or behavioral problems that disrupt their lives. Emergency Services are provided for anyone of any age experiencing a mental-health crisis.

Child, Adolescent & Family Mental Health Services

The Child, Adolescent and Family Mental Health treatment system is organized around five core capacity services that are available separately or in combination for a youth and their family, depending on their desires and needs. The five services offered are:

- Immediate Response: for children and adolescents experiencing a mental health crisis and their families.
- Clinic-Based Treatment: services that are provided within a clinic and are available during daytime and evening hours for school-age children and/or when families can easily access them.
- Outreach Treatment: services that are available in the home, school, and general community settings.
- Family Support: for parents and caregivers to help with guidance, support, and skill to cope with a difficult-to-care-for child. These services are offered in partnership with parents and consumer advocates.
- Prevention, Screening, Referral and Community Consultation: prevention efforts focus on promoting healthy lifestyles and healthy communities for all youth and families.

Vermont State Hospital (VSH)

The Vermont Legislature established the state run hospital, VSH, in 1891 to serve the emergency examination needs of mentally ill Vermonters unable to receive treatment and care in other settings. The VSH serves adults with serious and persistent mental illness as part of a comprehensive continuum of care. VSH also serves as a forensic examination facility for individuals who cannot be appropriately evaluated in an alternative, secure setting.

The Office of the Secretary of the Agency of Human Services (AHS) oversees several functions of the AHS under the direction of the Secretary and Deputy Secretary:

Fiscal Operations Unit

The Fiscal Operations Unit manages development, implementation and monitoring of the AHS budget to ensure that departmental programs reflect the Governor's priorities and are in compliance with legislative requirements. Specifically, the unit develops financial status reports and monitors key program performance indicators for each AHS department and office; coordinates all federal block grants and statewide single audit functions; develops the AHS indirect rate; updates federal cost allocation plans; updates the Vermont Human Services State plan and through the Rate Setting Unit, audits and establishes Medicaid payment rates for nursing facilities for DVHA, intermediate care facilities for people with developmental disabilities for DAIL and private non-medical institutions for DCF.

Health Care Operations, Compliance and Improvement

The AHS Health Care Operations, Compliance and Improvement Unit oversees activities pertaining to Medicaid and associated health care operations. It is responsible for integrated planning, policy development, regulatory compliance and funding. These initiatives require cross-departmental (and intra-governmental) operations for successful implementation and outcomes. Activities include but are not limited to: federal negotiations relative to changes in the AHS Medicaid structure; oversight of the DVHA and AHS operations of the Vermont Global Commitment to Health Medicaid Waiver; quality assurance, improvement and performance measurement of program activities; providing technical assistance to departments; overseeing AHS Consumer Information and Privacy Standards; and Health Information Portability and Accountability Act (HIPAA) requirements.

TN No. 10-017

Supersedes

TN No. None

Effective Date: 10/01/10

Approval Date: 03/09/11

Commission on National & Community Services

The commission administers funding to the state's AmeriCorps National service programs and promotes, supports, and recognizes volunteerism and community service throughout Vermont. The commission consists of 15 Governor appointed citizens supported by a staff of four housed in the Secretary's Office in the AHS.

Human Services Board (HSB)

The HSB is a citizen's panel consisting of seven members and was created by the Vermont legislature. Its duties are to act as a fair hearing board for appeals brought by individuals who are aggrieved by decisions or policies of the various departments and programs within the AHS.

Information Technology Unit (IT)

The AHS IT is responsible for developing and maintaining the information technology applications and systems necessary to support the mission of the AHS.

Vermont Developmental Disabilities Council (VTDDC)

The VTDDC is a state-wide board that works to increase public awareness about critical issues affecting people with developmental disabilities and their families.

Field Services Division (FSD)

The FSD's scope covers the entire AHS, including services provided by private, designated and contracted organizations. Seven AHS Field Directors have been established to unify human services operations at the local level. The goal is to build a local system focused on excellent customer service, the holistic needs of individuals and families, strength-based relationships, and improving results for Vermonters statewide.

Refugee Resettlement

Refugee Resettlement coordinates private and public resources for refugee resettlement and delivery of services to refugees. The Refugee Coordinator implements the State Plan for Refugee Resettlement, oversees federal grants for refugee services, including refugee medical assistance, refugee social services and refugee children school impact grants. The Refugee Coordinator works across all Departments and Agencies and with national, local and community partners to increase collaboration, foster the sharing of information, and maximize resources for the resettlement and successful integration of refugees into Vermont. The Coordinator chairs the Refugee & Immigrant Service Providers Networks (RISPNet) of Chittenden and Washington counties and the AHS Limited English Proficiency Committee.

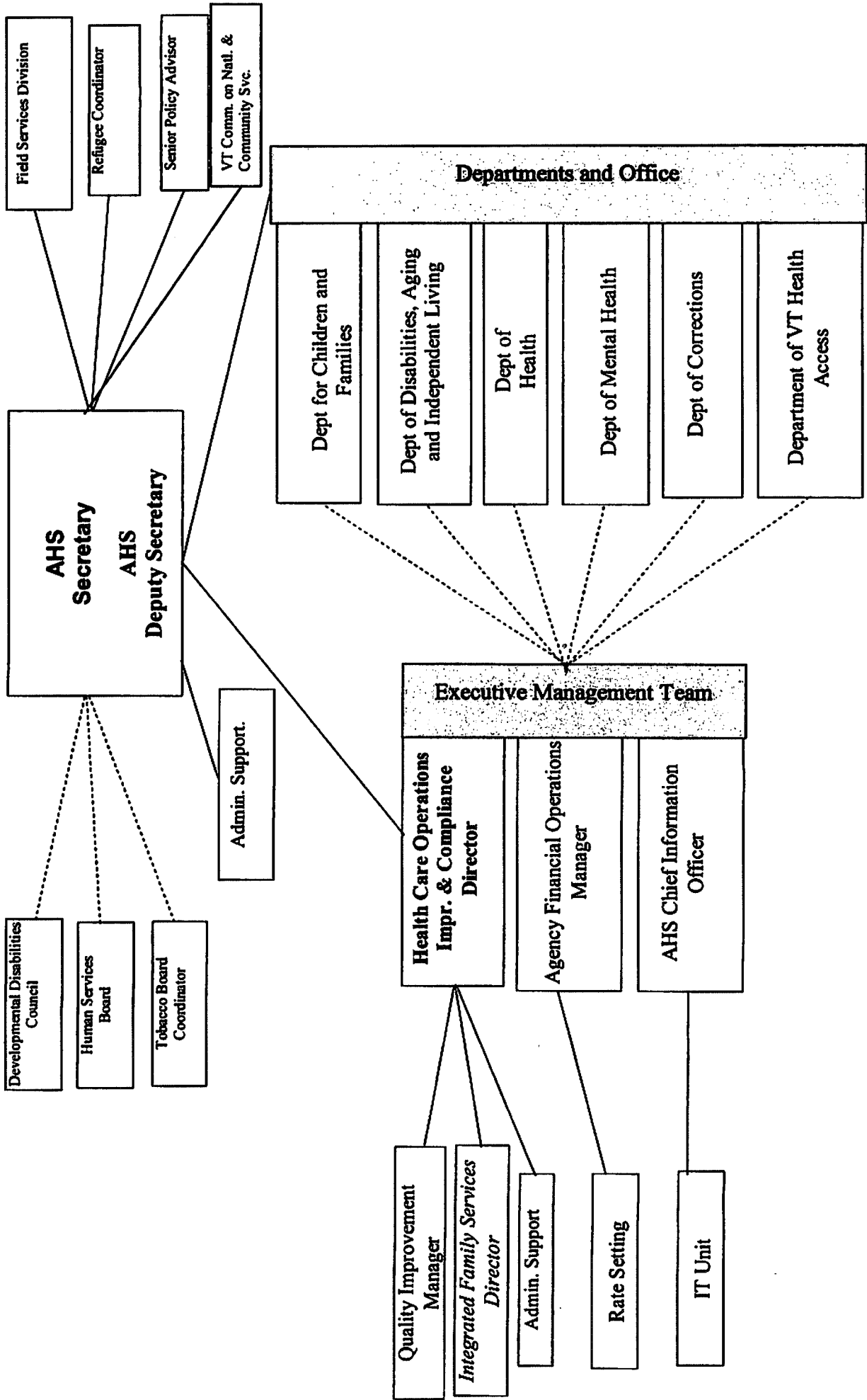
Tobacco Evaluation & Review Board

The Legislature established the Tobacco Evaluation and Review Board effective July 1, 2000 as an independent state board. It is located within, and receives administrative support from the Office of the Secretary of the AHS. The Board works in partnership with the AHS and the Department of Health and Education in establishing the annual budget, program criteria, and policy development, review and evaluation of the entire tobacco control program.

Rate Setting

The Rate Setting Unit was established in 1978 as an independent unit of the Agency of Human Services. The Unit provides the Agency and its departments with special financial, accounting, auditing, and related legal expertise, particularly relating to payments to Medicaid providers.

VERMONT AGENCY OF HUMAN SERVICES



Fiscal Operations

Supports, monitors, manages and reports all aspects of fiscal planning and responsibility. Functions include vendor payments, timesheets, expense reports, grants, contracts, purchasing, financial monitoring, budgeting and other relevant practices, procedures, and processes.

Health Care Reform

Responsible for providing oversight and coordination across state government, and with other public and private partners, to foster collaboration, inclusiveness, consistency, and effectiveness in state and federal health care reform. Leads on Health Information Technology (HIT) and Health Information Exchange (HIE) policy, planning and oversight.

Managed Care

Responsible for managing care arrangements for beneficiaries covered under the Medicaid Global Commitment to Health waiver, and works to develop new initiatives for DVHA which includes monitoring programs for compliance with quality standards to improve services for Medicaid beneficiaries.

Pharmacy

Ensures beneficiaries receive medically necessary medications in the most cost-effective manner. Pharmacy Unit staff members and the contracted Prescription Benefit Manager (PBM) work with providers, pharmacies and beneficiaries on benefits issues, clinical criteria, claims processing and appeals related to pharmacy. Responsible for the Drug Utilization Review (DUR) Board.

Program Policy

Responsible for coverage rules, fair hearings, grievances and appeals, HIPAA compliance, legislative activities, public record requests, requests for non-covered services, State Plan Amendments, and the State Children's Health Insurance Program (SCHIP). Coordinates major initiatives resulting from federal health care reform and state legislative sessions. May serve as the primary liaison to legislators, Vermont's Congressional Delegation, the media and the Centers for Medicare and Medicaid Services (CMS).

Provider/Member Relations Unit

Communication/liaison activities that assist providers and beneficiaries in accessing clinically appropriate health services. Manages the Medicaid non-emergency transportation program, and other various provider contracts for services (such as the member services contract); interacts with groups/organizations that represent provider and member interests, such as the Medicaid Advisory Board; and maintains the DVHA web site.

Quality Improvement

Monitors Intergovernmental Agreements (IGAs), collaborates with AHS partners to ensure compliance with quality standards and improve quality; prepares for the annual MCE external quality reviews as required by CMS, develops and monitors the MCE quality workplan, and performs utilization management of behavioral health inpatient services.

Program Integrity

Responsible for activities to prevent, detect, and investigate Medicaid fraud, waste and abuse. Includes data mining and analysis; recoupment of provider overpayments; administration of the Team Care and Pharmacy Home programs. Educates providers for accurate billing, and refers cases of abuse to the appropriate agencies, including but not limited to: Attorney General's MFRAU unit (provider fraud), DCF (eligibility fraud), Medical Practice Board, Office of Professional Regulations and Office of Inspector General (OIG).

TN # 10-017

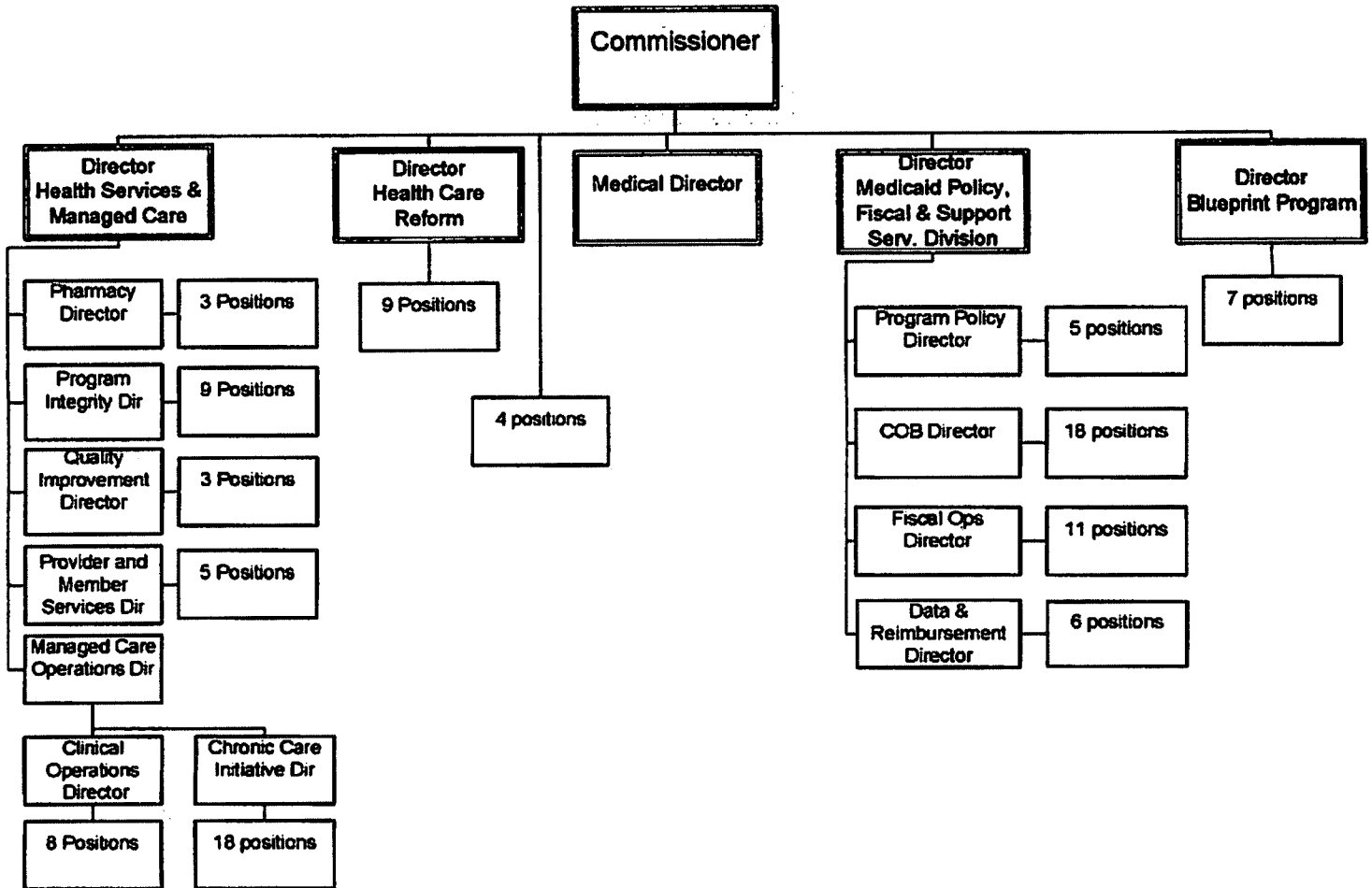
Supersedes

TN # 10-005

Effective Date: 10/01/10

Approval Date: 03/09/11

Department of Vermont Health Access (DVHA) Organizational Chart



TN # 10-017
Supersedes
TN # 10-005

Effective Date: 10/01/10
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