

The AHS/CO narrative included with this correspondence also reflects the removal of several program codes used in prior quarters that have either had their funding expire or have moved to the Department for Children and Families (DCF) plan. These are outlined below:

VISION Program Code	Title
37500	JJDP Grant
37501	JJDP Grant - Admin
37502	Juvenile Justice Council
37510	JAIBG
37512	JAIBG - Interest
37551	Drug Free Schools Consultants
37552	Drug Free Schools
37555	DFS Prevention Institute
37610	Community Based Family Resources
37611	Community Based Family Resources - Admin
37661	CTF/JJCP
37662	CTF/Tax Check Off
37675	Access and Visitation
37676	Access and Visitation - Admin
37950	PRISM
44100	Division of Administration

Department for Children and Families (DCF)

The Department for Children and Families (DCF) has identified several new program codes appearing in VISION data for the quarter effective 1/1/06. All of these program codes have been added to the narrative and highlighted in red and we have included a chart of these additions below:

VISION Program Code	Title	Allocation Method
31850	Employer Services Unit	Direct to Title IV-D
37676	Access and Visitation	Direct to Access and Visitation
40086	Sub-Care	Direct to MCO Investments
40556	Victim's Medical Services	Direct to MCO Investments
41311	ABAWD	Direct to Food Stamps E&T (No Match)
41503	State Supplemental Program	Direct to MCO Investments
41635	Medicare Part D	Direct to Medicare Part D Transition
41722	GA/GA Dental	Direct to MCO Investments
41723	GA/GC Dental	Direct to MCO Investments
41724	GA/EA Dental	Direct to MCO Investments
41725	GA/SA Dental	Direct to MCO Investments
41726	GA Pharmacy	Direct to MCO Investments
41727	GA Abortions	Direct to MCO Investments

Additionally, several program codes have revised allocation methods. These new methods are outlined below:

VISION Program Code	Title	Allocation Method
38140	Enhanced Funding APD	Direct to Enhanced Funding APD
40536	Evaluation and Counseling/Medical Treatment	Direct to MCO Investments
44450	Homeless Assistance	Direct to General Fund

The narrative also reflects a few cosmetic changes related to updated titles for program codes and certain descriptions. None of these affect the plan's methodology. All of these changes are highlighted in red.

Department of Disabilities, Aging and Independent Living (DDAIL)

The Department of Disabilities, Aging and Independent Living (DDAIL) has identified several new program codes appearing in VISION data for the quarter effective 1/1/06. All of these program codes have been added to the narrative and highlighted in red and we have included a

chart of these additions below:

VISION Program Code	Title	Allocation Method
41635	Medicare Part D	Direct to Medicare Part D Transition
43958	AOA ADRC Program Grant	Direct to ADRC program Grant
43959	CMSO ADRC Program Grant	Direct to CMSO ADRC Program Grant

Additionally, one program code required a revised allocation method. This new methodology is outlined below:

VISION Program Code	Title	Allocation Method
43955	MCO Investments	Direct to MCO Investments

Office of Vermont Health Access (OVHA)

The Office of Vermont Health Access (OVHA) has identified two new program codes appearing in VISION data for the quarter effective 1/1/06. These program codes have been added to the narrative and highlighted in red and we have included a chart of the additions below:

VISION Program Code	Title	Allocation Method
41610	HIV	Direct to MCO Investments
41635	Medicare Part D	Direct to Medicare Part D Transition

Additionally, several program codes have revised allocation methods. These new methods are outlined below:

VISION Program Code	Title	Allocation Method
41603	Civil Union	Direct to MCO Investments
41615	Buy-In	Direct to MCO Investments
41605	Vscript	Direct to MCO Investments

The narrative also reflects a few cosmetic changes related to update titles for program codes and certain descriptions. None of these affect the plan's methodology. All of these changes are highlighted in red.

Vermont Department of Health (VDH)

The Department of Health (VDH) has identified new program codes appearing in VISION data for the quarter effective 1/1/06. Program codes 39030 through 39034 were created for the Governor's Chronic Care Blueprint. This program is designed to provide services for anyone who receives health care in the State of Vermont. The allocation method for 39031 through 39034 is based upon the Medicaid eligible population for the entire State. All of these program codes have been added to the narrative and highlighted in red and we have included a chart of these additions below:

VISION Program Code	Title	Allocation Method
39030	Blueprint Health Systems	Direct to Governor's Blueprint
39031	Blueprint Self Management	Allocated Between Blueprint and Medicaid Admin
39032	Blueprint Community Support	Allocated Between Blueprint and Medicaid Admin
39033	Blueprint Information Technology	Allocated Between Blueprint and Medicaid Admin
39034	Blueprint Provider Practice	Allocated Between Blueprint and Medicaid Admin
39825	Strategic Prevention Framework State Incentive Grant	Direct to Strategic Prevention Framework State Incentive Grant
39868	Building the Infrastructure of Vermont's Adolescent Treatment System	Direct to SAMHSA Adolescent Treatment Grant
41635	Medicare Part D	Direct to Medicare Part D Transition
42755	CoSig	Direct to CoSig

Additionally, several program codes have revised allocation methods. These new methods are outlined below:

VISION Program Code	Title	Allocation Method
39520	Governor's Chronic Care Blueprint - Planning	Allocated Between Blueprint and Medicaid Admin
39522	Governor's Chronic Care Blueprint - Operations	Allocated Between Blueprint and Medicaid Admin
39539	Vermont Loan Repayment	Direct to MCO Investments
39553	Family Planning - State	Direct to MCO Investments
39599	Renal Disease	Direct to MCO Investments
39743	Newborn Screening	Direct to MCO Investments

There is a change in the process of determining costs for program code 39758, School-based EPSDT. The costs in this code are being determined by somewhat different mechanisms beginning this quarter. First, the State will begin paying the schools for 85% of the total FFP earned by the school, and retaining the 15% for Health Department uses. Previously, the State paid the school 100% of the FFP earned by the school and then billed the school for a 15% fee. Second, time of school staff will be calculated on a sample of five days each quarter rather than 100% time reporting. Third, there have been minor changes in the number and description of allowable and unallowable costs, and minor changes in the distribution of certain costs. The new mechanisms for sampling of time and for calculation of allowable and unallowable costs have been described in detail in a revision to Vermont's Plan for School-based claiming. That Plan revision has been filed with CMS, Region I, as required by the CMS 2003 Claiming Guide.

We appreciate your cooperation. If you have any questions, please do not hesitate to contact Ira Sollace at (802) 241-2949.

Sincerely,

Cynthia D. LaWare
 Secretary
 Agency of Human Services

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