



State of Vermont
Agency of Human Services
280 State Drive, Center Building
Waterbury, VT 05671-1000

Global Commitment Register

August 9, 2022

GCR 22-060
FINAL

Medicaid Reimbursement for Family-Managed Respite

Policy Summary:

The Department of Disabilities, Aging, and Independent Living (DAIL) increased the minimum and maximum rates for family-managed respite. Under family-managed care, it is consumers and family members who set provider wages. The Medicaid program sets upper and lower limits to Medicaid rates for respite which will accommodate a range of wages, benefits, and overtime. These upper and lower Medicaid limits are set as a result of a collective bargaining agreement (CBA) for direct support workers between the State of Vermont and the Federation of State, County, and Municipal Employees (AFSME).

The maximum and minimum rates for family managed respite can be found in the table below. These rates include the 11.38% employee taxes and fees (worker's compensation and unemployment).

Family Managed Respite Rates	Rates through 6/30/2022	Rates effective 7/1/2022
Minimum hourly rate	\$14.26	\$14.97
Maximum hourly rate	\$18.93	\$21.16
Minimum daily rate	\$228.11	\$239.51
Maximum daily rate	\$302.95	\$338.56
Maximum overtime hourly rate	\$28.40	\$31.75
Maximum overtime daily rate	\$454.43	\$508.00

Effective Date:

July 1, 2022

Authority/Legal Basis:

[Medicaid State Plan](#)

[Global Commitment to Health Waiver](#): Waiver authority #5 [Section 1902(a)(13), 1902(a)(30)]; Special Term and Condition #6.8.

Population Affected:

All Medicaid

Fiscal Impact:

The estimated gross annualized budget impact is \$105,000.

Public Comment Period:

The public comment period ended August 1, 2022. No comments were received.

To be added to the GCR email list, send an email to AHS.MedicaidPolicy@vermont.gov.