



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

Global Commitment Register

November 22, 2023

GCR 23-135
FINAL

Medicaid Investment: HCBS Provider and Organization Grants

Policy Summary:

The Vermont Medicaid program will enhance the quality, accessibility, and sustainability of Home and Community Based Services (HCBS) by making reimbursement-based grants available to Providers and Community-Based Organizations. The HCBS Grant Program includes three grant tracks:

1. Workforce Development will focus on supporting HCBS providers with professional development, employee growth, and enhancing productivity.
2. Care Model Innovation Pilots will focus on improving outcomes for marginalized communities, implementing new and expanding upon existing Health and Wellness programs, and improving Care Integration for those with complex healthcare needs.
3. HCBS Provider Organizational Performance Improvement and Compliance will focus on adopting best practices to improve HCBS access and quality, strengthening partnerships, and increasing compliance with State and Federal regulations.

Effective Date:

November 15, 2023

Authority/Legal Basis:

[Global Commitment to Health Waiver](#)

Population Affected:

Low-income, uninsured, underinsured individuals, and Medicaid beneficiaries

Fiscal Impact:

The estimated gross budget is \$15,000,000.

Public Comment Period:

The public comment period ended on November 11, 2023. No comments were received.

Additional Information:

See the Medicaid Investment application below which further describes this investment.

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	10/6/2023
Investment Title	Medicaid HCBS Provider and Organization Grants to bolster the quality, accessibility, and sustainability of Vermont's HCBS system of care.
Estimated Amount	\$15,000,000
Time Period	11/15/2023-3/31/2025
Department	Central Office
Category	<p>1) Provide home and community-based services and supports necessary to increase community living for individuals in Vermont at risk of needing facility-based care.</p> <p>2) Provide public health approaches, investments in social determinants of health, and other innovative programs that benefit low-income, uninsured, underinsured individuals and Medicaid beneficiaries in Vermont.</p> <p>3) Increase the access to quality health care by low income, uninsured, underinsured individuals and Medicaid beneficiaries in Vermont</p>
Project Objective, Targeted Outcomes, and Impact to Health Equity	

The HCBS Grant Program is designed to enhance HCBS workforce capabilities, drive care model innovation, and strengthen HCBS provider processes. The HCBS Grant Program includes three grant tracks: Workforce Development; Care Model Innovation Pilots; and HCBS Provider Organizational Performance Improvement and Compliance. Funding will only be provided for projects that meet the following targeted outcomes in each track:

- 1) Workforce Development Targeted Outcomes– a) Expand training supports and professional development opportunities for HCBS providers, b) Foster HCBS provider employee recruitment, retention, and growth, c) Reduce HCBS provider administrative burden, improve staff experience, and enhance productivity through the purchase of equipment, software, and secure technology.
- 2) Care Model Innovation Pilots Targeted Outcomes– a) Improve health and functional outcomes and enhance quality of life by addressing the Health-Related Social Needs of people with HCBS needs, b) Reduce health disparities and inequities among individuals who use HCBS by implementing targeted interventions to improve outcomes for marginalized communities or populations that face health disparities, c) Improve health and functional outcomes and enhance quality of life through implementation or expansion of evidence-based and evidence-informed Health and Wellness programs for individuals that use HCBS, d) Improve Care Integration and continuity of care for people that use HCBS and have complex healthcare needs.
- 3) HCBS Provider Organizational Performance Improvement and Compliance Targeted Outcomes – a) Adoption of best practices to improve HCBS access and quality, b) Improved organization functioning, c) Strengthened partnerships, and d) Compliance with State and Federal regulations.

Project Description

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)

Reimbursement-based grants will be made available to Medicaid HCBS Providers and Community-Based Organizations with a strong linkage to Vermont’s Medicaid HCBS programs. Workforce Development grants may also be made to educational institutions, school districts or schools, and workforce development organizations if they meet the Targeted Outcomes and improve the skills and resiliency of the Medicaid HCBS workforce. The Agency of Human Services will monitor grant awards to successful applicants of a competitive grant opportunity to ensure funds are only spent on eligible activities in alignment with Targeted Outcomes listed above, that awardees are achieving agreed upon milestones, and that data assessing project impact is reported.

How does the state ensure there is no duplication of federal funding?

Attachment S

<p>The Agency of Human Services operates under a Cost Allocation Plan (CAP) which is approved quarterly by HHS. The CAP ensures there is no duplication of funding because total expenses are allocated to the benefitting federal program.</p>
<p>Source of non-federal share</p>
<p>State funds equivalent to the amount of federal funds attributable to the increased FMAP from Section 9817 of the American Rescue Plan act.</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>AHS staff have reviewed project descriptions to ensure that the investment does not include any activities listed in STC #11.5 and will monitor program expenditures to ensure continued compliance with this requirement.</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>