



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

Global Commitment Register

September 30, 2024

GCR 24-109
PROPOSED

Disabilities Services and Brain Injury Program Case Management Transition Grants

Policy Summary:

The Vermont Medicaid program proposes to implement several initiatives to facilitate a smooth transition to new Case Management Entities (CMEs) for the Developmental Disabilities Services Program and the Brain Injury Program. Start-up funds will be provided to incoming CMEs to support service stability and quality for participants, a smooth transition between agencies, and workforce stability throughout the transition period. Current Designated Agencies (DAs), Specialized Service Agencies (SSAs) and Brain Injury Program (BIP) providers will receive funding to support transition planning and implementation, ensuring minimal disruption to enrollees.

The funding will support:

- Start-up funds for incoming case management entities (CMEs) to support limited operational costs before participant enrollment with the new CMEs.
- Funding for current DAs/SSAs/BIP providers to cover transition planning and implementation costs to minimize participant disruption.
- Individual staff retention bonuses for current service coordinators/case managers who retain full caseload through the transition or accept case management positions with new CMEs.
- Communications and marketing materials for outreach, enrollment, and unbiased systems information.
- Development of short-term/interim IT solutions to support file sharing and management, authorization, and utilization of data collection and sharing.
- The development of standardized case management training curricula and person-centered planning tools for Home and Community-Based Services (HCBS) programs.

These start-up funds will be issued as Medicaid Investments. Vermont's Global Commitment to Health Section 1115 Demonstration authorized expenditures, within annual limits, for public health, health care, and health-related investments. This investment will provide home and community-based services and supports necessary to increase community living for individuals in Vermont at risk of needing facility-based care. More information about this Medicaid Investment is available below.

Effective Date: November 1, 2024

Authority/Legal Basis:

[Global Commitment to Health Waiver](#)

Population Affected:

Developmental Disabilities Services and Brain Injury Program participants.

Fiscal Impact:

The estimated one-time budget impact is 4,200,000.

Public Comment Period:

September 30, 2024 – October 30, 2024

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:

The new investment application for the Disabilities Services and Brain Injury program case management grants is on the following pages.

[Vermont HCBS - COI Frequently Asked Questions](#)

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	November 1, 2024
Investment Title	Developmental Disabilities and Brain Injury Program Case Management Transition Grants
Estimated Amount	\$4,200,000
Time Period	November 1, 2024 – March 1, 2026
Department	Department of Disabilities, Aging, and Independent Living
Category	Provide home and community-based services and supports necessary to increase community living for individuals in Vermont at risk of needing facility-based care.
Project Objective, Targeted Outcomes, and Impact to Health Equity	
<p>The objective of this project is to support the transition of Developmental Disability Services (DS) and Brain Injury Program (BIP) case management clients from the current Designated Agency, Specialized Service Agency, and BIP providers to new case management entities. The transition is mandated by AHS’ compliance plan regarding conflict of interest.</p> <p>The targeted process outcomes include:</p> <ol style="list-style-type: none"> 1. Developing a collaborative and effective transition plan. 2. Facilitating transition activities outside of billable case management. 3. Encouraging retention of case management staff. <p>Impact on Health Equity includes:</p> <ol style="list-style-type: none"> 1. The transition aims to ensure continuity and quality of care, potentially reducing disparities in access to and quality of healthcare services among persons living with a developmental disability and brain injury. 2. Financial support to contribute to addressing workforce shortages in areas that may disproportionately affect underserved communities. 3. By aligning with CMS Conflict of Interest Regulations, the project seeks to uphold integrity and fairness in the delivery of HCBS Medicaid Waiver programs, potentially fostering trust and equity within the healthcare system. 	

<p>Project Description</p> <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>The initiative is vital to the state’s efforts to comply with CMS Conflict of Interest regulations. It focuses on allocating resources to Designated Agencies (DAs), Specialized Service Agencies (SSAs), Brain Injury Program (BIP) providers, and new Case Management Entities (CMEs) to support the planning and preparation needed for transitioning participants receiving case management services to the new CMEs. This preparation will facilitate a smooth transition of individuals from their current case management provider to the new entities.</p> <p>The Department of Disabilities, Aging, and Independent Living (DAIL) is critical in this process, authorizing the new CMEs to deliver case management services. DAIL will distribute grants to DAs, SSAs, BIP providers, and new CMEs to support the initiative. These grants will outline specific project objectives and deliverables to successfully transition Developmental Services (DS) and BIP participants to new case management providers.</p> <p>The initiative is designed to ensure individuals transitioning from the DS and BIP programs receive comprehensive case management services that promote continuity of care. Qualified case managers will be trained to meet the specific needs of this population, ensuring a tailored and supportive transition process.</p> <p>Methodologically, the program will utilize grants to support the transition of case management for the DS and BIP programs to a new case management entity(s). The payments will be tied to pre-defined performance metrics and milestones, ensuring accountability and incentivizing efficient service delivery.</p>
<p>How does the state ensure there is no duplication of federal funding?</p>
<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>State General Funds</p>
<p>State funds are 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>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>

Attachment S

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.