

Rule Renumbering

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All Programs Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2000	2000	All Programs
2010	2100-2109	Eligibility and Payment
2011	2101	Eligibility
2012	2102	Payment
2013	2103	Case Records
2014	2104	Authorized Representative
2015	2106.1	Fraud
2015.1	2106.2	Suspected Fraud
2015.2	2106.3	Methods of Investigation
2015.3	2106.4	Referral to Law Enforcement
2015.4	2106.5	Records and Reports
2020	2111	Application Procedures
2030	2170	Americans With Disabilities Act (ADA)

Reach First Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2100	2190	Reach First
2101	2191	Definitions
2110	2192	Eligibility
2111	2193	Financial Eligibility
2112	2194	Personal Interview
2113	2194.1	Orientation
2114	2194.2	Financial and Self-Sufficiency Screening
2115	2194.3	Ineligible Families
2116	2194.4	Families Inappropriate for Referral
2117	2194.5	Families with Mandatory Applicants
2118	2194.6	Families with No Mandatory Applicants
2120	2195	Payments
2121	2195.1	Payment Calculation
2122	2195.2	Payment Disbursement
2130	2196	Services Component
2131	2196.1	Assessment
2132	2196.2	Case Management
2133	2196.3	Family Development Plans
2134	2196.4	Support Services
2140	2197	Participant Responsibilities
2141	2197.1	Consequences of Noncompliance
2142	2197.2	Noncompliance and Good Cause
2143	2197.3	Conciliation
2150	2198	Referral and Transition to Other Programs
2160	2199	Notice and Appeal

Reach Up Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2200	2200	Reach Up
2201	2201	Eligibility and Payment Process
2202	2202	Eligibility and Payment Definition
2203	2203	Case Records
2204	2204	Authorized Representative
2205	2205.1	Fraud
2205.1	2205.2	Suspected Fraud
2205.2	2205.3	Methods of Investigation
2205.3	2205.4	Referral to Law Enforcement
2205.4	2205.5	Records and Reports
2206	2215	Quality Control Review
2207	2225.1	Domestic Violence
2210	2208	Application
2210.1	2334	Termination Due to Support Payment
2210.2	2209	Choice of Program
2210.3	2210	Deadline for Application Processing
2211	2211	Methods of Investigation
2211.1	2211.1	Statement of Need
2211.2	2211.2	Interviews
2211.3	2211.3	Verification
2211.4	2211.4	Collateral Sources
2212	2218	Continuing Eligibility
2213	2218.1	Review of Eligibility
2213.1	2220.1	Reviews
2214	2220	Change of Circumstances
2214.1	2223	Change of Address
2214.2	2224	Family Separation
2214.3	2222	Deceased Participant
2215	2218.2	Assistance Pending Fair Hearing
2216	2225	Decisions, Notification and Authorization
2216.1	2226	Application Decisions
2216.2	2226.1	Money Payment
2216.3	2227	Review Decisions
2217	2228	Notice of Decision
2217.1	2228.1	Exemptions from Minimum Advance Notice
2217.2	2228.2	Money Grant Notice
2220	2230	Money Grants
2221	2231	Alternate Payee
2222	2232	Method of Payment
2222.1	2238	Vendor Payments
2222.2	2237	Maintenance Assistance
2222.3	2236	Administrative Expense
2223	2233	Deceased Payee
2224	2234.1	Underpayments
2225	2234.2	Overpayments
2226	2235	Protective Payments
2226.1	2235.1	Money Mismanagement
2226.2	2235.2	Payee Selection Criteria
2226.3	2235.21	Conflict of Interest Limitation

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2226.4	2235.3	Payee Relationship
2226.5	2235.4	Controlled Vendor Payments (CVP)
2226.6	2235.5	Redetermination
2226.7	2235.6	Appeal
2230	2242.1	Eligible Child
2230.1	2302.11	Relative
2230.2	2302.12	Qualified Caretaker
2230.3	2302.13	Home
2231	2242.2	Eligible Parent
2231.1	2208.1	Civil Unions Act (Act 91)
2232	2242.4	Needy Essential Person
2233	2302	Residence
2233.1	2302.2	Residence - Committed Child
2234	2303	Social Security Numbers
2235	2330-2339	Support Obligations and Payments
2235.1	2331	Assignment of Support Rights
2235.2	2332	Cooperation With Child Support
2235.3	2332.1	Good Cause for Refusal
2235.4	2332.2	Request for Waiver
2235.5	2332.3	Review of Good Cause Waivers
2236	2242.7	Citizenship
2237	2304	Special Cases of Ineligibility
2237.1	2304.1	Strike Participants
2237.2	2304.2	Residence in Two States
2237.3	2304.3	Fugitive Felons and Probation and Parole Violators
2240	2242	Formation of the Assistance Group
2241	2242.5	Caretaker
2242	n/a	Unmarried Parents with a Child-in-Common
2250	2239	Need Determination
2251	2240	Method for Determination of Need
2252	2245.24	Ratable Reduction
2253	2240.1	Eligibility Computation
2254	2216.1	Prospective Budgeting
2254.1	2216.2	Prospective Eligibility and Budgeting
2255	2241	Amount of Payment
2256	2241.1	Income Deficits Prohibited
2260	2244-2249	Needs
2261	2245	Need Standards
2261.1	2245.2	Basic Need Standard
2261.2	2245.21	Members in Long-Term Care
2261.3	2245.22	Children in Schools or Institutions
2261.4	2245.23	Special Needs
2262	2243	Living Arrangement
2263	2245.3	Housing Allowance
2263.1	2245.31	Subsidized Housing
2263.2	2245.33	Budgeting Subsidized Housing
2263.3	2245.5	Shared Households
2263.4	2246	Room and Board Standards
2263.5	2247	Institution
2263.6	2248	Foster Home
2264	2245.4	Temporary Absence-Illness

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2265	2245.41	Temporarily Uninhabitable Home
2270	2250-2259	Income
2270.1	2250.1	Lump Sum Income
2270.2	2250.2	Income-in-Kind
2271	2252	Unearned Income
2271.1	2252.1	Social Security - Railroad Retirement
2271.2	2252.2	Veterans Benefits
2271.3	2252.3	Contributions
2272	2333	Distribution of Child Support
2272.1	2333.1	Family Bonus Payment
2272.2	2333.2	Parent Share Payment
2272.3	2333.3	Arrearage Collected
2272.4	2333.4	Advance Support Payments
2274	2253	Earned Income
2274.1	2253.1	Computation Method
2274.2	2253.11	Earned Income Computation Sequences
2274.3	2253.2	Business Expense
2274.4	2253.21	Providing Child Care
2275	2253.3	Earned Income Deductions
2275.1	2253.31	Employment Expenses
2275.2	2253.32	Dependent Care Expenses
2275.3	2253.33	Earned Income Disregard
2275.4	2253.34	Disallowance of Disregard
2276	2255.1	Excluded Income
2280	2260-2269	Resources
2281	2261	Combined Resources Limitation
2281.1	2261.1	Transfer or Assignment Prohibited
2281.2	2261.2	Property Sales
2281.3	2263.7	Excess Resources
2282	2262	Real Property
2283	2263	Personal Property
2283.1	2263.1	Liquid Assets
2283.2	2263.2	Trust Funds - Trust Accounts
2283.3	2263.3	Burial Plots - Funeral Arrangements
2283.4	2263.4	Pension Funds
2283.5	2263.5	Vehicles
2283.6	2263.6	Income-Producing Property
2284	2264	Excluded Resources
2290	2270-2279	Potential Income and Resources
2291	2271	Pension and Benefit Programs
2292	2272	Insurance and Liability Claims
2293	2273	Support from Relatives
2293.1	2273.1	Notice to Law Enforcement
2293.2	2273.2	Contact with Relatives
2293.3	2273.3	Location of Relatives
2293.4	2273.4	Referral to Office of Child Support
2293.5	2273.5	Cooperation with Courts
2293.6	2335	Collections for Non-Reach Up Families

Reach Up Services Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2300	2340	Reach Up Services
2301	2341	Definitions
2302	2350	Case Management
2302.1	2350.1	Caseload Size
2302.2	2350.2	Notification
2302.3	2350.3	Assessment
2302.4	2350.4	Case Management Responsibilities
2310	2351	Support Services
2311	2351.1	Support Services, Assessment, and the FDP
2312	2351.2	Support Services Providers
2313	2351.3	Types of Support Services
2314	2351.4	Payment for Support Services
2314.1	2351.41	Payment by Other Programs
2314.2	2351.42	Payment by DCF
2315	2351.5	Criteria For Purchase of Support Services
2316	2352	Child Care Assistance
2316.1	2352.1	Basic Eligibility Criteria
2316.2	2352.2	Allowable Child Care Expenses
2316.3	2352.3	Payment Rate
2317	2353	Incentive Payments
2317.1	2353.1	Payment of Incentives
2320	2360	Participation
2321	2360.1	Participation Requirements
2322	2360.2	Participation Phases
2322.1	2360.21	Application Phase
2322.2	2360.22	Pre-Work-Ready Phase
2322.3	2360.23	Work-Ready Phase
2322.4	2360.24	Employment Phase
2322.5	2360.25	Assignment to a Phase
2322.6	2360.26	Months of Financial Assistance
2330	2361	Family Development Plans
2331	2361.1	Employment Goal
2332	2361.2	Development of the FDP
2333	2361.3	FDP Reviews and Modifications
2334	2362	FDP Requirements
2335	2362.1	Adult Participants
2335.1	2362.11	Requirement to Report to VDOL
2335.2	2362.12	Primary Caretaker Parents
2336	2362.2	Minor Parents
2336.1	2362.21	Approved Living Arrangement
2336.2	2362.22	Other Approved Living Arrangements
2336.3	2362.23	Noncompliance with Approved Living Arrangement
2337	2362.3	Out-of-School Youth
2340	2363	Work Requirements

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2341	2363.1	Work-Ready Determination
2341.1	2363.11	When Determined Eligible
2341.2	2363.12	During the First 12 Months
2341.3	2363.13	12th Month of Financial Assistance
2341.4	2363.14	Pre-Work-Ready Phase Extended
2341.5	2363.15	Financial Assistance Before July 2001
2342	2363.2	Implementation of Phase-In Plan
2343	2363.3	Work Requirement Hours
2343.1	2363.31	Parents in Two-Parent Families
2343.2	2363.32	Single Parents and Caretakers
2343.3	2363.33	Participants Under 20 Years Old
2343.4	2363.34	Requirement to Accept or Retain a Job
2343.5	2363.35	Exceptions to Requirement to Accept a Job
2350	2364	Work and Work Activities
2350.1	2364.1	Unsubsidized Employment
2350.10	2364.1	Education Related to Employment
2350.11	2364.11	Satisfactory Attendance at Secondary School
2350.12	2364.12	Child Care Services to CSP Participant
2350.2	2364.2	Subsidized Private Employment
2350.3	2364.3	Subsidized Public Employment
2350.4	2364.4	Work Experience
2350.5	2364.5	On-the-Job Training
2350.6	2364.6	Job Search
2350.7	2364.7	Community Service Programs
2350.8	2364.8	Vocational Education
2350.9	2364.9	Job Skills Training
2351	2364.13	Financial Literacy Classes
2352	2364.14	Work Activity Displacement Policy
2353	2364.15	Fair Labor Standards Act
2360	2365	Deferments and Modifications
2361	2365.1	Presumption of Capacity to Work
2362	2365.2	Deferment of Requirements
2363	2365.3	Deferment or Modification of work Requirement
2363.1	2365.31	Domestic Violence Deferment or Modification
2363.2	2365.32	Medical Deferment or Modification
2370	2370	Noncompliance and Good Cause
2371	2370.1	Types of Noncompliance
2371.1	2370.11	De Facto Refusal
2371.2	2370.12	Overt Refusal
2372	2370.2	Determination of Good Cause
2373	2370.3	Good Cause Criteria
2373.1	2370.31	Good Cause for Refusing, Quitting, or Being Fired from a Job
2373.2	2370.32	Good Cause for Noncompliance with FDP Requirement
2373.3	2370.33	Absence of Appropriate Child Care
2374	2371	Conciliation

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2374.1	2371.1	Conciliation Process
2374.2	2371.2	Conciliation Resolution Period
2374.3	2371.3	Successful Resolution
2374.4	2371.4	Unsuccessful Resolution
2375	2372	Sanctions for Noncompliance
2375.1	2372.1	Independent Review and Notice
2375.2	2372.2	Sanction Amounts
2375.3	2372.21	Housing Protection Limitation
2375.4	2372.3	Vendor Payment of Housing Costs
2375.5	2372.4	Meeting with Case Manager
2376	2373	Sanctions – Cure and Forgiveness
2377	2373.1	Curing Sanctions
2377.1	2373.11	Notice of Ability to Cure
2377.2	2373.12	Process to Cure Sanctions
2378	2373.2	Forgiveness of Past Sanctions
2380	2380	Notice and Appeal
2380.1	2380.1	Notice
2380.2	2380.2	Appeal
2380.3	2380.3	Grounds for Appeal
2390	2180	Solely State-Funded Programs and Separate State Programs
2391	2181	Solely State-Funded Programs
2391.1	2181.1	Parental Nurturing Component
2391.2	2181.2	Minor Parents' Safety Net Component
2391.3	2181.3	Special Needs Component
2391.4	2181.4	SSI and SSDI Applicant Component
2392	2182	Exemption from 60-Month Limit
2393	2183	Assignment to Solely State-Funded Programs
2393.1	2183.1	Assignment Rules
2394	2184	Separate State Funds Programs
2395	2185	Child Support Distribution

Post Secondary Education Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2400	2400	Postsecondary Education (PSE)
2401	2401	Definitions
2402	2417	Americans with Disabilities Act
2410	2402.1	Initial Eligibility
2411	2402.2	Continuing Eligibility
2420	2403.1	General Application Requirements
2421	2403.2	Application Periods
2422	2403.3	Financial Eligibility
2423	2403.4	Documentation
2424	2403.5	Literacy Assessment
2425	2403.6	Non-Participating Parents Unable-to-Work
2426	2403.7	Pre-Existing PSE Degrees
2427	2403.8	Development of PSE Plan

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2428	2403.9	Conditions for Participation
2429	2403.10	Notice of Decision
2430	2404	Priorities
2440	2405	Participants Receiving a Stipend April 1, 2007
2450	2406.1	PSE Plan
2451	2406.2	PSE Plan Requirements
2452	2406.3	Fields of Study/Majors
2453	2406.4	Change in Occupation, Major, Degree or College
2454	2406.5	Modifications to Plan Schedule
2460	2407	Financial Assistance
2461	2408	Support Services
2462	2409	Pre-Participation Services
2470	2411.1	Case Management
2471	2411.2	Availability of Case Management
2472	2411.3	Case Management Services
2473	2411.4	Other Services
2474	2411.5	Case Management During Interruptions
2475	2411.6	Conflict of Interest
2480	2412.1	Annual Review
2481	2412.2	Documentation
2482	2412.3	Review of PSE Plan
2483	2412.4	Conditions for Continuing Participation
2484	2412.5	Non-Participating Parents Unable-to-Work
2485	2412.6	Notice of Decision
2486	2413.1	Approved Interruptions
2487	2413.2	Unapproved Interruptions
2488	2413.3	Financial Support During Interruptions
2490	2414	Time Limits for Participation
2491	2415	Termination from PSE
2492	2416	Notice and Appeal Rights

General Assistance Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2600	2600	General Assistance (GA)
2601	2600.1	Application
2601.1	2032	Methods of Investigation
2601.2	2032.2	Interviews
2601.3	2032.3	Verification
2601.4	2032.4	Collateral Sources
2602	2600.2	Applicant Household
2603	2600.3	Definitions
2604	2603	Citizenship and Residence
2605	2604	Applicant's Responsibility
2606	2605	District Director's Responsibility
2610	2601	Non-Catastrophic Eligibility
2620	2602	Catastrophic Eligibility
2621	2602.1	Catastrophic Situation
2622	2602.2	Constructive Eviction
2623	2602.3	Emergency Medical Need
2630	2607	Employment
2631	2607.1	Work Requirements
2632	2607.2	Work Exemptions
2633	2607.3	Active Job Search Effort
2640	2608	Income
2641	2608.1	Work Expense Deduction
2642	2608.2	Self Employment Deductions
2643	2608.3	Child Support Deductions
2644	2608.4	Room and Board Deductions
2645	2608.5	Dependent Care Deduction
2646	2608.6	Excluded Income
2650	2610	Benefit Issuance
2650.1	2060	Vendor Payments
2650.2	2061	Administrative Expenses
2651	2611	Groceries and Personal Needs
2652	2613	Housing
2652.1	2613.1	Permanent Housing
2652.2	2613.2	Temporary Housing
2653	2613.5	Moving Expense
2654	2614	Room and Board
2655	2615	Heating Equipment
2656	2616	Transportation
2657	2617	Fuel and Utilities
2657.1	2617.1	Metered Delivery
2657.2	2617.2	Bulk Delivery
2660	2620	Medical Care
2660.1	2620.1	Payment for Medical Care
2661	2621	Physician Services
2662	2622	Dental Services
2663	2623	Vision Services and Items
2664	2624	Prescription Drugs
2665	2625	Medical Supplies
2666	2626	Durable Medical Equipment

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2667	2627	Ambulance Services
2670	2640	Burial Responsibility
2671	2641	Burial Arrangements
2672	2642	Application for Burial
2673	2643	Burial Eligibility
2674	2644	Allowable Expenses, Burial
2674.1	2644.1	Professional Services, Burial
2674.2	2644.2	Other Expenses, Burial
2675	2645	Resources, Burial
2676	2646	Payment for Burial
2677	2647	Payment Process, Burial
2680	2680	Town Service Officer (TSO)
2681	2681	TSO Duties
2682	2682	TSO Decisions
2682.1	2682.1	Groceries or Meals, TSO
2682.2	2682.2	Housing, TSO
2682.3	2682.3	Fuel and Utilities, TSO
2682.4	2682.4	Emergency Medical Care, TSO
2682.5	2682.5	Other Items, TSO
2683	2683	TSO Compensation

Aid to the Aged, Blind or Disabled Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2700	2700-2799	Aid to the Aged, Blind or Disabled (AABD)
2701	2716	Authorized Representative
2702	2717	Case Records
2703	2713.4	Recipient Fraud
2710	2711	Application
2711	2712	Initial Eligibility
2712	2712.1	Application Decisions
2713	2712.2	Statement of Need
2714	2712.3	Interviews
2715	2712.4	Verification
2716	2712.5	Collateral Sources
2720	2713	Continuing Eligibility
2721	2713.1	Review Decisions
2722	2713.2	Change Report
2723	2713.3	Eligibility Review
2730	2714	Notice and Appeal
2731	2714.1	Notice of Decision
2732	2714.2	Right to Appeal
2733	2714.3	Continued Benefits
2734	2714.4	Fair Hearing Procedures
2740	2715.1	Eligibility Expenses
2741	2715.2	SSI/AABD Payments
2742	2715.3	Assistance Pending SSI
2743	2715.4	AABD-EP Benefit Payments
2750	2720-2729	Mandatory AABD Supplement
2760	2730-2739	Optional AABD Supplement
2761	2731	Living Arrangements

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2762	2731.1	Independent Living
2763	2731.2	Living in Another's Household
2764	2731.3	Residential Care Home
2764.1	2731.31	Residential Care, Assistive Community Care
2764.2	2731.32	Residential Care, Limited Nursing
2764.3	2731.33	Other Residential Care
2766	2731.4	Custodial Care
2767	2731.5	Long-Term Care
2770	2732	Payment Levels
2780	2750-2759	Essential Person (AABD-EP)
2781	2751	Essential Person Definition
2781.1	2751.1	Personal Care Services
2781.2	2751.2	Homemaker Services
2782	2752	AABD-EP Assistance Group
2783	2753	Living Arrangements, AABD-EP
2783.1	2753.1	Independent Living with EP
2783.2	2753.2	EP Living in Another's Household
2784	2754	AABD-EP Payment Levels
2785	2755	Resources, AABD-EP
2786	2756	Income, AABD-EP

Emergency Assistance Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2800	2800	Emergency Assistance (EA)
2801	2800.1	Application
2802	2800.2	Applicant Household
2803	2800.3	Definitions
2804	2800.4	Authorization Limits
2805	2803	Disqualification
2806	2804	Applicant's Responsibility
2807	2805	District Director's Responsibility
2810	2801	Non-Catastrophic Eligibility
2820	2802	Catastrophic Eligibility
2821	2802.1	Catastrophic Situation
2822	2802.2	Constructive Eviction
2823	2802.3	Emergency Medical Need
2830	2807	Employment
2831	2807.1	Work Requirements
2832	2807.2	Employment Definitions
2833	2807.3	Work Exemptions
2834	2807.4	Active Job Search Effort
2840	2808	Income
2841	2808.1	Work Expense Deduction
2842	2808.2	Self-Employment Deductions
2843	2808.3	Child Support Deductions
2844	2808.4	Room and Board Deductions
2845	2809.5	Dependent Care Deduction
2846	2809.6	Excluded Income
2850	2810	Benefit Issuance
2851	2811	Groceries and Personal Needs

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2852	2813	Housing
2852.1	2813.1	Permanent Housing
2852.2	2813.2	Temporary Housing
2852.3	2813.21	Permanent Housing Pre-Authorization
2853	2813.3	Rental or Mortgage Arrearage
2853.1	2813.31	Arrearage Definitions
2853.2	2813.32	Arrearage Eligibility
2854	2813.5	Moving Expense
2855	2814	Room and Board
2856	2815	Heating Equipment
2857	2816	Transportation
2858	2817	Fuel and Utilities
2858.1	2817.1	Metered Delivery
2858.2	2817.2	Bulk Delivery
2860	2820	Medical Care
2860.1	2820.1	Payment
2870	2830	Child Welfare Emergencies (EA-CWE)
2871	2830.1	EA-CWE Eligibility
2872	2830.2	Protective Services, EA-CWE
2873	2830.3	Family Support Services, EA-CWE
2874	2830.4	Family Prevention Services, EA-CWE

Fuel Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2900	2900	Fuel Program
2901	2900.1	Additional Funds
2902	2912	Fuel Supplier Certification
2903	2913	Advantageous Pricing
2904	2911	Recoupment
2910	2901	Household Composition
2911	2901.1	Definitions
2912	2901.2	Eligible Households
2913	2901.3	Excluded Households
2914	2902	Application
2915	2902.1	Application Period
2916	2905	Verification
2920	2903.2	Resources
2921	2903.1	Resources Maximum
2922	2903.3	Jointly Held Resources
2930	2904	Income
2931	2904.1	Income Maximums
2932	2904.2	Definition of Income
2933	2904.3	Income Deductions
2940	2906	Benefit Levels
2941	2906.1	Subsidized Housing
2942	2906.2	Calculation of Benefits
2943	2906.3	Fuel Program Tables
2944	2906.4	Primary Heating Fuel Costs
2950	2907	Benefit Issuance
2951	2907.1	Benefit Payment Method

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
2952	2907.2	Payments to Certified Fuel Suppliers
2953	2907.3	Credit Balances
2954	2907.4	Expedited Benefits, Crisis Households
2960	2908	Changes in Circumstances
2961	2908.1	Change of Fuel Supplier
2970	2909	Notices and Appeal Rights
2971	2910	Fair Hearing
2971.1	2910.1	Fair Hearing Definitions
2971.2	2910.2	Fair Hearing Rules
2980	2950	Crisis Fuel Assistance,
2981	2951	Eligibility, Crisis Fuel
2982	2951.1	Expedited Fuel Benefits, Crisis Households
2983	2952	Crisis Fuel Application
2984	2953	Income, Crisis Fuel
2985	2954	Resources, Crisis Fuel
2986	2955	Verification, Crisis Fuel
2987	2956	Crisis Fuel Benefits
2988	2957	Appeal Rights, Crisis Fuel
2989	2958	Recoupment, Crisis Fuel

Refugee Cash Assistance Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
3000	2501	Refugee Cash Assistance (RCA)
3010	2502	Eligibility
3020	2502.1	Relationship to SSI/AABD
3030	2503	Employment Requirements
3031	2503.1	Sanctions
3040	2504	Unaccompanied Minors
3050	2505	Fair Hearings

Medicaid Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
4100	M100	Medicaid Program
4101	M101	Purpose – Medicaid Program
4102	M101.1	Vermont Health Access Plan (VHAP)
4103	M116	VHAP Determination When Medicaid Closes
4104	M134	Quality Control Review
4105	M135	Beneficiary Fraud
4110	M102	Eligibility and Enrollment Process
4111	M102.1	Premiums
4112	M104	Authorized Representative
4113	M105	Case Records
4120	M111	Application
4121	M112	Reapplication and Reenrollment
4122	M113	Retroactive Application
4123	M114	Date of Application
4124	M115	Choice of Category
4130	M121	Application Decisions
4131	M122	Decision Time Limits

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
4132	M123	Application Forms
4133	M124	Interview
4134	M125	Social Security Numbers
4135	M126	Verification
4136	M127	Collateral Sources
4137	M128	Potential Unearned Income
4138	M129	Other Potential Income
4138.1	M129.1	Assignment of Rights to Payments
4138.2	M129.2	Cooperation in Obtaining Payments
4138.3	M129.21	Good Cause for Noncooperation
4138.4	M129.3	Enrollment in a Health Insurance Plan
4140	M131	Eligibility Review
4141	M132	Review Frequency
4142	M133	Review Decisions
4150	M141	Notice of Decision and Appeal
4151	M142	Right to Appeal
4152	M142.1	Disability Determination Appeal
4153	M143	Continued Benefits Pending Appeal
4154	M144	MCO Appeals and Fair Hearing Rules
4160	M150	Payment Systems
4161	M150.1	Cost-Sharing
4162	M150.2	Obligation of the Department
4163	M151	Eligibility Expenses
4164	M153	Beneficiary Identification
4170	M170.1	Citizenship
4171	M170.2	U.S. Citizen
4171.1	M170.21	Notice of Verification Requirement
4171.2	M170.22	Citizenship and Identity Documentation
4172	M170.3	Qualified Alien
4172.1	M170.31	Battered Alien
4172.2	M170.32	Immigration Status Documentation
4173	M170.4	Five-Year Bar for Qualified Aliens
4173.1	M170.41	Documentation of Entry Date
4174	M170.5	Non-Qualified Aliens
4174.1	M170.51	Illegal Aliens
4174.2	M170.52	Undocumented Aliens
4175	M170.6	Ineligible Aliens and Non-Immigrants
4176	M170.7	Confirmation of Immigration Via SAVE
4177	M170.8	Emergency Medical Services

SSI-Related Medicaid Eligibility Rules

<u>New Number</u>	<u>Old Numbers</u>	<u>Titles</u>
4200	M200	Medicaid, Aged, Blind, and Disabled
4201	M200.1	Definitions
4202	M200.2	Categorically Needy Coverage Groups
4202.1	M200.21	Categorically Needy Coverage Groups
4202.2	M200.22	SSI-Eligible Coverage Groups
4202.3	M200.23	Long-Term Care Coverage Groups
4202.4	M200.24	Coverage Groups for New Applicants
4202.5	M200.25	Coverage Groups for Former Recipients

<u>New Number</u>	<u>Old Numbers</u>	<u>Titles</u>
4203	M200.3	Medically Needy Coverage Group
4204	M200.4	Medicare Cost-Sharing Coverage Groups
4204.1	M200.41	Qualified Medicare Beneficiaries (QMB)
4204.2	M200.42	Qualified Disabled and Working Individuals (QDWI)
4204.3	M200.43	Specified Low-Income Medicare Beneficiaries (SLMB)
4204.4	M200.44	Qualified Individuals (QI-1)
4210	M210	Nonfinancial Eligibility Tests
4211	M211	Relationship to SSI
4212	M211.1	Definition of Age
4213	M211.2	Definition of Disability
4213.1	M211.21	Substantial Gainful Activity
4214	M211.3	Definition of Blindness
4215	M211.4	Determining Disability or Blindness
4216	M212	Citizenship and Identity
4216.1	M212.1	Emergency Medical Services
4217	M213	Residence
4217.1	M213.1	Temporary Absence
4217.2	M213.2	Placement in Vermont Institutions
4217.3	M213.3	Incapable of Stating Intent
4217.4	M213.4	Residence as Payment Requirement
4217.5	M213.5	Specific Prohibitions
4218	M214	Living Arrangement
4218.1	M214.1	Public Institution
4218.2	M214.2	Private Facility
4218.3	M214.3	Correctional Facility
4220	M220	Financial Eligibility
4220.1	M220.1	Definitions
4221	M221	Formation of Financial Responsibility Group
4221.1	M221.1	Financial Responsibility Groups for Single Adults
4221.2	M221.2	Financial Responsibility Groups for Children
4221.3	M221.3	Financial Responsibility Groups for Sponsored Noncitizens
4221.4	M221.31	Qualifying Quarters of Coverage
4222	M222	Formation of the Medicaid Group
4222.1	M222.1	Medicaid Groups for Single Adults
4222.2	M222.2	Groups for Adults with Spouses
4222.3	M222.21	Exceptions for Adults with Spouses
4222.4	M222.3	Medicaid Groups for Children
4223	M223	Deeming
4223.1	M223.1	Temporary Absences
4230	M230	Resources
4231	M231	Types of Resources
4232	M231.1	Nonliquid Resources
4232.1	M231.11	Real Property
4233	M231.2	Liquid Resources
4233.1	M231.21	Accounts in Financial Institutions
4233.2	M231.23	Stocks, Bonds, and Funds
4233.3	M231.24	Annuities
4233.4	M231.25	Mortgages and Promissory Notes
4234	M231.3	Resources Managed by Third Party
4234.1	M231.32	Power of Attorney
4234.2	M231.33	Guardian

<u>New Number</u>	<u>Old Numbers</u>	<u>Titles</u>
4234.3	M231.34	Representative Payee
4240	M232	Excluded Resources
4241	M232.1	Real Property
4241.1	M232.11	Home and Contiguous Land
4241.2	M232.12	Sale of Excluded Home
4241.3	M232.13	Real Property for Sale
4241.4	M232.14	Home Equity Conversion Plans
4241.5	M232.15	Jointly Owned Real Property
4241.6	M232.16	Life Estates
4241.7	M232.17	Income-Producing Real Property
4241.8	M232.18	Goods for Home Consumption
4242	M232.2	Insurance
4242.1	M232.21	Life Insurance
4242.2	M232.22	Long-Term Care Insurance Partnership
4243	M232.3	Burial Funds
4244	M232.4	Other Income-Producing Resources
4245	M232.5	Resources Managed by Third Party
4245.1	M232.51	Definition of Trust
4245.2	M232.52	Excluded Trusts
4245.3	M232.53	Trusts Excluded Due to Hardship
4246	M232.6	Early Withdrawal and Surrender Penalties
4247	M232.7	Jointly Held Accounts
4247.1	M232.71	Fiduciary for a Joint Fiduciary Account
4248	M232.8	Other Excluded Resources
4248.1	M232.81	Personal Property
4248.2	M232.82	Vehicles
4248.3	M232.83	Independent Living Contracts
4248.4	M232.84	Cash
4248.5	M232.85	Retirement Funds
4248.6	M232.86	Tax Refunds
4248.7	M232.87	Student Benefits
4248.8	M232.88	Savings from Excluded Income
4248.9	M232.89	Federal Exclusions
4249	M232.9	Exclusions for Limited Periods
4249.1	M232.91	Retroactive Social Security and SSI/AABD
4249.2	M232.92	Funds for Replacing Excluded Resources
4249.3	M232.93	Earned Income Tax Credit
4249.4	M232.94	Medical or Social Services Payments
4249.5	M232.95	Victim's Compensation Payments
4249.6	M232.96	Relocation Payments
4249.7	M232.97	Expenses from Last Illness and Burial
4249.8	M232.98	Stocks, Bonds, and Funds
4249.9	M232.99	Home-Based Long-Term Care Disregard
4250	M233	Value of Resources
4251	M233.1	Jointly Owned Resources
4251.1	M233.11	Tenancy in Common
4251.2	M233.12	Joint Tenancy
4251.3	M233.13	Tenancy by the Entirety
4252	M233.2	Value of Certain Resources
4252.1	M233.21	Annuities
4252.2	M233.22	Life Estates

<u>New Number</u>	<u>Old Numbers</u>	<u>Titles</u>
4252.3	M233.23	Jointly Owned Real Property
4252.4	M233.24	U.S. Savings Bonds
4252.5	M233.25	Income-Producing Notes and Contracts
4252.6	M233.26	Substantial Home Equity
4260	M234	Countable Resources
4261	M234.1	Individuals Other than Children
4262	M234.2	Individuals with Spouses and Not in Long-Term Care
4263	M234.3	Blind or Disabled Children
4264	M234.4	Individuals with Spouses and in Long-Term Care
4264.1	M234.41	Individuals with a Community Spouse
4264.2	M234.42	Allocation to a Community Spouse
4270	M240	Income Requirements
4271	M241	Types of Income
4272	M241.1	Earned Income
4272.1	M241.11	Self-Employment Income
4273	M241.2	Unearned Income
4280	M242	Income Exclusions
4280.1	M242.1	Earned Income Exclusions
4280.2	M242.2	Unearned Income Exclusions
4281	M243	Determination of Countable Income
4281.1	M243.1	Financial Responsibility Group of One
4281.2	M243.2	Financial Responsibility Group of Two
4281.3	M243.3	Parent and Child Living Together
4281.4	M243.4	Children Seeking Community Medicaid
4281.5	M243.5	Individuals Seeking Long-Term Care
4281.6	M243.51	Long-Term Care in Nursing Facilities
4281.7	M243.52	Waiver or Hospice Services
4282	M245	Income Deductions
4283	M245.1	Earned Income Deductions
4283.1	M245.11	Business Expenses
4283.2	M245.12	Work Expenses of Blind Individuals
4283.3	M245.13	Work Expenses of Disabled Individuals
4284	M245.2	Unearned Income Deductions

ANFC-Related Medicaid Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
4300	M300	Medicaid, Families and Children
4301	M301	Eligibility
4301.1	M301.1	Income Maximums
4301.2	M301.2	Deprivation Not Required
4310	M302	Categorically Needy Coverage Groups
4311	M302.1	Eligible Family Members
4312	M302.2	Family Members Eligible Based on Exceptions
4312.1	M302.21	Eligible Except for Earnings
4312.2	M302.22	Eligible Except for Child Support
4312.3	M302.23	Eligible Except for Institutional Status
4312.4	M302.24	Recipients in August 1972
4312.5	M302.25	Eligible Except for Child Care Payments
4312.6	M302.26	Children Under 18 (Dr. Dynasaur)
4312.7	M302.27	Pregnant Women (Dr. Dynasaur)

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
4312.8	M302.28	Other Eligible Family Members
4320	M303	Medically Needy Coverage Groups
4330	M311	Citizenship and Identity
4330.1	M311.1	Emergency Medical Services
4331	M312	Residence
4332	M313	Living Arrangements
4332.1	M313.1	Public Institution
4332.2	M313.2	Private Facility
4332.3	M313.3	Correctional Facility
4340	M320-M329	ANFC-Related Eligibility Factors
4341	M321	Age
4342	M322	Pregnancy
4343	M323	Parents and Caretaker Relatives
4350	M330-M339	Financial Eligibility
4351	M331	Financial Responsibility of Relatives
4351.1	M331.2	Spousal Responsibility
4351.2	M331.3	Parental Responsibility
4360	M332	ANFC-Related Medicaid Group
4361	M332.1	Medicaid Group Formation
4361.1	M332.11	Exceptions to Medicaid Group Formation Rules
4362	M336	Exclusions from Income and Resources
4363	M337	Sponsored Aliens
4363.1	M337.1	Qualifying Quarters of Work
4370	M340-M349	Resources
4371	M340.1	Jointly Owned and Jointly Held Resources
4372	M340.2	Resource Disregard
4373	M341	Liquid Assets
4373.1	M341.1	Life Insurance
4373.2	M341.2	Trusts
4373.3	M341.21	Trusts Established Prior to 1994
4373.4	M341.22	Trusts Established After 1993
4373.5	M341.3	Burial Plots and Funeral Agreements
4374	M342	Non-Liquid Assets
4374.1	M342.1	Real Property
4374.2	M342.2	Vehicles
4374.3	M342.3	Income-Producing Property
4375	M344	Lump Sum Receipts
4380	M350-M359	Income
4381	M351	Unearned Income
4382	M352	Earned Income
4382.1	M352.1	Income Computation
4382.2	M352.2	Business Expenses
4382.3	M352.3	Employment Expenses
4382.4	M352.4	Dependent Care Expenses
4390	M360	Long-Term Care and Community Spouses

Medicaid Spend-down Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
4400	M400	Spenddown, Patient Share, and Resource Transfer
4410	M401	Living Arrangements
4411	M401.1	Community Living Arrangement
4412	M401.2	Long-Term Care Living Arrangement
4420	M402	Accounting Periods
4421	M402.1	Six-Month Spend-Down Period
4422	M402.2	One-Month Patient Share Period
4430	M410	Spenddown of Excess Resources and Income
4431	M411	Spending Down Excess Resources
4432	M411.1	Retroactive Coverage
4433	M412	Spending Down Excess Income
4434	M412.1	Allowable Uses of Excess Income
4440	M420	Medical Expense Spenddown
4441	M420.1	Eligibility Date
4442	M420.2	Deduction Sequence
4443	M420.3	Time Frames for Deductions
4443.1	M420.31	Predictable Expenses
4443.2	M420.32	Prior Medical Expenses
4450	M421	Allowable Medical Expenses
4451	M421.1	Health Insurance Expenses
4452	M421.2	Expenses Not Covered by Medicaid
4452.1	M421.21	Over-the-Counter Drugs and Supplies
4452.2	M421.22	Transportation
4452.3	M421.23	Personal Care Services
4452.4	M421.24	Assistive Community Care Services
4453	M422	Covered Medical Services
4454	M423	Third-Party Coverage
4460	M430	Patient Share Payment for Long-Term Care
4461	M431	Long-Term Care Residence Period
4461.1	M431.1	Percentage of Month in Long-Term Care
4461.2	M431.2	Determining Maximum Patient Share
4462	M432	Deductions from Patient Share
4462.1	M432.1	Personal Needs Allowance and Community Maintenance Allowance
4462.2	M432.2	Home Upkeep Deduction
4462.3	M432.3	Allocation to Family Members
4462.4	M432.31	Allocation to Community Spouse
4462.5	M432.32	Allocation to Other Family Members
4463	M433	Transfer Between Nursing Facilities
4463.1	M433.1	Hospital Admission from Nursing Facility
4463.2	M433.2	Transfer from Waiver Services to Nursing Facility
4463.3	M433.3	Discharge from Nursing Facility to Waiver Services
4463.4	M433.4	Discharge from Long-Term Care
4463.5	M433.5	Termination of Eligibility for Long-Term Care
4463.6	M433.6	Patient Share in the Month of Death
4470	M440	Income or Resource Transfer and Long-Term Care Coverage
4471	M440.1	Definition of Transfer
4472	M440.2	Transfers for Fair Market Value
4472.1	M440.21	Receipt of Fair Market Value

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
4473	M440.3	Transfers for Less Than Fair Market Value
4473.1	M440.31	Transfers of Trusts for Less than Fair Market Value
4473.2	M440.32	Transfers of Homes to Family Members
4473.3	M440.33	Other Transfers to Family Members
4473.4	M440.34	Transfers of Annuities
4473.5	M440.35	Jointly Held Income or Resources
4473.6	M440.36	Income-Producing Notes and Contracts
4474	M440.4	Penalty Period for Disallowed Transfers
4474.1	M440.41	Penalty Date
4474.2	M440.42	Penalty Period
4474.3	M440.43	Penalty When Both Spouses Request Long-Term Care Coverage
4474.4	M440.44	Undue Hardship

Refugee Medical Assistance Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5100	2510	Refugee Medical Assistance (RMA)
5101	2510.2	Medical Screening Examination
5110	2510.1	Eligibility Requirements
5120	2511	Determining Eligibility
5121	2511.1	Non-Financial Eligibility
5122	2511.2	Financial Eligibility
5130	2512	Limited English Proficiency

Dr. Dynasaur Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5200	3000	Dr. Dynasaur
5210	3001	Eligibility
5211	3001.1	Residence
5212	3001.2	Member of Covered Group
5212.1	3001.21	Pregnant Woman
5212.2	3001.22	Child Under the Age of 18
5220	3001.3	Financial Need
5221	3001.31	Definition of Household
5222	3101.32	Income Level
5230	3001.4	Uninsured
5240	3002	Services
5250	3004.1	Application
5251	3004.2	Application Decision
5252	3004.3	Period of Eligibility
5253	3004.4	Identification Document
5254	3004.5	Application for Other Benefits
5255	3004.6	Right to Appeal

VHAP Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5300	4000	Vermont Health Access Plan (VHAP)
5301	4002.7	Beneficiary Fraud
5310	4001	Eligibility

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5311	4001.1	Age
5312	4001.2	Uninsured or Underinsured
5313	4001.3	Citizenship and Identity
5314	4001.4	Residence
5315	4001.5	Living Arrangement
5316	4001.6	Student Status
5317	4001.7	Other Eligibility Requirements
5320	4001.8	Financial Need
5321	4001.81	Income
5322	4001.82	Excluded Income
5323	4001.83	Countable Income
5324	4001.84	Income Test
5330	4001.9	Cost-Sharing Requirements
5331	4001.91	Premium
5332	4001.92	Co-payment
5340	4002.1	Application
5341	4002.2	Application Decision
5342	4002.3	Eligibility Period and Enrollment
5342.1	4002.31	VHAP-Limited Coverage
5342.2	4002.32	VHAP Managed Health Care
5343	4002.4	Identification Document
5344	4002.5	Application for Medicaid
5345	4002.6	Right to Appeal
5350	4003	Benefit Delivery
5351	4003.1	Benefits
5351.1	4003.11	Beneficiaries Eligible for VHAP and Medicare
5352	4003.2	VHAP Managed Health Care Plan
5352.1	4003.21	Enrollment
5352.2	4003.22	Appeals of Managed Health Care Decisions
5360	4004	Medicaid Program

VPharm Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5400	3500	VPharm
5401	3501	Definitions
5402	3504.4	Beneficiary Fraud
5410	3502	Eligibility
5411	3502.1	Age
5412	3502.2	Disability
5413	3502.3	Residence
5414	3502.4	Income
5415	3502.5	PDP Enrollment
5416	3502.6	Limited Income Subsidy
5417	3502.7	Citizenship and Identity
5420	3503	Application
5421	3503.1	Application Decision
5430	3504.1	Eligibility Period and Enrollment
5431	3504.2	Identification Document
5432	3504.3	Notice and Appeal
5440	3505	Payment System

5441	3505.1	Cost-Sharing
5442	3505.2	Medicare Advocacy Program
5443	3505.3	Payments for Prescribed Drugs
5444	3505.4	Price for Ingredients
5445	3505.5	Compounded Prescriptions
5446	3505.6	Participating Pharmacy
5447	3505.7	Prescribed Drugs
5450	3506	Coverage

VHAP-Pharmacy Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5500	3300	VHAP-Pharmacy
5501	3302.7	Beneficiary Fraud
5510	3301	Eligibility
5511	3301.1	Age
5512	3301.2	Disability
5513	3301.3	Uninsured
5514	3301.4	Citizenship and Identity
5515	3301.5	Residence
5516	3301.6	Living Arrangement
5520	3301.7	Financial Need
5521	3301.71	Countable Income
5522	3301.72	Excluded Income
5523	3301.73	Determining Countable Income
5524	3301.74	Income Test
5530	3302.1	Application
5531	3302.2	Application Decision
5532	3302.3	Eligibility Period and Enrollment
5533	3302.4	Identification Document
5534	3302.5	Application for Other Benefits
5540	3302.6	Right to Appeal
5550	3303.1	Cost Sharing
5551	3303.2	Payments for Prescribed Drugs
5552	3303.3	Price for Ingredients
5553	3303.4	Compounded Prescriptions
5554	3303.5	Participating Pharmacy
5555	3303.6	Co-Payments
5560	3304	Prescribed Drugs
5570	3305	Benefit Coverage

VScript Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5600	3200	VScript
5610	3201	Eligibility
5611	3201.1	Citizenship and Identity
5612	3201.2	State Resident
5613	3201.3	Living Arrangement
5614	3201.4	Member of Covered Group
5614.1	3201.41	Elderly Definition

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5614.2	3201.42	Disabled Definition
5620	3201.5	Uninsured Definition
5630	3201.6	Financial Need
5631	3201.61	Countable Income
5632	3201.62	Excluded Income
5633	3201.63	Determining Income
5634	3201.64	Income Test
5640	3202	Coverage
5641	3202.1	Maintenance Drugs
5642	3202.2	Participating Pharmacy
5643	3202.3	Dispensing
5650	3203	Cost-Sharing Requirements
5660	3204.1	Application
5661	3204.2	Application Decision
5662	3204.3	Eligibility Period and Enrollment
5663	3204.4	Payment Methodology
5664	3204.5	Right to Appeal

Healthy Vermonters Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5700	3400	Healthy Vermonters
5701	3402.9	Beneficiary Fraud
5710	3401	Eligibility
5711	3401.1	Insurance Coverage
5712	3401.2	Citizenship and Identity
5713	3401.3	Residence
5714	3401.4	Living Arrangement
5720	3401.5	Financial Need
5721	3401.51	Income
5722	3401.52	Excluded Income
5723	3401.53	Countable Income
5724	3401.54	Income Test
5730	3402	Eligibility Process
5731	3402.1	Application
5732	3402.2	Application Decision
5733	3402.3	Eligibility Period
5734	3402.4	Termination
5735	3402.5	Reporting Changes
5736	3402.6	Identification Document
5737	3402.7	Application for Other Benefits
5738	3402.8	Right to Appeal
5740	3403.1	Benefit
5741	3403.2	Enrollment Fee
5742	3403.3	Coinsurance Requirement
5743	3403.4	Coverage
5744	3403.5	Participating Pharmacy

HIV/AIDS Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5800	3100	HIV/AIDS
5810	3101	Eligibility
5811	3101.1	Residence
5812	3101.2	Member of Covered Group
5820	3101.3	Financial Need
5821	3101.31	Definition of Household
5822	3101.32	Income Level
5823	3101.33	Resource Limit
5830	3102	Coverage
5840	3104.1	Application
5841	3104.2	Application Decision
5842	3104.3	Period of Eligibility
5843	3104.4	Payment Methodology
5844	3104.5	Right to Appeal

Premium Assistance Eligibility Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5900	4100	Premium Assistance
5901	4101	Definitions
5910	4102	Eligibility
5911	4102.1	VHAP-ESIA
5911.1	4102.2	VHAP-ESIA Enrollment
5912	4102.3	Catamount-ESIA
5913	4102.4	CHAP
5914	4102.5	Prior Loss of Insurance
5915	4102.6	Medicare
5916	4102.7	Income Determinations
5917	4102.8	ESI Available to Ineligible Member
5920	4103	Eligibility Process
5921	4103.1	Application
5922	4103.2	Cooperation Requirements
5923	4103.3	Screening; Initial Eligibility
5924	4103.4	Plan Information Request Letter
5924.1	4103.5	Enrollment Determination
5924.2	4103.6	Approval of ESI Plans
5924.3	4103.7	Determining Cost-Effectiveness
5924.4	4103.8	No Cost-Effective or Available ESI
5924.5	4103.9	Cost-Effective ESI Available
5925	4103.10	Eligibility Period and Enrollment
5925.1	4103.11	New Access to ESI
5925.2	4103.12	Plan Disenrollment
5925.3	4103.13	ESI No Longer Approved or Cost-Effective
5926	4103.15	Seamless Coverage
5930	4103.14	Notice and Appeal Rights
5940	4104	Premium-Assistance Amounts
5950	4105	VHAP-ESIA Benefits
5951	4105.1	Premium Balances and Assistance Amounts
5952	4105.2	VHAP Wraparound Coverage

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
5960	4106	Catamount-ESIA Benefits
5961	4106.1	Premium Balances and Assistance Amounts
5962	4106.2	Chronic-Care Wraparound Coverage
5963	4107.1	Premium Balances and Assistance Amounts
5970	4108	Premium Balance Collection Methods
5971	4109	Premium Payments
5972	4110	Payment Adjustments
5972.1	4110.1	Underpayments
5972.2	4110.2	Overpayments

Medicaid Covered Services Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7101	M103	Medicaid Benefit Delivery
7101.1	M103.1	Fee-For-Service
7101.2	M103.2	Managed Health Care Plan
7101.3	M103.3	Primary Care Case Management (PCCM)
7102	M106	Prior Authorization
7102.1	M106.2	Criteria for Prior Authorization
7102.2	M106.3	Prior Authorization Determination
7102.3	M106.4	Waiver of Prior Authorization
7102.4	M106.5	Prior Authorization Process
7103	M107	Medical Necessity
7104	M108	Requesting Coverage Exceptions
7105	M152	Medical Service Payment
7105.1	M152.1	General Exclusions
7105.2	M154	Provider Responsibility
7105.3	M156	No Reassignment of Claims
7106	M155	Violations of Provider Responsibility
7106.1	M155.1	Definitions
7106.2	M155.2	Grounds for Sanctioning Providers
7106.3	M155.3	Sanctions
7106.4	M155.4	Imposition and Extent of Sanctions
7106.5	M155.5	Provider Information Program
7106.6	M155.6	Right of Appeal
7106.7	M155.7	Withholding Payments
7107	M157	Utilization Control
7107.1	M157.1	Beneficiary Abuse
7107.2	M157.2	Provider Abuse
7108	M158	Third-Party Liability
7108.1	M158.1	Health Insurance Premiums
7108.2	M159	Adjustment or Recovery
7108.3	M159.1	Estate Recovery
7109	M160	Health Care Trust Fund
7110	M180	Global Commitment Appeals and Grievances
7110.1	M180.1	Definitions
7110.2	M181	Beneficiary Appeals
7110.3	M182	Fair Hearing
7110.4	M183	School-Based Health Services
7110.5	M184.1	Filing Grievances

Medicaid Hospital Services Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7201	M500	Payment for Hospital Services
7201.1	M501	Reimbursement Standards
7201.2	M505	Disproportionate Share
7202	M510	Inpatient Services
7202.1	M511	Excluded Services
7202.2	M512	Dental Procedures
7202.3	M513	Psychiatric Care
7202.4	M514	Care Of Newborn Child
7203	M520	Outpatient Services

Medicaid Covered Services Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7301	M600	Physicians and Other Licensed Practitioners
7301.1	M610	Physician Services
7301.2	M611	Psychiatric Services
7302	M617	Abortion
7303	M618	Acupuncture
7304	M640	Chiropractic Services
7305	M613	Covered Organ and Tissue Transplants
7306	M616.1	Fertility Services
7307	M618.1	Massage Therapy
7308	M630-M639	Podiatry Services
7309	M616	Sterilizations and Related Procedures
7310	M615	Surgery
7311	M619	Medical and Surgical Services of a Dentist
7311.1	M619.2	Eligibility for Care
7311.2	M619.3	Covered Services
7311.3	M619.4	Conditions for Coverage
7311.4	M619.5	Prior Authorization Requirements
7311.5	M619.7	Qualified Providers
7311.6	M619.8	Reimbursement
7312	M620	Dental Services for Beneficiaries Under 21
7312.1	M620.2	Eligibility for Care
7312.2	M620.3	Covered Services
7312.3	M620.4	Conditions for Coverage
7312.4	M620.5	Prior Authorization Requirements
7312.5	M620.6	Non-Covered Services
7312.6	M620.7	Qualified Providers
7312.7	M620.8	Reimbursement
7313	M621	Dental Services for Beneficiaries Age 21 and Older
7313.1	M621.2	Eligibility for Care
7313.2	M621.3	Covered Services
7313.3	M621.4	Conditions for Coverage
7313.4	M621.5	Prior Authorization Requirements
7313.5	M621.6	Non-Covered Services
7313.6	M621.7	Qualified Providers
7313.7	M621.8	Reimbursement/Copayments

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7314	M622	Orthodontic Treatment
7314.1	M622.2	Eligibility for Care
7314.2	M622.3	Covered Services
7314.3	M622.4	Conditions for Coverage
7314.4	M622.5	Prior Authorization Requirements
7314.5	M622.7	Qualified Providers
7314.6	M622.8	Reimbursement
7315	M650	Audiology Services/Hearing Aids
7315.1	M650.2	Eligibility for Care
7315.2	M650.3	Covered Services
7315.3	M650.4	Conditions for Coverage
7315.4	M650.5	Prior Authorization Requirements
7315.5	M650.6	Non-Covered Services
7315.6	M650.7	Qualified Providers
7315.7	M650.8	Reimbursement
7316	M670	Eyeglasses and Vision Care Services
7316.1	M670.2	Eligibility for Care
7316.2	M670.3	Covered Services
7316.3	M670.4	Conditions for Coverage
7316.4	M670.5	Prior Authorization Requirements
7316.5	M670.6	Non-Covered Services
7316.6	M670.7	Qualified Providers
7316.7	M670.8	Reimbursement

Medicaid Other Covered Services Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7401	M710.1	Home Health Agency Services
7401.1	M710.2	Eligibility for Care
7401.2	M710.3	Covered Services
7401.3	M710.4	Conditions for Coverage
7401.4	M710.5	Prior Authorization Requirements
7401.5	M710.6	Non-Covered Services
7401.6	M710.7	Qualified Providers
7401.7	M710.8	Reimbursement
7402	M715	Hospice Services
7403	M720	Clinic Services
7403.1	M721	Mental Health Clinic
7403.2	M722	Indian Health Service Facilities
7403.3	M723	Rural Health Clinics
7405	M730	Laboratory and Radiology Services
7406	M740.1	Personal Care Services
7406.1	M740.2	Eligibility for Care
7406.2	M740.3	Covered Services
7406.3	M740.4	Qualified Providers
7406.4	M740.5	Non-Covered Services
7406.5	M740.6	Guidelines for Coverage
7406.6	M740.7	Prior Authorization Requirements
7406.7	M740.8	Reimbursement
7407	M750	Ambulance Services
7407.1	M751	Reimbursement

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7408	M755	Transportation
7409	M760	Planned Parenthood of Vermont
7410	M770	Early and Periodic Screening, Diagnosis and Treatment (EPSDT)
7410.1	M771	Informing
7410.2	M772	Screening and Outreach
7410.3	M773	Corrective Treatment
7410.4	M774	Rates of Payment
7411	M781	Private Non-Medical Institutions
7411.1	M781.1	Residential Child Care Facilities
7411.2	M781.11	Prior Authorization
7411.3	M781.12	Reimbursement
7411.4	M781.2	Assistive Community Care Facilities
7411.5	M781.21	Reimbursement

Medicaid Drugs and DME Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7501	M800-M889	Pharmaceuticals, Medical Supplies and Equipment - General Information
7501.1	M801	Beneficiaries Eligible for Medicaid and Medicare
7501.2	M813	Payment Conditions
7501.3	M813.1	Payments for Prescribed Drugs
7501.4	M813.2	Price for Ingredients
7501.5	M813.3	Compounded Prescriptions
7501.6	M813.4	Beneficiaries in Long-Term Care Facilities
7501.7	M813.5	Unused Drugs From Long-Term Care Facilities
7502	M810	Prescribed Drugs
7502.1	M811	Smoking Cessation Products
7502.2	M811.1	Non-Drug Items
7502.3	M811.2	Amphetamines and Appetite Depressants
7502.4	M811.3	Vitamins and Minerals
7502.5	M811.4	Other Preparations
7502.6	M812	Family Planning Items
7503	M820	Whole Blood
7504	M830	Medical Supplies
7504.1	M830.2	Eligibility for Care
7504.2	M830.3	Covered Services
7504.3	M830.4	Conditions for Coverage
7504.4	M830.5	Prior Authorization Requirements
7504.5	M830.6	Non-Covered Services/Supplies
7504.6	M830.7	Qualified Providers
7504.7	M830.8	Reimbursement
7505	M840.1	Durable Medical Equipment (DME)
7505.1	M840.2	Eligibility for Care
7505.2	M840.3	Covered Services
7505.3	M840.4	Conditions for Coverage
7505.4	M840.5	Prior Authorization Requirements
7505.5	M840.6	Non-Covered Services
7505.6	M840.7	Qualified Providers
7505.7	M840.8	Reimbursement

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7506	M841.1	Wheelchairs, Mobility Devices and Seating Systems
7506.1	M841.2	Eligibility for Care
7506.2	M841.3	Covered Services
7506.3	M841.4	Conditions for Coverage
7506.4	M841.5	Prior Authorization Requirements
7506.5	M841.6	Non-Covered Services
7506.6	M841.7	Qualified Providers
7506.7	M841.8	Reimbursement
7507	M842.1	Augmentative Communication Devices/Systems
7507.1	M842.2	Eligibility for Care
7507.2	M842.3	Covered Services
7507.3	M842.4	Conditions for Coverage
7507.4	M842.5	Prior Authorization Requirements
7507.5	M842.6	Non-Covered Services
7507.6	M842.7	Qualified Providers
7507.7	M842.8	Reimbursement
7508	M843.1	Prosthetic Devices
7508.1	M843.2	Eligibility for Care
7508.2	M843.3	Covered Services
7508.3	M843.4	Conditions for Coverage
7508.4	M843.5	Prior Authorization Requirements
7508.5	M843.6	Non-Covered Services
7508.6	M843.7	Qualified Providers
7508.7	M843.8	Reimbursement

Medicaid Long-Term Care Services Rules

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7601	M900	Long Term Care Institutions
7601.1	M901	Definitions
7601.2	M902	Medical Review Systems
7601.2	M910.2	Supplementation Prohibition
7602	M910	Per Diem Rates and Payment Conditions
7602.1	M910.1	Billings for Long Term Care
7603	M920	Daily Care Services
7603.1	M920.1	Drugs in Long-Term Care Facilities
7603.2	M920.2	Drugs in the Vermont State Hospital
7603.3	M920.3	Personal Comfort Items
7603.4	M920.4	Services in a Non-Medicare Facility (ICF's)
7603.5	M920.5	Services in a Medicare Participating Facility (SNF)
7604	M930	Duration of Coverage
7604.1	M930.1	Nursing Home Leave of Absence
7604.2	M930.2	Absence Due to Hospitalization
7604.3	M930.3	Leave of Absence in ICF/MR's
7605	M940	Patient Classifications
7605.1	M940.1	Authorization for Care
7605.2	M940.2	Level of Care - SNF's, ICF's
7605.3	M940.3	Level of Care - ICF/MR's, Psychiatric Facilities
7605.4	M940.4	Level of Care - Mental Hospitals
7605.5	M940.5	Pre-Admission Review from Hospitals)
7605.6	M940.6	Post-Admission Review

<u>New Number</u>	<u>Old Number</u>	<u>Title</u>
7605.7	M940.7	Determining Need for Continued Stay
7606	M950.1	Request for Reconsideration and Appeal of Level of Care or Termination
7606.1	M950.2	Appeal Process -Review of Reconsideration
7606.2	M950.3	Appeal Process - Mental Health Facilities
7606.3	M950.4	Appeal Process - Medicaid Financial Eligibility
7607	M960.1	Appeal Process Provider Agreement
7607.1	M960.2	Notice of Voluntary Medicaid Closure
7607.2	M960.3	Medicaid Closure or Prohibition by the State of Vermont
7608	M970	Level I and Level II Care in Vermont General Hospitals