



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

Global Commitment Register

August 17, 2023

GCR 23-042
PROPOSED

Comprehensive Pain Management Pilot – Medicaid Investment

Policy Summary:

The Vermont Medicaid program proposes to test extending Medicaid coverage for a comprehensive pain management program as a temporary pilot. Under this pilot, the Comprehensive Pain Program operated by the University of Vermont Medical Center (UVMCC) would be funded as a Medicaid Investment. Vermont's Global Commitment to Health Section 1115 Demonstration authorizes expenditures, within annual limits, for public health, health care, and health-related investments. This investment will increase access to quality health care for Medicaid beneficiaries in Vermont.

It is estimated that chronic pain impacts 11-47% of the population and is the leading cause of disability. Studies have demonstrated that chronic pain conditions negatively and substantially impact a person's quality of life, including their ability to work. This comprehensive pain program would provide access to a multi-disciplinary array of both traditional and non-traditional health care therapies to help patients with chronic pain learn to self-manage their conditions to achieve optimal comfort and functionality.

Services in this 16-week program include: primary care, physical and occupational therapy, acupuncture, massage therapy, craniosacral therapy, yoga, reiki, hypnosis, nutrition, health coaching, psychological therapy, and mindfulness. Providers of these services include licensed clinicians, medical staff, and persons certified in alternative medicine.

The pilot will aim to serve at least 100 Medicaid members who have experienced chronic pain that interrupts their functioning and participation in activities of daily living, as well as work and social activities. The pilot will seek to specifically engage those Medicaid members experiencing chronic pain who are recipients of home and community-based services. UVMCC will conduct outreach to potentially eligible individuals.

Effective Date:

September 16, 2023

Authority/Legal Basis:

[Global Commitment to Health Waiver](#)

Population Affected:

Medicaid members with chronic pain, particularly Medicaid members experiencing chronic pain who are recipients of home and community-based services.

Fiscal Impact:

The estimated gross annualized budget impact is \$800,000.

Public Comment Period:

August 17, 2023 – September 15, 2023

Send comments to:

Medicaid Policy Unit

280 State Drive, Center Building

Waterbury, VT 05671-1000

Or submit via e-mail to AHS.MedicaidPolicy@vermont.gov.

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

Additional Information:

[Comprehensive Pain Program Website \(uvmhealth.org\)](http://uvmhealth.org)

See the Global Commitment Investment application below which further describes the pilot.

ATTACHMENT S
New Investment Application Template

For each new investment, the state must submit the following information to CMS as described in STC 11.6.

Date	8/15/2023
Investment Title	Comprehensive Pain Management Pilot
Estimated Amount	\$800,000
Time Period	September 1, 2023 – March 30, 2025
Department	Department of Vermont Health Access (DVHA)
Category	Increase the access to quality health care by low income, uninsured, underinsured individuals, and Medicaid beneficiaries in Vermont.
Project Objective, Targeted Outcomes, and Impact to Health Equity	
<p>To expand access to include Vermont Medicaid members in an established Comprehensive Pain Program at the University of Vermont Medical Center (UVMMC) on a pilot basis. The program is in place for eligible Blue Cross Blue Shield of Vermont (BCBSVT) members and has shown promising results, which are expected to be realized by Vermont Medicaid members. In particular, Vermont Medicaid wants to test if the following goals are achieved in order to understand the benefit to its members:</p> <ul style="list-style-type: none"> • Decreased pharmacy expenditure (and use), ER visits, MD visits. • Increased self-management of pain treatment by members including use of informal or non-medical supports. • Increased participation by members in work and life activities that were previously significantly impacted by chronic pain condition(s). 	
Project Description	
<p>This must include descriptions of specific terms associated with eligibility, benefits and services, and how the state intends to operationalize the program (e.g., population served, provider types, provider qualifications, methodology for incentive payments)</p>	

<p>DVHA seeks to test extending Medicaid coverage for a comprehensive pain management program currently provided by UVMHC and covered by BCBSVT. This potential multi-payer initiative provides access to a team of providers and an array of both traditional and non-traditional health care therapies to help patients with chronic pain learn to self-manage their conditions to achieve optimal comfort and functionality. Chronic pain impacts an estimated 11%-47% of the population and is a leading cause of disability. Services in this 16-week program include: primary care, physical and occupational therapy, acupuncture, massage therapy, craniosacral therapy, yoga, reiki, hypnosis, nutrition, health coaching, psychological therapy, and mindfulness. Providers of these services include licensed clinicians, medical staff, and persons certified in alternative medicine.</p> <p>The pilot project will target at least 100 Medicaid members who have experienced chronic pain that interrupts their functioning and participation in activities of daily living, as well as work and social activities. The pilot will seek to specifically engage those Medicaid members experiencing chronic pain who are recipients of home and community-based services.</p> <p>As part of the pilot, analyses will be conducted on patient outcomes, the value of these services for Medicaid members in reducing health care costs over time, and the feasibility of scaling the program to serve the Medicaid population statewide.</p>
<p>How does the state ensure there is no duplication of federal funding?</p>
<p>Under this pilot, the services contained within the program’s service array will not duplicate services the Medicaid member already receives to treat their existing condition. Rather, patients receive treatment plans tied directly to the program services they will receive and these plans are shared with the patient’s primary care provider along with patient care notes and aftercare planning, ensuring there is not duplication of services provided while the patient is enrolled in the program.</p>
<p>Source of non-federal share</p>
<p>State funds equivalent to the amount of federal funds attributable to the increased FMAP.</p>
<p>How does the state ensure that the investment does not include any activities listed in STC 11.6 (Investment Approval Process)?</p>
<p>The State attests that the investment does not include any activities listed in STC 11.6. Ongoing financial monitoring of the investment will ensure compliance.</p>
<p>The state assures that in reporting cost, the state and providers must adhere to 45 CFR §75 Uniform Administration Requirements, Cost Principles, and Audit Requirements for Health and Human Services (HHS) Awards and 42 CFR §413 Principles of Reasonable Cost Reimbursement. Pursuant to 45 CFR §75.302(a) the state must have proper fiscal control and accounting procedures in place to permit the tracing of funds to a level of expenditures adequate to establish that such funds have not been used in violation of applicable statutes. Costs must be supported by adequate source documentation.</p>