



OFFICE OF THE SECRETARY  
208 Hurricane Lane, Suite #103  
Williston, Vermont 05495-2069

June 30, 2013

Mr. Darryl Mayes  
Director, Division of Cost Allocation  
Department of Health and Human Services  
26 Federal Plaza, Room 41-122  
New York, NY 10278

Mr. Mayes:

Below you will find various amendment notifications for cost allocation plans within the Vermont Agency of Human Services. These updates are effective April 1, 2013.

**Agency of Human Services Central Office (AHSCO)**

The Agency of Human Services Central Office (AHSCO) has identified new program codes appearing in VISION data. While these program codes have been added to the narrative and highlighted in red, we have included a chart of these additions below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
41767	SIM Grant Non-IT Staff and Operating	Per Approved SIM Grant

The Agency of Human Services Central Office (AHSCO) has updates in narrative wording only with no change in the actual allocation method for the following:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
37900	Tobacco Evaluation and Review Board Administrator	Direct to Tobacco Funds

**Department for Children and Families (DCF)**

The Department for Children and Families (DCF) has identified items which are new or have been updated but have no adverse federal impact. While this program code has been added to the narrative and highlighted in red, we have included a chart of this addition below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
40531	IV-E Eligibility Determination	Direct to Title IV-E
41609	VIEWS - Eligibility and Enrollment - Contractual	Direct to Title IV-E
41704	Exchange level 2 Non-IT Staff and Operating	Per Approved Health Enterprise IAPD
41032	DCF Information Services Staff	Employee Salaries Across DCF (excluding DDS)
41033	DCF Info Services Staff ESD RU	Reach-Up Time Study

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

***Department for Children and Families (DCF) cont'd***

The Department for Children and Families (DCF) has identified items which are new or have been updated but have no adverse federal impact. While this program code has been added to the narrative and highlighted in red, we have included a chart of this addition below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
41034	DCF Info Services Staff ESD	Employees' Salaries Across Economic Services (including field staff)
41037	DCF Info Services Staff	Employees' Salaries Across Field Staff (within Economic Services)
41038	DCF Info Services Staff ESD BPS	Results of the Economic Assistance Time Study
40070	DCF Info Services Staff FSD Ops	Title IVE & GC Eligibility Rate (remainder to TANF & Woodside)
41025	DCF Info Services Staff CSI RU CDD	Direct to TANF
41045	DCF Info Services Staff 3SQrs AD	Direct to SNAP
41701	Exchange level 2 IT Staff and Operating	Per Approved Health Enterprise IAPD

The Department for Children and Families (DCF) has Program codes which were moved or added from one Planned Department category to another with no changes in funding:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
40100	Child Development Division Staff IT	Employee Salaries Across Child Development
40105	Child Development Division Licensing, CCFAP, Operations Service Staff IT	Child Subsidy Case Count
39600	Family Infant and Toddler Program IT	Direct to Family Infant and Toddler Program
40010	Social Workers IT	Results of Family Services time study
40040	Adoption & Guardianship Services IT	Title IV-E Adoption Assistance Rate and IV-E Guardianship Rate
40050	Family Services District Directors and Administrative Staff IT	Employee Salaries Across Field Staff (within Family Services)
40075	Family Services Deputy Commissioner's Office IT	Employee Salaries Across Family Services (including Field Staff)
37511	Juvenile Accountability Incentive Block Grant (JAIBG) IT	Direct to JAIBG
40200	Woodside – Admin IT	Employees' salaries across Woodside
41195	Aid to the Aged, Blind, and Disabled IT	Direct to AABD
41310	RU - Employment Training IT	Direct to SNAP Employment and Training (cost matched by the State)
44100	OEO Administration IT	Direct to State General Funds
44240	DOE WX & WTF IT	% of DOE WX compared to total expense.
40500	General Fund IT	Direct to State Funded
41210	LIHEAP Benefits Program Staff IT	Direct to Home Heating Program/LIHEAP
40370	Emergency Food Assistance (TEFAP) IT	Direct to the Emergency Food Assistance Program (TEFAP)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

The Department for Children and Families (DCF) has updates in narrative wording only with no change in the actual allocation method for the following:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
40050	Emergency Services Program	Employee Salaries Across Field Staff (within Family Services)
40060	Emergency Services Program	Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside)
44235	VT Gas program	Direct to VT Gas Utility Eligibility
40105	Child Development Division Licensing, CCFAP, Operations Service Staff	Child Subsidy Case Count
44250	GMP Weatherization	Direct to GMP Weatherization <del>OE</del>
40065	Residential Licensing and Special Investigations Unit	Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside)
40075	Family Services Deputy Commissioner's Office.	Employee Salaries Across Family Services (including Field Staff)
40085	System of Care and Revenue Enhancement Unit	Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside)
40015	Social Worker District Supervisors	Results of the Family Services Time Study
38090	Data Processing & IT costs	Direct to Title IV-D

The Department for Children and Families (DCF) has deleted program codes previously appearing in VISION data. While these program codes have been lined-through in the narrative and highlighted in red, we have included a chart below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
40070	Operations Manager and Staff	Title IVE & GC Eligibility Rate (remainder to TANF & Woodside)
40110	Child Development Licensing Unit	Child Subsidy Case Count
40115	Child Development Licensing Unit	Child Subsidy Case Count
40020	Assessment Social Workers	Results of Family Services time study
44325	VT Gas program	Direct to VT Gas Utility Eligibility

**Department of Disabilities, Aging and Independent Living**

The Department of Disabilities, Aging and Independent Living (DAIL) has identified new program codes appearing in VISION data. While all these program codes have been added to the narrative and highlighted in red, we have included a chart of these additions below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
43040	Leave Time	Direct to Leave Time
41640	ICD-10	Direct to ICD-10 IAPD
41642	MES – DDI	Per approved Health Enterprise IAPD.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Department of Vermont Health Access (DVHA)**

The Department of Vermont Health Access (DVHA) has identified new program codes appearing in VISION data. While all these program codes have been added to the narrative and highlighted in red, we have included a chart of these additions below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
41767	SIM STAFF Implementation	Direct to SIM Grant
41768	IPA staff Level 1B	Direct to Exchange Level 1B

The Department of Vermont Health Access (DVHA) has identified items which are new or have been updated but have no adverse federal impact. While this program code has been added to the narrative and highlighted in red, we have included a chart of this addition below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
37714	Graduate Medical Education Payment	Direct to GC

The Department of Vermont Health Access (DVHA) has identified the following indirect allocation cost codes which are no longer used:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
1008.1	75/25 GC Admin	Direct to GC
1009.1	GC Admin	Direct to GC
1010.1	VIEWS – MOVE	Direct to VIEWS IAPD
1011.1	5010	Direct to 5010 IAPD
1012.1	MMIS - TA	Direct to MMIS PAPD
1014.1	ONC HIT 3013	Direct to ONC HIT Grant
1015.1	SOA Infrastructure Components (BUS, Workflow, Rules)	Direct to SOA Infrastructure IAPD
1016.1	OCHIO - SPEG - ACA Exchanges	Direct to OCHIO Exchange Grant
1017.1	HIT: Implementation and Operation-Staff	Direct to SMHP-HIT IAPD
1018.1	MAPIR - State Customization - Staff Costs	Direct to SMHP-HIT IAPD
1019.1	ICD-10-Staff	Direct to ICD-10 IAPD

**Vermont Department of Health (VDH)**

The Vermont Department of Health (VDH) has identified items which are new or have been updated but have no adverse federal impact. While this program code has been added to the narrative and highlighted in red, we have included a chart of this addition below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
39047	Statewide Quality Assurance System	Direct to Statewide Quality Assurance System
39120	Healthy Homes & Lead Poisoning Prevention	<del>Direct to Healthy Homes</del> Direct to Global Commitment MCO Investment.
39122	Act 125 Activities	<del>Direct to Childhood Lead Poisoning Prevention</del> Direct to Global Commitment MCO Investment
39190	Childhood Passenger Safety MOU with DPS	Direct to Childhood Passenger Safety MOU with DPS
39231	Immunization Pilot	Direct to Immunization Pilot

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

***Department of Mental Health***

The Department of Mental Health (DMH) has identified updated program codes appearing in VISION data. While all these program codes have been updated to the narrative and highlighted in red, we have included a chart of these additions below:

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Allocation Method</b>
42303	<del>Policy and Legislative Liaison-Department Planning and Development</del>	Total Cost of All Programs, Including Community Health and Inpatient Care
420145	<del>Community Services Director DMH Administration</del>	<del>Total Cost of All Programs, Excluding Inpatient Care</del> Total Cost of All Programs, Including Community Health and Inpatient Care
42015	Community Mental Health Administration – Adults and Children	Total Costs of All Programs Excluding Inpatient Care
42301	<del>Inpatient</del> Direct Service Technical Assistants Assistance Supports	<del>Total Cost of Inpatient Programs</del> Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate
42304	<del>Clinical Director</del>	<del>Total Cost of all Clinical Programs</del>
42305	Adult Services Utilization Director	Full Time Equivalent Count across Housing, Utilization Review, and Employment Supports
42306	Inpatient Utilization Review	Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate
42307	Residential and Intensive Services Director	Full Time Equivalent Count across Technical Assistance and Secure Residential
42319	<del>Information and Data Management</del> Technology and Data Collection	Total Cost of All Programs, Including Community Health and Inpatient Care
42321	Legal Services – Inpatient	Total Cost of All <del>Programs,</del> <del>Including</del> Inpatient Care Programs
42322	Legal Services – Community Mental Health	Total Cost of All <del>Programs,</del> <del>Including</del> Community Health Programs
42401	<del>SAMHSA/FEMA Regular Services Program Grant for Adults</del>	<del>Direct to SAMHSA/FEMA Regular Services Program Grant</del>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## **Cost Impact Assessment**

**Category 1** – Programs in this category are administrative allocations used to accurately reflect costs to federal benefiting programs across AHS. Overall there will be no federal effect with these new programs.

**Category 2** - Programs in this category are used to identify new grants 100% federally funded.

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.

**Category 4** – Program codes being moved from one Planned Department category to another with no changes in funding.

**Category 5** – Updates in this category do have an adverse effect on federal funding.

**Category 6** – Updates in narrative wording only with no change in the actual allocation method.

**Category 7** – Deleted program. Program has expired or been terminated.

**Note:** *All other program code changes identified in red on the CAP narrative are narrative updates only and have no impact on funding.*

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Agency of Human Services Central Office (AHSCO)**

The Agency of Human Services Central Office (AHSCO) has made the following changes to the Cost Allocation Plan this quarter:

**Category 3** - Programs in this category are new or have been updated but have no adverse federal impact.  
**41767** - SIM Grant Non-IT Staff and Operating

**Category 6** - Updates in narrative wording only with no change in the actual allocation method.  
**37900** - Tobacco Evaluation and Review Board Administrator

**Department for Children and Families (DCF)**

The Department for Children and Families (DCF) has made the following changes to the Cost Allocation Plan this quarter:

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.  
**40531** - IV-E Eligibility Determinations  
**41609** - VIEWS - Eligibility and Enrollment - Contractual  
**41704** - Exchange level 2 Non-IT Staff and Operating  
**41032** - DCF Information Services Staff  
**41033** - DCF Info Services Staff ESD RU  
**41034** - DCF Info Services Staff ESD  
**41037** - DCF Info Services Staff  
**41038** - DCF Info Services Staff ESD BPS  
**40070** - DCF Info Services Staff FSD Ops  
**41025** - DCF Info Services Staff CSI RU CDD  
**41045** - DCF Info Services Staff 3SQrs AD  
**41701** - Exchange level 2 IT Staff and Operating

**Category 4** – Program codes being moved from one Planned Department category to another with no changes in funding.

**40100** - Child Development Division Staff IT  
**40105** - Child Development Division Licensing, CCFAP, Operations Service Staff IT  
**39600** - Family Infant and Toddler Program IT  
**40010** - Social Workers IT  
**40040** - Adoption & Guardianship Services IT  
**40050** - Family Services District Directors and Administrative Staff IT  
**40075** - Family Services Deputy Commissioner's Office IT  
**37511** - Juvenile Accountability Incentive Block Grant (JAIBG) IT  
**40200** - Woodside – Admin IT  
**41195** - Aid to the Aged, Blind, and Disabled IT  
**41310** - RU - Employment Training IT  
**44100** - OEO Administration IT  
**44240** - DOE WX & WTF IT  
**40500** - General Fund IT  
**41210** - LIHEAP Benefits Program Staff IT  
**40370** - Emergency Food Assistance (TEFAP) IT

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Category 6** – Updates in narrative wording only with no change in the actual allocation method.

- 40060** - Emergency Services Program
- 40050** - Family Services District Directors and Administrative Staff
- 44235** - VT Gas program
- 40105** - Child Development Division Licensing, CCFAP, Operations Service Staff
- 44250** - GMP Weatherization
- 40065** - Residential Licensing and Special Investigations Unit
- 40075** - Family Services Deputy Commissioner's Office.
- 40085** - System of Care and Revenue Enhancement Unit
- 40015** - Social Worker District Supervisors
- 38090** - Data Processing & IT costs

**Category 7** - Deleted program. Program has expired or been terminated

- 40070** - Operations Manager and Staff
- 40110** - Child Development Licensing Unit
- 40115** - Child Development Licensing Unit
- 40020** - Assessment Social Workers
- 44325** - VT Gas program

**Department of Disabilities, Aging and Independent Living**

The Department of Disabilities, Aging and Independent Living (DAIL) has made the following changes to the Cost Allocation Plan this quarter.

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.

- 43040** - Leave Time
- 41640** - ICD-10
- 41642** - MES – DDI

**Department of Vermont Health Access (DVHA)**

The Department of Vermont Health Access (DVHA) has made the following changes to the Cost Allocation Plan this quarter.

**Category 1** - Programs in this category are administrative allocations used to accurately reflect costs to federal benefiting programs across AHS. Overall there will be no federal effect with these new programs.

- 41767** - SIM STAFF Implementation
- 41768** - IPA staff Level 1B

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.

- 37714** - Graduate Medical Education Payment

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Category 6** – Updates in narrative wording only with no change in the actual allocation method.

- 1008.1** - 75/25 GC Admin
- 1009.1** - GC Admin
- 1010.1** - VIEWS – MOVE
- 1011.1** - 5010
- 1012.1** - MMIS - TA
- 1014.1** - ONC HIT 3013
- 1015.1** - SOA Infrastructure Components (BUS, Workflow, Rules)
- 1016.1** - OCIO - SPEG - ACA Exchanges
- 1017.1** - HIT: Implementation and Operation- Staff
- 1018.1** - MAPIR - State Customization - Staff Costs
- 1019.1** - ICD-10-Staff

**Vermont Department of Health (VDH)**

The Vermont Department of Health (VDH) has made the following changes to the Cost Allocation Plan this quarter.

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.

- 39047** - Statewide Quality Assurance System
- 39120** - Healthy Homes & Lead Poisoning Prevention
- 39122** - Act 125 Activities
- 39190** - Childhood Passenger Safety MOU with DPS
- 39231** - Immunization Pilot

**Department of Mental Health (DMH)**

The Vermont Department of Mental Health (DMH) has made the following changes to the Cost Allocation Plan this quarter.

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.

- 42303** - Policy and Legislative Liaison Department Planning and Development
- 42014** - Community Services Director DMH Administration
- 42015** - Community Mental Health Administration – Adults and Children
- 42301** - Inpatient Direct Service Technical Assistants Assistance Supports
- 42304** - Clinical Director
- 42305** - Adult Services Utilization Director
- 42306** - Inpatient Utilization Review
- 42307** - Residential and Intensive Services Director
- 42319** - Information and Data Management Technology and Data Collection
- 42321** - Legal Services – Inpatient
- 42322** - Legal Services – Community Mental Health
- 42401** - SAMHSA/FEMA Regular Services Program Grant for Adults

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

We appreciate your cooperation. If you have any questions, please do not hesitate to contact Jim Giffin at (802) 871-3005.

Sincerely,

Douglas A. Racine  
Secretary  
Agency of Human Services

cc:

Ben Black  
Bill Kelly  
Brenda Fox-Howard  
Cara McSherry  
Carrie Hathaway  
Christine Brown  
Diane Cummings  
Ed Dwinell  
Gary Leach  
Heidi Hall  
Hugh McCaslin

Jill Gould  
Jim Euber  
Jim Giffin  
Jim Mall  
Joan Adams  
Judy Morse  
Leo Clark  
Marti Sterin  
Mary Ann Alligood  
Megan Vezina  
Mike Mooradian

Monica Light  
Patrick Burke  
Paul Daley  
Paula Lefebvre  
Peter Bestenbostel  
Ray Stout  
Richard Donahey  
Rob Roberts  
Shannon Thompson  
Sherie Barbour  
Victoria Alberghini

# Agency of Human Services Central Office (AHSCO)

## I. Introduction

The following narrative represents the cost allocation plan (CAP) for the State of Vermont, Agency of Human Services (AHS). For purposes of this narrative, AHS is also referred to as the “Office of the Secretary”, as it is the Secretary’s Office that provides support functions, while all direct services, with the exception of certain grants, are administered by the departments that fall under this umbrella agency. The Departments which fall under AHS are Department of Children and Family Services (DCF); Department of Disabilities, Aging and Independent Living (DAIL); Department of Vermont Health Access (DVHA); the Vermont Department of Health (VDH); and the Department of Mental Health (DMH). Appropriate costs allocated as benefitting the Agency of Human Services Central Office (AHS/AHS-CO) are further reallocated across all other agency-specific benefitting objectives.

The mission of the AHS Office of the Secretary is to:

- Ensure that citizens, policy makers, and service providers are knowledgeable about the well-being of Vermonters;
- Promote integrated planning, delivery, and evaluation of resources and services; and
- Ensure that Agency resources (personnel, fiscal, technology, and space) are managed effectively.

## II. Organization

The AHS Secretary oversees the four divisions within AHS in addition to the Human Services Board, the Vermont Developmental Disabilities Council, Field Services, SerVermont and the Duals Eligible Program.

### *Division of Administrative Services:*

The Division coordinates the development of the Agency’s budget to ensure that departmental programs reflect the Governor’s priorities and are in compliance with legislative requirements. The Division develops financial status reports and monitors key program performance indicators for each Agency department and office. The Division’s fiscal unit coordinates all federal block grant and statewide single audit functions and updates federal cost allocation plans as necessary. The Division’s Audit Unit performs monitoring functions agency wide. The Division’s Health Care Integrated Unit monitors health care expenditures and revenues functions statewide. The Division’s data processing group coordinates the deployment of new centralized systems and software applications that allows both Agency district offices and community sites to share data appropriately across geographic and organizational boundaries. The Division also coordinates the efficient use of AHS office space statewide.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

***Division of AHS Healthcare Operations, Compliance and Improvement:***

The Division works in partnership with communities and state entities to improve the well-being of Vermonters through the planning, coordination, and evaluation of human services. The Division engages in prevention planning, training and technical assistance, and evaluation with AHS Departments and other state agencies and non-governmental partners. It assists communities to assess their strengths and assets and to articulate clear and consistent goals, develop integrated and effective strategies, and deploy resources efficiently. The Division also engages in federal grant compliance monitoring and helps communities to evaluate their initiatives. The Division publishes annual summaries of Vermont State and community performance on more than 50 indicators of well-being.

***Division of Rate Setting:***

The Division audits and establishes choices for care payment rates for nursing facilities and private non-medical institutions for the Department of Children and Families Services (DCF) as well as intermediate care facilities for people with developmental disabilities for the Department of Disabilities, Aging and Independent Living (DAIL). Through the application of its rules, the Division evaluates the reasonableness and allow ability of program budgets and expenditures to ensure both cost containment and quality of care.

***Human Services Board:***

The Board is a citizen's panel consisting of seven members created by the legislature pursuant to 3 V.S.A., Sec. 3090. Its duties are to act as a fair hearing board for appeals brought by individuals who are aggrieved by decisions or policies of departments and programs within AHS. The Board conducts hearings and issues written decisions in accordance with its rules and its statutory responsibilities. The Board also certifies Family Court copies of Child Support Orders issued by the Board prior to the creation of the Family Court.

***Vermont Developmental Disabilities Council:***

The Developmental Disabilities Council works to ensure that all people with developmental disabilities receive the opportunities, assistance, and services necessary to live independently and productively in integrated community settings. The Council engages in advocacy, capacity building, and systems change activities. It contributes to a self-directed and family-centered system of community services, individualized supports, and other forms of assistance that enable self-advocates exercising self-determination, to be independent, productive, and included in all facets of community life.

***Assistant Attorney General:***

The chief legal advisor to the Secretary and staff offer legal counsel and input to the Agency and the departments within the Agency.

***Field Services Division***

This division has broad responsibility for the operations of all Agency of Human Services functions within each region. Regional Field Directors are charged with assuring the optimal functioning of the Agency, oversight of district offices and mobilization of the local community to design and implement a human services system which contributes to the health and well-being of all Vermonters.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## *SerVermont*

The Committee administers several federal grants to support community based initiatives throughout the state. The programs include Neighbor to Neighbor, the Dream mentoring initiative, the Northeast Kingdom Initiative, the Vermont Youth Development Corps, and Vermont Community Stewardship program.

### ***Duals Eligible Program***

This program consists of a Project Director. This program is for the design of an innovative integrated care model to improve the quality, coordination, and cost effectiveness of care for dual populations eligible for Medicare and Medicaid in their respective state.

### **III. Plan Departments (Cost Pools) and Allocation Methodologies**

Plan Department:

#### **State Wide Indirect Cost Allocation Plan (SWICAP)**

Nature and Extent of Services: The State of Vermont, Agency of Administration negotiates the annual State Wide Indirect Cost Allocation Plan (SWICAP) with the Federal Government. The approved statewide indirect costs applicable to AHS are included in the CAP and allocated to the appropriate benefiting objectives.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
10000.1	<b>SWICAP- AHS</b>	AHS Allocation of State Wide Indirect Costs	Directly charged to AHS
10000.2	<b>SWICAP- DAIL</b>	DAIL Allocation of State Wide Indirect Costs	Directly charged to DAIL
10000.3	<b>SWICAP-Corrections</b>	Corrections Allocation of State Wide Indirect Costs	Directly charged to CORR
10000.4	<b>SWICAP- Health (VDH)</b>	VDH Allocation of State Wide Indirect Costs	Directly charged to VDH
10000.5	<b>SWICAP-DVHA</b>	DVHA Allocation of State Wide Indirect Costs	Directly charged to DVHA
10000.6	<b>SWICAP- DCF</b>	DCF Allocation of State Wide Indirect Costs	Directly charged to DCF
10000.7	<b>SWICAP- DMH</b>	DMH Allocation of State Wide Indirect Costs	Directly charged to DMH

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

**Single Audit**

Nature and Extent of Services: The Single State Audit is administered annually by an outside accounting firm that has entered into a contract with the State of Vermont. This work is put out to bid yearly. The contractor works with the State Auditor's Office as well as Central Office staff to calculate the payment for which AHS is responsible.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37120.1	<b>Single Audit-State Auditor's Office Financial Statement and Internal Controls along with OMB A-133 Compliance Reviews</b>	AHS-CO is responsible for payment of that portion of the contract which is applicable to the entire Agency of Human Services (as determined by the Auditor's office).	Audit cost for Financial Statement and Internal Controls is allocated to all Departments based on allocations provided by the State Auditor's Office. Compliance costs are allocated to all federal programs based on the specific number of State Auditor's Office contractor staff hours billed to each CFDA number.

Plan Department:

**Attorney General's Office**

Cost in VISION attributable to the Attorney General's Office managed by the AHS Central Office.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
88888.1	<b>AAG's Office - DCF</b>	DCF Allocation of AAG's Office Cost	Result of Legal Time Study
88888.6	<b>AAG's Office - DAIL</b>	DAIL Allocation of AAG's Office Cost	Result of Legal Time Study
88888.3	<b>AAG's Office - VDH</b>	VDH Allocation of AAG's Office Cost	Result of Legal Time Study
88888.4	<b>AAG's Office - AHS</b>	AHS Allocation of AAG's Office Cost	Result of Legal Time Study
88888.5	<b>AAG's Office - DVHA</b>	DVHA Allocation of AAG's Office Cost	Result of Legal Time Study
88888.2	<b>AAG's Office - DAIL</b>	DAIL Allocation of AAG's Office Cost	Result of Legal Time Study
88888.7	<b>AAG's Office - DMH</b>	DMH Allocation of AAG's Office Cost	Result of Legal Time Study

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

### **AHS Field Directors**

Costs in VISION attributable to the Field Director's activities, who are under the direction of the AHS Secretary's Office. Activities include costs for flexible funding initiatives, regional coordination grants, and other operating costs of regional coordination.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40450.1	<b>AHS Field Services</b>	Costs associated with Field Services staff salaries and benefits.	Results of Field Services Time Studies

Plan Department:

### **Secretary's Office**

Nature and Extent of Services: The Secretary's Office for the Agency of Human Services oversees the operations of the Agency, its Divisions, and Departments.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37210.1	<b>Secretary's Office Staff</b>	Office of the AHS Secretary and Staff	Number of Staff Across AHS
32004.1	<b>Training</b>	Costs associated with training of staff.	Number of Staff Across AHS

Plan Department:

### **Human Services Board Office**

Nature and Extent of Services: The Board's duties are to act as a fair hearing board for appeals brought by individuals who are aggrieved by decisions or policies of departments and programs within the Agency of Human Services. The Board conducts hearings and issues written decisions in accordance with its rules and its statutory responsibilities. The Board also certifies Family Court copies of Child Support Orders issued by the Board prior to the creation of the Family Court.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37220.1	<b>Human Services Board</b>	This four-member unit conducts fair hearings regarding clients who feel that they have been disadvantaged within the Agency of Human Services system.	Results of Human Services Board staff time studies.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

**Fiscal Unit**

Nature and Extent of Services: Fiscal Unit within the Division of Administrative Services.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37010.1	<b>Staff Accountant-AHS- Operations Financial Staff</b>	Financial staff assigned directly to AHS-CO fiscal duties; responsibilities include budget development & monitoring, preparation of quarterly cost allocation, all financial reports, and fiscal support to grant programs administered through the AHS-CO.	Salary and benefit costs for the staff accountant are allocated based on the percentages derived from the quarterly allocation of salaries and benefits for all Central Office staff.
37020.1	<b>Federal Funds Management Unit</b>	This unit's primary responsibility is the management and accountability of federal funds. Duties performed within this unit include the development and preparation of departmental cost allocation & indirect cost plans, federal expenditure reporting, cash management of federal funds, and compliance with federal regulations.	Results of Financial AHS Time Study
37021.1	<b>Fiscal Analysis &amp; Development</b>	Oversees Global Commitment and budget staff	Results of staff reporting to position
37030.1	<b>Budget Services Unit</b>	Performs budget over site and monitoring agency wide	Results of Budget Services Unit Time Study

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Fiscal Unit (continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37040.1	<b>Agency Chief Fiscal Officer</b>	As the chief fiscal officer, this position has oversight and responsibility for all Agency fiscal matters. This includes direct supervision of the Federal Funds Management Unit and the Budget Services Unit, as well as continual interaction with the departmental business managers. This position is an integral member in the establishment of Agency-wide budget priorities and budget presentation to the State legislature.	Results of staff reporting to position.
37050.1	<b>Admin Services Manager</b>	Costs associated with the Operations Coordinator.	Number of Staff Across AHS
37011.1	<b>Audit Unit</b>	Costs associated with monitoring A133 audit issues and with monitoring the agreements with sub-recipients throughout the Agency.	Results of the Audit Unit Time Study
37013.1	<b>Medicaid Unit</b>	Costs associated with managing of the health care expenses and revenues statewide	Direct to Medicaid Administration

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

**Information Technology Unit**

Nature and Extent of Services: Information Technology Unit within the Division of Administrative Services.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37070.1	<b>IT Program Support</b>	Costs associated with IT programming staff	Results of IT Program Support time studies
37071.1	<b>IT Technical Support</b>	Costs associated with IT technical staff	Results of IT Technical Support time studies
37072.1	<b>IT Management</b>	Costs associated with IT Management & Operating costs	Results of combined IT Program & Technical Support time studies
41607.1	<b>VIEWS – Eligibility &amp; Enrollment</b>	Staff work related to Health Enterprise Eligibility and Enrollment DDI and IV&V	Per Approved Health Enterprise IAPD
41617.1	<b>ONC HIT 3013</b>	Costs associated with Vermont State HIT-HIE Program and eHealth Initiative	Per Approved Health Enterprise IAPD
41618.1	<b>SOA Infrastructure Components -- Staff</b>	Staff Expenses related to Health Enterprise shared component design and development	Per Approved Health Enterprise IAPD
41640.1	<b>ICD-10 Staff Costs</b>	Conversations or work associated with the ICD-10 planning	Direct to ICD-10 IAPD
41642.1	<b>MES DDI Staff</b>	Staff work associated with the development of the MES	Per Approved Health Enterprise IAPD
41693.1	<b>HIT: Implementation &amp; Operations Staff</b>	Staff Expenses related to Health Enterprise HIT HIE, EHR, and Public Health Development and Implementation	Per Approved Health Enterprise IAPD
41696.1	<b>Exchange Level 1 Non-IT Staff and Operating</b>	Non-IT Salary and Operating costs related to the Level I OCIO Exchange Grant	Per Approved Health Enterprise IAPD

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:  
**Information Technology Unit**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41701.1	<b>Exchange Level 2 IT Staff and Operating</b>	IT Salary and Operating costs related to the Level 2 OCIO Exchange Grant	Per Approved Health Enterprise IAPD
41704.1	<b>Exchange Level 2 Non-IT Staff and Operating</b>	Non-IT Salary and Operating costs related to the Level 2 OCIO Exchange Grant	Per Approved Health Enterprise IAPD
41767.1	<b>SIM Grant Non-IT Staff and Operating</b>	Non-IT Salary and Operating costs related to the SIM Grant	Per Approved SIM Grant

Plan Department:

**Division of AHS Healthcare Operations, Compliance and Improvement**

Nature and Extent of Services: The Division works in partnership with communities and state entities to improve the well-being of Vermonters through the planning, coordination, and evaluation of human services.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37101.1	<b>Health Care Operations, Compliance and Improvement Staff</b>	Project work assigned by the AHS Secretary's Office.	Direct to Medicaid Administration
37110.1	<b>Healthcare Operations, Compliance and Improvement Support Staff</b>	Support staff provides assistance for the Division.	Direct to Medicaid Administration

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

### Duals Eligible Program

Nature and Extent of Services: Development work on the proposed State of Vermont Dual Medicare/Medicaid Eligible Demonstration.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37711.1	<b>Dual Eligibility</b>	Grant Demonstration Project work assigned by the AHS Secretary's Office.	Direct to Dual Eligibility

Plan Department:

### Tobacco Evaluation and Review Board Administrator

Nature and Extent of Services: The Vermont Tobacco Evaluation and Review Board is an independent board established by (and accountable to) the Legislature for recommending an annual budget, program criteria and policy initiatives, and for review and evaluation of Vermont's Comprehensive Tobacco Control Program.

The purpose of this board is to provide information to youth about the dangers of smoking.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37900.1	<b>Tobacco Evaluation and Review Board Administrator</b>	Administrator of the Tobacco Board. The purpose of this board is to recommend an annual budget, program criteria and policy initiatives, and for review and evaluation of Vermont's Comprehensive Tobacco Control Program. provide information to youth about the dangers of smoking.	Direct to Tobacco Funds

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

**State Refugee Coordinator**

Nature and Extent of Services: Coordinator for the federal Refugee Resettlement program. The purpose is to assist with the resettlement of refugees into a safe environment.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37530.1	<b>Refugee Social Services</b>	Funding to provide employability services to refugees	Direct to Refugee Resettlement Grant
37531.1	<b>State Refugee Coordinator-Refugee Admin</b>	Coordinator for the federal Refugee Program	Direct to Refugee Resettlement Grant
37532.1	<b>Refugee School Impact</b>	Funding to Vermont schools for refugee children.	Direct to Refugee School Impact Grant
37534.1	<b>Refugee Elders Collaborative</b>	Funding to provide services to older refugees	Direct to Refugee Elders Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

**Commission for National and Community Services (SerVermont)**

Nature and Extent of Services: Commission administers programs to support community based initiatives throughout the state.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37965.1	<b>SerVermont - Administrative</b>	Administrative cost for staff to support community based initiatives.	Direct to SerVermont
37964.1	<b>SerVermont - PDAT grant</b>	National and Community Service Act of 1990 for community based initiatives	Direct to SerVermont
37963.1	<b>SerVermont - Disability grant</b>	National and Community Service Act of 1990 for community based initiatives	Direct to SerVermont
37962.1	<b>SerVermont - Formula grant</b>	National and Community Service Act of 1990 for community based initiatives	Direct to SerVermont
37961.1	<b>SerVermont - Competitive grant</b>	National and Community Service Act of 1990 for community based initiatives	Direct to SerVermont
37969.1	<b>SerVermont - Volunteers in Service to America (VISTA) Supervision</b>	National and Community Service Act of 1990 for community based initiatives	Direct to SerVermont
37966.1	<b>SerVermont – Water wheel</b>	Water wheel funding to support Vermont flood recovery	Direct to SerVermont

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

### General Operating Expenses

Nature and Extent of Services: Routine operating expenses (such as central services costs) that are not identifiable to a specific funding source are allocated to the various programs and departments.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37170.1	General Operating Expenses	Routine operating expenses (such as central services costs) that are not identifiable to a specific funding source are allocated to the various programs and departments.	Number of Staff Across AHS

Plan Department:

### Grants and Contracts

Nature and Extent of Services: Grants and contracts administered by AHS-CO identifiable to a specific program and funding source.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42016.1	Health Care Administration: EQRO	Global Commitment Administration	Direct to Medicaid Administration
37700.1	Health Care Administration: Actuarial	Global Commitment Administration	Direct to Medicaid Administration
42020.1	Health Care Administration: 211 Grant	Global Commitment Administration	Direct to Medicaid Administration

Plan Department:

### Legal Services

Nature and Extent of Services: Contract with Vermont Legal Aid.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37190.1	Legal Services –Vermont Legal Aid	The Agency contracts annually with VT Legal Aid to provide legal advice and representation to low income persons, such as representation in administrative proceedings before the Human Services Board, and other administrative and judicial proceedings	Allocated to benefiting programs (TANF, Global Commitment, Social Services Block Grant) based on quarterly caseload data provided by VT Legal Aid

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department:

**Administrative Funds**

Nature and Extent of Services: Administrative cost incurred by the Central office as a revolving loan process with the Agency's Departments.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37415.1	Rent-Brattleboro		Direct to Administrative Funds
37420.1	Rent-Middlebury		Direct to Administrative Funds
37425.1	Rent-Morrisville		Direct to Administrative Funds
37428.1	Rent-Randolph		Direct to Administrative Funds
37430.1	Rent-Rutland-Merchants Row		Direct to Administrative Funds
37434.1	Rent-Winooski		Direct to Administrative Funds
37435.1	Rent/Janitorial-Burlington		Direct to Administrative Funds
37436.1	Rent-Williston		Direct to Administrative Funds
37445.1	Rent/Utilities/Tax-St Johnsbury		Direct to Administrative Funds
37460.1	Rent-St. Albans		Direct to Administrative Funds
37465.1	Security-Burlington		Direct to Administrative Funds
37470.1	Janitorial-Middlebury		Direct to Administrative Funds
37485.1	Utilities-White River Junction		Direct to Administrative Funds
37486.1	Rent-White River Junction		Direct to Administrative Funds
37490.1	To Be Allocated		Direct to Administrative Funds

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



Plan Department:

### Misc. Grants and Contracts

Cost in Vision attributable to miscellaneous grants and contract managed by the AHS Central Office.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37180.1	Misc. Grants and Contracts		Number of Staff Across AHS
37185.1	High Risk Pool		Direct to DAIL/DMH Based on Client Count
37709.1	Global Commitment Capitation Payments		Direct to Global Commitment Capitation Payments Final Receiver
41002.1	Service Coordination		Results of Field Staff Time Study
41003.1	Direct Service Dollars		Results of Field Staff Time Study

Plan Department:

### Vermont Developmental Disabilities Council

Cost in Vision attributable to the Vermont Developmental Disabilities Council.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37650.1	DDC Administration	Administrative costs associated with the Developmental Disabilities Council.	Direct to DD Council
37651.1	DDC Steering Committee	Costs associated with the Developmental Disabilities Council Steering Committee.	Direct to DD Council
37654.1	DDC Grants	Grants used in the Developmental Disabilities Council Program.	Direct to DD Council

Plan Department:

### Rate Setting

Nature and Extent of Services: Cost in Vision attributable to the Rate Setting Division

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37308.1	Division of Rate Setting	Costs for the entire Rate Setting Division within the Vermont Agency of Human Services.	Direct to Global Commitment

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## Department for Children & Families (DCF)

### I. Introduction

The following narrative and supporting schedules represent the public assistance cost allocation plan for the State of Vermont, Agency of Human Services (AHS), Department for Children and Family Services (DCF). DCF is the “single state agency” for the Title IV-E, Title IV-B, Title IV-D, Temporary Assistance to Needy Families (TANF), and Food Stamps programs. DCF is also responsible for all Global Commitment eligibility processes performed in Vermont.

It is the mission of DCF to promote the social, emotional, physical, and economic well-being and safety of Vermont’s children and families. This work is done through the provision of protective, developmental, therapeutic, probation, economic, and other support services for children and families in partnership with schools, businesses, community leaders, service providers, families, and youths statewide.

**The major Divisions and Offices within DCF include the following:**

- **The Child Development Division ensures a statewide system that promotes and supports safe, accessible, quality childcare for Vermont families.**
- **The Office of Child Support (OCS) establishes and enforces child support court orders, locates missing parents, and ensures the steady flow of economic support to Vermont children.**
- **The Division of Family Services administers juvenile justice services, including the Woodside facility and administers child welfare services, including foster care and adoptive services.**
- **The Economic Services Division manages the SNAP program, Welfare-to-Work (Reach Up), Home Heating Assistance, General and Emergency Assistance, the Essential Person program (AABD), Choices for Care Waiver and Global Commitment.**
- **Disability Determination Services consists of professional disability examiners who work with part-time medical doctors representing a number of medical specialties.**
- **The Office of Economic Opportunity (OEO) seeks to increase the self-sufficiency of Vermonters and strengthen Vermont communities by connecting communities to governmental and private resources to eliminate poverty through weatherization services, support for community-based organizations engaged in anti-poverty efforts, and food and nutrition services.**

Within this document, we have included an overview of DCF’s organizational structure and a list of the specific functions performed by DCF, referred to as plan departments or cost pools, and the allocation method for each function. Please note that cost pools are developed based on VISION program codes. VISION is the State of Vermont’s accounting system.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## **II. Organization**

**Please refer to the attached organizational charts.**

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**III. Time Study Methodologies and Instruments**  
**Please refer to the attached time study related documents.**

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**IV. Title IV-E Rate Methodologies**  
**Please refer to the attached Title IV-E related document.**

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## V. Plan Departments and Allocation Methodologies

### Plan Department 1:

#### *Indirect Cost Allocations*

**Nature and Extent of Services:** DCF is assessed costs from both the State of Vermont, called the SWICAP, and the Agency of Human Services Central Office, for activities performed on its behalf.

<b>Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>10000.1</b>	<b>Statewide Indirect Cost Allocation Plan (SWICAP) – DCF</b>	<b>DCF allocation of Statewide Indirect Costs.</b>	<b>The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).</b>
<b>10000.2</b>	<b>AHS Secretary’s Office</b>	<b>DCF allocation of AHS Secretary’s Office costs</b>	<b>The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).</b>
<b>10000.3</b>	<b>Financial Statement and Internal Control Audit Expenses</b>	<b>DCF allocation of costs related to Statewide Audit and Internal Control Audit expenses</b>	<b>The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).</b>
<b>10000.31</b>	<b>Financial Statement and Internal Control Audit Expense – IV-D</b>	<b>DCF allocation of costs related to Title IV-D audit.</b>	<b>Direct to Title IV-D</b>
<b>10000.4</b>	<b>AHS - IT</b>	<b>DCF allocation of costs related to AHS Information Technology expenses.</b>	<b>The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).</b>
<b>10000.5</b>	<b>Legal Aid - TANF</b>	<b>DCF allocation of Legal Aid costs directed attributable to TANF.</b>	<b>Direct to TANF</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 1:**

*Indirect Cost Allocations cont'd*

<b>Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
10000.6	Legal Aid - SSBG	DCF allocation of Legal Aid costs directed attributable to SSBG.	Direct to SSBG
10000.7	Human Services Board	DCF allocation of Human Service Board costs.	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).
10000.8	Attorney General's Office	DCF allocation of Attorney General's Office costs.	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).
10000.10	Field Service Directors	DCF allocation of Field Service Directors costs	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).
10000.11	DCF Grant	Allocation of costs related to the DCF TANF grant.	Direct to TANF

*Cost Allocation Plan Guidance:*

<b>-Program Code</b>	<b>References</b>
N/A	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2:**

*Administrative Services*

**Nature and Extent of Services:** These general administrative services support all operations and programs at DCF.

<b>Vision Program Code(s)</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43999	NGA Grant	Assist the National Governors Assoc in hosting summit on Poverty & Economic Opportunity	Direct to State Funded
40430	Human Resources	Human Resource staff dedicated to DCF staff	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).
40777	Benefits Paid on Termination	Accrued vacation hours, personal time, comp time and unemployment compensation, paid at the time of employment termination with the State of Vermont.	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).
41020	DCF Commissioner's Office Staff	The Commissioner's Office is responsible for overseeing all DCF activities.	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).
41260	Business Office	Functions including accounts payable, accounts receivable, contracts, grants, payroll, budgets (preparation and tracking), cash receipts, client benefit financial processing, cost allocation preparation, and sub-recipient monitoring.	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).

*Cost Allocation Plan Guidance:*

<b>Vision Program Code</b>	<b>References</b>
43999      41020	OMB A-87, Attachment A, Section C 1(a) & Attachment B, Section 1, 9, and 11
40430      41260	
40777	

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Plan Department 3:**

**Information Technology**

**Nature and Extent of Services:** Costs associated with staff and equipment that maintain connectivity, provide desktop support, develop technical standards, manage email systems, develop and support agency wide information systems, including web applications, oversee procurement and budget processes, spearhead strategic planning, maintain statewide perspective, oversee agency strategy, and manage large-scale initiatives.

Vision Program Code	Plan Dept. Name	Description	Allocation Method
37511	Juvenile Accountability Incentive Block Grant (JAIBG) IT	Admin Cost Associated with JAIBG.	Direct to JAIBG
38090	Data Processing & IT costs Moved from OCS	Costs from the State's central data processing facility and information technology costs that directly support the Title IV-D program.	Direct to Title IV-D
39600	Family Infant and Toddler Program IT	Programmatic Costs associated with the Infant and Toddler Program.	Direct to Family Infant and Toddler Program
40010	Social Workers IT	Costs directly associated with social workers. Social workers provide direct services to child welfare clients including case management, child abuse/neglect investigations, and eligibility determination.	Results of Family Services time study
40040	Adoption & Guardianship Services IT	The Adoption Unit manages all aspects of the adoption and guardianship subsidy programs, including post-adoption services.	Title IV-E Adoption Assistance Rate and IV-E Guardianship Rate
40050	Family Services District Directors and Administrative Staff IT	All administrative costs (personal service costs and operating expenses) incurred in the district office other than those associated with social workers, resource coordinators and adoption workers. The District Director and Staff manage the office and provide administrative support and supervision to the field staff.	Employee Salaries Across Field Staff (within Family Services)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 3 cont'd:**  
**Information Technology**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40070	DCF Info Services Staff FSD Ops	Support of DCF functions, including PC's, networks, databases & services for FSD ops	Title IVE & GC Eligibility Rate (remainder to TANF & Woodside)
40075	Family Services Deputy Commissioner's Office IT	Costs Associated with the administration of the Division, including activities related to the Policy and Planning activities policy and Quality Assurance.	Employee Salaries Across Family Services (including Field Staff)
40100	Child Development Division Staff IT	Personal services and operating expenses associated with Child Care Services Division Staff, including Deputy Commissioner, whose activities are defined as administrative by the Child Care and Development Fund regulations. This includes Division Director, Program Supervisors, Program Monitors, and clerical and administrative support for the childcare program. Also includes the Assistant Attorney General assigned to Child Care Development.	Employee Salaries Across Child Development
40105	Child Development Division Licensing, CCFAP, Operations Service Staff IT	Personal services and operating expenses for, CDD licensing, CCFP, Operations. associated with service staff including the operations manager and staff.	Child Subsidy Case Count
40106	Child Development (Child Care) System Development Costs	Costs associated with development of system.	Child Subsidy Case Count
40200	Woodside – Admin IT	Personal services and operating expenses directly associated with the operation of the Woodside Juvenile Treatment Facility.	Employees' salaries across Woodside

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 3 cont'd:**  
**Information Technology**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40370	Emergency Food Assistance (TEFAP) IT	Administrative costs associated with food purchases through USDA for shelters.	Direct to the Emergency Food Assistance Program (TEFAP)
40500	General Fund IT	Payments to individuals and organizations not eligible for federal funding.	Direct to State Funded
41025	DCF Information Services Staff	Support of DCF functions, including PC's, networks, databases, and servers not directly attributable to a cost object.	Direct to TANF
41030	DCF Information Services Staff	Support of DCF functions, including PC's, networks, databases, and servers.	DCF Information Services Division Time Study
41031	Computer Equipment	Cost associated with purchase of computer and computer equipment.	Quarterly Computer Inventory Count
41032	DCF Information Services Staff	Support of DCF functions, including PC's, networks, databases, and servers not directly attributable to a cost object.	Employee Salaries Across DCF (excluding DDS)
41033	DCF Info Services Staff ESD RU	Support of DCF functions, including PC's, networks, databases & services for ESD RU	Reach-Up Time Study
41034	DCF Info Services Staff ESD	Support of DCF functions, including PC's, networks, databases & services for ESD	Employees' Salaries Across Economic Services (including field staff)
41035	Central Computer Charges (CIT) for ACCESS/FAMIS	Data processing costs associated with ACCESS/FAMIS.	CPU's for Applicable Programs (Income Maintenance)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 3 cont'd:**  
**Information Technology**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41037	DCF Information Services Staff	Support of DCF functions, including PC's, networks, databases, and servers.	Employees' Salaries Across Field Staff (within Economic Services)
41038	DCF Info Services Staff ESD BPS	Support of DCF functions, including PC's, networks, databases & services for ESD BPS	Results of the Economic Assistance Time Study
41045	DCF Info Services Staff 3SQrs AD	Support of DCF functions, including PC's, networks, databases & services for 3SQrs AD	Direct to SNAP
41195	Aid to the Aged, Blind, and Disabled IT	General administrative expenses that are direct charged to AABD.	Direct to AABD
41210	LIHEAP Benefits Program Staff	Staff costs related to running the Home Heating Program.	Direct to Home Heating Program/LIHEAP
41310	RU - Employment Training IT	Provision of program activities and case management to Reach Up participants. This cost is matched by the State at 50%.	Direct to SNAP Employment and Training (cost matched by the State at 50%)
44100	OEO Administration IT	State funded portion of costs to oversee all OEO functions and provides supervision to office staff.	Direct to State General Funds
44240	DOE WX & WTF IT	Costs associated with salary and operations using both DOE WX & WTF funding	% of DOE WX compared to total expense.

**1. Cost Allocation Plan Guidance:**

<b>Vision Program Code</b>	<b>References</b>
38090 40106 41030 41033 41037 40070 41045 40105 40010 40075 40200 44240 41195 41210	41031 41035 41032 41034 41038 41025 40100 39600 40040 37511 44100 41310 40500 40370 OMB A-87 Attachment A, Sec C (1)(a) and Attachment B, Sec 6 and Sec 11

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**2. Plan Department 4:**

*Family Services*

**Nature and Extent of Services:** The Division of Family Services administers juvenile justice services, including the Woodside facility and administers child welfare services, including foster care and adoptive services. Detailed explanations of individual functions are included below.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37510	Juvenile Accountability Incentive Block Grant (JAIBG)	Grant expenditures associated with JAIBG.	Direct to JAIBG
37511	Juvenile Accountability Incentive Block Grant (JAIBG)	Admin Cost Associated with JAIBG.	Direct to JAIBG
37512	Juvenile Accountability Incentive Block Grant (JAIBG)	Interest earned on funds drawn in for JAIBG	Direct to JAIBG
37515	Balanced and Restorative Justice	Costs associated with Balanced and Restorative Justice	Direct to State Funded
37640	Sexual Assault Education and Prevention	Program related to prevention of sexual assault	Direct to VDH earmark funds they received in their PHHS Block Grant specific to the prevention of sexual assault
37675	Access and Visitation	Access and Visitation Program provides non-custodial parents with access and visitation to their children.	Direct to Title IV-D - Access and Visitation
37676	Access and Visitation - Administration	Administration costs for the Access and Visitation Program provides non-custodial parents with access & visitation to their children.	Direct to Title IV-D - Access and Visitation
37677	Supervised Visits	States grant providing non-custodial parents with access & visitation to their children in supervised environment.	Direct to Supervised Visits
40060	Emergency Services Unit Program	The Emergency Services unit provides emergency services at all times that a district office is not open. An 800 number hot line is staffed with social workers who attempt to resolve crises over the phone, using foster parents, sheriffs, and other community resources to manage particular situations.	Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>40065</b>	<b>Residential Licensing and Special Investigations Unit</b>	<b>Subset of Child Safety Unit, responsible for investigating allegations related to a child's placement in a residential setting and corresponding policy changes. The Residential Licensing and Special Investigation Unit licenses foster homes and residential programs, and conducts investigations of child abuse and neglect in all facilities regulated by the department.</b>	<b>Title IV-E &amp; Global Commitment Eligibility Rate (remainder to TANF, Woodside)</b>
<b>40070</b>	<b>Operations Manager and Staff</b>	<b>Supervisor and Staff within the System of Care Unit.</b>	<b>Title IV-E &amp; Global Commitment Eligibility Rate (remainder to TANF, Woodside)</b>
<b>40075</b>	<b>Family Services Deputy Commissioner's Office.</b>	<b>Costs Associated with the administration of the Division, including activities related to the Policy and Planning activities policy and Quality Assurance.</b>	<b>Employee Salaries Across Family Services (including Field Staff)</b>
<b>40085</b>	<b>Residential Programs and System of Care and Revenue Enhancement Unit</b>	<b>The Residential Services Unit oversees and supervises the residential placement system including the Woodside Facility. Activities include contract negotiation with residential service providers, placement consultation and coordinating interagency collaboration to provide comprehensive service packages for youth needing intensive services. The System of Care Unit oversees the contracted system of care, which includes foster care, kinship care, residential care, and family-based services. The Revenue Enhancement Unit prepares, executes and monitors all grants and contracts.</b>	<b>Title IV-E &amp; Global Commitment Eligibility Rate (remainder to TANF, Woodside)</b>
<b>40531</b>	<b>IV-E Eligibility Determination</b>	<b>Staff handle all aspect of determining children's eligibility for Title IV-E</b>	<b>Direct to Title IV-E</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40090	UVM Social Work Students	Social Worker Students participating in the University of Vermont program.	Direct to Title IV-E Training (75%) Is claimed using a blended eligibility rate of both adoption and IV-E children. State match to be provided by UVM.
40200	Woodside - Admin	Personal services and operating expenses directly associated with the operation of the Woodside Juvenile Treatment Facility.	Employees' salaries across Woodside
40210	Woodside – Treatment	Costs associated with the treatment services provided by the Woodside Juvenile Treatment Facility	Total Global Commitment eligible population compared to total population
40220	Woodside – Education	Costs associated with the education services provided by the Woodside Juvenile Treatment Facility	Direct to Woodside
40420	Extended Foster Care Support	Cost associated with extending foster care support past the age of 18.	Direct to State Funded
40425	Homeless Rural Youth	Federal grant to provide services for non-system homeless youth and youth aging out of foster care.	Direct to Homeless Rural Youth
40432	Relatives as Parents Program	Cost associated with increasing public awareness of relatives serving as caregivers.	Direct to Relatives as Parents
40434	OJP Youth Delinquency Prevention	Federal grant to fund sub-awards to schools and non-profits targeting youth delinquency prevention.	Direct to Earmarks
40436	2009 Congressional Earmark/ OJJP Council & CTF	Federal grants to community and state partners for delinquency prevention and early intervention programs.	Direct to Youth Crime Prevention.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40437	Title V Community Grants	OOJJP grants using Title V funding	Direct to JJDP
40438	Youth Crime Prevention	Cost associated with the Youth Crime Prevention Program	Direct to Youth Crime Prevention
40439	Youth Justice Services-Council Costs.	Cost associated with the Juvenile Justice Delinquency Prevention Grant	Direct to JJDP
40440	Youth Justice Services	Costs associated with the Youth Justice Delinquency Prevention Program.	Direct to JJDP
40443	2010 OJP Congressional Earmark	FY2010 Congressional Earmark Grant Program – community based delinquency prevention projects (OJJDP) 2010-JL-FY-0604	Direct to Earmarks
40500	Family Services General Fund	Payments to individuals and organizations not eligible for federal funding.	Direct to State Funded
40510	CAPTA	Costs associated with administration of CAPTA.	Direct to CAPTA (Child Abuse and Neglect)
40530.1	Family Services Title IV-E Maintenance Payments	Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, and transportation.	Direct to Title IV-E Foster Care Maintenance Payments
40530.2	Case Review Services/Foster Parent Recruitment	Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, and transportation.	Title IV-E Eligibility Rate
40530.12	Foster and Adoptive Parent Training	Title IV-E eligible program expenditures including Preparation of applicants for foster care and adoption for appropriately caring for children in foster care and on adoption subsidy.	Is claimed using a blended eligibility rate of both IV-E adoption and foster care, as applicants for foster care and adoption are trained together, with many applying for approval for both programs.
40530.3	Foster Parent Trainings	Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, and transportation.	Title IV-E Eligibility Rate (IV-E Training)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40530.5	Training UVM students in Social Worker studies (degree program)	Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, and transportation.	Direct to Title IV-E Foster Care Training (75%) Is claimed using a blended eligibility rate of both adoption and IV-E children. State match to be provided by UVM.
40530.6	Title IV-E Short Term Training	Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, and transportation.	Direct to Title IV-E – Training (‘09-55%)
40530.8	Subsidized Adoptions	Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation and other.	Direct to Title IV-E Foster Care Maintenance Payments
40535	Permanent Guardianship	Title IV-E Eligible Program expenditures for the Guardianship Assistance Program.	Direct to Permanent Guardianship
40550	Title IV-E Independent Living	Costs associated with administration of Independent Living program.	Direct to Title IV-E Independent Living
40555	Family Services - SSBG	Direct payments to foster parents and group homes.	Direct to SSBG
40560	Children’s Justice	Costs associated with administration of Children’s Justice Grant.	Direct to Children’s Justice Grant
40590	Family Preservation	Costs associated with Family Preservation Grant.	Direct to Family Preservation IV-B Part 2
40595	Safe Havens	To provide an opportunity for communities to support supervised visitation and safe exchange of children, in situations involving domestic violence, dating violence, child abuse, sexual assault, or stalking.	Direct to Safe Havens

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Vision Program Code	Plan Dept. Name	Description	Allocation Method
40610	Domestic Violence Unit	Costs associated with staff administering the Domestic Violence Grant.	Direct to Domestic Violence Grants
40612	Rape Prevention Block Grant	Costs associated with Rape Prevention Block Grant	Direct to Rape Prevention Block Grant
40629	Juvenile Accountability Incentive Block Grant	Costs associated with Juvenile Accountability Incentive Block Grant.	Direct to Juvenile Accountability Incentive Block Grant.
40631	Family Services - TANF	Direct payments to foster parents and group homes.	Direct to TANF
40700	Family Services	Direct payments to group homes and treatment providers.	Direct to Global Commitment
40701	Global Commitment	Cost associated with Medicaid administration.	Direct to Global Commitment
40702	MCO Investment Medical Sub Care	Costs directly associated with sub care treatment	Direct to MCO
40703	MCO Investments Lund Residential	MCO costs related to Lund residential services	Direct to MCO
40710	G/C Performance Contracts	Cost associated with Shaken Baby performance contracts	Direct to MCO
40712	VCRHYP Performance Grants	Programmatic expenses associated with VT Coalition of Runaway Homeless Youth Program	Due To Global Commitment
41602	SCHIP Costs	SCHIP eligible costs in the VCHRYP program	Direct to SCHIP

*Cost Allocation Plan Guidance:*

Vision Program Code	References
37510 37677 40090 40434 40500 40595 40702 37511 40060 40200 40436 40510 40610 40703 37512 40065 40210 40437 40530 40612 40710 37515 40070 40220 40438 40550 40629 40712 37640 40075 40420 40439 40555 40631 37675 40425 40440 40560 40700 37676 40085 40432 40443 40590 40701 41602 40535	OMB A-87, Attachment A, Section C 1(a) & Attachment B, Sections 11 and 40

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 5:****Economic Services**

**Nature and Extent of Services:** The Economic Services Division manages the Food Stamps program, Welfare-to-Work (Reach Up), Home Heating Assistance, General and Emergency Assistance, the Essential Person program (AABD), and Health Care eligibility (G/C and SCHIP).

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
39725	WIC- General Administration	Those costs associated with production and distribution of WIC EBT cards including staff costs and vendor related charges.	Direct to WIC - General Admin
39705	Vermont Spay Neuter Incentive Program (VSNIP)	Incentive program to encourage sterilization of dogs and cats in order to reduce the population of unwanted companion animals and protect public health and safety.	Direct to VSNIP
41631	GEARWAR	Programmatic Costs	Direct to General Fund
40705	Health Care – Citizenship	Costs associated with verifying citizenship of applicants for health care eligibility.	Direct to Global Commitment
40370	Emergency Food Assistance (TEFAP)	Administrative costs associated with food purchases through USDA for shelters.	Direct to the Emergency Food Assistance Program (TEFAP)
40961	ARRA – TANF Non-Recurrent	Stimulus funds to support TANF – Non-recurring	Direct to ARRA - TANF- Non-recurrent
40962	ARRA – FSCO - SNAP	Stimulus funds to support SNAP Cash Out program	20.02% Eligible Costs
40963	ARRA – TANF Basic Assistance	Stimulus funds to support basic assistance program	Direct to ARRA TANF – Basic Assistance

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>40964</b>	<b>ARRA – Subsidized Employment</b>	<b>Stimulus funds to subsidize employment in the Reach Up program</b>	<b>Direct to Stimulus Funds.</b>
<b>41015</b>	<b>Economic Services Deputy Commissioner and Staff</b>	<b>Economic Services Deputy Commissioner is responsible for overseeing all of the Economic Services Division activities. Includes regulatory, planning, and policy unit conducts legal research and analysis, as well as policy, regulatory and statutory development work for all Economic Services programs.</b>	<b>Employee Salaries Across Economic Services (including field staff)</b>
<b>41016</b>	<b>Economics Benefits Director</b>	<b>Responsible for overall program administration and supervises the Benefit Programs Administrator, the Health care Programs Administrator, and the Fuel Assistance Program Chief. Director serves as project chair for major program initiatives or changes, and networks with other divisions, departments, agencies and advocates to develop and deliver integrated benefits to clients.</b>	<b>Employee Salaries related to Economic Services Programs.</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41073	Member card Replacement (personnel & HP Contract) DCF \$4,500 gross	Personnel costs and efforts associated with removing the SSN off our member cards and then reissuance of cards. (Project ends 12/31/10)	Direct to Member Card Replacement
41075	Health Care Policy Analyst	Health Care Policy Analyst who assists the Economic Services policy, Planning, and Evaluation Director in planning, development and continuing assessment of Health Care programs.	Percentage of Global Commitment, SCHIP & Catamount Eligible
41110	General Admin - Global Commitment/SCHIP/Catamount	Costs related to SCHIP, Global Commitment and Catamount premiums and other related administrative costs.	Percentage Global Commitment, SCHIP & Catamount Eligible
41141	Long Term Care	Costs related to processing long term care eligibility including Operations and quality assurance staff	Direct to Global Commitment
41142	Catamount Health	Health care cost program	Percentage of G/C eligible as compared to total Catamount enrollment
41143	PERM (Payment Error Rate Measurement)	This is cost associated with complying with the federal mandate.	Direct to Global Commitment

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Vision Program Code	Plan Dept. Name	Description	Allocation Method
41155	Reach Up Operations	Welfare-to-Work Director and staff who administer the Reach Up program, including the case management and financial assistance components of Reach Up. Director acts as project manager for such endeavors as state welfare reform, TANF reauthorization, and program redesign.	Direct to TANF and Employment & Training
41165	Quality Assurance Supervisors/Specialists	Staff, which conducts quality control, works involving TANF, Food Stamp, Global Commitment and Catamount programs. Perform detail analysis of sample cases to insure actions were valid. Analyzes delivery and payment system for potential problems and recommends improvement.	Actual cases reviewed by quarter for Food Stamps, TANF, & Global Commitment
41170	Quality Control Program Chief/Director	Economic Benefits Director supervises Fraud & Quality Assurance Units.	Staff supervised within the fraud unit and the quality assurance unit

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41180</b>	<b>Quality Control/Treasury Offset Program Staff</b>	<b>Staff who is responsible for quality control work involving TANF, SNAP, Global Commitment and Catamount programs. Perform detail analysis of sample cases to insure actions were valid and work on the Treasury Offset Program – SNAP.</b>	<b>Hours per Quarter for TANF, SNAP, &amp; Global Commitment</b>
<b>41181</b>	<b>SNAP New Investment</b>	<b>To track the expense for the SNAP new investment project</b>	<b>Direct to State Fund.</b>
<b>41185</b>	<b>Financial Eligibility Specialists/Interviewers/Call Center Agents</b>	<b>District office personnel who interview and input data on new applications to establish eligibility and determine continuing eligibility of clients by review of applications, interviews, correspondence and other sources for the TANF, LIHEAP, Global Commitment, General Fund, AABD and SNAP and Catamount programs.</b>	<b>Results of the Economic Assistance time study</b>
<b>41195</b>	<b>Aid to the Aged, Blind, and Disabled</b>	<b>General administrative expenses that are direct charged to AABD.</b>	<b>Direct to AABD</b>
<b>41210</b>	<b>LIHEAP Benefits Program Staff</b>	<b>Staff costs related to running the Home Heating Program.</b>	<b>Direct to Home Heating Program/LIHEAP</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41211	Operations Oversight and ADPC Staff	Benefit Programs Support Staff provides training and administrative support for all Economic Services programs.	Employee Salaries Across Economic Services (including field services)
41212	Benefit Programs Administrator	Supervises Home Heating Staff, Benefit Programs Support Staff and Systems Operations – Specialists.	Employee Salaries Across Heating
41220	SNAP Medical Exams	Medical exams requested by Field Operations Staff as part of eligibility determination.	Direct to SNAP Administration
41240	Town Services Officers	Department appointed personnel in towns throughout the state who are compensated for time and expenses. Officers may issue vendor authorizations (purchase orders) to clients with immediate need, may transport clients to and from emergency services.	Percentage of EA and GA dollars spent (allocated to TANF and state general fund)
41245	State Supplement Program – SSA Admin	Cost of processing of SSI checks as charged by the Social Security Administration.	Direct to AABD
41250	EBT Financial Services	Contract costs for EBT financial services related directly to SNAP.	Direct to SNAP Admin
41252	EBT Farmers MKT	For POS equipment for farmers MKT	Direct to EBT Farmers MKT
41255	EBT Financial Services	Contract costs for the EBT financial services related directly to TANF.	Direct to TANF

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



Vision Program Code	Plan Dept. Name	Description	Allocation Method
41261	EBT Financial Administrator	Acts as deputy to EBT project director in management of EBT contract. Coordinates benefit delivery and develops procedures for Field Operations Staff. Provides customer services to advocacy groups, the banking community, grocery stores, and other groups. Collaboratively trains new workers and EBT liaisons.	Direct to TANF, SNAP Benefits Issued, and WIC (Based on Case Count Statistics from Monthly Invoice)
41270	TANF General Administration	General administrative costs to be direct charged to TANF, including but not limited to expenditures related to meetings to be directly billed.	Direct to TANF
41271	Reach Up Policy Analyst	Policy analyst who specializes in TANF and/or RU planning, development, and assessment.	Direct to TANF
41275	Fraud Investigators	Fraud Investigators and Staff investigate possible client fraud in all ESD programs assists attorney general and state attorney offices in preparation and prosecution of civil and criminal cases.	Quarterly percentage of fraud investigations

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41290</b>	<b>General Assistance Administration</b>	<b>General administrative costs related to providing GA services.</b>	<b>Percentage of EA and GA dollars spent (allocated to TANF and state general fund)</b>
<b>41300</b>	<b>Home Heating General Administration</b>	<b>General administrative costs to be direct charged to Home Heating, including but not limited to specific project related expenditures to be direct charges.</b>	<b>Direct to Home Heating Program/LIHEAP</b>
<b>41305</b>	<b>SNAP General Administration</b>	<b>General administrative costs to be direct charged to SNAP benefits, including but not limited to, specific project related expenditures to be direct charged.</b>	<b>Direct to SNAP Administration</b>
<b>41306</b>	<b>SNAP Program Coordinator</b>	<b>Provides coordination and administrative services to Nutrition Education and the Farm to Family programs.</b>	<b>Food &amp; Nutrition Program allocations</b>
<b>41313</b>	<b>SNAP Participation – 2007</b>	<b>Increase participation in SNAP program and improve customer service.</b>	<b>Direct to SNAP Participation Program</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41314	Job Retention Support Services <90 days	Support payments for job retention up to the first 90 days of employment following participation in an employment and training activity, as authorized by Food, Conservation & Energy Act of 2008	Direct to SNAP Employment & Training
41340	Reach Up Transportation	Administrative costs associated with program for used car donation.	Direct to TANF
41345	SNAP Employment and Training Transportation	Costs related to transportation to related services.	Direct to SNAP Employment & Training
41365	Farm to Family Administration	Administrative costs associated with vouchers used at farmers markets.	Direct to Farm to Family Administration
41401	Reach Up Basic Assistance/Shelter	Costs associated with Reach Up benefits.	Direct to TANF
41411	Reach Up (Unemployed Parents)	Direct cost of cash assistance payments.	Direct to State Funded
41415	RU Support Services – State Only	Direct cost of cash assistance payments	Direct to State Funded
41417	Reach Up Basic Assistance/SSF(Solely State Funded)	Direct cost of cash assistance payments	Direct to State Funded
41419	RU Lund – PNMI/SA LUND GC Cost	Treatment cost paid to the Lund Center	Direct to G/C
41421	Reach Up Program Costs	Direct cost of cash assistance payments.	Direct to TANF
41431	Reach Up Support Services	Direct cost of cash assistance payments.	Direct to TANF
41432	Reach First	Assistance paid to a family the first four months of Reach Up eligibility	Direct to TANF

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41433	Reach Ahead	Food assistance for client coming off Reach Up and going to work.	Direct to TANF-MOE
41451	Supportive Services – Medical Transportation	Direct cost of cash assistance payments.	Direct to TANF
41456	Getting Ready for Work	Direct cost of cash assistance payments.	Direct to TANF
41458	Disposals	Direct cost of cash assistance payments.	Direct to State Funded
41461	Single Parent – State Only	Direct cost of cash assistance payments.	Direct to State Funded
41462	Two Parents – State Only	Direct cost of cash assistance payments.	Direct to State Funded
41467	Two Parents over 60 month limit	Payments paid by State after the 60 month limit	Direct to State Funded
41468	Single Parent over 60 month limit	Payments paid by State after the 60 month limit	Direct to State Funded
41471	Absence and Incapacity	Direct cost of cash assistance payments.	Direct to TANF
41472	Cash Assistance Payments (Post-Secondary Education)	Direct cost of cash assistance payments.	Direct to State Funded
41473	Incapacity	Direct cost of cash assistance payments.	Direct to TANF
41475	Job Retention	Direct cost of cash assistance payments.	Direct to TANF
41476	Two Parents Not Meeting Work Requirements	Direct cost of cash assistance payments.	Direct to TANF
41477	Social Rehab Services	Direct cost of cash assistance payments.	Direct to TANF
41478	Childcare/Caretaker Deferment	Direct cost of cash assistance payments.	Direct to State Funded
41479	Single Parent Working	Direct cost of cash assistance payments.	Direct to TANF
41480	Single Parent not Meeting Work	Direct cost of cash assistance payments.	Direct to TANF
41481	Cash Assistance Payments (minor parent not living with parent)	Direct cost of cash assistance payments.	Direct to State Funded

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41484	Absence	Direct cost of cash assistance payments.	Direct to TANF
41485	Two Parent Working	Direct cost of cash assistance payments.	Direct to TANF
41499	MMIS – TA	Conversations or work that is related to MMIS Technical Assistance efforts	Direct to MMIS-TA
41501	State Supplement Program – AABD-EP-SSI	AABD-Essential Persons-SSI payments	Direct to Global Commitment- MCO
41502	State Supplement Program – AABD-SSA	AABD – State Supplement benefits – SSI payments	Direct to AABD
41532	Home Heating Subsidies – Supplement Fuel Benefits	Amount of direct assistance to families.	Direct to Home Heating Program/LIHEAP
41533	Home Heating Subsidies – Emergency Fuel Benefits	Amount of direct assistance to families.	Direct to Home Heating Program/LIHEAP
41542	SNAP Payments – Over 65 no SSI	Direct cost of food stamps given to eligible clients.	Direct to SNAP Cashout
41544	SNAP Payments – Over 65 with SSI	Direct cost of food stamps given to eligible clients.	Direct to SNAP Cashout
41546	SNAP Payments – With SSI Disability	Direct cost of food stamps given to eligible clients.	Direct to SNAP Cashout
41555	SNAP State Exchange	Travel expenditures for meetings and conferences relating to the administration of the Food Stamps Program.	Direct to SNAP State Exchange
41607	IEWS - Eligibility and Enrollment	Staff work related to Health Enterprise Eligibility and Enrollment DDI and IV&V	Per Approved Health Enterprise IAPD

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41609	<b>IEWS - Eligibility and Enrollment - Contractual</b>	<b>Contractual Expenses related to Health Enterprise Eligibility and Enrollment DDI and IV&amp;V</b>	<b>Per Approved Health Enterprise IAPD</b>
41618	<b>SOA Infrastructure Components – Staff</b>	<b>Staff Expenses related to Health Enterprise shared component design and development</b>	<b>Per Approved Health Enterprise IAPD</b>
41639	<b>ICD-10 - Contractual Costs</b>	<b>Contractor expenses - associated with the ICD-10 planning</b>	<b>Direct to ICD-10 IAPD</b>
41640	<b>ICD-10 Staff Costs</b>	<b>Conversations or work associated with the ICD-10 planning</b>	<b>Direct to ICD-10 IAPD</b>
41642	<b>MES - DDI Staff</b>	<b>Staff work associated with the development of the MES</b>	<b>Per Approved Health Enterprise IAPD</b>
41696	<b>Exchange level 1 Non-IT Staff and Operating</b>	<b>Non-IT Salary and Operating costs related to the Level I OCIO Exchange Grant</b>	<b>Per Approved Health Enterprise IAPD</b>
41701	<b>Exchange level 2 IT Staff and Operating</b>	<b>IT Salary and Operating costs related to the Level 2 OCIO Exchange Grant</b>	<b>Per Approved Health Enterprise IAPD</b>
41704	<b>Exchange level 2 Non-IT Staff and Operating</b>	<b>Non-IT Salary and Operating costs related to the Level 2 OCIO Exchange Grant</b>	<b>Per Approved Health Enterprise IAPD</b>
41712	<b>General Assistance – Direct Payments for General Assistance</b>	<b>Direct costs related to providing GA services.</b>	<b>Direct to State Funded</b>
41714	<b>General Assistance –Direct Payments for a household with children</b>	<b>Direct costs related to providing GA services.</b>	<b>Direct to State Funded</b>
41716	<b>General Assistance – Direct payments for pending SSI cases</b>	<b>Direct costs related to providing GA services.</b>	<b>Direct to State Funded</b>
41721	<b>GA Emergency Assistance</b>	<b>Direct costs related to providing Emergency Assistance</b>	<b>Direct to TANF</b>
41722	<b>GA/GA Dental</b>	<b>Direct costs related to providing Emergency Assistance</b>	<b>Direct to MCO Investments</b>
41726	<b>GA Pharmacy</b>	<b>Direct costs related to providing Emergency Assistance</b>	<b>Direct to MCO Investments</b>
41727	<b>GA Abortions</b>	<b>Direct costs related to providing Emergency Assistance</b>	<b>Direct to State Funded</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Vision Program Code	Plan Dept. Name	Description	Allocation Method
41728	GA Vision/Physician	Direct costs related to providing Emergency Assistance	Direct to MCO Investments
41777	Economic Services General Fund	Miscellaneous non-federal expenditures within Economic Services.	Direct to State Funded
44325 44235	VT Gas program	To track expenses for the VT GAS Utility discount program	Direct to VT Gas Utility Eligibility
44345	Utility Eligibility	To track GMP expenditures in administrative appropriation	Direct to Utility Eligibility

*Cost Allocation Plan Guidance:*

Vision Program Code	References
39705 41271 41476	OMB A-87 Attachment A, Sec C (1)(a) and Attachment B, Sec 1, 9, 11
39725 41275 41477	
40370 41290 41478	
40961 41300 41479	
40962 41305 41480	
40963 41306 41481	
40705 41313 41484	
41015 41314 41485	
41016 41340 41499	
41073 41345 41501	
41075 41346 41502	
41110 41365 41532	
41141 41401 41533	
41142 41411 41542	
41143 41415 41544	
41155 41417 41546	
41165 41419 41555	
41170 41421 41607	
41180 41431 41631	
41185 41432 41712	
41195 41433 41714	
41210 41451 41716	
41211 41456 41721	
41212 41458 41722	
41220 41461 41726	
41240 41462 41727	
41245 41467 41728	
41250 41468 44345	
41252 41471 41181	
41255 41472 41777	
41261 41473 41639	
41270 41475 41640	
41642 41696 44325	
41701 44235	
41609	
41704	

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 6:**

*Office of General Counsel*

**Nature and Extent of Services: Legal Staff including General Counsel, Staff, and Staff Attorneys for specific DCF functions.**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37101	Privacy Officer	Responsible to review complaints concerning participants, providers, grantees, and contractors related to the confidentiality of health information.	Direct to Global Commitment
40441	DCF Special Assistant	Responsibilities include overall oversight of DCF's legislative agenda; coordination and management of various legal units within DCF and in the Attorney General's Office; coordination with judiciary; establishment of policy directives regarding court improvement efforts; supervision of complex litigation and defense of claims against DCF; oversight of negotiation of contracts and grants; oversight of DCF's diverse regulatory responsibilities and rulemaking. Responsibilities also extend to more general management of DCF affairs, including budgeting process, personnel issues, staff coordination, HRD, coordination between DCF divisions, liaison to AHS, Commissioner-level complaints, departmental and agency policy development and execution.	The percentage of salaries by program in DCF compared to the total of all salaries in DCF (not including fringe).

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40442	DCF FSD Legal Staff	Lawyers and support staff responsible for working with the court system on behalf of children on DCF's caseload.	Title IV-E Eligibility Rate
41295	Legal Division for Economic Services	Staff of Attorneys law clerk and secretarial staff who represent the department in lawsuits and other legal matter especially regarding interpretation of Federal regulations pertaining to client rights. Also, review department contractual agreements.	Results of Legal Time Study

*Cost Allocation Plan Guidance:*

<b>Vision Program Code</b>	<b>References</b>
37101 40442 40441 41295	OMB A-87, Attachment B, Sec. 11 & Sec. 14 (b)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 7:**

**Field Operations**

**Nature and Extent of Services: Out stationed services provided by DCF.**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40010	Social Workers	Costs directly associated with social workers. Social workers provide direct services to child welfare clients including case management, child abuse/neglect investigations, and eligibility determination.	Results of Family Services time study
40015	Assessment & Ongoing Social Worker District Supervisors	Supervisory personnel who plan, assign and review the work of district office Assessment & Ongoing Social Workers.	Results of the Family Services Time Study
40020	Assessment Social Workers	Costs directly associated with assessment social workers. Assessment social workers respond to allegations of abuse or neglect, addressing immediate child safety concerns, and assessing the family's need for medical, behavior, social and other services to assure safe parenting.	Results of Family Services time study
40025	Centralized Intake Unit	Social workers in centralized intake receive and document calls from mandated reporters and other citizens who are concerned that a child is being abused or neglected. Supervisory staff makes the initial decision about whether to assign district office social workers to conduct an assessment.	Direct to TANF
40030	Resource Coordinators Move from Family Services	Resource Coordinators recruit and train foster parents and other residential service providers and facilitate the placement of children in those settings.	Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>40040</b>	<b>Adoption &amp; Guardianship Services</b>	<b>The Adoption Unit manages all aspects of the adoption and guardianship subsidy programs, including post-adoption services.</b>	<b>Title IV-E Adoption Assistance Rate and IV-E Guardianship Rate</b>
<b>40050</b>	<b>Family Services District Directors and Administrative Staff</b>	<b>All administrative costs (personal service costs and operating expenses) incurred in the district office other than those associated with social workers, resource coordinators and adoption workers. The District Director and Staff manage the office and provide administrative support and supervision to the field staff.</b>	<b>Employee Salaries Across Field Staff (within Family Services)</b>
<b>40400</b>	<b>FSD Act 1</b>	<b>Sexual Violence and Abuse Prevention activity per S.13</b>	<b>Direct to State Funded</b>
<b>41006</b>	<b>Consumer Involvement</b>	<b>Stipends and associated costs to ensure consumer involvement in the functions of the AHS.</b>	<b>Employee Salaries of all staff at Field Offices</b>
<b>41150</b>	<b>Health Care Operations</b>	<b>Provides health care eligibility for Health Access programs.</b>	<b>Percentage of SCHIP &amp; Catamount eligible as compared to the total G/C eligible</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41190	Regional Managers/Economic Resource System & Economic Services Supervisors	District office supervisory personnel, who plan, assign and review the work of eligibility specialists.	Results of the Economic Assistance time study
41200	Economic Services District Directors and Support Staff	District office directors who manage the day-to-day operations of welfare district offices. Responsible for implementation of all assigned welfare programs according to Federal and State regulations and procedures. Cost center includes Case Aides and supporting clerical staff.	Employee Salaries Across Field Staff (within Economic Services)
41280	Reach Up Case Managers	District office self-support personnel for TANF and Employment and Training programs who provide support services, counseling and job search assistance to clients seeking employment opportunities.	Reach Up Time Study
41285	Reach Up Case Manager Supervisors	District office supervisory personnel, who plan, assign and review the work of social workers for TANF and Employment and Training programs.	Reach Up Time Study

*Cost Allocation Plan Guidance:*

<b>Vision Program Code</b>	<b>References</b>
40010 41002 40015 40020 41003 40025 41006 40030 41150 40040 41185 40050 41190 41200 40400 41280 41285	OMB A-87, Attachment A, Sec C (1)(a) and Attachment B, Sec 11 and 9

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 8:*****Office of Child Support***

**Nature and Extent of Services:** The Office of Child Support (OCS) establishes and enforces child support court orders, locates missing parents, and ensures the steady flow of economic support to Vermont children.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>38010</b>	<b>Administration</b>	<b>Unit is responsible for the entire Vermont Office of Child Support program. This includes providing support for all facets of child support operations, including policy and procedures; developing goals, standards, and performance measures; technological functions; business functions; training; administrative support; legal supervision; legislation; strategic planning; and management.</b>	<b>Employee Salaries Across Office of Child Support (OCS)</b>
<b>38020</b>	<b>Cash Receipts Unit</b>	<b>This unit performs child support accounting functions as well as billing activities (bills are sent to non-custodial parents and employers) and the maintenance of arrearage information on child support cases. This unit performs all payment receipting and disbursement functions for public assistance and non-public assistance cases.</b>	<b>IV-D Cases vs. Non-IV-D Cases</b>
<b>38030</b>	<b>Customer Service Unit</b>	<b>This unit responds to telephone inquiries involving child support and researches complex issues for customers calling OCS. This allows field operations staff time to be attentive to the establishment, modification, and the enforcement functions for customers in the continued process of collecting child support for families.</b>	<b>IV-D Customer Contacts vs. Non-IV-D Customer Contacts</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>38040</b>	<b>Records Center</b>	<b>This unit receives all court orders and enters data from the court order into the mainframe computer. All applications for child support services come to this unit and this data is entered as well. The unit stores and controls all case files and hard copy documents for legal actions in Field Operations, Cash Receipts, Registry, Customer Service, Interstate, Intercept, Legal, and the Administration Units.</b>	<b>IV-D Cases vs. Non-IV-D Cases</b>
<b>38050</b>	<b>Program Development</b>	<b>This unit is responsible for the planning, coordination, and development of policies, procedures, and state plan for the IV-D program.</b>	<b>Direct to Title IV-D</b>
<b>38060</b>	<b>Interstate Central Registry</b>	<b>This unit provides support for processing all actions necessary to establish, modify, and enforce child support orders when the custodial or non-custodial parent is out of state. The unit also houses the Parent Locator function that finds absent parents. The Parent Locator service searches and locates parents in order to secure child support for families.</b>	<b>Direct to Title IV-D</b>
<b>38070</b>	<b>Legal</b>	<b>Costs incurred by the legal unit including sheriff services, recording fees, etc. This cost pool does not include family court cost, staff attorney or paralegal positions.</b>	<b>Direct to Title IV-D</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>38075</b>	<b>Family Court Costs</b>	<b>The Office of Child Support will reimburse the Court Administrators Office for total IV-D expenditures less applicable court fees. Reimbursement will be based on the number of MPRS in a county and at the individual rates calculated for each county.</b>	<b>Direct to Title IV-D</b>
<b>38080</b>	<b>Paternity Testing</b>	<b>Costs in this cost pool are for Contracts with private laboratories for genetic and other blood tests for use in paternity determination.</b>	<b>Direct to Title IV-D</b>
<b>38100</b>	<b>Intercept Unit</b>	<b>This unit is responsible for administrative child support enforcement remedies. Such remedies include liens, administrative wage withholding, administrative arrears increase, bank match, Federal and State Tax Offset, and license suspension.</b>	<b>Direct to Title IV-D</b>
<b>38110</b>	<b>Training</b>	<b>This unit includes the Training Coordinator who provides court, computer, policy, procedure, and other IV-D training opportunities for OCS staff. In addition, training related travel and overtime will be charged to this unit during employee training.</b>	<b>Direct to Title IV-D</b>
<b>38140</b>	<b>Enhanced Funding APD</b>	<b>Advanced Funding costs per approved APDs.</b>	<b>Direct to Enhanced Funding APD</b>
<b>38150</b>	<b>Employer Services Unit</b>	<b>This unit acts as a liaison between OCS and Vermont employer providing customer services directly to employers regarding availability of health insurance, wages withholding garnishments and new hire reporting</b>	<b>Direct to IV-D</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>38210</b>	<b>OCS Regional Director and Staff</b>	<b>These units establish, modify, and enforce child support orders for TANF cases and in instances where the custodial parent has applied for OCS services.</b>	<b>Direct to Title IV-D</b>

*Cost Allocation Plan Guidance:*

<b>Vision Program Code</b>	<b>References</b>
<b>38010 38150 38030 38210 38020 38040 38050 38060 38080 38100 38140</b>	<b>OMB A-87, Attachment A, Sec C (1)(a) and Attachment B, Sections 1, 6, 11, and 14</b>
<b>38070, 38075</b>	<b>OMB A-87, Attachment B, Sec. 11 &amp; Sec 14 (b)</b>
<b>38110</b>	<b>OMB A-87, Attachment A, Sec C (1) (a) &amp; Attachment B, Sec 11 &amp; Sec 40.</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Plan Department 9:****Office of Economic Opportunity**

**Nature and Extent of Services:** This office seeks to increase the self-sufficiency of Vermonters and strengthen Vermont communities. OEO provides program and grants management, resource identification and development, training, technical assistance, and advocacy for community-based organizations in a manner that fosters creativity and innovation.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40438	HUD Homeless – Economic Development Initiative	Costs associated with the HUD Homeless Grant	Direct to Earmarks
40957	ARRA - CSBG	Stimulus funds to support program.	Direct to ARRA-CSBG
40958	ARRA – HPRP (ESG)	Stimulus funds to support program.	Direct to ARRA - HPRP
40959	ARRA – DOE Weatherization	Stimulus funds to support program.	Direct to ARRA - Weatherization
40960	ARRA – DOE Weatherization T& TA	Stimulus funds to support program training & technical assistance.	Direct to ARRA – Weatherization T&TA
40965	ARRA – DOE Weatherization – SERC	ARRA funds for weatherization related to the sustainable energy resources for consumers grant.	Direct to ARRA DOE Weatherization SERC
40967	FEMA	This grant will be used to assist victims of Tropical Storm Irene through the provision of long-term disaster case management services.	Direct to FEMA
41729	C4C Community Initiative – HOPE & GA Front Door Grants	Direct Costs related to providing Emergency Assistance	Direct to MCO Investments
44100	OEO Administration	State funded portion of costs to oversee all OEO functions and provides supervision to office staff.	Direct to State General Funds
44200	Weatherization	State funded portion statewide program that works to reduce energy costs for low-income families, particularly for the elderly, people with disabilities, & children.	Direct to Weatherization (state funded)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
44210	DOE Weatherization	Federal funded portion statewide program that works to reduce energy costs for low-income families, particularly for the elderly, people with disabilities, & children.	Direct to Weatherization (federally funded)
44220	Emergency Heating System Grant Program	Special (State) funds, provides resources to allow the replacement and repair of unsafe heating systems.	Direct to Weatherization (state funded)
44240	DOE WX & WTF	Costs associated with salary and operations using both DOE WX & WTF funding	% of DOE WX compared to total expense.
44250	GMP Weatherization	Provide Low-Income Weatherization services to residents of the "CVPS Legacy Area"	Direct to GMP Weatherization OEO
44300	Community Services (CSBG Discretionary)	Federal funds-The primary goal is to eliminate poverty and provide training and technical assistance.	Direct to CSBG
44305	Community Services Block Grant (CSBG) Administration	Administrative costs associated with CSBG.	Direct to CSBG
44310	Community Services Block Grant (CSBG)	Federal funded, with a goal to eliminate poverty. Funds are used to provide a range of services and activities having measurable and potentially major impact on causes of poverty in the community or those areas of the community where poverty is a particularly acute problem.	Direct to CSBG

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
44340	LIHEAP Outreach	To provide outreach activities for the Fuel Assistance program to include public information on the fuel program, transportation and referral activities to local Fuel Assistance program offices to assure access to program benefits.	Direct to Home Heating Program/LIHEAP
44350	Individual Development Account (IDA)	State funded, to provide financial literacy training and matched savings accounts for low-income Vermonters seeking home ownership, further education or to start their own business.	Direct to IDA
44450	Homeless Assistance	State funded for the homeless and Emergency Shelter Grant	Direct to State Funded
44460	Emergency Solutions Program	Federal and state funded, provides funds for operating expenses of brick and mortar shelters and supportive services for the homeless and those at risk of homelessness.	Direct to Emergency Solutions Program
44461	HUD Operations	Operations cost associated with the HUD Grant	Direct to Emergency Solutions Program
44462	HUD Essential Social Services	Social Services cost associated with the HUD Grant	Direct to Emergency Solutions Program
44463	HUD Prevention	Prevention cost associated with the HUD Grant	Direct to Emergency Solutions Program
44464	HUD Rapid Re-Housing	Rapid Re-Housing cost association with the HUD grant.	Direct to Emergency Solutions Program

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Vision Program Code	Plan Dept. Name	Description	Allocation Method
44600	Job Start T & TA	State funded to provide training, education, advice and other help to lower income people interested in starting maintaining, or expanding small businesses. The program is designed to help participants assess the feasibility of their ideas, develop business plans, acquire appropriate skills, and secure necessary financing from Job Start or other sources.	Direct to Job Start Program

*Cost Allocation Plan Guidance:*

Vision Program Code	References
40438 44340 40957 44350 40958 44450 40959 44460 40960 44600 41729 44461 40965 44462 40967 44463 44100 44464 44200 44250 44210 44220 44230 44240 44300 44305 44310	OMB A-87, Attachment A, Sec C (1)(a) and Attachment B, Sections 1, 11

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 10:*****Disability Determination Services***

**Nature and Extent of Services:** The division consists of professional disability examiners who work with part-time medical doctors representing a number of medical specialties. These professionals are supported by case clericals and an administrative unit. Besides salaries, principal expenditures are fees to pay for evidence from applicant's treating sources and fees for consultative medical examinations arranged by the DDS with doctors around the state when critical medical evidence is not available from treating sources.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>40225</b>	<b>Disability Determinations Director and Staff</b>	<b>Oversees all professional disability examiners who work with part-time medical doctors representing a number of medical specialties. Also oversees their support staff, which consists of case clericals and an administrative unit.</b>	<b>Direct to Social Security</b>
<b>40226</b>	<b>DD Clerical</b>	<b>Administrative costs (personal service costs and operating expenses) of the clerical unit that provides supports to the Director, Claims Examiners and Adjudicators of the Disability Determination Services Unit.</b>	<b>Direct to Social Security</b>
<b>40227</b>	<b>DD Examiners</b>	<b>DDS collects medical and vocational evidence on each applicant sufficient to apply the above definition, interpreted by the Social Security Administration policy manual.</b>	<b>Direct to Social Security</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
40228	DD – Medical Consultants	Cost of contracted staff to conduct disability determinations.	Direct to Social Security
40229	DD Information Technology	Technology supports specifically related to DDS.	Direct to Social Security IT
41100	DDS Medical Exams	Review of medical evidence records necessary for Global Commitment eligibility determinations.	Direct to Social Security

*Cost Allocation Plan Guidance:*

<b>Vision Program Code</b>	<b>References</b>
40225 40226 40227 40228 41100	OMB A-87, Attachment A, Sec C (1)(a) and Attachment B, Section 9, 11
40229	OMB A-87, Attachment A, Sec C (1)(a) and Attachment B, Sec 6 and Sec 11

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 11:****Child Development****Nature and Extent of Services: Efforts related to childcare activities in the State of Vermont.**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37540	Building Bright Futures Direct Services (formerly Success by Six Program)	Costs for direct services to Building Bright Futures Program	Direct to Building Bright Futures Direct Services
37560	Parent Child Centers	Costs associated with Parent Child Centers.	Direct to State Funded
37660	Children's Trust Fund Grant	Costs associated with Children's Trust Fund Grant.	Direct to Children's Trust Fund Grant
37661	Children's Trust Fund Grant/JJDP	Costs associated with Children's Trust Fund Grant but charged to JJDP grants.	Direct to JJDP
37662	Children's Trust Fund Grant/Tax Check	Costs associated with Children's Trust Fund Grant/Tax Check Off.	Direct to Children's Trust Fund Grant
37672	Pregnancy Assistance	Support for pregnant and parenting teens	Direct to Teen Parenting Grant
37670	Head Start Collaboration	To promote school readiness by enhancing the social and cognitive development of low-income children, including children on federally recognized reservations and children of migratory farm workers.	Direct to Head Start Collaborative Grant
39600	Family Infant and Toddler Program	Programmatic Costs associated with the Infant and Toddler Program.	Direct to Family Infant and Toddler Program
39601	Family Infant and Toddler Program – Admin Costs	Administrative Costs associated with the Infant and Toddler Program.	Direct to Global Commitment

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
39750.1	Nursing and Family Support (NFS) – SPMP	Staff costs associated with administering the Nursing and Family Support (NFS) program for skilled medical professionals.	Direct to Global Commitment
39750.2	Nursing and Family Support (NFS) Grant	Programmatic Costs associated with the Nursing and Family Support (NFS) Program.	Direct to Global Commitment
39751	Nursing and Family Support (NFS) – Non-SPMP	Staff costs associated with administering the Nursing and Family Support (NFS) program.	Direct to Global Commitment
39763	Early Childhood Comp Systems (ECCS)	Federal funded early childhood program.	Direct to ECCS
40100	Child Development Division Staff	Personal services and operating expenses associated with Child Care Services Division Staff, including Deputy Commissioner, whose activities are defined as administrative by the Child Care and Development Fund regulations. This includes Division Director, Program Supervisors, Program Monitors, and clerical and administrative support for the childcare program. Also includes the Assistant Attorney General assigned to Child Care Development.	Employee Salaries Across Child Development
40105	Child Development Division Licensing, CCFAP, Operations Service Staff	Personal services and operating expenses for, CDD licensing, CCFP, Operations. associated with service staff including the operations manager and staff.	Child Subsidy Case Count
40110 40115	Child Development Licensing Unit	The unit is primarily charged with risk reduction and quality services for children’s day care, foster care, and children’s residential care facilities as well as private child placing and adoption agencies.	Child Subsidy Case Count
40175	Strengthening Families	The primary goal of these grants is to ensure affordable, high quality comprehensive early health and developmental care and education programs for children and families.	Direct to MCO
40180	CIS Intake Coordinator	Intake Coordinators coordinate the CIS Team functions, do outreach, referral, intake, integration of services, and monitor outcomes	Direct to GC
40530.7	Child Development Subsidy	IV-E eligible program expenditures for child subsidy payments	Direct to Title IV-E Child Development

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>40540</b>	<b>Family Support Daycare Program</b>	<b>Administrative costs associated with Family Support Daycare Program</b>	<b>Direct to Title IV-B Child Welfare Services</b>
<b>40570</b>	<b>Child Care and Development Fund - Discretionary</b>	<b>Administrative costs associated with administrative of CCDF.</b>	<b>Direct to Child Care Development Fund (CCDF) – Discretionary</b>
<b>40575</b>	<b>Child Care Quality Improvement</b>	<b>Training and support for child care workers/teachers in licensed centers, funded by VDOL grant.</b>	<b>Direct to VDOL grant</b>
<b>40600</b>	<b>Child Care and Development Fund – Mandatory and Matching</b>	<b>Administrative costs associated with administrative of CCDF.</b>	<b>Direct to Child Care Development Fund (CCDF) – Mandatory/Matching</b>
<b>40615</b>	<b>Bright Futures</b> <b>Moved from Family Services</b>	<b>Costs associated with the Bright Futures Infrastructure Program</b>	<b>Direct to State Funded</b>
<b>40631</b>	<b>Child Development – TANF</b>	<b>Payments for Transportation and Subsidy eligibility.</b>	<b>Direct To TANF</b>
<b>40633</b>	<b>Child Development - TANF- MOE Only</b>	<b>Child subsidy payments</b>	<b>Direct to TANF MOE</b>
<b>40704</b>	<b>GC Early Intervention (EI) CAPTA Medicaid Eligible</b>	<b>Programmatic cost associated with Medicaid Eligible CAPTA EI service.</b>	<b>Direct to GC</b>
<b>40707</b>	<b>GC Early Childhood &amp; Family Mental Health (ECFMH) Program Staff</b>	<b>Program staff working on the ECFMH program</b>	<b>Direct to ECFMH</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Vision Program Code	Plan Dept. Name	Description	Allocation Method
40708	GC MCO CAPTA - Non Medicaid	Programmatic cost associated with non-Medicaid Eligible CAPTA EI.	Direct to MCO
40710	G/C Performance Contracts Moved from Family Services	Cost associated with HBKF performance contracts	Direct to MCO
40711	HBKF Performance Grants & Children's Integrated Services	Programmatic expenses associated with CIS & HBKF, Kids & Family grants.	Direct to Global Commitment
40713	Therapeutic Child Care - Bonus	Rate differential paid for children with special needs to providers with special training.	Direct to GC-MCO
40953	ARRA-CCDF	Stimulus funds to support program.	Direct to ARRA- CCDF
40954	ARRA – IDEA Part C	Stimulus funds to support EI program.	Direct to ARRA – IDEA Part C
40966	Head Start-ARRA	Head Start Program paid for with ARRA funding	Direct to Head Start ARRA
41602	SCHIP Costs	SCHIP eligible costs in EI and NFS.	Direct to SCHIP
42500	GC Early Childhood & Family Mental Health (ECFMH)	Provides early childhood mental health intervention.	Direct to MCO-GC ECFMH
42501	Early Childhood & Family Mental Health (ECFMH)-Administrative	Administrative costs associated with ECFMH	Direct to Global Commitment

*Cost Allocation Plan Guidance:*

Vision Program Code	References
37540 40115 40711 37560 40530 40713 37660 40540 40953 37661 40570 40954 37662 40600 37670 40615 40966 39600 40631 41602 39601 40633 42500 39750 40704 42501 39751 39763 40707 40175 40105 40708 40180 40110 40710 40575	OMB A-87, Attachment A, Sec C (1)(a) and Attachment B, Sec 11 (a), (b)
40100	OMB A-87, Attachment B, Sec. 11 & Sec 14 (b)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 12:**

**Grants**

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37550	Drug Free Schools	Costs associated with Drug Free Schools program.	Direct to Drug Free Schools
37551	Drug Free Schools Administration	Administrative costs associated with Drug Free Schools grants.	Direct to Drug Free Schools
37552	Drug Free Schools Consultants	Consultant costs associated with Drug Free Schools grants.	Direct to Drug Free Schools
37610	Community Based Child Abuse Prevention Grant (CBCAP)	Costs associated with CBCAP grants.	Direct to CBCAP
37611	Community Based Child Abuse Prevention (CBCAP) Administration	Administrative costs associated with CBCAP grants.	Direct to CBCAP
40551	Title IV-E Educational Training Vouchers	Costs associated with Title IV-E Educational Training grant - EVT program	Direct to Title IV-E/ EVT
41310	RU - Employment Training	Provision of program activities and case management to Reach Up participants. This cost is matched by the State at 50%.	Direct to SNAP Employment and Training (cost matched by the State at 50%)
41311	RU - Employment Training - (E&T 100%)	Provision of program activities and case management to Reach Up participants.	Direct to Food Stamp Employment and Training
41315	SNAP Outreach	Provide SNAP outreach services to eligible low-income persons.	Direct to SNAP Outreach
41316	SNAP Outreach	Provide SNAP outreach services to eligible low-income persons. Match provided by sub-recipients.	Direct to SNAP Outreach

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41320	SNAP Nutrition Education	Provide nutrition education services to food stamp recipients and applicants and to other eligible low-income persons.	Direct to SNAP Nutrition Education
41321	SNAP Nutrition Education 100% Matched	Provide nutrition education services to SNAP recipients and applicants and to other eligible low-income persons.	Direct to SNAP Nutrition Education
41330	Reach Up Verification and Documentation Support	Provision of program activities and case management to Reach Up participants and a Teen Parent Education Program for eligible teens.	Direct to TANF
41331	Reach Up Case Management Other 50/50 TANF/FSE	Provision of program activities and case management to Reach Up participants and a Teen Parent Education Program for eligible teens.	Direct to TANF and Employment and Training
41335	Reach Up Case Management - Job Start	Provision of program activities and case management to Reach Up participants and a Teen Parent Education Program for eligible teens.	Direct to SNAP Employment and Training
41336	USDA E&T 50% Fed/50% Other Entity Match	Provision of program activities and case management to Reach Up participants. This code is used for cost where the 50% match is paid by an entity other than the State.	Direct to Employment & Training (This code is used for cost where the 50% match is paid by an entity other than the State)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Vision Program Code</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41337	Reach Up Case Management - DET	Provision of program activities and case management to Reach Up participants and a Teen Parent Education Program for eligible teens.	Direct to TANF
41343	Reach Up Post-Secondary Education	Provision of program activities and case management to Reach Up participants and a Teen Parent Education Program for eligible teens.	Direct to State Funded
41360	Farm to Family - Non-WIC	Programmatic costs associated with Farm to Family Program.	Direct to Farm to Family Non-WIC
41361	Farm to Family - Senior Coupons	Programmatic costs associated with Farm to Family Program.	Direct to Farm to Family Senior Coupons
41362	Farm to Family - WIC	Programmatic costs associated with Farm to Family Program.	Direct to Farm to Family WIC
41370	DCF - Child Nutrition - CECH	Support Child Nutrition Program services that cannot be funded with SNAP outreach money.	Direct to State Funded
40900	Interdepartmental Transfers	Costs associated with interdepartmental agreements.	Direct to Interdepartmental Agreements
44320	SAE Foods	Administrative costs associated with SAE Foods.	Direct to SAE Foods
44321	SAE Commodity	SAE reallocation for commodity system.	Direct to SAE Foods

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## **Department of Aging and Independent Living (DAIL)**

### **I. Introduction**

The following narrative and supporting schedules represent the public assistance cost allocation plan (PCAP) for the State of Vermont, Agency of Human Services (AHS), Department of Disabilities, Aging and Independent Living (DDAIL). DDAIL is responsible for administering Title III funded programming, Section 110 programming and developmental disabilities case management services for the State of Vermont.

#### ***DDAIL Mission Statement***

The Department of Aging and Independent Living is the center of the Agency of Human Services' program management and policy development with respect to older persons and persons with disabilities. The Department has the following goals:

- Assist older persons and adults with physical disabilities to live as independently as possible.
- Assist persons with disabilities to find and maintain meaningful employment.
- Assure quality of care and life to individuals receiving health care and/or long term care services from licensed or certified health care providers and protect elderly and disabled adults from abuse, neglect and exploitation.

Within this document, we have included an overview of DDAIL's organizational structure and a list of the specific functions performed by DDAIL, referred to as plan departments or cost pools, and the allocation method for each function.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## II. Organization

The major programs at DDAIL are organized under the following divisions:

**Division of Disability and Aging Services** - These activities center around developing, overseeing and enabling access to a system of services which assist older persons and persons with disabilities to live as independently as is possible. Includes overseeing a variety of services, such as nutrition, attendant care, homemaker, adult day, respite, transportation, benefits counseling, advocacy, service coordination, information and referral, and, and legal assistance. DDAS also helps children and adults with developmental disabilities and children with health impairments and/or physical disabilities to live as independently as possible within their family, home and community, acting as the appointed (public) guardian for some persons age 60 and over.

**Blind and Visually Impaired** - These activities offer a wide range of vocational, independent living, social and advocacy services to individuals who are blind or visually impaired.

**Vocational Rehabilitation** - These activities are designed to assist persons with disabilities to obtain or maintain employment or independence consistent with their interests and abilities.

**Licensing and Protection** - These activities include the regulation of a variety of health care and residential facilities, and investigating adult abuse and/or neglect.

Also DDAIL has an Intergovernmental agreement with OVHA pertaining to the Global Commitment Health Waiver.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### III. Plan Departments and Allocation Methodologies

Plan Department 1:

#### State Wide Indirect Cost Allocation Plan (SWICAP)

Nature and Extent of Services: The State of Vermont, Agency of Human Services, negotiates the annual State Wide Indirect Cost Allocation Plan (SWICAP) with the Federal Government. The approved statewide indirect costs applicable to DDAIL are included in the CAP and allocated to the appropriate benefiting objectives.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
10000*	SWICAP	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions (Department level indirect costs, Statewide costs (including Single Audit), and Agency costs are allocated to each division based on their share of Department wide salary costs excluding the Attendant Service Program salaries. Costs are allocated at the divisional level based on total cost.)
10002*	Attorney General's Office	DDAIL Allocation of Attorney General's Office	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions
11111*	AHS Indirect Cost	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**State Wide Indirect Cost Allocation Plan (SWICAP) cont.**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37070*	Computer Services Unit	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. Within Divisions
33333*	Secretary's Office	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions
37200*	Single State Audit	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions
37220*	Human Services Board	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions
37240*	Field Services	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**DDAIL Commissioner's Office**

Nature and Extent of Services: The DDAIL Commissioner's Office oversees and enables the department to meet its mission: assist older Vermonters and people with disabilities to live as independently as possible; assist people with disabilities to find and maintain meaningful employment; assure quality of care and life to individuals receiving health care services from licensed or certified health care providers; and protect vulnerable adults from abuse, neglect and exploitation.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
39166	Bioterrorism Prepare Info	Costs related to the Bioterrorism Grant	Direct to Bioterrorism Preparedness Grant
41499	MMIS – TA (Advanced Planning Document)	Conversations or work that is related to MMIS Technical Assistance efforts	Direct to MMIS – TA based on positive time reporting
41607	IEWS – Eligibility and Enrollment	Staff work related to Health Enterprise Eligibility and enrollment DDI and IV&V.	Per Approved Health Enterprise IAPD
41618	SOA Infrastructure Components	Staff Expenses related to Health Enterprise shared component design and development.	Per approved Health Enterprise IAPD.
41640*	ICD-10	Direct staff work associated with the ICD-10 planning and implementation.	Direct to ICD-10 IAPD
41642	MES – DDI	Direct staff work that is related to the replacement of the current MMIS.	Per approved Health Enterprise IAPD.
43010*	Commissioner's Office - Department Administration	DDAIL Allocation of State Wide Indirect Costs	Salary Dollars less Attendant Services Salaries to Division and Total Cost to Plan Dept. within Divisions
43040	Leave Time	Timesheet code for all hours reported not worked.	Direct to Leave Time
43500	General Fund	Expenses that are entirely State funded	Direct to State General Fund
43520	Dementia Grant	Federal related to respite services to families with dementia	Direct to Dementia Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43570	State Health Insurance Program	Area Agencies on Aging provide outreach and assistance to Medicare beneficiaries.	Direct to State Health Insurance Program Grant
43890	State Plan Administration and National Family Care Supplemental (III-E)	Activities related to administering OAA programs & for III-E services	Direct to Admin on Aging National Family Care Supplemental III-E
43902	MFP – ADRC	Expenses related to the federal Money Follows the Person grant.	Direct to MFP Grant
43955*	MCO Investments	State expense reportable under the Global Commitment Waiver	Direct to MCO Investments
43958	AOA ADRC Program Grant	Expenses related to ADRC Program Grant	Direct to ADRC program Grant
43971	ADRC Options Counseling	Expenses related to ADRC Options Counseling Standards Project.	Direct to ADRC Options Counseling
43972	ADRC Options Counseling – AOA Enhanced Part A	Expenses related to AOA Enhanced ADRC Options Counseling.	Direct to ADRC Options Counseling – AOA Enhanced Part A

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## **Division of Disability and Aging Services**

Nature and Extent of Services: The Division of Disability and Aging Services develops, oversees and enables access to a system of services which assist older persons and persons with disabilities to live as independently as is possible. Its responsibilities include overseeing a variety of services, such as nutrition, attendant care, homemaker, adult day, respite, transportation, benefits counseling, advocacy, service coordination, information and referral, and legal assistance. It also helps children and adults with developmental disabilities and children with health impairments and/or physical disabilities to live as independently as possible within their family, home and community. The Division of Disability and Aging Services is broken down into six distinct units. The following information describes the units.

### **Director of Long Term Care Services & Support Unit**

This unit consists of the Data and Planning & Innovation Unit as well as the Director of DDAS and support staff. Their functions are wide ranging and contribute to the Division of Disability and Aging Services as a whole. This unit's default program code is 43070. The Method for this program/unit spreads costs based on ratio of total direct costs of each unit in DDAS expended in the quarter.

### **Aging and Physical Disabilities Services Unit**

This unit manages the Medicaid funded long-term care programs that support older Vermonters, people with physical disabilities, and people with traumatic brain injuries. This unit helps this population of Vermonters live as independently as possible in the setting of their choice. Programs include Choices for Care, Traumatic Brain Injury Program, and Attendant Services Program. This unit also provides oversight and funding for all Older American Act programs that offer services and opportunities for older Vermonters to remain as independent as possible and to be active contributing members of their community. The director and support staff are allocated by the percent of salary dollars directly charged in the unit.

### **Developmental Disabilities Services Unit**

The DD Unit provides oversight to services that help keep individuals of all ages with developmental disabilities living in the community with their families. They provide support to prevent institutionalizing, prevent or respond to abuse or neglect, prevent imminent risk to people's health and safety, respond to adults who may become homeless, and help people find and maintain employment. Director and staff of this unit are allocated by percent of salary dollars directly charged in the unit.

This unit also oversees the guardianship services to the elderly and mentally disabled. The ultimate objective of each public guardian is to ensure wards receive appropriate care, protection and services in the least restrictive manner and environment. The director and support staff will be allocated by percent of salary dollars directly charged in the unit.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41499	MMIS – TA (Advanced Planning Document)	Conversations or work that is related to MMIS Technical Assistance efforts	Direct to MMIS – TA based on positive time reporting
41607	IEWS – Eligibility and Enrollment	Staff work related to Health Enterprise Eligibility and enrollment DDI and IV&V.	Per Approved Health Enterprise IAPD
43030*	DDAS Managers and Support Staff	Managers and support staff in the Division of Disability and Aging Services	Method M - Percent of Salary Dollars Directly Charged (DDAS)  (Managers' & support staff salaries, fringe, and operating expenses will be aggregated and allocated to all direct program charges in the quarter based upon an aggregate percentage of salary dollars directly charged in their unit.)
<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43040	Leave Time	Timesheet code for all hours reported not worked.	Direct to Leave Time

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Disability and Aging Services (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43070*	DDAS Division Director and Support Staff	Expenses associated with the Division Director and Administrative Staff who have broad responsibilities for programs operated within the division.	Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (Salary & Expenses of Division Director and Administrative Staff are allocated based on a ratio of total costs in each division.)
37700*	Global Commitment Administration	Staff and related expenses for administering Vermont's Section 1115 Waivers of the Social Security Act and other Global Commitment State Plan Services. Includes grant payments to Area Agencies on Aging for Global Commitment outreach to Ombudsman Program.	Direct to Global Commitment
37710*	Global Commitment Program	Expenses related to Global Commitment programs (TBI, ICF-MR, Waiver, Clinic, Adult Day and ASP Personal Care)	Direct to Global Commitment Program
37711*	DUALS Project	Expenses related to DUAL Medicaid/Medicare project	Direct to DUALS
37800	Social Services Block Grant	Expenses related to Social Services Block Grant	Direct to Social Services Block Grant
39610	Autism Grant	Federal Autism Grant to VDH and transferred to DAIL.	Direct to Autism Grant
39727	Commodities Supplemental Food Program	Delivery of Commodities to primarily Seniors	Direct to Commodities Supplemental Food Program
41072	OVHA SPAP Grant	Expenses related to the SPAP Grant	Direct to SPAP Grant
41602	State Children's Health Insurance Program	Expenses related to the SCHIP Program	Direct to SCHIP

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41618	SOA Infrastructure Components	Staff Expenses related to Health Enterprise shared component design and development.	Per approved Health Enterprise IAPD.
41620*	Refugee Assistance Program	Expenses paid via weekly Medicaid draw for clients determined to be refugees.	Direct to Refugee Assistance Program
41642	MES – DDI	Direct staff work that is related to the replacement of the current MMIS.	Per approved Health Enterprise IAPD.
41640*	ICD-10	Direct staff work associated with the ICD-10 planning and implementation.	Direct to ICD-10 IAPD
41820	Civil Monetary Funds	Funds generated by Nursing Home penalties.	Direct to Civil Monetary Funds
42011	Guardianship Services Specialists	Provide Guardianship services to the eligible developmentally disabled population	Direct to DDAS Guardianship
42016*	Nurse SMP Time	Expenses related to Nurse Professional time to administer Global Commitment Program.	Direct to Global Commitment
42006*	PASARR	Expenses related to Preadmission Screening and Record Review (PASRR).	Direct to PASRR
43050*	Attendant Services Program	Staff and expenses related to administering the Attendant Services Program, a program providing attendants to elderly persons and persons with disabilities who manage their own care.	Method O - Persons Served in Quarter By DDAS (Allocated among Title III E, General Fund, and Global Commitment Admin 50% based upon the persons served in the quarter.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43060*	Case Management	State staff time and expenses related to training program for case managers. Recipients of training are staff from the Area Agencies on Aging and Home Health Agencies.	Method P - Divided between Title III- E and Global Commitment Admin 50%
43520	Dementia Grant	Federal related to respite services to families with dementia	Direct to Dementia Grant
43530	Administration on Aging Support Services (III-B)	Expenses related to administration on aging support services	Direct to Admin on Aging Support Services – Title III – B
43531	AAA Congregate Meals III-C-1	Expenses related to grant for congregate meals	Direct to AAA Cong. Meals III-C1
43532	AAA Home Delivered Meals (III-C-2)	Expenses related to Admin on Aging Home Delivered Meals	Direct to AAA Delivered Meals III-C-2
43534	AAA Preventative Health III-D	Expenses related to Admin on Aging Preventative Health	Direct to Admin on Aging Preventative Health Title III-D
43535	AAA Abuse Prevention VII	Expenses related to Admin on Aging Abuse Prevention	Direct to Admin on Aging Abuse Prevention VII
43536	Ombudsman Title VII	Expenses related to Ombudsman Title VII	Direct to Ombudsman Title VII

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43540	AOA - Irene Disaster Assistance	AOA Tropical Storm Irene Disaster Assistance Project	Direct to AOA Irene Disaster Assistance
43550	AAA General Fund	Costs for AAA programs providing services to seniors	Allocated to Food and Nutrition Services based on cost of the program (using AAA GF Transportation method) for the quarter and then allocated proportionately to the Title III programs based upon Title III total costs in the quarter (using Direct to Older American's Act Method %'s)
43570	State Health Insurance Program	Area Agencies on Aging provide outreach and assistance to Medicare beneficiaries.	Direct to State Health Insurance Program Grant
43590	NSIP USDA	Expenses related to NSIP Grant	Direct to NSIP Grant
43600	SNAP Outreach	Supplemental Nutrition Assistance Program Outreach	Direct to SNAP Outreach
43610	Liheap Energy	Expenses related to the Energy Outreach Grant	Direct to Energy Outreach Grant
43810	Robert Wood Johnson	Private Grant for housing related expenses	Direct to Robert Wood Johnson Grant
43820	DDAS Transportation –Adult Day Centers	Expenses related to DAD Transportation	Direct to State General Fund
43890	State Plan Administration and National Family Care Supplemental (III-E)	Activities related to administering OAA programs & for III-E services	Direct to Admin on Aging National Family Care Supplemental III-E

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43891	ARRA – SCSEP (Senior Community Service Employment Grant)	Expenses related to federal grant (43991). 43891 used for stimulus tracking.	Direct to Senior Community Service Employment Program
43892	ARRA – AOA Congregate Meals III-C-1	ARRA funded expenses related to the AOA congregate meals grant	Direct to AAA Congregate Meals III-C-1 (ARRA)
43893	ARRA – AOA Home Delivered Meals III-C-2	ARRA funded expenses related to the AOA grant for home delivered meals	Direct to AAA Delivered Meals III-C-2 (ARRA)
43894	ARRA – CDSMP	ARRA Chronic Disease Self-Management Program. Funds transfer from VDH	Direct to ARRA CDSMP
43896	Money Follows the Person – general admin	Expenses related to the federal Money Follows the Person grant.	Direct to MFP Grant
43897	MFP – Transition Coordinators Travel Time	Expenses related to the federal Money Follows the Person grant.	Direct to MFP Grant
43898	MFP – Transition Coordinators Education Time	Expenses related to the federal Money Follows the Person grant.	Direct to MFP Grant
43901	MFP – Transition Coordinators Case Management Time (skilled nursing)	Expenses related to the federal Money Follows the Person grant.	Direct to MFP Grant
43902	MFP – ADRC	Expenses related to the federal Money Follows the Person grant.	Direct to MFP Grant
43951	CMS-CSRE-System Change	Expenses related to the CMS-CSRE-System Change Grant	Direct to CMS-CSRE System Change

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43952	1115 LTC Waiver extra admin - 50%	New costs incurred for the purpose of implementing the 1115 LTC Waiver	Direct to Medicaid 50%
43953	1115 LTC Waiver extra admin - 75% SPM	Time and travel of the LTC Nursing Staff for new activities pertaining to the LTC Section 1115 Medicaid Waiver. These activities are limited to: assessing the necessity for and adequacy of services, including level of care determination and utilization review; consulting with staff, providers and other agencies regarding the necessity for and adequacy of medical care and services; and furnishing professional medical opinions.	Direct to Medicaid 75%
43955*	MCO Investments	State expense reportable under the Global Commitment Waiver	Direct to MCO Investments
43956	Senior Center Earmark	Costs associated with the Senior Center Grant	Direct to Senior Center Grant
43958	AOA ADRC Program Grant	Expenses related to ADRC Program Grant	Direct to ADRC program Grant
43959	CMSO ADRC Program Grant	Expenses related to CMSO ADRC Program Grant	Direct to CMSO ADRC Program Grant
43960	TBI Planning Grant	Direct expenses related to the Grant	Direct to TBI Planning Grant
43969	VT TBI Fund	Expenses related to TBI special fund.	Direct to VT TBI Fund - 21994
43967	TBI Employment Grant	Employment Focused Neuro-Resource Facilitation for VT Vets with TBI	Direct to TBI Employment Grant
43970	Ombudsman State General Fund	Expenses related to legal aid portion of long-term care ombudsman program	Direct to Admin on Aging Support Services III-B

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43971	ADRC – Options Counseling	Expenses related to ADRC Options Counseling Standards Project.	Direct to ADRC – Options Counseling
43972	AOA Enhanced ADRC Options Counseling Part A	Expenses related to AOA enhanced ADRC Options.	Direct to AOA Enhanced Options Counseling Part A
43980	Senior Farmers Market	Food Coupons to Seniors for use at Farmer’s Markets	Direct to Senior Farmers Market
43981	Nursing Home Diversion Grant	Expenses related to the Nursing Home Diversion Grant	Direct to Nursing Home Diversion Grant
43982	MIPPA ACA 2008 LIS-MSP OR	Affordable Care Act Medicare Patients and Providers Act 2008 LIS/MSP Outreach Grants	Direct to MIPPA ACA 2008 LIS/MSP
43983	MIPPA ACA Medicare Enroll – AAAs	Affordable Care Act Medicare Patients & Providers Act Medicare Enrollment-AAAs Grant	Direct to MIPPA ACA Medicare Enroll - AAAs
43984	MIPPA ACA Medicare Enroll – ADRC	Affordable Care Act Medicare Patients & Providers Act Medicare Enrollment-ADRC Grant	Direct to MIPPA ACA Medicare Enroll - ADRC
43985	Emergency Preparedness	Expenses related to Emergency Preparedness	Direct to Emergency Preparedness
43986	MIPPA MEA – AAA	MIPPA Medicare Enrollment Assistance - AAA	Direct to MIPPA MEA - AAA
43987	MIPPA MEA – ADRC	MIPPA Medicare Enrollment Assistance – ADRC	Direct to MIPPA MEA - ADRC
43988	MIPPA 2007 LIS/MSP Outreach	MIPPA 2007 Outreach (AAA and ADRC split)	Direct to MIPPA 2007 LIS/MSP Outreach
43989	MIPPA 2008 LIS/MSP Outreach	MIPPA 2008 Outreach (Medicare beneficiary I&A-other)	Direct to MIPPA 2008 LIS/MSP Outreach
43991	Senior Community Service Employment Program	Federal Grant related to employment services for elders	Direct to Senior Community Service Employment Program

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43992	Elderly & Disabled Transportation	Expenses related to a federal transportation grant	Direct to Elderly & Disabled Transportation
43996*	Robert Wood Johnson Cash and Counseling Grant	Expenses related to the RWJ Cash and Counseling Grant	Direct to RWJ Cash and Counseling which is funded 50% Global Commitment Admin and 50% RWJ funds
43997	CMS Quality Assurance/Quality Improvement Grant	Expenses related to the CMS Quality Assurance/Quality Improvement Grant	Direct to CMS QA/QI
43998	CMS Long Housing & Supports Grant	Expenses related to the CMS Long Housing & Supports Grant	Direct to CMS Long Housing & Supports
43965	TBI – Vets Info & Referral Grant	Expenses related to the TBI – Vets Info & Referral Grant	Direct to TBI – Vets Info & Referral Grant
43500	General Fund	Programs that are entirely State funded	Direct to State General Fund

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### Division for the Blind and Visually Impaired

Nature and Extent of Services: The Division for the Blind and Visually Impaired offers a wide range of vocational, independent living, social and advocacy services to individuals who are blind or visually impaired.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43020*	Division Director and Staff	Expenses associated with the Division Director, the Casework Supervisor and Administrative Secretary who have broad responsibilities for programs operated within the division.	Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (Blind and Visually Impaired)  (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total cost of program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
43040	Leave Time	Timesheet code for all hours reported not worked.	Direct to Leave Time
43620	Independent Living Part B	Expenses related to the Independent Living grant	Direct to Independent Living Grant Part B
43625	ARRA – Blind Independent Living Part B - Stimulus	ARRA Expenses related to the Independent Living grant – Part B	Direct to Independent Living Grant Part B - ARRA

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43630	Mobile Low Vision Grant Title VII	Grant for elders with low vision	Direct to Mobile Low Vision
43635	ARRA – Blind Independent Living Part C - Stimulus	ARRA Grant for elders with low vision	Direct to Independent Living Grant Part C - ARRA
43640	Rehabilitation Training Grant	Staff Training Grant	Direct to Rehab Training Grant
43650	Section 110 (Blind and Visually Impaired)	Expenses related to Section 110 grant	Direct to Section 110 (Blind)
43655	ARRA – DBVI Section 110 - Stimulus	ARRA stimulus expenses related to Section 110 Grant	Direct to Section 110 (DBVI) - ARRA
43660	Supported Employment Title VI-C	Supported Employment services	Direct to Title VI-C
43670	Innovation & Expansion	Expenses related to Section 110 grant.	Direct to Section 110 (Blind)
43680	Vending & Other	Expenses related to Vending	Direct to Vending and Other
43500	General Fund	State funded programs	Direct to State General Fund
43955*	MCO Investments	State expenses reportable under the Global Commitment Waiver	Direct to MCO Investments

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### Division of Vocational Rehabilitation

Nature and Extent of Services: The Division of Vocational Rehabilitation assists persons with disabilities to obtain or maintain employment or independence consistent with their interests and abilities.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41635	Medicare Part D	Expenses related to Medicare Part D	Direct to Medicare Part D
43020*	Division Director and Staff	Expenses associated with the Division Director, the Program Services Chief, Rehabilitation Coordinator, Systems Developer II, Administrative Secretary, and clerical support staff who have broad responsibilities for programs operated within the division.	Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (Voc Rehab)  (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total cost of program funds expended. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
43040	Leave Time	Timesheet code for all hours reported not worked.	Direct to Leave Time
37700*	Global Commitment Administration	Salary and Expenses related to Personal Care Services	Direct to Global Commitment Admin
37710*	Global Commitment Program	Expenses related to personal care services	Direct to Global Commitment Program

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Division of Vocational Rehabilitation (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43290	Regional Support Staff and General Operating Costs	Expenses incurred by the regional and district offices that support all activities within the region. This includes regional manager salaries and expenses; support staff salaries and expenses; and operating bills not directly attributable to an activity.	Method R - Ratio of Total Direct Program Funds Expended in Quarter by Regional Staff (Voc Rehab)  (Statewide VR Regional managers, support staff, and operating expenses will be allocated based upon the percentage of statewide regional office personal services and operating direct charged expenses charged to activities.)
43690	Assistive Technology Grant	Federal Grant to help consumers receive information pertaining to assistive Technology and system changes	Direct to Assistive Technology Grant
43700	Employee Assistance	Expenses related to the EAP program	Direct to Employee Assistance
43720	Counseling and Assistance - Social Security Disability Insurance Benefit Offset Demonstration Pilot	Expenses related to Social Security Disability Insurance Benefit Offset Demonstration Pilot	Direct to SSDI Benefit Offset
43730	Supported Employment Title VI-B	Expenses related to Supported Employment grant	Direct to Supported Employment Title VI-B
43740	Ticket To Work	Expenses related to Ticket to Work in the Section 110 Program	Direct to Section 110

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Vocational Rehabilitation (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43750	Voc Rehab Independent Living Grant Part B	Direct expenses related to the Grant	Direct to Independent Living Grant Part B
43755	ARRA – VR Independent Living Part B - Stimulus	ARRA Expenses related to the Independent Living grant – Part B	Direct to Independent Living Grant Part B - ARRA
43760	Rehabilitation Training Grant	Staff Training Grant	Direct to Rehab Training Grant
43765	Voc Rehab Quality Training Grant	Staff Training Grant	Direct to VR Quality Training Grant
43770	Section 110 (Voc Rehab)	Expenses related to Section 110 grant.	Direct to Section 110 (Voc Rehab)
43771	DOL Evaluations	Expenses related to DOL Evaluations	Direct to DOL Evaluations
43775	ARRA – VR Section 110 - Stimulus	ARRA stimulus expenses related to Section 110 Grant	Direct to Section 110 (Voc Rehab) - ARRA
43780	VR UMASS BOND	Expenses related to grant from UMASS for Social Security Demonstration	Direct to VR UMASS BOND
43790	Welfare to Work	Expenses related to Welfare to Work grant.	Direct to Welfare to Work
43795	Community Action - SSI	Expenses related to VR Community Action - SSI applications	Direct to Community Action - SSI
43800	Innovation & Expansion	Expenses related to the Section 110 Grant	Direct to Section 110
43895	Reach Up Non VR	Expenses related to Reach Up grant	Direct to Reach Up – Non VR
43899	VR Reach Up Pilot	Expenses related to Reach Up grant	Direct to Reach Up - Pilot
43900	Medicaid Infrastructure Grant	Direct expenses related to the Grant	Direct to Medicaid Infrastructure Grant
43910	DET Grant	Direct expenses related to the Grant	Direct to DET Grant
43954	Corrections Disability Tracking	Expenses related to Corrections SSA Billing	Direct to Corrections SSA Billing

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Vocational Rehabilitation (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43961	Work Incentives Planning & Assistance Grant	Expenses related to the Work Incentives Planning & Assistance Grant	Direct to Work Incentives Planning & Assistance Grant
43962	Mathmatica	Direct expenses related to the Mathmatica Policy & Research Grant	Direct to Mathmatica Policy & Research Grant
43967	TBI Employment Grant	Employment Focused Neuro-Resource Facilitation for VT Vets with TBI	Direct to TBI Employment Grant
43500	General Fund	Programs that are entirely State funded	Direct to State General Fund

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### Division of Licensing and Protection

Nature and Extent of Services: The Division of Licensing and Protection regulates a variety of health care and residential facilities, and investigates adult abuse and/or neglect.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37700*	Global Commitment Admin	Expenses related to Global Commitment Admin	Direct to Global Commitment Admin & State General Fund
43020*	Director, Nurse Survey & Staff	Expenses associated with the Division Director and Administrative Staff who have broad responsibilities for programs operated within the division.	Method J - Salary & Expenses in Quarter – Director of Division of Licensing and Protection and Staff  (Time and expenses of Director and staff are allocated to all division programs based on salary costs in the quarter.)
43040*	Licensing and Protection Admin/Leave Time	Expenses associated with the administrative and leave time for the Licensing and Protection Division.	Method K - Salary & Expenses in Quarter – Director of Division of Licensing and Protection  (Administrative and leave time expenses are allocated to all division programs based on salary costs in the quarter.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43070*	Director and Administrative Support	Expenses for the Division director and administrative support that supports entire division.	Method I - Salary & Expenses in Quarter – Director of Division of Licensing and Protection  (Time and expenses of Director and secretarial support for the Division are allocated to all division programs based on salary costs in the quarter.)
43100*	LTC Engineering	Expenses for staff of the Division of Labor and Industry that work with the Survey and Certification staff on the licensure of facilities. Also, includes costs for architectural, engineering, and other consultants necessary for facilities licensing.	Method H - Allocated based on total costs of survey work to programs that require facility engineering.
43110	Clinical Laboratory Cer. and Insp.	Costs incurred in the enforcement of federal regulations in federally certified clinical laboratories.	Direct to Clin Lab Cert and Insp.
43120	Certification of Home Health Agencies	Cost incurred in the survey of Vermont Home Health Agencies and Hospice programs to ensure compliance with all federal regulations related to HHA and Hospice.	Direct to Medicare (XVIII Funds)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43130	Non-Certified Health Care Facilities	Expenses incurred in the surveys, follow-up visits, and complaint investigations occurring in nursing homes that are state licensed, but not federally certified.	Direct to State General Funds
43140	Hospital XVIII Non Licensed HC Facilities	Expenses incurred in the surveys of Outpatient Rehabilitation Facilities; End State Renal Dialysis Units; Rural Health Centers; Outpatient P.T.; Outpatient S.T., Independent Physical Therapists; and the Medicare-certified portion of Vermont State Hospital.	Direct to Medicare (XVIII Funds)
43150	Hospital XVIII Licensed HC Facilities	Expenses incurred in the performance of validation surveys, and substantial allegation surveys in hospitals as directly by CMS. Includes enforcement of federal regulations in psychiatric hospitals, psychiatric units of hospitals, rehabilitation units of hospitals, and swing beds.	Direct to Medicare Title XVIII Non-SNF and State General Fund
43160	State Licensure	Expenses incurred in the enforcement of State licensure requirements in Level III residential care facilities that do not provide Assistive Community Care Services; Level IV residential care facilities; assisted living facilities; and therapeutic community residences.	Direct to State General Funds

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43170*	LTC – Multi, Licensure of Nursing Facilities	Expenses incurred in the surveys, follow-up visits, and complaint investigations occurring in nursing facilities that are federally certified for participation in the Title XVIII & XIX program.	Allocation between S&C State General Fund, XVIII, XIX, and State based on Homes Certification per Surveys and Certification Policies (for Nursing Homes).
43190	ICF/MRs	Expenses incurred in the enforcement of federal ICF/MR requirements.	Allocation between XIX and State for ICF/MRs
43200	Community Care Homes (CCH)	Expenses related to community care homes	Direct to State General Fund
43210*	Level III Licensed Facilities	Expenses incurred in the review and enforcement of state licensure and federal requirements related to facilities providing Assistive Community Care Services.	Allocated between Global Commitment and State General Funds using # ACCS beds billed Global Commitment for qtr by 15th of month divided by total # ACCS beds on 15th of month beginning quarter.
43220*	Baseline Validation	Expenses incurred in the site visits to nursing facilities to verify the accuracy of the information provided the Federally mandated MDS+ forms.	Direct to Global Commitment
43230*	Prior Authorization Program (SPMP)	Expenses incurred in the review of the medical necessity of all nursing facility admissions of Medicaid/Medicaid applied individuals.	Direct to Global Commitment

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43240*	Enhanced Residential Care	Expenses related to time spent assessing placement variance and assessments required for 1115 Waiver applications. This includes time spent on activities required beyond the normal licensing time for residential care home licensure due to the placement of an 1115 Waiver resident in a residential care home.	Direct to Global Commitment
43250	Outcome and Assess. Info Set (OASIS)	Cost associated with administration of the federally mandated home health agency Outcome and Assessment Information Set.	Direct to OASIS
43260*	NATAC Admin & Registry	Cost related to the nurse assistant testing competency evaluation program	Direct to NATCEP Admin & Registry and S&C Medicare XVIII LTC
43270*	Minimum Data Set (MDS)	Cost associated with information technology and reporting associated with the administration of the federally mandated nursing home Minimum Data Set.	Allocation between XVIII, XIX, and State based on Surveys and Certification (for Nursing Homes) (Costs are allocated in accordance with survey and certification procedure based on the licensure of nursing homes.)
43310*	Training ICF/MR	Covers expenses incurred by staff in attending in-services, conferences, and workshops related to the enforcement of federal regulations in ICF/MR	Allocation Between Global Commitment, and State for ICF/MR's 75% Global Commitment and 25% State.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
43320	Health Care Facilities Training Nursing Facilities	Covers expenses incurred by staff in attending in-services, conferences, and workshops related to the enforcement of federal regulations in certified facilities.	Direct to Medicare Title XVIII Non-SNF & Medicare XVIII LTC
43330	Home Health Hotline	Costs for operating the Home Health Hotline.	Direct to Medicare (XVIII Funds)
43340*	Nursing Home Complaints	Expenses related to nursing home complaints	Allocation between XVIII, XIX, and State based on licensure of nursing homes.
43350*	Nurse Aid Training and Competency (NATAC)	Costs incurred in the administration of competency tests and skills tests to nurse aides as required by federal regulations.	Direct to Nurse Aid Testing
43360	Assisted Living	Expenses related to assisted living services	Direct to State General Fund
43950	Medicare Supplemental for Equipment	Specific funding dedicated by HHS/CMS Medicare to purchase equipment to upgrade/replace equipment for Nurse Surveyor's in division.	Direct to Medicare Supplemental for Equipment
43955*	MCO Investments	State expenses reportable under the Global Commitment Waiver	Direct to MCO Investments

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
44444*	NATAC Registry and Administration	Costs incurred in the administration of federally mandated nurse aide training and competency program and maintenance of registry.	Allocation between XVIII and NATCP Admin & Registry based on Certified and Participating Facilities (for NATAC Admin)  (Expenditures for administration and Nurse Aid Registry are allocated to the Medicare portion of Survey and Certification and Medicaid Administration based on the number of participating facilities certified for Medicare and Medicaid programs.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
55551*	Consultants	Expenses related to Consultants	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
55555*	Communication	Expenses related to communication	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## Division of Licensing and Protection (Continued)

Plan Dept.	Plan Dept. Name	Description	Allocation Method
66661*	Subcontracts	Expenses related to subcontracts	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
66666*	Supplies	Expenses related to Supplies	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## Division of Licensing and Protection (Continued)

Plan Dept.	Plan Dept. Name	Description	Allocation Method
77771*	Workers Compensation	Expenses related to Workers Compensation	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
77777*	Space	Expenses related to space	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Division of Licensing and Protection (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
88881*	Liability Insurance	Expenses related to liability insurance	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
66662*	Equipment	Expenses related to equipment	Ratio of Total Direct Program Funds Expended in Quarter (Cost of staff and associated operating that oversee grants programs are allocated on the ratio of total direct program funds expended during the quarter. This treatment allocates a share of indirect cost to all benefiting grant programs, regardless of whether the individual grant actually provides funding for this indirect cost.)
43500	General Fund	Programs that are entirely State funded	Direct to State General Fund

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## **Department of Vermont Health Access (DVHA)**

### **I. Introduction**

The DVHA is the State office responsible for the management of Medicaid, the State Children's Health Insurance Program (CHIP), and other publicly funded health insurance programs in Vermont. The DVHA is the largest insurer in Vermont in terms of dollars spent and the second largest insurer in terms of covered lives.

#### **The mission of the DVHA is to:**

- **Assist beneficiaries in accessing clinically appropriate health services.**
- **Administer Vermont's public health insurance system efficiently and effectively.**
- **Collaborate with other health care system entities in bringing evidence based practices to Vermont Medicaid beneficiaries.**

The DVHA is led by the Department of Vermont Health Access Commissioner, Deputy Commissioner, Medicaid Policy, Fiscal and Support Services Division, Deputy Commissioner, Health Services and Care Management, the Deputy Commissioner of Healthcare Reform, the Health Exchange Deputy Commissioner, and the Medical Director. The Department of Vermont Health Access Commissioner is responsible for oversight of all of DVHA's operations. The Health Services and Care Management Deputy Commissioner, is primarily responsible for data analysis, health programs integration, and pharmacy and program integrity. Deputy Commissioner of Medicaid Policy, Fiscal and Support Services is responsible for policy, provider relations, benefit coordination, reimbursement and administrative services. The Deputy Commissioner of Healthcare Reform is responsible for oversight of Healthcare Reform initiatives excluding the Vermont Blueprint for Health division. The Health Insurance Exchange Deputy Commissioner is responsible for oversight of all Healthcare Exchange related activities, including the development and implementation of the Healthcare Exchange. The Medical Director is responsible for clinical operations, chronic care management and care coordination.

During the fall of 2005, the State received approval from the Centers for Medicare and Medicaid Services (CMS) for a Section 1115 Medicaid Waiver known as "Global Commitment to Health Waiver". The Waiver allows the State to fundamentally restructure the Medicaid program and imposes a cap on the amount of federal funding available for services for the Medicaid population. The State exchanged the risk of operating under a capped funding arrangement for the opportunity to use federal Medicaid funds for non-Medicaid health programs.

#### **The goals of the Waiver include:**

- 1. Financial and programmatic flexibility to help maintain public health care coverage and provide for more effective services.**
- 2. To lead in exploring new ways to reduce the number of uninsured.**
- 3. Foster innovation within health care by focusing on health care outcomes.**

**The five-year Waiver term became effective October, 2005, and allows the State to deviate from traditional federal Medicaid law and regulations in the following key ways:**

- 1. Imposes a global cap on federal funds.**
- 2. Establishes the DVHA as a managed care entity (MCE).**
- 3. Allows the State to use federal Medicaid funds for state fiscal relief and non-Medicaid health programs.**
- 4. Provides flexibility to reduce benefits, increase cost sharing, and limit enrollment for optional and expansion populations with some limits.**

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## **I. Introduction (continued)**

Within the Agency of Human Services (AHS), the Waiver will allow cross-departmental initiatives to obtain the greatest value from scarce health care dollars. The flexibility of the Waiver allows the State to effectively manage public resources, provide the tools necessary to make health care programs fiscally sustainable, and improve the Vermont health care system. Under the Global Commitment to Health Waiver, the DVHA is an MCE, and must meet rules for Medicaid MCEs. The DVHA has intergovernmental agreements (IGAs) with the AHS and AHS departments that make them part of the MCE within the framework of the Global Commitment to Health Waiver. The State desires to use the Global Commitment to Health Waiver flexibility to integrate a Chronic Care Management Program (CCMP) into a system of care that can be used to benefit Medicaid beneficiaries, providers, and the DVHA.

### ***Other Departmental Claiming***

The following AHS Departments also claim allowable administrative to the Medicaid program, such as school-based and child welfare related costs

### **Social and Rehabilitative Services (SRS), now DCF**

- Percentage of Social Worker time spent on allowable Medicaid administrative activities.

### **Prevention Assistance, Transition, and Health Access (PATH), now DCF**

- Medicaid outreach and eligibility.

### **Department of Mental Health**

- The Mental Health Department contracts with 11 designated community agencies (DAs) to provide services to children and adults who are experiencing an acute mental-health crisis.
- The contracted designated agencies also operate the mental health Emergency Services Programs which are available 24 hours a day, seven days a week, responding to any individual experiencing a mental health crisis.
- Emergency programs screen situations to determine if there is need for admission into involuntary and/or acute care arrangements
- Vermont State Hospital (VSH) inpatient services – provides involuntary emergency examinations and commitments in which adults have become dangerous to themselves or others or for psychiatric evaluations of competency to stand trial in criminal cases.

### **Department of Aging and Independent Living (DAIL)**

- Grants to designated agencies for local administration of HCB waiver.
- Grants to area agencies on aging to assist elders in Medicaid outreach.
- Division of Advocacy and Independent Living staff time on administering waivers and fulfilling Medicaid state plan requirements.
- NATAC Registry and Administration.
- Licensed Nursing Facilities Survey, Licensure, and Complaints.
- ICF/MR Licensure.
- Level III Homes Licensure.
- Home Health Hotline.
- Auditing MDS+ Forms.
- Prior authorization personnel.
- Developmental Services administration.
- Vocational Rehabilitation staff administering traumatic brain injury HCB waiver.

### **Vermont Department of Health (VDH)**

- Medicaid outreach and eligibility.
- Medical Practice Division (Quality Assurance).
- Selected Skilled Professional Medical Personnel.

Costs for these activities are included in each Department's plan and included on the CMS-64 as appropriate.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



## II. Plan Departments and Allocation Methodologies

### Plan Department 1:

#### Indirect Cost Allocations

**Nature and Extent of Services:** The State of Vermont, Agency of Human Services negotiates the annual State Wide Indirect Cost Allocation Plan (SWICAP) with the Federal Government. The approved statewide indirect costs applicable to DVHA are included in the CAP and allocated to the appropriate benefiting objectives. DVHA also receives allocations from the AHS Office of the Secretary.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
1000.1	SWICAP	DVHA Allocation of Statewide Indirect Costs (Plan Dept No. 10000)	Salary and wage account code totals across all Program codes.
1001.1	AHS- Secretary's Office	DVHA Allocation of Central Office Costs (Plan Dept No. 37000, 37001, 37011, 37020, 37030, 37040, 37050, 37110, 37170, 37190, 20000, 37021, 37101 and 37210)	Salary and wage account code totals across all Program codes
1003.1	Human Service Board	DVHA Allocation of Human Service Board Costs (Plan Dept No. 37220)	Salary and wage account code totals across all Program codes
1004.1	Financial Statement and Internal Controls	DVHA Allocation of Statewide Single Audit Indirect Costs (Plan Dept No. 37120)	Salary and wage account code totals across all Program codes
1005.1	AAG's	DVHA Allocation of Attorney General's Office Costs (Plan Dept. No. 88888)	Salary and wage account code totals across all Program codes
1006.1	IT	DVHA Allocation of IT Computer Services Unit Costs (Plan Dept. No. 37070)	Salary and wage account code totals across all Program codes
1007.1	Field Services	DVHA Allocation of Field Services Costs (Plan Dept. No. 40450.1, 41002, and 41003)	Salary and wage account code totals across all Program codes
1008.1	75/25 GC Admin	DVHA Allocation of AHS contracted EQRO Costs at 75% (Plan Dept. No. 42016)	Direct to GC
1009.1	GC Admin	DVHA Allocation of AHS Medicaid Unit – Health Care Integrated Unit (Plan Dept. No. 37013, 37700, 37080)	Direct to GC
1010.1	VIEWS – MOVE	DVHA allocation of AHS Views – Move Related costs. (Plan Dept. No. 41607)	Direct to VIEWS IAPD

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 1 (Continued):  
Indirect Cost Allocations (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
1011.1	5010	DVHA allocation of 5010 MOVE related costs. (Plan Dept. No. 41608)	Direct to 5010 IAPD
1012.1	MMIS - TA	DVHA allocation of AHS IT costs related to MOVE Project. (Plan Dept. No. 41499)	Direct to MMIS PAPD
1014.1	ONC HIT 3013	DVHA allocation of ONC HIT costs related to CMS HIT 3013 Project. (Plan Dept. No.41617)	Direct to ONC HIT Grant
1015.1	SOA Infrastructure Components (BUS, Workflow, Rules)	DVHA allocation of SOA salary and operating costs. (Plan Dept. No.41618)	Direct to SOA Infrastructure IAPD
1016.1	OCIHO - SPEG - ACA Exchanges	DVHA allocation of salary, operating and contractual OCIHO-SPEG-ACA Exchange costs. (Plan Dept. No.41619)	Direct to OCIHO Exchange Grant
1017.1	HIT: Implementation and Operation-Staff	DVHA allocation of costs associated with in-house activities related to SMHP HIT. (Plan Dept. No.41693)	Direct to SMHP-HIT IAPD
1018.1	MAPIR - State Customization - Staff Costs	DVHA allocation of costs associated with in-house activities related to SMHP HIT. (Plan Dept. No.41638)	Direct to SMHP-HIT IAPD
1019.1	ICD-10-Staff	Cost associated with Staff time Spend on ICD-10. (plan Dept. No.41638)	Direct to ICD-10 IAPD

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
SWICAP, Single State Audit, and AHS	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2:  
Administrative Costs**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for salary, benefits, operating, contracts and grants for services, and related administrative costs associated with DVHA programs.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>37711</b>	<b>Dual Eligible Program</b>	<b>Costs associated with dual eligible program</b>	<b>Direct to Duals Grant</b>
<b>37531</b>	<b>Refugee Administration</b>	<b>Costs associated with the administration of the Refugee program.</b>	<b>Direct to RMA Grant</b>
<b>41050</b>	<b>Enrollment Broker Services</b>	<b>Benefits counseling enrollment outreach and member services</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41051</b>	<b>Pharmacy Benefit Manager Services</b>	<b>Pharmacy Benefit Manager Services</b>	<b>Quarterly number of Pharmacy Claims paid for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41085</b>	<b>DUR/MAB Board</b>	<b>Provide consultation and feedback on program design, management, and operations. The Drug Utilization Review Board (DUR) consists of physicians and pharmacists. The DUR Board reviews drug utilization in terms of prescriber practices, pharmacy dispensing, and beneficiary use. The Board also acts as DVHA's Pharmacy and therapeutics P&amp;T Committee, advising DVHA on benefit design for the pharmacy programs. The Medicaid Advisory Board consists of providers and beneficiaries and their representatives; representatives of other related government entities; and other interested parties providing evaluation and advice on the design and operations of all of DVHA's benefit programs.</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and all other benefiting programs</b>
<b>41090</b>	<b>SPMP</b>	<b>Cost of time staff in positions requiring a professional medical certification or degree spent on duties and responsibilities requiring professional medical knowledge and skills.</b>	<b>Direct to GC</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41120</b>	<b>Fiscal Intermediary</b>	<b>Cost of contractual services for the administration of Medicaid/CHIP program. Receives, organizes and processes bills for medical recipients, maintains and makes available on-line histories of benefits paid and develops new applications with the context of approved advance planning documents</b>	<b>Quarterly number of paid claims for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41470</b>	<b>State Only Expenses</b>	<b>Administrative expenses for “State Only” programs</b>	<b>Direct to State only</b>
<b>41486</b>	<b>Commissioner’s Office</b>	<b>Operations and oversight of DVHA units in both operations and the administration of the State of Vermont’s public health care programs; Act as Chief Liaison to and directs staff interaction with administration, legislature, AHS central office and departments, other state agencies, the media and federal entities.</b>	<b>Salary and wage account code totals across all Program codes.</b>
<b>41487</b>	<b>Data Analysis Management</b>	<b>Provides data and analytical support to DVHA. Responds to Medicaid claims and enrollment data requests in a timely and accurate manner as well as providing analytical support to DVHA staff and units.</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41488</b>	<b>Pharmacy Unit</b>	<b>Implements and manages the pharmacy benefits for Medicaid and the VHAP, VHAP Pharmacy, VScript, VScript Expanded, Medicare Part D and VPharm plans. Ensures that the State’s pharmacy benefit plans are implemented and administered appropriately so that benefits can be accessed appropriately and pharmacies’ claims for those activities are processed correctly and paid on a timely basis. Also work with Vermont Medicaid enrolled providers regarding the State’s pharmacy programs.</b>	<b>Quarterly number of Pharmacy Claims paid for Global Commitment, Choices for Care, CHIP and other benefiting Programs.</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41489	Health Program Integrity	Responsible for monitoring the integrity of our Medicaid Program, including the provision of medically necessary and appropriate health care services, accurate reimbursement to qualified providers of those services, efficient administration of the program and the prevention of inappropriate services and reimbursement. Works closely with each department within DVHA as well as the Medicaid Fraud and Residential Abuse Unit to investigate referred issues to determine if there is a problem.	Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs
41490	Clinical Unit	Manages Care Coordination (CC), Quality Initiatives (QI) and Prior Authorizations. CC initiative is designed to facilitate the provider/patient relationship by coordinating interventions that assist primary care practices for the needs of our beneficiaries – specifically in emergency room utilization and inpatient hospitalization. QI provides operational direction necessary to monitor and evaluate the quality and appropriateness of care and service for our members, identify opportunities for clinical and service improvement, ensure resolution of identified problems and to measure/monitor intervention results over time to assess the need for new improvement strategies.	Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs
41491	Chronic Care Initiative	Extension of the above mentioned clinical unit responsibilities with the addition of make routine visits to provider/patients.	Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs
41493	Provider & Member Relations	Provide assistance to all provider groups for both incoming and outgoing communication regarding issues that affect providers.	Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41495</b>	<b>Policy and Reporting</b>	<b>Represents DVHA in a variety of venues and furnishes required reports for the state and federal governments. Also responsible for maintaining and revising when necessary the Vermont Medicaid State Plan, the Vermont Medicaid Rules and Procedures and the Vermont Health Access Program rules and procedures. Coordination and management of the administrative process of responding to requests for non-covered services by beneficiaries as well as representing DVHA at fair hearings.</b>	<b>Salary and wage account code totals across all Program codes.</b>
<b>41496</b>	<b>Coordination of Benefits</b>	<b>Investigates claims potential for third party liability for areas of health insurance, court ordered medical support, Medicare Part D drug plans, estate recovery, cost effective health insurance, workers compensation and subrogation. When a liability is found, claims and/or liens are filed with the liable party obligating the party to reimburse the Medicaid paid claims.</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, and All Other benefiting Programs</b>
<b>41497</b>	<b>Administrative Services</b>	<b>Responsible for fiscal and operational activities, including budget items, AR, AP, payroll and expenses, contract and grant monitoring, federal reporting, cost allocation and overall human resources and building maintenance.</b>	<b>Salary and wage account code totals across all Program codes.</b>
<b>41607</b>	<b>IEWS Enrolment and Eligibility</b>	<b>Staff work related to Health Enterprise Eligibility and Enrolment DDI and IV&amp;V</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41608</b>	<b>5010</b>	<b>Conversations or work that is related to 5010 efforts. IAPD</b>	<b>Direct to 5010 IAPD</b>
<b>41609</b>	<b>IEWS Eligibility and Enrolment Contractual</b>	<b>Contractual Expenses related to Health Enterprise Eligibility and Enrolment DDI and IV&amp;V</b>	<b>Per Approved Health Enterprise IAPD</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41612	DDI - Provider Directory	Contractual Expenses related to the Health Enterprise Provider Directory	Per approved Health Enterprise IAPD
41613	MES – DDI	Contractual Expenses related to Health Enterprise MES DDI and IV&V	Per approved Health Enterprise IAPD
41614	ICD-10 Data Storage	Contractor expenses - associated with the ICD-10 planning	Direct to ICD-10 IAPD
41617	ONC HIT 3013	Costs Associated with Vermont State HIT-HIE Program and eHealth Initiative	Per approved Health Enterprise IAPD
41618	SOA Infrastructure	Staff Expenses related to Health Enterprise shared component design and development	Per approved Health Enterprise IAPD
41622	CHIPRA – Maine	Salary and operating costs related to OCIO exchange project with Maine	Direct to Maine CHIPRA grant
41622.102	CHIPRA – Maine QA	Allowable CHIPRA QA costs	Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

41626	Health Care Reform	Time and effort associated with implementing Vermont's Healthcare Reform program. Healthcare Reform in the State of VT is made up of over 60 specific initiatives all designed to increase access, improve the quality, and contain costs of healthcare for Vermonters.	Bi-Annual % of State population Eligible for Medicaid to GC Admin remainder to MCO. Staff in this Program code also directs code time as appropriate to other Program codes.
41627	Blueprint Administration	All costs associated with Blueprint for Health staff	Bi-Annual % of State population Eligible for Medicaid to GC Admin remainder to MCO.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41628</b>	<b>Blueprint – Partnerships</b>	<b>Costs associated with Contractual and grant</b>	<b>Bi-Annual % of State population Eligible for Medicaid to GC Admin remainder to MCO.</b>
<b>41629</b>	<b>Quality Improvement Division</b>	<b>Responsible for ensuring compliance to the State and Federal quality standards including oversight of any delegated activities; implementation, management and oversight of quality initiatives including the CHIPRA Quality Demonstration Grant; and authorization and concurrent review of inpatient psychiatric services.</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41632</b>	<b>SOA Infrastructure Contractual</b>	<b>Contractual Expenses related to Health Enterprise shared component design and development</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41634</b>	<b>Provider Directory – Staff &amp; DII Project Management</b>	<b>Salary, operating and DII staff expenses related to Health Enterprise provider directory</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41636</b>	<b>MAPIR – EHR Incentive Payments</b>	<b>EHR Incentive Payments to providers</b>	<b>Direct to CMS HIT IAPD</b>
<b>41637</b>	<b>MAPIR – State Customization – Contractual Costs</b>	<b>Contractor expenses – State Customization – contract associated with the Medical Assistance Provider Incentive Repository Program -</b>	<b>Per Approved Health Enterprise IAPD</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41639</b>	<b>ICD-10 – Contractual Costs</b>	<b>Contractor expenses – associated with the ICD-10 planning and Implementation</b>	<b>Direct to ICD-10 IAPD</b>
<b>41640</b>	<b>ICD-10 – Staff Costs</b>	<b>Work associated with the ICD-10 planning and Implementation</b>	<b>Direct to ICD-10 IAPD</b>
<b>41642</b>	<b>MES – DDI Staff</b>	<b>Staff work related to the development of the MES</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41692</b>	<b>HCR/HIT – Contracts</b>	<b>Compuware, Bi-state and any other “non-base” HCR expense</b>	<b>Bi-Annual % of State population Eligible for Medicaid to GC Admin remainder to MCO. Staff in this Program code also direct-code time as appropriate to other Program codes.</b>
<b>41693</b>	<b>HIT: Implementation and Operation-Staff</b>	<b>Staff Expenses related to Health Enterprise HIT, HIE, EHR, and Public Health Development and Implementation</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41694</b>	<b>HIT: Implementation and Operation-Contractors</b>	<b>Contractual Costs related to Health Enterprise HIT HIE, EHR, and Public Health Development and Implementation</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41695</b>	<b>MAPIR Incentive Payments</b>	<b>HIT EHR Incentive Payments for Eligible Hospitals</b>	<b>Direct to CMS HIT IAPD</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41696</b>	<b>Exchange Level 1 Staff and Operating (Non-IT)</b>	<b>Salary, operating and contractual costs related to the level one OCIO exchange project implementation</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41697</b>	<b>Reimbursement Unit</b>	<b>Administrative expenses associated with the operation and oversight of Vermont's provider assessment, Disproportionate Share Hospital (DSH) payments, cost settlement process, and value based reimbursements.</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41698</b>	<b>Substance Abuse Initiative</b>	<b>Expenses associated with the execution of substance abuse targeted programs including the "Team Care" and the "Hub and Spoke" models.</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41699</b>	<b>Managed Care and Compliance</b>	<b>Executive salary expenses associated with Program Integrity, Provider and Member Services, and the Substance Abuse initiative</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41701</b>	<b>Exchange Level 2 – IT staff and operating</b>	<b>Cost associated with Exchange Level 2 related IT staff and operating expenses</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41702</b>	<b>Exchange Level 1 – IT Contractual</b>	<b>Cost associated with IT related Exchange contracting and consulting expenses</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41703</b>	<b>GC Administrative Contracts</b>	<b>Contract Expenses associated with Administrative services charged to GC</b>	<b>Quarterly Enrollment for Global Commitment, Choices for Care, CHIP, and All Other benefiting Programs</b>
<b>41704</b>	<b>Exchange Level 2- non-IT Staff and operating</b>	<b>Cost associated with Exchange Level 2 related non- IT staff and operating expenses</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41705</b>	<b>Exchange Level 2 – IT Contractual</b>	<b>Cost associated with IT related Exchange Level 2 contracting and consulting expenses</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41706</b>	<b>Exchange Level 2 – non-IT Contractual</b>	<b>Cost associated with non-IT Exchange Level 2 related contract and consulting expense</b>	<b>Per Approved Health Enterprise IAPD</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 2 (Continued):  
Administrative Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>41760</b>	<b>Exchange Level 1 – non-IT consulting/contractual</b>	<b>Cost associated with non-IT Exchange related contract and consulting expenses</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41761</b>	<b>Non-IT Exchange staff (Medicaid Allocable) Level 1</b>	<b>Costs associated with Non-IT related Exchange level 1 Staff and operating costs that are Medicaid Allocable</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41762</b>	<b>Non-IT Exchange contractual (Medicaid Allocable) Level 1</b>	<b>Costs associated with Non-IT related Exchange level 1 Contract and operating costs that are Medicaid Allocable</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41763</b>	<b>Non-IT Exchange staff (Medicaid Allocable) Level 2</b>	<b>Costs associated with Non-IT related Exchange level 2 Staff and operating costs that are Medicaid Allocable</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41764</b>	<b>Non-IT Exchange contractual (Medicaid Allocable) Level 2</b>	<b>Costs associated with Non-IT related Exchange level 2 Contract and operating costs that are Medicaid Allocable</b>	<b>Per Approved Health Enterprise IAPD</b>
<b>41765</b>	<b>Adult Medicaid Quality Grant Level 1 Staff</b>	<b>Costs associated with AMQ Level 1 related to staff expense</b>	<b>Direct to AMQ Grant</b>
<b>41766</b>	<b>Adult Medicaid Quality Grant Level 1 Contractual</b>	<b>Costs associated with AMQ Level 1 related to Contractual expense</b>	<b>Direct to AMQ Grant</b>
<b>41767</b>	<b>SIM STAFF Implementation</b>	<b>Staff costs associated with the implementation of SIM</b>	<b>Direct to SIM Grant</b>
<b>41768</b>	<b>IPA staff Level 1B</b>	<b>Staff costs associated with Exchange Navigators</b>	<b>Direct to Exchange Level 1B</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
37711, 37531, 41050, 41051, 41085, 41090, 41120, 41470, 41486, 41487, 41488, 41489, 41490, 41491, 41492, 41493, 41495, 41496, 41497, 41607, 41608, 41609, 41612, 41613, 41614, 41617, 41618, 41622, 41622.102, 41626, 41627, 41628, 41629, 41632, 41634, 41636, 41637, 41639, 41640, 41642, 41629, 41693, 41694, 41695, 37711, 41696, 41697, 41698, 41699, 41701, 41702, 41703, 41704, 41705, 41706, 41760, 41761, 41762, 41763, 41764, 41765, 41766, 41767, 41768	OMB A-87, Attachment A, Section C 1(a) & Attachment B, Section 11 (a) and (b)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 3:  
Programmatic Costs**

**Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for other programmatic costs associated with DVHA programs not including, salary, benefits, travel and medical services contracts.**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>37714</b>	<b>Graduate Medical Education Payment</b>	<b>Programmatic Costs</b>	<b>Direct to GC</b>
<b>41601</b>	<b>Medicaid</b>	<b>Programmatic Costs</b>	<b>Actual Charges Incurred for Global Commitment, Choices for Care CHIP and Other Benefiting Programs (41601.115) Direct to Choices for Care (.116) Direct to MCO Investments (.117) Direct to Non-Waiver (.118)</b>
<b>41602</b>	<b>CHIP Payments</b>	<b>Programmatic Costs</b>	<b>Direct to CHIP</b>
<b>41603</b>	<b>Civil Union</b>	<b>Programmatic Costs</b>	<b>Direct to MCO Investments</b>
<b>41605</b>	<b>State-Only Pharmacy</b>	<b>Programmatic Costs</b>	<b>Direct to State Funds</b>
<b>41610</b>	<b>HIV/INS</b>	<b>Programmatic Costs</b>	<b>Direct to MCO Investments</b>
<b>41615</b>	<b>Buy-in Part A</b>	<b>Programmatic Costs</b>	<b>Actual Charges Incurred for Global Commitment, Choices for Care, CHIP and Other Benefiting Programs (.115) Direct to Choices for Care (.116)</b>
<b>41620</b>	<b>Refugee Program</b>	<b>Programmatic Costs</b>	<b>Direct to RMA grant</b>
<b>41625</b>	<b>Vermont Legal Aid MAP</b>	<b>Programmatic Costs</b>	<b>Direct to Global Commitment</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Plan Department 3 (Continued):  
Programmatic Costs (Continued)**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41631	GEARWAR	Programmatic Costs	Actual Charges Incurred for Global Commitment, Choices for Care, CHIP and Other Benefiting Programs
41641	Buy-in Part B	Programmatic Costs	Actual Charges Incurred for Global Commitment, Choices for Care (including ARRA funding), CHIP and Other Benefiting Programs (41641.115) Direct to Choices for Care (.116) Direct to Non-Waiver (.118)
46405	Medicare Clawback	Programmatic Costs	Direct to State Funds
41645	DSH	Programmatic Costs	Direct to DSH Medicaid Allotment

*Cost Allocation Plan Guidance*

<b>Plan Department</b>	<b>References</b>
37714, 41601, 41602, 41603, 41605, 41610, 41615, 41620, 41625, 41631, 41641, 46405,41645	OMB A-87, Attachment A, Section C 1(a) & Attachment B, Section 11 (a) and (b)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



## I. Introduction

The Vermont Department of Health (VDH) has nine divisions within three appropriations, as follows:

### Administration appropriation

- Administration division

### Public Health appropriation

- Public Health Preparedness
- Health Surveillance
- Maternal and Child Health
- Health Promotion and Disease Prevention
- Office of Local Health
- Medical Practice Board
- Environmental Health

### Alcohol and Drug Abuse Programs appropriation

- Alcohol and Drug Abuse Programs division

VDH's mission statement is as follows:

Mission: To protect and promote optimal health for all Vermonters.

Vision: Healthy Vermonters living in healthy communities.

Goals:

1. Effective and integrated public health programs
2. Communities with the capacity to respond to public health needs
3. Internal systems that provide consistent and responsive support
4. A competent and valued workforce that is supported in promoting and protecting the public's health
5. A public health system that is understood and valued by Vermonters
6. Health equity for all Vermonters

Within this document we have included an overview of VDH's organizational structure and a list of the specific functions performed by VDH, referred to as plan departments or cost pools, and the allocation method for each function. Please note that the plan department numbers correspond to internal AHS program codes from the state accounting system.

## II. Organization

VDH is organized into nine divisions, as listed above. For the implementation of Global Commitment, VDH activities are based on an Inter-Agency Agreement with OVHA. OVHA is the Public Managed Care Organization (Public MCO) for all enrollees under the Global Commitment to Health Waiver. The AHS, as the Single State Agency, will provide oversight of the OVHA in that capacity.

### ***Administration:***

The Administration appropriation includes:

- The Commissioner's Office
- Health Planning
- Information Technology Services
- Business Office

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

The Commissioner's Office provides policy direction and guidance to staff and programs of the Department. In addition, the Office keeps the public informed of issues that may affect their health and wellbeing through press releases, press conferences and responding to multiple daily press inquiries seeking information related to matters affecting public health. Information on community health is made available to the public through the periodic release of the *Health Status Report* and through establishing broad health goals such as are included in *Healthy Vermonters 2020*.

Health planning provides grants to support health systems improvements throughout the state as well as strategic planning for the VDH activities.

Information technology services maintain a 500+ user network serving 15 sites statewide. Staff development, support and maintain a large number of custom software applications serving department programs. The unit supports a key national public health initiative to develop a national electronic disease surveillance and reporting system.

The business office provides financial and logistics support for all department operations, including budget and grants management services. Budget and grants management staff manages the department's overall budget and spending. The unit manages the budgets for the nearly 100 federal and foundation funding sources that make up two thirds of the department's budget.

#### ***Public Health Preparedness:***

This division includes

- Public Health Preparedness Administration
- Emergency Preparedness
- Emergency Medical Services
- Radiological Health

#### ***Health Surveillance:***

The Health Surveillance division includes:

- Public Health Laboratory – performs laboratory tests annually to identify infectious disease toxins or contaminants in air, food, water and clinical samples;
- Epidemiology – investigates and monitors reportable diseases and operates programs that provide service and prevention for sexually transmitted disease, HIV/AIDS, hepatitis and tuberculosis;
- Immunizations – provides vaccine to children and adults, assures adherence to vaccination procedures and policies;
- Chronic Disease – investigates and monitors chronic disease-Public Health Statistics – provides statistical and analytical support to all department programs, maintains and analyzes vital records, conducts health surveys and operates the Vermont Cancer Registry.
- The Office of the Chief Medical Examiner – performs autopsies and investigates unexpected deaths from violence, injury, suicide, drugs or other circumstances;

#### ***Maternal and Child Health***

- Maternal and Child Health – administers the Maternal and Child Health federal block grant and monitors and works to improve the system of health care for women, children and families, including the work through the School Based Medicaid Administration Claiming (MAC) and the Vermont Child Health Improvement Project at the University of Vermont;
- Children with Special Health Needs – provides and/or assures that health care and support services are available to children (0-21) who have complex health problems and to their families;
- WIC – federally funded program to enhance the health of infants, young children, pregnant women and new mothers.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### ***Health Promotion and Disease Prevention (HPDP)***

- HPDP Administration
- Tobacco Control
- Health Promotion
- Dental Health
- Ladies First
- Chronic Disease

### ***Office of Local Health (OLH)***

- District Offices Around the State – provide the essential health promotion and disease prevention services necessary for an effective public health system. It is through these district offices that most Health Department programs reach the people of Vermont, including
  - Healthy Babies, Kids & Families – health care and support services through pregnancy and delivery and for infants and children from birth to 5 years;
  - WIC – federally funded program to enhance the health of infants, young children, pregnant women and new mothers;
  - EPSDT – consists of two main components: (1) assuring the availability and accessibility of required health care resources; and (2) helping Global Commitment recipients and their parents or guardians effectively use these resources;

### ***Board of Medical Practice:***

The Board of Medical Practice licenses physicians, podiatrists and physician assistants. The Board investigates all complaints and charges of unprofessional conduct against any person subject to its jurisdiction. The Board is also required by law to create individual profiles on all health care professionals licensed, certified or registered by the department and make these profiles available to the public.

The following new division was established effective 7/1/2012, containing programs that had been located in other divisions, primarily in the Health Surveillance division.

### ***Environmental Health:***

- Administration
- Environmental Tracking
- Healthy Homes and Childhood Lead Poisoning Prevention
- Asbestos and Lead Regulation
- Radiology and Toxicology
- Food and Lodging

### ***Alcohol & Drug Abuse Programs:***

The Alcohol and Drug Abuse Program appropriation funds:

- Alcohol and Drug Research and Planning – conducts surveys and analysis to determine the prevalence of substance abuse and treatment needs of communities. Conducts program and fiscal monitoring data analyses and evaluations of key ADAP prevention, intervention and treatment services to ensure their accessibility, appropriateness, quality and cost effectiveness. Manages and monitors federal data grants and SAPT block grant data reporting.
- Alcohol and Drug Abuse Treatment – manages and provides quality assurance for the state's substance abuse treatment system including monitoring programs and licensing of substance abuse counselors. Operates the Drinking Driver Rehabilitation (CRASH) program. Manages student assistance programs. Funds treatment services for VHAP and uninsured clients. Manages and monitors Global Commitment funding of treatment providers.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

- Alcohol and Drug Prevention – collaborates with the Department of Education to help schools and colleges develop comprehensive alcohol and drug abuse prevention programs. Provides funding for prevention programs through grants to schools and community agencies and monitors implementation and results.

**Cost Impact:**

All changes in the Cost Allocation Plan are identified in red. The cost impacts, by category, are as follows.

**Category 1** – Programs in this category are administrative allocations used to accurately reflect costs to federal benefiting programs across AHS. Overall there will be no federal effect with these new programs.

**Category 2** - Programs in this category are used to identify new grants 100% federally funded.

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact.

Plan Dept.	Plan Dept. Name	Description	Allocation Method	Explanation
39047	Statewide Quality Assurance System	Funding to VPQHC to implement and maintain a statewide quality assurance system to evaluate and improve the quality of healthcare services rendered in Vermont.	Direct to Statewide Quality Assurance System	Costs are supported by Special Funds. To transfer of legislative responsibility for V.S.A. 18 Sec 9416 from the Department of Financial Regulation (DFR) to the Health Dept. effective 07/01/13. Funds will be transferred to the HD to carry out the scope of work.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Category 3 cont'd** – Programs in this category are new or have been updated but have no adverse federal impact.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>	<b>Explanation</b>
<b>39120</b>	Healthy Homes & Lead Poisoning Prevention	All costs associated with the Healthy Homes and Lead Poisoning Prevention Program. Follow-up activities for Global Commitment-eligible clients are coded to EPSDT Administration functions.	<del>Direct to Healthy Homes</del> Direct to Global Commitment MCO Investment.	The CDC grant has not been renewed; Global Commitment funding has been approved in order to maintain a minimal level of service consistent with State statute.
<b>39122</b>	Act 125 Activities	Costs associated with carrying out the enforcement activities related to Act 125: An Act to Prevent Lead Poisoning in Children in Rental Housing and Child Care Facilities	<del>Direct to Childhood Lead Poisoning Prevention</del> Direct to Global Commitment MCO Investment	The CDC grant has not been renewed; Global Commitment funding has been approved in order to maintain a minimal level of service consistent with State statute

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Category 3 cont'd** – Programs in this category are new or have been updated but have no adverse federal impact.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>	<b>Explanation</b>
<b>39190</b>	Childhood Passenger Safety MOU with DPS	All costs of those activities associated with the Childhood Passenger Safety MOU with the DPS Governor's Highway Safety Program	Direct to Childhood Passenger Safety MOU with DPS	New Memo Of Understanding with the Department of Safety, Governor's Highway Safety Program needs to have costs tracked.
<b>39231</b>	Immunization Pilot	All costs associated with Staff time, operating and other costs- including vaccine costs- in support of immunizations for people with insurance coverage.	Direct to Immunization Pilot	Federal CDC guidance no longer allows Section 317 funds to be used for vaccines for certain populations. (Federal CDC Section 317 Immunization funding had been used to cover the vaccine costs of people, other than those eligible for Vaccines For Children, without private insurance coverage. These costs will now be covered by Global Commitment MCO Investment. )

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Category 4 – Program codes being moved from one Plan Department category to another with no changes in funding.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>	<b>Explanation</b>

Category 5 – Updates in this category do have an adverse effect on federal funding.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>	<b>Explanation</b>

Category 6 – Updates in narrative wording only with no change in actual allocation method.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>	<b>Explanation</b>

Category 7 – Deleted program. Program has expired or been terminated.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>	<b>Explanation</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### III. Plan Departments and Allocation Methodologies

Plan Department 1:

#### Indirect Cost Allocations

Nature and Extent of Services: The State of Vermont, Agency of Human Services negotiates the annual State Wide Indirect Cost Allocation Plan (SWICAP) with the Federal Government. The approved statewide indirect costs applicable to VDH are included in the CAP and allocated to the appropriate benefiting objectives. VDH also receives allocations from the AHS Office of the Secretary.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
1000.1	SWICAP	VDH Allocation of Statewide Indirect Costs	Relative Share of Department Salaries
1000.2	State Auditor's Office – Financial Statement & Internal Control Costs	VDH Allocation of Statewide Single Audit Indirect Costs	Relative Share of Department Salaries
1000.3	Attorney General's Office	VDH Allocation of Attorney General's Office Costs	Relative Share of Department Salaries
1000.4	AHS Secretary's Office	VDH Allocation of AHS Secretary's Office	Relative Share of Department Salaries
1000.5	AHS Field Services	VDH Allocation of the costs of AHS Field Services	Relative Share of Department Salaries
1000.6	AHS Information Technology	VDH Allocation of AHS I.T. costs	Relative Share of Department Salaries

*Cost Allocation Plan Guidance:*

Plan Department	References
SWICAP, Single State Audit, and AHS	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Administration**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for costs associated with the Commissioner's Office; Information Technology Services; Health Planning; and the Business Office. It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39001</b>	Administration-Departmental	Costs associated with overall management of VDH including: legal services, policy, development, planning, public affairs, administrative support, and financial management and Board of Health activities.	Relative Share of Department Salaries
<b>39009</b>	Administration-Leave Time	Time code for all staff paid for time not worked such as vacations, holidays, sick leave, personal time and compensatory time.	Relative Share of Department Salaries
<b>39011</b>	Public Health Training Center	Costs associated with VDH participation in the New England Public Health Workforce Development Alliance.	Direct to Public Health Training Center
<b>39013</b>	Corrections Dept. Quality Oversight	Expenditures associated with Quality Oversight of the Corrections Department.	Direction to Corrections Dept. Quality Oversight
<b>39014</b>	Duty Officer Time	Standby time and work time associated with assignment as Duty Officer outside of normal business hours.	Allocated 25% to Bioterrorism (99999.2) and 75% to Epidemiology (99999.91)
<b>39016</b>	Patient Safety Surveillance	All costs associated with activities related to patient safety surveillance and improvement system.	Direct to Patient Safety Surveillance

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Administration cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39023</b>	Hospital Licensing	Expenses related to license applications, developing rules and monitoring compliance with same, issuance of licenses and other activities.	Direct to Hospital Licensing
<b>39040</b>	Area Health Education Center program support	Payments to provide support to Area Health Education Centers (AHECs) in order to improve Vermont's public health by establishing educational partnerships, supporting students and health professionals and engaging in community outreach and education.	Direct to MCO Investments.
<b>39041</b>	Federally Qualified Health Center and Look-Alike Funding	Payments associated with legislative funding for Federally Qualified Health Centers (FQHC) or for Federally Qualified Health Center look-alikes.	Direct to MCO Investments.
<b>39042</b>	Free Clinic Administrative Support	Payments to the Vermont coalition of clinics for the uninsured to provide outreach, enrollment, education, and care coordination to patients receiving services at any of the free clinics.	Direct to MCO Investments.
<b>39043</b>	Tele-child psychiatry services	Payments associated with tele-child psychiatry patient consultation services and tele-education in the area of assessment, treatment, and referral of children with emotional or behavioral problems who are seen in federally qualified health centers.	Direct to MCO Investments.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## Plan Department 2 cont'd:

**Administration cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39044</b>	Prescription Drug Education	Payments to support an evidence-based prescription drug education program, including Academic Detailing teams, for health care professionals.	Direct to MCO Investments.
<b>39045</b>	Primary Care ARRA	Payments to sub recipients of Federal ARRA funds received under the ARRA Primary Care grant from the Health Resources and Services Administration	Direct to Primary Care ARRA
<b>39046</b>	Public Health Infrastructure	All costs associated with a project funded through the Affordable Care Act, to build public health infrastructure and improve the delivery of public health services	Direct to Public Health Infrastructure
<b>39047</b>	Statewide Quality Assurance System	Funding to VPQHC to implement and maintain a statewide quality assurance system to evaluate and improve the quality of healthcare services rendered in Vermont.	Direct to Statewide Quality Assurance System
<b>39523</b>	Poison Control and Surveillance Activities	Activities associated with poison control and surveillance, including services currently provided by the Northern New England Poison Center, other than Real Time Disease Detection activities.	Direct to Poison Control
<b>39531</b>	CHAMPPS (Coordinated Healthy Activity, Motivation, and Prevention Programs)	Grants payments to community organizations to support the Coordinated Healthy Activity, Motivation and Prevention Programs (CHAMPPS)	Direct to CHAMPPS (Global Commitment MCO Investment)
<b>39534</b>	Rural Hospital Flexibility Program	Costs associated with the activities under the ongoing Rural Hospital Flexibility Program grant from HRSA to help stabilize rural hospitals and improve access to health services in rural communities.	Direct to Rural Hospital Flexibility Program Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Administration cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39539</b>	Vermont Loan Repayment	Costs associated with grants to support educational loan repayment to health care professionals.	Direct to Vermont Loan Repayment MCO Investments
<b>39541</b>	Small Hospital Improvement	Costs associated with a project to assist small hospitals in implementing prospective payments systems, improving quality and complying with certain provisions of the Health Insurance Portability and Accountability Act (HIPAA).	Direct to Small Hospital Improvement
<b>39769</b>	VDH/UVM College of Medicine Collaborative	Costs associated with any grants that fall under the umbrella of the VDH/UVM College of Medicine Memorandum of Understanding including the AHEC agreement but excluding the VCHIP agreement.	Direct to VDH/UVM
<b>42756</b>	Alternatives to Restraint and Seclusion Grant	The costs of all activities associated with a grant from SAMSHA to implement alternatives to the use of restraint and seclusion in institutional and community-based settings that provide mental health services.	Direct to Alternatives to Restraint Grant

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
<b>39001</b> <b>39009</b> <b>39011</b> <b>39012</b>	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 3:

**Public Health Preparedness:**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for costs primarily associated with the following programs: Public Health Preparedness Administration, Emergency Preparedness and Emergency Medical Services. (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.) The following program codes have been moved from the Office of Public Health Preparedness and into the new Environmental Health Division: 39132, 39212, 39213, 39214, 39215, 39210, and 39211.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39101</b>	Office of Public Health Preparedness Administration	Staff time and operating costs associated with overall administration of the Office of Public Health Preparedness.	Relative Share of Office of Public Health Preparedness Salaries.
<b>39109</b>	Office of Public Health Preparedness Leave Time	Time code for time not worked, such as vacations, holidays, sick leave, personal leave, and compensatory time.	Relative Share of Office of Public Health Preparedness Salaries.
<b>39171</b>	CRI – Cities Readiness Initiative	All costs associated with the Cities Readiness Initiative component of the Bioterrorism and Public Health Preparedness program.	Direct to Bioterrorism Preparedness Grant
<b>39179</b>	<b>EMS Special Fund</b>	<b>All costs to improve EMS services in Vermont through training and other activities underwritten by the insurance companies via a Special Fund</b>	<b>Direct to EMS Special Fund</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Public Health Preparedness cont'd:**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39181</b>	EMS Program Services	Cost associated with statewide developmental and administrative activities including complaint investigation and technical consultation to services, hospitals and communities. Does not cover any costs associated with licensing, certification or with direct provision of patient services such as vehicles, equipment, training or provider personnel.	Direct to EMS
<b>39182</b>	EMS Licensing	Staff time and other costs associated with the quality assurance functions performed by the Vermont Department of Health necessary to credential EMS personnel, vehicles and organizations. Activities related to regulation: licensing, ambulances, testing, certification, complaint investigation and training for either certification or re-certification.	Direct to PHHS Block Grant
<b>39183</b>	EMS for Children	Staff time, contracts and other payments for the EMS for Children project.	Direct to EMS for Children
<b>39184</b>	EMS – Highway Safety	Costs associated with the EMS Highway Safety Program.	Direct to EMS Highway Safety
<b>39186</b>	Automated External Defibrillator Purchase	Costs associated with a project to provide automated external defibrillators and training in their use to emergency responders throughout Vermont.	Direct to EMS Program Services
<b>39187</b>	EMS Trauma Plan	Costs associated with a project to develop a new State Emergency Medical Service plan, including a Trauma Care System Plan.	Direct to EMS Trauma Plan

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 3 cont'd:  
**Public Health Preparedness cont'd:**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39188</b>	SIREN	All costs associated with the development, implementation and ongoing maintenance of a Statewide Incident Reporting Network (SIREN) for Emergency Medical Services.	Direct to PHHS Block Grant.
<b>39189</b>	Siren MOU with DPS	All costs associated with the SIREN project funded by the VT Dept. of Public Safety	Direct to Siren MOU with DPS
<b>39190</b>	Childhood Passenger Safety MOU with DPS	All costs of those activities associated with the Childhood Passenger Safety MOU with the DPS Governor's Highway Safety Program	Direct to Childhood Passenger Safety MOU with DPS
<b>39538</b>	Hospital Bioterrorism Preparedness	Costs associated with a program to support hospitals and other health care entities in preparing for a bioterrorist or other disease emergency.	Direct to Hospital Bioterrorism Preparedness
<b>39543</b>	Hospital H1N1 Preparedness	All costs associated with a program to support hospitals and other health care entities in preparing for an H1N1 influenza pandemic.	Direct to Hospital H1N1

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
<b>39101</b> <b>39109</b>	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for costs associated the Public Health Laboratory; Epidemiology; Immunization; Chronic Disease; Public Health Statistics; Office of the Chief Medical Examiner, (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.)

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>37901</b>	<b>Irene Related Expenses</b>	<b>All related costs for fixing the damage caused by Tropical Storm Irene</b>	<b>Direct to Irene</b>
<b>39130</b>	Terrorism Task Force	Costs associated with activities undertaken to support the State's Terrorism Task Force, including consequence management planning, exercise and training activities.	Direct to Bioterrorism Preparedness Grant
<b>39161</b>	Medical Examiners Program	Expenses incurred in performing autopsies and maintaining the Office of the Chief Medical Examiner.	Direct to Medical Examiner
<b>39162</b>	Medical Examiner – Medico legal Consultation/Education	Expenses incurred for the following: lawyers, conferences, expert testimony and lectures for hospitals, schools and emergency medical services.	Direct to Medical Examiner

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39163</b>	Regional Medical Examiner Payments	Payments to Regional Medical Examiners for services provided.	Direct to Medical Examiner
<b>39164</b>	Assistant Medical Examiner System	Cost associated with developing, implementing and maintaining the Assistant Medical Examiner system of death investigation, including all payments to Assistant Medical Examiners for services provided.	Direct to Medical Examiner
<b>39165</b>	DMORT Egyptian Airlines	Costs associated with the activities of the Office of the Chief Medical Examiner in coordinating New England DMORT activities related to Egyptian Airlines crash near Nantucket in October 1999.	Direct to Medical Examiner
<b>39167</b>	Cremation Permits	All receipts and disbursements of cremation permit fees from funeral homes, etc. to assistant medical examiners.	Direct to Medical Examiner
<b>39168</b>	CME – Coverdell MOU	All costs related to the OCME program funded with Coverdell funds from the VT Dept. of Public Safety	Direct to CME – Coverdell MOU
<b>39230</b>	Immunization ACA	All costs associated with a project to enhance immunization information exchange between health care and public health systems.	Direct to Immunization ACA

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39231</b>	Immunization Pilot	All costs associated with Staff time, operating and other costs-including vaccine costs- in support of immunizations for people with insurance coverage.	<del>Direct to Immunization Pilot</del> Direct to Global Commitment MCO Investment.
<b>39240</b>	HAI and Flu Surveillance	Costs of the activities, currently Health-Care Associated Infections and Influenza Surveillance, under the Epi Lab Capacity ACA program which are not funded by Prevention and Public Health Funds	Direct to ACA Epi Lab Capacity
<b>39301</b>	Health Surveillance Administration	Staff time and operating costs associated with overall administration of the Health Surveillance Division	Relative Share of Health Surveillance Program Salaries
<b>39309</b>	Health Surveillance – Leave Time	Time code for all staff paid for time not worked such as vacations, holidays, sick leave, personal time and compensatory time.	Relative Share of Health Surveillance Program Salaries
<b>39311</b>	Vaccines	Vaccine purchases	Direct to PHHS Block Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39314</b>	Immunization Services	Staff time and expenditures for Immunization Services. This includes the preparation of doctors' orders for vaccines and the distribution of vaccines to local providers.	Direct to Immunization
<b>39315</b>	Immunization Action Plan	Costs associated with activities related to day care facilities and follow-up of non-Global Commitment eligible children that are associated with the Immunization Action Plan. Follow-up activities for Global Commitment eligible clients are coded to EPSDT Administration functions.	Direct to Immunization
<b>39316</b>	Immunization Information System	Costs associated with the implementation and operation of an immunization information system, including the development of an information system infrastructure.	Direct to Immunization

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39317</b>	Epidemiology – General	Time and supplies used in day to day routine infectious disease epidemiology and disease control work, not otherwise funded under specific grants or programs.	Direct to Epidemiology
<b>39318</b>	Epidemiology – Outbreak Management	Costs associated with episodic outbreak control. Use specific control or investigation codes, if available.	Direct to Epidemiology
<b>39320</b>	Epidemiology and Laboratory Capacity Building	Costs associated with a project to enhance the department's capacity for infectious disease surveillance and response.	Direct to EPI and Lab Capacity
<b>39322</b>	Hepatitis B – State Employees	Costs for staff time and vaccine to immunize State employees, including vaccine administration, distribution, appointment-making and pre- and post-clinic activities.	Direct to Hepatitis B – State Employees
<b>39323</b>	Refugee Health	Costs associated with refugee health activities.	Direct to Refugee Health

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39324</b>	HIV Prevention	Costs associated with activities related to the HIV Prevention project, including health education and risk reduction, counseling and testing and public information.	Direct to HIV/Prevention Grant
<b>39325</b>	State-funded HIV Prevention Activities	Payments to service organizations using State funds appropriated for HIV Prevention activities.	Direct to AIDS Services Support
<b>39326</b>	HIV/AIDS Evaluation	Costs associated with supplemental funding for HIV/AIDS evaluation activities under the HIV Prevention grant.	Direct to HIV/Prevention Grant
<b>39327</b>	AIDS Surveillance	Costs associated with activities having to do with active surveillance for AIDS or HIV infection.	Direct to AIDS Surveillance
<b>39328</b>	AIDS Services Support	Expenditures to support AIDS services in Vermont which cannot be reported against a more specific cost center, such as AIDS education or HIV care.	Direct to AIDS Services Support
<b>39329</b>	HIV Care	Costs associated with the Ryan White (Title II) HIV Care project.	Direct to HIV Care

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39330</b>	AMAP Payments to EDS	Payments to EDS for their reimbursement on behalf of the AIDS Medication Assistance Program.	Direct to HIV Care
<b>39331</b>	Sexually Transmitted Diseases	Costs of the STD program, time, supplies, travel, etc., not to include AIDS.	Direct to Sexually Transmitted Diseases
<b>39332</b>	Tuberculosis Control	Cost related to the Tuberculosis Control Program, including staff time and operating expenses, except the costs of clinical services and medication provided to tuberculosis patients.	Direct to Tuberculosis Control
<b>39333</b>	TB Medical Services	Costs of clinical services and medication provided to tuberculosis patients in Vermont.	Direct to TB Medical Services

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39334</b>	Rabies Control	Staff time and other costs associated with prevention of rabies in humans and animals.	Direct to Rabies Control
<b>39336</b>	Bioterrorism Preparedness Planning "A"	Costs associated with activities providing coordination and direction of the statewide effort to prepare for response to events of bioterrorism or other public health emergencies, including assessment and development of the necessary public health infrastructure and the development and exercise of a public health response plan. (Focus Area "A" of the Bioterrorism Preparedness program.)	Direct to Bioterrorism Preparedness Grant
<b>39338</b>	Bioterrorism Surveillance "B"	Costs associated with developing and implementing improved methods for surveillance to detect a bioterrorist incident. (Focus Area "B" of the Bioterrorism Preparedness program.)	Direct to Bioterrorism Preparedness Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39339</b>	Vermont HIV Prevention Community Planning Group	Costs associated with the statewide advisory planning group that provides guidance for allocation of the CDC prevention grant.	Direct to HIV/Prevention Grant
<b>39344</b>	Enhanced Immunization Program	Time, expenses and vaccine purchases associated with the Enhanced Immunization Program	Direct to Enhanced Immunization Program
<b>39345</b>	CSTE – Avian Flu Trainings	All costs associated with avian influenza rapid response trainings conducted under agreement with the Council of State and Territorial Epidemiologists.	Direct to CSTE Avian Flu
<b>39347</b>	Adult Viral Hepatitis	All activities associated with the prevention of adult viral hepatitis	Direct to Adult Viral Hepatitis
<b>39349</b>	ACA Epi Lab Capacity	All costs associated with a project, funded through the Affordable Care Act, to build and strengthen the Department's epidemiology, laboratory and health information systems	Direct to ACA Epi Lab Capacity
<b>39351</b>	Epidemiology – Chronic Disease	Costs associated with supervising of performing activities related to chronic disease epidemiology.	Direct to Epidemiology
<b>39352</b>	Chronic Disease Epidemiologist	Salary and fringe costs of the position of Chronic Disease Epidemiologist.	Direct to Epidemiology

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39353</b>	Diabetes Services Improvement	Costs associated with a project to improve the capacity to provide comprehensive health services to people with diabetes.	Direct to Diabetes Services Improvement
<b>39354</b>	Arthritis	Costs associated with arthritis planning and epidemiology.	Direct to Arthritis
<b>39355</b>	Asthma	Costs associated with asthma planning and epidemiology.	Direct to Asthma
<b>39356</b>	Cancer Registry	Costs associated with the Vermont Cancer Registry.	Direct to Cancer Registry
<b>39381</b>	Vital Registration	Costs associated with the registration, collection, preservation, amendment and certification of vital records and the processing and publication of vital statistics.	Direct to Vital Registration
<b>39382</b>	Vital Statistics	Costs associated with the analysis and dissemination of vital statistics.	Direct to Vital Statistics
<b>39383</b>	Vital/Special Requests	Staff time and other costs of responding to special requests for vital statistics.	Direct to Vital/Special Requests

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39384</b>	Research and Statistics	Costs associated with the activities related to the collection, editing, coding, key entry, processing, analysis and publication of health statistics. This cost center also includes the provision of consultative and statistical support services to various Health Department and Agency of Human Services Programs and the involvement in independent research projects, but excludes computer systems development and computer programming.	Direct to Research and Statistics
<b>39385</b>	Hospital Data Council/Utilization	Research staff time and related computer costs and any other costs associated with producing the inpatient monograph.	Direct to Hospital Data Council
<b>39386</b>	Hospital Data Council/Hospital Utilization Companion Volume	Staff time and other costs associated with producing data and printing of the companion to the utilization monograph bulletin.	Direct to Hospital Data Council

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39387</b>	Hospital Data Council/Ambulatory Surgery Study	Staff time and other costs associated with producing data for this HDC contract.	Direct to Hospital Data Council
<b>39388</b>	Other Hospital Data Requests	Staff time and other costs associated with hospital data requests not attributable to a more specific cost center.	Direct to Other Hospital Data Requests
<b>39390</b>	Health Statistics Requests	Staff time and other costs of responding to requests for health statistics, not attributable to a more specific cost center.	Direct to Vital Statistics
<b>39391</b>	Population/Estimates	Costs associated with activities related to the production of the population estimates.	Direct to Population
<b>39392</b>	Population/Other	Staff time and other costs of responding to requests for information related to the population estimates.	Direct to Population
<b>39393</b>	Health Risk Survey	Staff time and other costs associated with the Health Risk Survey.	Direct to Health Risk Survey
<b>39394</b>	Behavioral Risk Factor Surveillance	Staff time and other costs associated with designing, administering and conducting the behavioral risk factor survey.	Direct to Behavioral Risk Factor Surveillance

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39395</b>	Pregnancy Risk Assessment Monitoring	Costs associated with planning, developing and implementing a pregnancy risk assessment monitoring system.	Direct to Pregnancy Risk Assessment Monitoring
<b>39397</b>	Electronic Death Registry System	All costs associated with the activities related to the creation of an electronic death registration system.	Direct to Electronic Death Registry System.
<b>39398</b>	Advanced Directives Registry	All costs associated with advanced directives registry.	Direct to Advanced Directives Registry: G.C. MCO Investment
<b>39431</b>	Laboratory Training Services	Costs and activities associated with providing courses, technical training or workshops to other than laboratory staff, excluding activities directly related to the Data Master.	Direct to Laboratory
<b>39432</b>	Laboratory Certification	Costs and activities associated with certification of other laboratories, except CLIA activities.	Direct to Laboratory

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39433</b>	Laboratory Customer Service	Costs and activities associated with customer services which do not fit into program areas.	Direct to Laboratory
<b>39434</b>	Laboratory Administration	Costs and activities associated with the overall administration of the laboratory which is not directly related to another functional area. This does not include training, meetings and other activities directly related to a specific program, but do include such activities when they are broader than a single function.	Direct to Laboratory
<b>39450</b>	Laboratory – Forensic Toxicology	Costs and activities associated with forensic toxicology testing and related activities, excluding blood alcohol testing.	Direct to Laboratory
<b>39451</b>	Laboratory – Water Bacteriology	Costs and activities associated with microbiological water testing.	Direct to Laboratory
<b>39452</b>	Laboratory – Drinking Water, Organic and VOCs	Costs and activities associated with organic testing of drinking water related to VOCs and THMs (EPA method 524.2).	Direct to Laboratory
<b>39453</b>	Laboratory – Drinking Water, Inorganic, Other	Costs and activities associated with organic drinking water testing except for VOCs and THMs.	Direct to Laboratory

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39454</b>	Laboratory – Inorganic Drinking Water, Metals	Costs and activities associated with inorganic testing of drinking water for metals.	Direct to Laboratory
<b>39455</b>	Laboratory – Inorganic Drinking Water, Other	Costs and activities associated with inorganic testing of drinking water except for metals and radiological testing.	Direct to Laboratory
<b>39456</b>	Laboratory – Miscellaneous Chemistry	Costs and activities associated with environmental lead, special projects and other chemistry work that is not described under other codes.	Direct to Laboratory
<b>39460</b>	Laboratory, Blood Alcohol	Costs and activities associated with the testing of blood for alcohol.	Direct to Laboratory
<b>39461</b>	Laboratory, Datamaster Support	Costs and activities associated with the Datamaster Program, except legal support. This includes training of others both within and outside the department.	Direct to Laboratory
<b>39462</b>	Laboratory, Alcohol Program, Legal	Costs and activities of a legal nature related to the alcohol program. This includes testimony, written and oral consultation, preparation of legal responses and documents, such as affidavits and discovery requests and preparation for these activities.	Direct to Laboratory

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39470</b>	Laboratory – Radiological, Water	Costs and activities associated with radiochemistry water testing.	Direct to Laboratory
<b>39471</b>	Laboratory – Radiological, Vermont Yankee	Costs and activities associated with Vermont Yankee surveillance.	Direct to Laboratory – Radiological, Vermont Yankee
<b>39472</b>	Laboratory – Radiological, Other	Costs and activities associated with radiological testing except water and Vermont Yankee surveillance.	Direct to Laboratory
<b>39480</b>	CLIA	Staff time and other costs associated with CLIA.	Direct to CLIA
<b>39481</b>	Laboratory – Diagnostic Microbiology, Serology	Costs and activities associated with serology such as hepatitis, HIV, measles, mumps, rubella, syphilis and similar tests.	Direct to Laboratory
<b>39482</b>	Laboratory – Diagnostic Microbiology, Other	Costs and activities associated with parasitology and virology or other diagnostic microbiology excluding serology.	Direct to Laboratory
<b>39483</b>	Laboratory – Environmental Microbiology	Costs and activities associated with testing of food products or similar samples.	Direct to Laboratory

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39484</b>	Bioterrorism Laboratory Capacity "C"	Costs associated with enhancing laboratory capacity for diagnosis of biological bioterrorist agents and all costs associated with participation in the Laboratory Response Network (Focus Area "C" of the Bioterrorism Preparedness program.)	Direct to Bioterrorism Preparedness Grant
<b>39485</b>	Laboratory – Clinical Toxicology	Costs and activities associated with clinical toxicology, including blood lead testing.	Direct to Laboratory
<b>39486</b>	Dollar Tree Settlement Blood Lead Filter Paper	All costs associated with the testing of filter paper specimens for blood lead under the terms of the Dollar Tree Settlement.	Direct to Dollar Tree Settlement Blood Lead Filter Paper
<b>39490</b>	ISO 17025 Accreditation for State Food Testing Laboratories	All costs of those activities associated with acquiring ISO 17025 laboratory accreditation for microbiological food testing areas, providing the FDA with data generated during response to food born outbreaks and establishing an integrated consortium of laboratory networks funded under a grant from the FDA	Direct to Accreditation for State Food Testing Laboratories

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



Plan Department 4 cont'd:

**Health Surveillance cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39526</b>	Chronic Disease Self-Management Program – ARRA	All costs with efforts to build state infrastructure to implement evidence-based chronic disease self-management programs	Direct to Chronic Disease Self-Management Program – ARRA
<b>39537</b>	Minority Health	All costs associated with implementing the objectives of the Department's Minority Health Strategic Plan.	Direct to Minority Health
<b>39544</b>	Refugee Preventive Health	All costs associated with a set of preventive health services for refugees, funded under the new Refugee Preventive Health grant from the Administration for Children and Families	Direct to Refugee Preventive Health

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
<b>39301</b> <b>39309</b> <b>39311</b>	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### Maternal and Child Health

The following plan departments, descriptions, and allocation methodologies are costs associated with the Maternal and Child Health Program, School Based MAC, Children with Special Needs Program, WIC, and Family Planning. (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.)

The Maternal and Child Health Division includes the School Based MAC Program code 39758. In a previous update to the Cost Allocation Plan (for the quarter beginning 7/1/2010), the Department submitted three documents describing the web-based random moment time study (RMTS) designed by the University of Massachusetts in cooperation with the Department. Subsequently, CMS Region I facilitated a telephone discussion of the time study procedures on February 3, 2011. Included in that telephone discussion was staff from CMS Region I, CMS Central Office, the Vermont Agency of Human Services, the Vermont Department of Health and the University of Massachusetts. Based on the advice offered during and after that discussion, the documents were revised. After CMS review of these revised materials, we had another telephone conference with CMS on July 14, 2011. Based on this advice, the documents were further revised and supplemental information was provided, and all documents were submitted to CMS August 26, 2011. CMS has asked additional questions and Vermont expects to submit a complete response to CMS soon. If this material is satisfactory to CMS, the revised procedural material will be included in the Cost Allocation Plan update for the next quarter.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39701</b>	Maternal and Child Health Administration	Staff time and operating costs associated with overall administration of the Maternal Child Health Division.	Relative Share of MCH Salaries.
<b>39709</b>	MCH/OLH Leave Time	Time code for time not worked such as vacations, holidays, sick leave, personal leave, and compensatory time.	Relative Share of MCH/OLH Salaries
<b>39517</b>	Sex Offense Prevention	Costs associated with activities concerned with sex offense prevention, education, training, printing, research, media, etc. Staff time for all above activities.	Direct to PHHS Block Grant
<b>39551</b>	Family Planning – Title X	Costs associated with grants and contracts for the family planning program including staff activities to develop and monitor programs.	Direct to Family Planning Program

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39552</b>	Family Planning – SSBG	Costs associated with grants and contracts for the family planning program.	Direct to Social Services Block Grant
<b>39553</b>	Family Planning	Costs associated with grants and contracts for the family planning program funded by General Funds.	Direct to Family Planning MCO Investments
<b>39554</b>	Family Planning Look-alike	Grant payments in support of the family planning Medicaid initiative	Direct to Family Planning (MCO Investments)
<b>39581</b>	CSHN Administration	Payments for Children with Special Health Needs overall administration which are not attributable to a specific clinic service, including staff time, equipment, medical supplies, etc.	Direct to MCH Grant
<b>39582</b>	CSHN Payments to HP for Treatment Services	CSHN payments to HP for authorized therapies.	Direct to MCH Grant
<b>39583</b>	CSHN – Case Management	Staff positions and operating costs directly related to case management as defined in the SPRANS grant application.	Direct to MCH Grant
<b>39584</b>	CSHN – Orthopedic	Expenditures for pediatric congenital orthopedic conditions. Includes costs of children who are Vermont residents and are sent to other states for orthopedic care and children who receive care at University Orthopedics.	Direct to MCH Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39585</b>	CSHN – Arthritis	Expenditures related to rheumatoid arthritis authorized through the Vermont Arthritis Clinic as well as those who go to the Dartmouth Hitchcock Medical Center.	Direct to MCH Grant
<b>39586</b>	CSHN – Myelo Clinic	Staff time, clinical costs and treatment costs related to children followed through CSHN Myelo Clinic.	Direct to MCH Grant
<b>39587</b>	CSHN – Hearing Impairment	Expenses directly related to the diagnosis and treatment of hearing impairment, including contractual services, hearing aids, etc.	Direct to MCH Grant
<b>39588</b>	HOP	Staff time and other costs related to the hearing screening program for infants and toddlers.	Direct to MCH Grant
<b>39589</b>	CSHN – Cleft Lip and Palate	Staff time, clinic costs and treatment costs directly related to cleft lip/palate or other facial anomaly, including dental care, orthodontics and speech therapy.	Direct to MCH Grant
<b>39590</b>	CSHN – Epilepsy	Costs directly related to the diagnosis and treatment of epilepsy and seizure control, including physician services and pharmacy.	Direct to MCH Grant
<b>39591</b>	CSHN – Metabolic	Staff time, clinical costs and treatment costs directly related to diagnosis and treatment of metabolic disorders.	Direct to MCH Grant
<b>39592</b>	CSHN – Cystic Fibrosis	Costs associated with the diagnosis and treatment of cystic fibrosis.	Direct to MCH Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39593</b>	CSHN – Special Services	Costs associated with congenital conditions not covered by other, more specific, Handicapped Children Services programs.	Direct to MCH Grant
<b>39594</b>	Jamie Rosen Fund	Costs associated with the care of children within the guidelines of the Rosen Fund as authorized by the HCS Director.	Direct to Jamie Rosen Fund
<b>39595</b>	CSHN – Cardiac	Costs associated with a pediatric congenital heart condition.	Direct to MCH Grant
<b>39596</b>	Child Development Clinic	Costs associated with the Child Development Clinic.	Direct to MCH Grant
<b>39597</b>	ILEHP	Staff time and other costs associated with the Interdisciplinary Leadership Education for Health Professionals program.	Direct to MCH Grant
<b>39598</b>	NICU	Staff time and other costs related to services for children at the Newborn Intensive Care Unit.	Direct to MCH Grant
<b>39599</b>	Renal Disease	Payments made to the Vermont Kidney Association for Renal Patient Fund.	Direct to Renal Disease MCO Investments
<b>39600</b>	Part C	Costs associated with the implementation of an early intervention program for children aged 0-36 months.	Direct to Part C
<b>39603</b>	Early Hearing Detection and Intervention Grant	Costs associated with the Children's Hearing Intervention and Resources Project, the Early Detection and Intervention CDC Grant.	Direct to Early Hearing Detection and Intervention Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39605</b>	CSHN Medical Home	Costs associated with the implementation of a MCHB grant to promote more comprehensive coordinated care for children with special health needs in the context of their primary care "medical home".	Direct to CSHN - Special Services
<b>39606</b>	Universal Newborn Hearing Screening	All costs associated with the activities authorized under a grant from HRSA to support a program of universal newborn hearing screening.	Direct to Universal Newborn Hearing Screening
<b>39607</b>	ILEHP Services	All costs associated with grant payments to UVM for ILEHP services for Global Commitment eligible children.	Direct to Global Commitment Administration
<b>39610</b>	Autism	All costs associated with a project to improve services for children youth with Autism Spectrum Disorder and other developmental disabilities	Direct to Autism
<b>39719</b>	<b>WIC MIS Planning &amp; Implementation</b>	<b>Costs associated with Planning for replacement of the legacy WIC MIS system and transfer &amp; implementation of the chosen replacement system</b>	<b>Direct to WIC MIS Planning &amp; Implementation</b>
<b>39721</b>	WIC Supplemental Food	Costs of WIC food and formula paid directly to dairies and drug companies.	Direct to WIC Supplemental Food

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39725</b>	WIC General Administration	Costs (direct or indirect) generally considered being overhead or management costs. General management costs include those costs associated with program monitoring, prevention of fraud, general oversight and food instrument accountability. Examples include WIC administrative salaries/benefits and other costs necessary to conduct outreach, food instrument reconciliation, monitoring and payment, vendor monitoring, administrative record keeping and reporting.	Direct to WIC Admin
<b>39729</b>	WIC Health Care Provider Collaboration	Costs associated with a project to develop and test a model delivering WIC services in collaboration with health care providers.	Direct to WIC Provider Collaboration
<b>39730</b>	WIC Loving Support	Costs associated with a project to use "Loving Support" materials to promote breastfeeding.	Direct to WIC Loving Support
<b>39731</b>	WIC Breastfeeding Peer Counselor Project	All costs associated with development and implementation of a WIC breastfeeding peer counselor demonstration project.	Direct to WIC Breastfeeding Peer Counselor Project
<b>39735</b>	WIC Infrastructure	All costs associated with projects to improve the general infrastructure of the WIC program as funded under the WIC Infrastructure grants.	Direct to WIC Infrastructure.
<b>39737</b>	WIC EBT Planning	All costs associated with grant-funded WIC EBT planning activities.	Direct to WIC EBT Planning.
<b>39738</b>	WIC Weight Gain	All costs associated with a behavioral weight management program for WIC prenatal women.	Direct to WIC Weight Gain.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39739</b>	BF Performance Bonus	All costs associated with activities related to the FNS breastfeeding performance bonus.	Direct to BF Performance Bonus
<b>39741</b>	Maternal and Child Planning and Evaluation	Staff time, purchased supplies, equipment and services and other costs of MCH planning and evaluation.	Direct to MCH Grant
<b>39742</b>	MCH Primary Care Planning	Costs associated with activities related to the development of a comprehensive primary care system of services for children.	Direct to MCH - Primary Care Planning
<b>39743</b>	Newborn Screening	Staff and contract activity related to the Newborn Screening Program.	Direct to Newborn Screening MCO Investments
<b>39748</b>	Abstinence Education	Costs associated with the provision of Abstinence Education.	Direct to Abstinence Education
<b>39753</b>	Healthy Babies Payments	Reimbursements for payments made to private providers in the Healthy Babies program.	Direct to Healthy Babies Payments
<b>39754</b>	Healthy Babies Payments for CHIP Recipients	Payments to EDS for Healthy Babies services provided to CHIP recipients.	Direct to Healthy Babies Payments for CHIP
<b>39758</b>	School Based MAC	Payments to schools of Federal Global Commitment funds to reimburse costs of the School Based MAC	Direct to Global Commitment Schools & UVM
<b>39759</b>	Vermont Child Health Improvement Project	Costs associated with this project, a joint effort between UVM, the Office of VT Health Access and the Vermont Department of Health.	Direct to Global Commitment Schools & UVM
<b>39790</b>	PREP-Personal Responsibility Education	All costs associated with a project to establish evidence-based comprehensive sexuality education for high risk and vulnerable youth in Vermont.	Direct to PREP-Personal Responsibility Education

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Maternal and Child Health**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39792</b>	MCH Home Visiting	All costs associated with a project to establish an evidence-based nurse home visiting program for Vermont families with young children who are at risk.	Direct to MCH Home Visiting
<b>39793</b>	LAUNCH (Linking Actions for Unmet Needs in Children's Health)	All costs associated with a strength-based, family-centered, culturally competent community system for promoting young child wellness in all developmental domains. This project will serve children aged pre-natal through 8 yrs. and their families.	Direct to LAUNCH
39794	Home Visiting Expansion	All costs associated with the expansion of the MCH Home Visiting program, funded under a supplementary grant from HRSA	Direct to MCH Home Visiting

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Promotion and Disease Prevention**

The following plan departments, descriptions, and allocation methodologies are costs associated with the Health Promotion and Disease Prevention division: Tobacco Control, Health Promotion, and Dental Health. (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.)

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39501</b>	HPDP Administration	Staff time and operating costs associated with overall administration of the Health Promotion and Disease Prevention Division.	Relative Share of HPDP Salaries.
<b>39509</b>	HPDP Leave Time	Time code for time not worked, such as vacations, holidays, sick leave, personal leave, and compensatory time.	Relative Share of HPDP Salaries.
<b>39511</b>	Health Promotion	Costs associated with activities that generally cover public health education and community organization (programs around exercise, nutrition, stress, smoking, etc.). Central office staff time.	Direct to PHHS Block Grant
<b>39512</b>	Education and Community Services	Costs associated with promotion, prevention and surveillance activities for communities or special populations.	Direct to PHHS Block Grant
<b>39513</b>	Conference Costs	Costs associated with conferences underwritten by the Department to be offset by conference fees or transfers.	Direct to Conference Costs
<b>39518</b>	Nutrition for Healthy Vermonters 2000	Costs associated with activities related to Healthy Vermonters 2000 Nutrition and Physical Activity objectives.	Direct to PHHS Block Grant
<b>39519</b>	Fit and Healthy Kids	Costs associated with the Fit & Healthy Kids program.	Direct to Fit and Healthy Kids MCO Investments

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Promotion and Disease Prevention cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39521</b>	Obesity Prevention	Costs associated with a program for nutrition and physical activity to prevent obesity and other chronic diseases.	Direct to PHHS Block Grant
<b>39524</b>	Healthy Communities	All costs associated with providing technical assistance and consultation to help communities develop and implement "Healthy Community" policy, systems, and environmental change strategies to address chronic disease prevention and health promotion.	Direct to Healthy Communities.
<b>39525</b>	Healthy Communities – ARRA	All costs associated with efforts to implement policy, environmental and system changes on a statewide level to address physical activity, nutrition and tobacco use	Direct to Healthy Communities – ARRA
<b>39562</b>	Dental Services – Homeless Health	Costs associated with activities for the Homeless Health Program including patient care (subcontractors) and program administration.	Direct to Dental Services - All Other Programs
<b>39563</b>	Dental Services Global Commitment Professional Medical	Costs associated with assessment, treatment plan review, travel and consultations for the Global Commitment program.	Direct to Global Commitment Administration
<b>39564</b>	Dental Services –Global Commitment Administration	Costs associated with claims processing for the Global Commitment program.	Direct to Global Commitment Administration

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Promotion and Disease Prevention cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39565</b>	Dental Services – All Other Programs	Costs associated with General Assistance, SPOP, CWEP, WIN, Vocations Rehabilitation, Farm Family, Child Health Services, Headstart and Mental Health Programs. This includes assessment, treatment plan review, claim processing, travel, meals, consultations and meetings.	Direct to Dental Services – All Other Programs
<b>39566</b>	Dental Access Grants	Payments to dental providers, hospitals or schools to increase dental access to low income and Global Commitment recipients.	Direct to Global Commitment Administration
<b>39567</b>	Dental Health Education	Costs associated with education, assessment, referrals for treatment, parent notices, in-service training, scheduling, fluoride rinse program, travel, meals, consultation and meetings. (Schools, nursing homes, day care, etc.)	Direct to MCH Grant
<b>39569</b>	Fluoridation	Costs associated with school and community fluoridation, promotion, systems management time spent preparing contracts and correspondence.	Direct to Fluoridation (as an MCO Investment)
<b>39570</b>	Fluoridation Systems Assistance	Operating and contractual expenses entailed in assisting community water systems to install and upgrade water fluoridation systems and to improve the operations of these systems.	Direct to Fluoridation Systems Assistance

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Promotion and Disease Prevention cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39573</b>	Oral Health Access Assessment	Costs associated with an assessment of Vermont's oral health system and the development of a strategic plan to improve that system, especially for children.	Direct to Oral Health Initiative
<b>39575</b>	Dental Public Health in D.O.'s	All costs associated with public health dental hygienists in district offices.	Direct to Dental Public Health in D.O.'s (Global Commitment)
<b>39576</b>	Oral Disease Prevention Program	All costs associated with supporting efforts to address activities associated with the CDC State-Based Oral Disease Prevention Program	Direct to Oral Disease Prevention Program
<b>39621</b>	Tobacco Control	Costs associated with the Tobacco Prevention and Control project.	Direct to Tobacco Control
<b>39623</b>	Tobacco Control – Other	Costs associated with tobacco control program activities that are not funded by CDC, RWJ, ALF or State Settlement funds and are not eligible for Global Commitment reimbursement.	Direct to Tobacco Control – Other
<b>39627</b>	Tobacco Community Based	Costs associated with tobacco community based programs.	Direct to Tobacco Settlement
<b>39628</b>	Tobacco Counter-marketing	Costs associated with tobacco counter-marketing activities.	Direct to Tobacco Settlement
<b>39629</b>	Tobacco Cessation	Costs associated with tobacco cessation programs.	Direct to Tobacco Settlement
<b>39630</b>	Tobacco Statewide	Costs associated with tobacco statewide programs.	Direct to Tobacco Settlement
<b>39631</b>	Tobacco Surveillance and Evaluation	Costs associated with tobacco surveillance and evaluation programs.	Direct to Tobacco Settlement
<b>39632</b>	Legacy Foundation	Costs associated with a program for smoking cessation and prevention among young adults funded by the Legacy Foundation.	Direct to Legacy Foundation

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Health Promotion and Disease Prevention cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39633</b>	Tobacco Quit-Lines – ARRA	All costs associated with efforts to enhance and expand tobacco cessation quit lines.	Direct to Tobacco Quit-Lines – ARRA
<b>39634</b>	Tobacco Control Supplement - CDC	All costs associated with Tobacco Control Supplement funded activities	Direct to Tobacco Control Supplement - CDC
<b>39635</b>	Community Transformation	All costs associated with the implementation of the Community Transformation Grant to strengthen local public health infrastructure in rural areas of Vermont	Direct to Community Transformation
<b>39636</b>	Chronic Disease Coordination	All costs associated with the implementation of the Chronic Disease Coordination Grant to strengthen existing chronic disease prevention programs including public health and health surveillance efforts	Direct to Chronic Disease Coordination
<b>41499</b>	MMIS-TA	Work that is related to Medicaid Management Information System (MMIS) Technical Assistance efforts	Direct to MMIS-TA

<b>Plan Department</b>	<b>References</b>
<b>39501</b> <b>39509</b>	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Office of Local Health**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are costs associated with the twelve District Offices around the State. (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.)

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39038</b>	Blueprint Administration	All costs associated with administration of the Blueprint for Health Division.	Relative Share of Blueprint Division Salaries.
<b>39030</b>	Blueprint Health Systems	All costs related to changing health systems to support care for people with chronic conditions as identified in the strategic plan. Does not include health systems work associated with a specific condition or funding source.	Direct to Blueprint
<b>39031</b>	Blueprint Self-management	All costs related to improving self-management of chronic conditions. Does not include self-management work associated with a specific condition or funding source.	Allocated Between Blueprint and Global Commitment Admin (Statistic derived from the total Medicaid eligible population divided by the total state population on an annual basis.)
<b>39032</b>	Blueprint Community Support	All costs related to enhancing community infrastructure and programs to help people manage chronic conditions. Does not include community work associated with a specific condition or funding source.	Allocated Between Blueprint and Global Commitment Admin (Statistic derived from the total Medicaid eligible population divided by the total state population on an annual basis.)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Office of Local Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39033</b>	Blueprint Information Technology	All costs related to information system development for the "Vermont Blueprint for Health"; includes projects specific to the strategic plan and linkage to department systems. Does not include information technology work associated with a specific chronic disease condition or funding source.	Allocated Between Blueprint and Global Commitment Admin (Statistic derived from the total Medicaid eligible population divided by the total state population on an annual basis.)
<b>39034</b>	Blueprint Provider Practice	All costs related to assisting health care providers to deliver quality care for chronic conditions more effectively. Does not include provider practice work associated with a specific condition or funding source.	Allocated Between Blueprint and Global Commitment Admin (Statistic derived from the total Medicaid eligible population divided by the total state population on an annual basis.)
<b>39724</b>	WIC Breastfeeding Support	Time and operating expenses associated with promoting and supporting breastfeeding. May include group education, home visiting time, training, materials, travel and space rental.	Direct to WIC Admin
<b>39736</b>	Breast Feeding Peer Counseling	Costs associated with the PHHS Block Grant for expanded activity of Breast Feeding in Franklin and Grand Isle Counties	Direct to PHHS Block Grant
<b>39744</b>	MCH – Pregnancy/Postpartum	Costs associated with Maternal and Child Health services benefiting women 22 years of age or over. This covers all costs including staff activities, purchases and grants.	Direct to MCH Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Office of Local Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39745</b>	MCH – Infants	Costs associated with Maternal and Child Health services benefiting infants up to 12 months of age. This covers all costs including staff activities, purchases, grants and contracts.	Direct to MCH Grant
<b>39746</b>	MCH – Children	Costs associated with Maternal and Child Health services benefiting children 1 to 21 years of age (except pregnant adolescents). This covers all costs including staff activities, purchases, grants and contracts.	Direct to MCH Grant
<b>39747</b>	MCH – Adolescent Pregnancy/Postpartum	Costs associated with Maternal and Child Health services benefiting pregnant women who are under 22 years of age. This covers all costs including staff activities, purchases, grants and contracts.	Direct to MCH Grant
<b>39749</b>	CHP – Maternal and Child Health	Costs associated with case management, counseling and health education, risk reduction intervention, home-based care and other supportive services for pregnant women and infants through age one for CHP commercial members.	Direct to CHP - Maternal and Child Health
<b>39750</b>	Healthy Babies	Time spent in collaboration with DCF's Child Development Division and community-based partner agencies on behalf of Medicaid-eligible pregnant and post-partum women and children ages 0 through 5 years participating in the HBKF, plus allowable costs associated with this work. These tasks include participation in the design and review of HBKF or Children's Integrated Services policies, procedures, protocols, and forms.	Direct to Global Commitment Admin

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Office of Local Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39751</b>	Healthy Babies – Non-SPMP	Time spent by Non-SPMP staff in collaboration with DCF's Child Development Division and community-based partner agencies on behalf of Medicaid-eligible pregnant and post-partum women and children ages 0 through 5 years participating in the HBKF, plus allowable costs associated with this work. These tasks include participation in the design and review of HBKF or Children's Integrated Services policies, procedures, protocols, and forms.	Direct to Global Commitment Administration
<b>39752</b>	Global Commitment Skilled Nursing	Costs associated with visits to pregnant women and infants on Global Commitment which are authorized through the Healthy Babies Program for Level II and Level III individuals. Requires a signed physician's order and a plan of care. Includes time spent in: travel to visit site, face to face contact with client, documentation in the client record and case consultations with providers. Do not use this code for the assessment visit.	Direct to Skilled Nursing
<b>39756</b>	EPSDT Administration Functions 1	Costs associated with preliminary assessments in the home, comparing treatment to screening abnormalities previously found, determining when a recipient has received a complete screen in accordance with the periodicity schedule and assessing the necessity for and adequacy of medical care and services required by individual recipients. This cost center also includes activities performed by directly supporting staff providing functions supporting the activities above.	Direct to Global Commitment Admin

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 7 cont'd:  
**Office of Local Health cont'd**

Plan Dept.	Plan Dept. Name	Description	Allocation Method
39757	EPSDT Administration Function 2	Costs associated with accounting and auditing; budgeting; program management for categories of services not requiring medical expertise; emergency transportation; non-emergency transportation and home and community-based waiver services; program analysis where the emphasis is cost or utilization of services in lieu of the medical aspects of the program, cost reimbursement including all analytical work related to the program cost of covered services; cost report settlements and establishments of rates; program integrity including any investigation and follow-up activities not directly involving the determination of the medical necessity of specific services; third party liability activities/overpayment collection activities;	Direct to Global Commitment Admin
39757	EPSDT Administration Function cont.	administrative practices and procedures including the development of State plans, administrative rates, cost allocation and provider agreements; all claims processing activities except those involving medical review of complex physician bills, reviewing the medical necessity of prior authorized services and providing required second medical opinions, which would be allowable 75% functions; outreach activities such as notifying clients of required screens from a periodicity schedule, scheduling appointments, informing clients and arranging transportation; eligibility determination; legal services including administrative appeals; and contract management.	Direct to Global Commitment Admin

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Office of Local Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39766</b>	Health Contract Services	Costs associated with activities by employees for/with schools and Headstart which have contracted with the Department of Health for school health services.	Direct to Health Contract Services
<b>39767</b>	Foster Children Health Mentoring	Costs classified as skilled professional medical associated with a pilot program to provide health advocacy and health monitoring services for pre-adolescents and adolescent foster children in the Burlington area.	Direct to Global Commitment Professional Medical
<b>39768</b>	Foster Children Health Mentoring – Global Commitment Administration	Costs not classified as skilled professional medical associated with a pilot program to provide health advocacy and health monitoring services for pre-adolescents and adolescent foster children in the Burlington area.	Direct to Global Commitment Administration
<b>39771</b>	EPSDT Outreach and Informing	Development, evaluation, review and revision of EPSDT informing letters; completion of tasks that bring about the dissemination of these letters or materials; and clarification and problem-solving, when needed, relative to Medicaid beneficiaries' receipt of informing letters; follow-up with newly eligible Medicaid beneficiaries ages zero through 20.	Direct to Global Commitment Administration

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Office of Local Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39772</b>	EPSDT SYSTEMS/INFRASTRUCTURE BUILDING	Time and other costs for tasks that are intended to improve the system of care available to Medicaid/Dr. Dynasaur beneficiaries ages zero through 20 years and pregnant women and, in some instances, for Medicaid beneficiaries 21 years and older.	Direct to Global Commitment Administration
<b>39773</b>	EPSDT Systems/Infrastructure Building (Non - SPMP)	Time and other costs for Non-SPMP staff tasks that are intended to improve the system of care available to Medicaid/Dr. Dynasaur beneficiaries ages zero through 20 years and pregnant women and, in some instances, for Medicaid beneficiaries 21 years and older.	Direct to Global Commitment Administration
<b>39774</b>	FOSTERING HEALTHY FAMILIES	Time spent by VDH staff working collaboratively with DCF Family Services division staff on tasks that improve access to health services for and the health status of children and adolescents in state custody, plus allowable costs associated with this work.	Direct to Global Commitment Administration
<b>39775</b>	Fostering Healthy Families (Non-SPMP)	Time and other costs for Non-SPMP staff tasks that are intended to improve the system of care available to Medicaid/Dr. Dynasaur beneficiaries ages zero through 20 years and pregnant women and, in some instances, for Medicaid beneficiaries 21 years and older.	Direct to Global Commitment Administration

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Office of Local Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39776</b>	Healthy Child Care Vermont (HCCVT)	Time spent by VDH staff on tasks that are intended to improve the health of Medicaid/Dr. Dynasaur beneficiaries attending DCF-regulated child programs, plus allowable costs associated with this work.	Direct to Global Commitment Administration
<b>39778</b>	SCHOOL-BASED HEALTH ACCESS PROGRAM	Time and associated costs for School-based Health Access Program or Coordinated School Health tasks that are intended to improve the health of school-age Medicaid/Dr. Dynasaur beneficiaries. In limited instances, time spent by Public Health Nutritionists on Coordinated School Health tasks is also covered by this code. This does not include payments to schools that are paid under program code 39758.	Direct to Global Commitment Administration
<b>39780</b>	OTHER PROGRAM INITIATIVES	Time and other costs related to program or special initiative activities when no other program code is available to use for this work.	Direct to Other Program Initiatives.

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
<b>39701</b> <b>39709</b> <b>39712</b> <b>39758</b> <b>39759</b>	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Board of Medical Practice**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for costs associated with the Board of Medical Practice.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39020</b>	Medical Practice Board	Costs associated with the Medical Practice Board except those costs specifically described elsewhere.	Allocation Between Medical Practice Board and Global Commitment Admin. (Statistic derived from the total Medicaid eligible population divided by the total state population on an annual basis.)
<b>39021</b>	Vermont Practitioner Health Program	Costs associated with the Vermont Medical Society.	Allocation Between Medical Practice Board and Global Commitment Admin (Statistic derived from the total Medicaid eligible population divided by the total state population on an annual basis.)
<b>39029</b>	Medical Practice Board Leave Time	Time code for time not worked, such as vacations, holidays, sick leave, personal leave and compensatory time.	Direct to Medical Practice Board

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 9:

**Environmental Health**

The following plan departments, descriptions, and allocation methodologies are costs associated with the Environmental Health division: Environmental Tracking, Healthy Homes and Childhood Lead Poisoning Prevention; Asbestos and Lead Regulation, Radiology and Toxicology, and Food and Lodging. (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.)

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39119</b>	Lead Investigation	Staff time and other costs associated with investigating sources of exposure for severely lead poisoned children.	Direct to Lead Investigation
<b>39120</b>	Healthy Homes & Lead Poisoning Prevention	All costs associated with the Healthy Homes and Lead Poisoning Prevention Program. Follow-up activities for Global Commitment-eligible clients are coded to EPSDT Administration functions.	<del>Direct to Healthy Homes</del> <b>Direct to Global Commitment MCO Investment.</b>
<b>39121</b>	EPA Lead Certification Project	Costs associated with establishing an EPA-authorized Lead Model Plan, including an equity project, processing of certification applications, public outreach, and enhanced tracking programs.	Direct to EPA Lead Certification Project
<b>39122</b>	Act 125 Activities	Costs associated with carrying out the enforcement activities related to Act 125: An Act to Prevent Lead Poisoning in Children in Rental Housing and Child Care Facilities	<del>Direct to Childhood Lead Poisoning Prevention</del> <b>Direct to Global Commitment MCO Investment</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Environmental Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39123</b>	Lead Safe Housing Education Contract	Cost of all activities under contract with Vermont Housing and Conservation Board to provide educational and informational services related to lead safe housing.	Direct to Lead Safe Housing
<b>39124</b>	Lead Hazard Awareness Campaign	Costs associated with home visits, on the subject of lead poisoning prevention, made prior to the start of VHCB's lead abatement services.	Direct to Lead Hazard Awareness Campaign
<b>39125</b>	Water Supply Program Support	Costs associated with activities which support the public water supply program administered by the Department of Environmental Conservation.	Direct to Water Supply Program Support
<b>39126</b>	Private Water Supplies	Costs associated with providing information and assistance to the public regarding the quality of private water supplies other than the costs of laboratory analysis of water samples.	Direct to Private Water Supplies
<b>39127</b>	Asbestos Certification, Notification and Technical Assistance	Costs of activities associated with certification of asbestos removal contractors, site inspections and technical assistance.	Direct to Asbestos Certification, Notification and Technical Assistance
<b>39128</b>	Asbestos in Schools	Costs associated with conducting inspections of schools and providing technical assistance to schools for compliance with AHERA.	Direct to Asbestos in Schools
<b>39129</b>	Health Officer Assistance	Costs associated with any work dealing with Health Officers or local health issues.	Direct to PHHS Block Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Environmental Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39132</b>	Potassium Iodide Distribution	All staff time and other costs associated with distribution of potassium iodide.	Direct to VRERP
<b>39133</b>	North Clarendon Toxicology Assessment	Costs associated with the investigation, risk assessment and remediation of potential health issues in the North Clarendon area.	TBD (no costs included in current CAP)
<b>39136</b>	ABLES	All costs and receipts associated with the Adult Blood Lead epidemiology Surveillance Program from CDC.	Direct to ABLES
<b>39137</b>	Environmental Public Health Tracking Program	All costs associated with the establishment and maintenance of a tracking network to obtain integrated health and environmental data in support of actions that improve the health of communities.	Direct to Environmental Public Health Tracking
39138	BRACE (Building Resilience Against Climate Change Effects in VT)	All costs associated with the implementation of the BRACE grant to support activities and staff, funded by the CDC	Direct to BRACE
<b>39151</b>	Food and Lodging – Surveillance, Technical Assistance and Licensing	Cost associated with the inspection of food and lodging establishments. Includes paperwork associated with issuing licenses to establishments, change of owner and new establishment inspections. Also includes formal and informal review of plans and blueprints.	Direct to Food and Lodging

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Environmental Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39152</b>	Food and Lodging – Administration and Program Development	Cost associated with planning, goal setting, paperwork, staff meetings, supervision, general correspondence, budget, public meetings, formal training of others, attending workshops, conferences, etc.	Direct to Food & Lodging
<b>39153</b>	Food and Lodging – Data Management	Cost associated with computer time, data entry, programming, work with programmer and statistician, data retrieval, etc.	Direct to Food & Lodging
<b>39154</b>	Food Protection Task Force	All costs associated with the implementation of the Food Protection Task Force grant to support activities & meetings of a food safety task force	Direct to Food Protection Task Force.
<b>39155</b>	Manufactured Food Regulatory Program	All costs of those activities associated with the conformance with the Manufactured Food Regulatory Program Standards	Direct to Manufactured Food Regulatory Program
<b>39210</b>	Radiation Inspections	Costs associated with on site evaluation of medical/dental x-ray equipment functions, radiation shielding and exposure to employees, patients and general public. Maintaining and updating registration program for all x-ray equipment in the state. Conducting all other types of radiation evaluations.	Direct to Radiation Inspections
<b>39211</b>	Mammography X-Ray Unit Inspection	Costs associated with radiation safety inspection of mammography x-ray equipment per the current agreement with the Food and Drug Administration.	Direct to Mammography X-ray Unit Inspection
<b>39214</b>	VRERP Training		Direct to VRERP

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 9 cont'd:

**Environmental Health cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39215</b>	Tritium Leak 2010	All costs associated with the investigation of elevated tritium levels from Vermont Yankee	Direct to Tritium Leak 2010
<b>39401</b>	Environmental Health Administration	Staff time and operating costs associated with overall administration of the Environmental Health Division.	Relative Share of Environmental Health Division Salaries.
<b>39409</b>	Environmental Health Leave Time	Time code for time not worked such as vacations, holidays, sick leave, personal leave, and compensatory time	Relative Share of Environmental Health Division Salaries.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Alcohol and Drug Abuse Programs**

Nature and Extent of Services: The following plan departments, descriptions, and allocation methodologies are for costs associated with Alcohol and Drug Research and Planning; Alcohol and Drug Abuse Treatment; and Alcohol and Drug Prevention. (It is standard practice that any staff person in the department can code costs to any program code in the department if that code is the most appropriate description of the cost. These plan dept. codes are shown within this Division as an approximate guide to the most likely users of these codes.)

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39801</b>	Alcohol and Drug Abuse Programs Administration	Staff time and operating costs associated with overall administration of the Alcohol and Drug Abuse Programs	Relative Share of ADAP Program Salaries
<b>39809</b>	Alcohol and Drug Abuse Programs – Leave Time	Time code for time not worked, such as vacations, holidays, sick leave, personal leave and compensatory time.	Relative Share of ADAP Program Salaries
<b>39811</b>	Substance Abuse Prevention Consultant System	All costs associated with the Substance Abuse Prevention Consultant System including payroll, benefits, travel, operations, etc.	Direct to Substance Abuse Grant
<b>39812</b>	Vermont Alcohol & Drug Information Clearinghouse	All costs associated with Vermont Alcohol and Drug Information Clearinghouse (VADIC) / Prevention communications activities.	Direct to Substance Abuse Grant
<b>39813</b>	Community Substance Abuse Prevention Technical Assistance Funds.	All costs associated with Community Substance Abuse Prevention Technical Assistance Funds (Prevention Consultant System).	Direct to Substance Abuse Grant
<b>39814</b>	OJJDP	Costs associated with combating underage drinking through public policy enforcement.	Direct to OJJDP
<b>39815</b>	Juvenile Accountability Incentive Block Grant (JAIBG)	Costs associated with action steps that will improve the adolescent service system for children in trouble with substance abuse.	Direct to JAIBG

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39821</b>	Student Assistance Program (SAP) – Prevention	Costs associated with the Student Assistance Program through the Prevention Unit.	TBD (no costs included in current CAP)
<b>39822</b>	Youth Initiative – Community Based Programs	Costs associated with Community Based Programs, such as the continuation of the New Directions Coalition grants, New Directions staff salaries and operating expenses for things like meetings, publishing reports, travel, etc.	Direct to Substance Abuse Grant
<b>39823</b>	Student Assistance Programs (SAP) – Assessment and Referrals	Costs associated with a school based program for assessment and referral with regard to substance abuse.	Direct to Student Assistance Programs
<b>39825</b>	Strategic Prevention Framework Partnership for Success (SPF-PFS)	All costs associated with the Strategic Prevention Framework initiative targeted to prevent the onset and reduce the progression of substance abuse.	Direct to Strategic Prevention Framework Partnership for Success (SPF-PFS)
<b>39826</b>	Strategic Prevention Framework State Incentive Grant - CHAMPS	The SPF-SIG portion of the CHAMPS initiative, part of the Legislative Common Sense Initiative.	Direct to Strategic Prevention Framework State Incentive Grant
<b>39827</b>	Strategic Prevention Framework Partnership for Success -- Community (SPF-PFS)	All community sub grant costs associated with the Strategic Prevention Framework Partnership for Success Grant.	Direct to Strategic Prevention Framework Partnership for Success (SPF-PFS)
<b>39828</b>	Strategic Prevention Framework State Incentive Grant - State Evaluation	All State evaluation costs associated with the Strategic Prevention Framework State Incentive Grant (SPF-SIG).	Direct to Strategic Prevention Framework State Incentive Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 10:  
**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39829</b>	SPF – SPE Community Evaluation	All Community evaluation costs associated with the Strategic Prevention Framework State Incentive Grant (SPF-SIG).	Direct to SPF – SPE.
<b>39831</b>	Other Opiate Initiatives	Services supporting opiate treatment other than direct medication assisted therapy.	Direct to Substance Abuse Grant
<b>39832</b>	Block Grant Administration	Costs associated with administration of grant.	Direct to Substance Abuse Grant
<b>39833</b>	DDRP	Costs associated with the Drinking Driver Rehabilitation Program including DWI assessments and CRASH schools.	Number of ADAP Clients Per Quarter (Global Commitment Eligible)
<b>39834</b>	Public Inebriate Program	Costs associated with program.	Direct to Substance Abuse Grant
<b>39835</b>	Payments Assistance Program	Staff time, operating costs and payments to providers to treatment.	Direct to Substance Abuse Grant
<b>39836</b>	Payments to Providers for Treatment – Outpatient	Direct payments.	Direct to Substance Abuse Grant
<b>39837</b>	Payments to Providers for Treatment – Intensive Outpatient	Direct payments.	Direct to Substance Abuse Grant
<b>39838</b>	Payments to Providers for Treatment – Residential	Direct payments.	Direct to Substance Abuse Grant
<b>39841</b>	Payments to Providers for Treatment: Half-Way	Direct payments.	Direct to Substance Abuse Grant
<b>39842</b>	Payments to Providers for Treatment: Crash	Direct payments.	Direct to Substance Abuse Grant
<b>39843</b>	Payments to Providers for Treatment: Assessment	Direct payments.	TBD (no costs included in current CAP)
<b>39844</b>	Payments to Providers for Treatment: Special Populations	Direct payments.	Direct to Substance Abuse Grant
<b>39845</b>	Alcohol and Drug Abuse Programs Provider Monitoring	Costs associated with monitoring activities.	Number of ADAP Clients Per Quarter (Global Commitment Eligible)
<b>39846</b>	Payments to EDS for Global Commitment: General	Direct payments.	Payments to EDS for Global Commitment: General

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 10:  
**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39851</b>	Payments to EDS for CHIP	Payments to EDS on behalf of children eligible for the Children's Health Insurance Program.	Direct to Payments to EDS for CHIP
<b>39852</b>	Barriers to Treatment	Payments to remove barriers to treatment.	Direct to Substance Abuse Grant
<b>39853</b>	Treatment Improvement	Costs associated with tracking funds for accreditation and provider data collection.	Direct to Substance Abuse Grant
<b>39854</b>	Performance Outcome Indicators	Costs associated with performance indicators, including support for development of processes for monitoring treatment outcome indicators used for continuous treatment improvement.	Direct to Substance Abuse Grant
<b>39855</b>	Service Planning and Coordination	Costs associated with services to ensure that adequate treatment plans are developed and implemented for adolescents receiving treatment through DDMH facilities and their families. Paid through the transfer of match funds to DDMH.	Direct to Substance Abuse Grant
<b>39859</b>	Payments to Providers for Residential Treatment – Non Block Grant Expenses	Direct payments.	Direct to Payments to Providers for Residential Treatment – Non Block Grant Expenses
<b>39860</b>	ADAP Treatment Unit	To aggregate the time the Alcohol and Drug Abuse Treatment Unit staff whose assigned duties comprise the assessment, certification and monitoring of residential and individual treatment providers pursuant to the Global Commitment State Plan.	Direct to Global Commitment Administration.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



Plan Department 10:  
**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39862</b>	Methadone Treatment – Block Grant Eligible	Methadone costs not eligible for Medicaid.	Direct to Substance Abuse Grant
<b>39863</b>	Student Assistance Program (SAP) – Treatment Grants	Payments to providers for treatment: SAP	Split between Substance Abuse Grant and Global Commitment Admin based on Medicaid allowable share of costs.
<b>39864</b>	Youth Initiative: Outpatient Treatment	Costs associated with specialized youth clinicians and case managers. Also grants to preferred providers in a particular geographic area to fund youth treatment services.	Direct to Substance Abuse Grant
<b>39865</b>	Case Management	Costs associated with services to ensure that adequate treatment plans are developed and implemented for ADAP non- Global Commitment clients in treatment and their families.	Direct to Substance Abuse Grant
<b>39866</b>	Payments to Providers – Bradford Operations	Payments to OAS, LLC for residential treatment at the Valley Vista Facility.	Direct to Provider Payments – Bradford Ops
<b>39867</b>	Payment to Provider Non Resident Non Block Grant	To identify payments to providers for non-residential services that is non-block grant expenditures.	Direct to Payment to Provider Non Resident Non Block Grant
<b>39868</b>	Building the Infrastructure of Vermont's Adolescent Treatment System	All costs associated with the enhancement of the service system that treats adolescent substance abuse, including the co-occurring problems of substance abuse and mental health disorders.	Direct to SAMHSA Adolescent Treatment Grant
<b>39869</b>	Prescription Drug Monitoring Program	Costs associated with developing and maintaining a program to prevent prescription drug abuse in Vermont.	Direct to Prescription Drug Monitoring

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 10:  
**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39871</b>	State Epidemiological Outcomes Workgroup (SEOW) Program	All Costs associated with staffing and operating expenses for the State Epidemiological Outcomes Workgroup (SEOW) Program	Direct to State Epidemiological Outcomes Workgroup (SEOW) Program
<b>39873</b>	Youth Risk Behavioral Survey	Costs associated with survey.	Direct to YRBS
<b>39875</b>	Needs Assessment – Treatment	Staff time, contractual payments and all other costs associated with implementing the needs assessment contract for Treatment contract with began 9/26/97.	Direct to Needs Assessment Contract
<b>39876</b>	Needs Assessment – Prevention	Staff time, contractual payments and all other costs associated with implementing the needs assessment contract for Prevention contract.	Direct to Needs Assessment Contract
<b>39877</b>	Case Management – Rutland Court System	Costs associated with providing case management services to high risk youth in the court system. Case Managers broker clinical, educational and vocational services and they assure that the clients access the necessary services.	Direct to Substance Abuse Grant
<b>39880</b>	Community Recovery Centers	Costs to provide seed funding to establish community-based and community-run recovery centers which provide a place for self-help, education and referral services in the community.	Direct to Community Recovery Center

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 10:  
**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>9883</b>	State Data Infrastructure	Costs associated with a project to develop an infrastructure for data collection pertaining to substance abuse treatment services.	Direct to State Data Infrastructure
<b>39884</b>	Other Treatment Grants – Transitional Housing	Costs associated with short-term (30 to 90 days) housing for clients who have completed formal treatment and are in need of a supportive residential environment to enable them to reestablish themselves in the community.	Direct to Substance Abuse Grant
<b>39885</b>	Transitional Housing-Charitable Choice		Direct to Transitional Housing-Charitable Choice (state funds)
<b>39886</b>	Strategic Prevention Framework State Incentive Grant - Community Media	All Community media costs associated with the Strategic Prevention Framework State Incentive Grant (SPF-SIG).	Direct to Strategic Prevention Framework State Incentive Grant
<b>39887</b>	Strategic Prevention Framework State Incentive Grant - Community Training	All Community training costs associated with the Strategic Prevention Framework State Incentive Grant (SPF-SIG).	Direct to Strategic Prevention Framework State Incentive Grant
<b>39888</b>	Methadone Treatment – NonBlock Grant Eligible	- Methadone costs not eligible for SAPT Block Grant reimbursement	Direct to SAPT Not claimed
<b>39889</b>	Substance Abuse Prevention Administration and Planning.	All costs associated with Substance Abuse Prevention including payroll, benefits, travel, operations, etc., for administration, planning, evaluation, and sub-recipient monitoring.	Direct to Substance Abuse Grant
<b>39890</b>	Substance Abuse Prevention Community Grants Program	All costs associated with Substance Abuse Prevention Community grants program.	Direct to Substance Abuse Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

Plan Department 10:  
**Alcohol and Drug Abuse Programs**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
<b>39891</b>	Substance Abuse Prevention Community – Project Rocking Horse.	All costs associated with the Project Rocking Horse grant program.	Direct to Substance Abuse Grant
<b>39892</b>	Substance Abuse Workforce Development	All costs associated with substance abuse workforce development and training.	Direct to Substance Abuse Grant
<b>39893</b>	Direct Outpatient Treatment Services	All costs associated with outpatient, intensive outpatient, or clinical case management services.	Direct to Substance Abuse Grant
<b>39894</b>	Building Substance Abuse Treatment Capacity	All costs associated with the building of substance abuse treatment capacity in Franklin, Chittenden, Rutland, Caledonia and Orleans County in accordance with the Memorandum of Understanding with the Department of Corrections as authorized by H.859 (S.179) in the 2007-2008 Legislative session.	Direct to Substance Abuse Grant
<b>39895</b>	Other Opiate Addiction Related Services	Provides specification for opiate services that are not direct treatment services.	Direct to Substance Abuse Grant
<b>39896</b>	Public Inebriate Services, Challenges for Change, Global Commitment	Crisis intervention for Mental Health and substance abuse issues; non-categorical case mgmt.; development of a detoxification bed program	Direct to Public Inebriate Services, Challenges for Change, Global Commitment MCO Investments

*Cost Allocation Plan Guidance:*

<b>Plan Department</b>	<b>References</b>
39801 39809 39833 39845 39846	OMB A-87, Attachment A, Section C (1)(a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Department of Mental Health (DMH)**

**I. Introduction**

**VERMONT AGENCY OF HUMAN SERVICES  
DEPARTMENT OF MENTAL HEALTH  
COST ALLOCATION PLAN**

**Effective April 1, 2013**

**TABLE OF CONTENTS**

<b>I.</b>	<b>CERTIFICATIONS</b>	<b>3</b>
<b>II.</b>	<b>INTRODUCTION</b>	<b>5</b>
<b>III.</b>	<b>ORGANIZATION</b>	<b>6</b>
<b>IV.</b>	<b>FEDERAL AND STATE PROGRAMS</b>	<b>8</b>
<b>V.</b>	<b>COST IMPACT STATEMENT</b>	<b>9</b>
<b>VI.</b>	<b>PLAN DEPARTMENTS AND ALLOCATION METHODOLOGIES</b>	<b>10</b>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## II. CERTIFICATIONS

### STATE OF VERMONT DEPARTMENT OF MENTAL HEALTH COST ALLOCATION PLAN

#### CERTIFICATION

In accordance with 45 CFR 95.507 (a) (8), I hereby certify that:

- 1) The information contained in this proposed cost allocation plan is prepared in conformance with Office of Management and Budget Circular A-87;
- 2) The costs are accorded consistent treatment through the application of generally accepted accounting principles appropriate to the circumstances;
- 3) An adequate accounting and statistical system exists to support claims that will be made under the cost allocation plan; and
- 4) The information provided in support of the proposed cost allocation plan amendment is accurate.

Vermont Department of Mental Health  
Government Unit

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**STATE OF VERMONT DEPARTMENT OF MENTAL HEALTH COST ALLOCATION PLAN**

**Outside Agency Cost Statement**

I hereby certify that wherever costs are claimed for services provided by a governmental agency outside the Department of Mental Health that they will be supported by a written agreement that includes at a minimum: (i) the specific services(s) being purchased; (ii) the basis upon which the billing will be made by the provider agency (e.g., time reports, number of homes inspected, etc.); and (iii) a stipulation that the billing will be based on the actual costs incurred, except where the cost involved are specifically addressed in the Vermont Department of Mental Health Cost Allocation Plan.

Vermont Department of Mental Health  
Government Unit

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### III. INTRODUCTION

The Department of Mental Health (DMH) was established by the state legislature effective July 1, 2007.

Within this document we have included an overview of DMH's organizational structure and a list of the specific functions performed by DMH, referred to as plan departments or cost pools, and the allocation method for each function. Please note that the plan department numbers correspond to internal AHS program codes, from the state accounting system.

Our cost allocation plan (CAP) narrative is broken out into organizational areas called "cost centers" that are based on the sections of our organizational chart. Cost centers are comprised of various plan departments or units of cost that fall under each cost center.

Staff at DMH direct code their time to the programs they support throughout their work day. DMH staff enters their time into the state's payroll system. When staff enters timesheet information, they "direct code" their time and the data feeds the VISION accounting system. Staff performing support functions will use their assigned VISION code unless they work on a specific function where they are required to direct code their time to a specific function or program. Staffs who work across multiple programmatic and direct service areas will code their time appropriately to multiple VISION codes. 100% of staff time is recorded. As a result, the staff costs in each VISION code are from staff recording their time, and an individual's cost may appear in more than one code, though it cannot exceed the total cost of that employee.

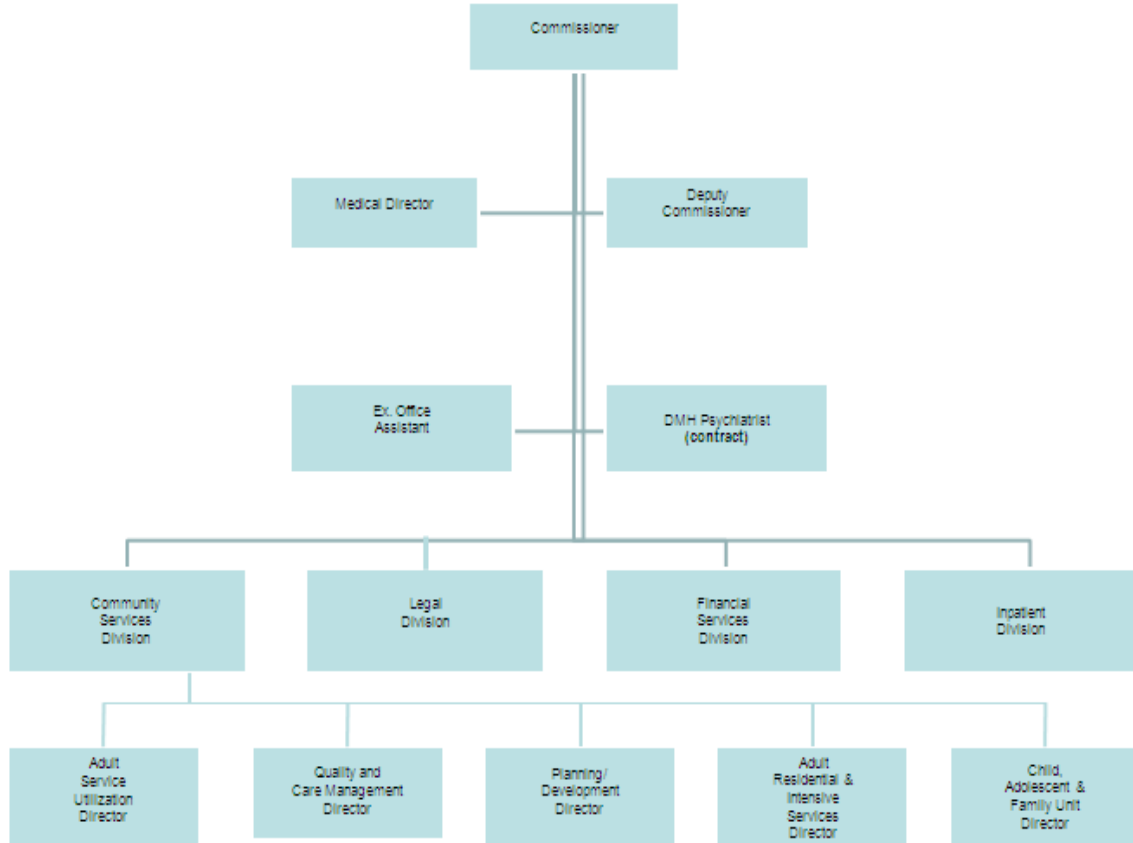
\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



## IV. Organization

DMH has set up our cost allocation plan narrative to mirror the organizational structure under which it operates. Section VI of this document describes, in narrative form, our cost allocation process. We have included a table that breaks out each of our cost pools, which mimic the boxes below on the organization chart; the narrative and organizational chart crosswalk to one another, and the narrative further describes the programs that the units within DMH administer.

### DEPARTMENT OF MENTAL HEALTH



\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

DMH contracts with ten designated community agencies (DAs) and one specialized service agency (SSA) to provide services to adults with severe mental illness and adults with less severe emotional or behavioral problems that still disrupt their lives; children and adolescents experiencing a serious emotional disturbance and their families; and anyone who is experiencing an acute mental-health crisis.

The contracted designated agencies also operate mental health Emergency Services Programs which are available 24 hours a day, seven days a week, responding to any individual experiencing a mental health crisis and to communities following natural disasters, accidental deaths, suicides and other traumatic events. Emergency programs also screen situations to determine if there is need for admission into involuntary and/or acute care arrangements.

On August 28, 2011 Tropical Storm Irene produced a devastating flood which wreaked havoc on the town of Waterbury including the State of Vermont office complex and the Vermont State Hospital (VSH). The Waterbury facility, where the majority of state human services staff worked, is no longer occupied. During the flooding emergency the VSH patients were safely evacuated to alternate locations. These included psychiatric units of other acute care hospitals, other community programs and a wing of a correctional center which was converted to a secure treatment program run by VSH staff. Among the alternate locations are Springfield Correctional Facility, Brattleboro Retreat, Second Spring in Williamstown, Fletcher Allen Health Care in Burlington, Chrysalis House in Waterbury, Robinson House and Hill House in Middlebury and The Pines in Lyndonville. Psychiatric Services for these patients are allocated to the hospitals based on the numbers of beds.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## V. FEDERAL AND STATE PROGRAMS

Vermont operates under a Medicaid waiver. The Global Commitment to Health Section 1115(a) Demonstration is designed to use a multi-disciplinary approach including the basic principles of public health, the fundamentals of effective administration of a Medicaid managed care delivery system, public-private partnership, an initiative in employer sponsored health insurance, and program flexibility. Specifically, Vermont expects to demonstrate its ability to achieve universal access to health care, cost containment, and improved quality of care. The initial Global Commitment to Health Demonstration was approved in September of 2005. As a result of the waiver, DMH allocates cost to Global Commitment (Program) and Global Commitment (Investment) based on the type of expenditure and what was determined between the Centers for Medicare and Medicaid Services (CMS) and the Department of Vermont Health Access (DVHA).

### List of Federally Assisted and Other Programs Performed

<b>Program Names/Descriptions</b>	<b>Federal CFDA Numbers (if applicable)</b>
Child Mental Health Initiative (CMHI, Youth in Transition grant)	93.104
Mental Health Services Block Grant	93.958
<del>Crisis Counseling Services</del>	<del>93.982</del>
Jail Diversion and Trauma Recovery	93.243
Mental Health Transformation Grant	93.243
National Child Traumatic Stress Initiative Cat 3	93.243
PATH Formula Grant	93.150
Social Services Block Grant (SSBG)	93.667
State Data Infrastructure Grant	93.243
EDI (Contract)	93.243
Transformation Transfer Initiative	N/A
Vermont Children's Health Insurance Program	93.767
Medicaid ADMIN	93.778
Medicaid PROGRAM	93.778

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## VI. COST IMPACT STATEMENT

All changes in the Cost Allocation Plan are identified in red. The cost impacts, by category, are as follows.

**Category 3** – Programs in this category are new or have been updated but have no adverse federal impact

Cost Center 3: Operations has been dissolved. All functions still exist and have been moved to other cost centers as appropriate. Other cost centers have been renumbered to maintain numerical order throughout the narrative. Names of cost centers have also been edited to more accurately mirror the DMH organizational chart. All of these changes are not reflected in the chart below, but are marked with red font throughout the narrative.

Additionally, the following program codes have been added, deleted, or edited throughout the CAP narrative.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
42014	DMH Administration	Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, <del>Director of Operations,</del> <del>Community Services Director,</del> <del>Operations Manager,</del> Administrative Support Coordinator, and Deputy Commissioner	Total Cost of All Programs, Including Community Health and Inpatient Care
42015	Community <del>Mental Health Administration – Adults and Children</del>	<del>Allocated Care Management to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate</del> Staff time and operating costs associated with overall administration of adult and children's mental health programs, excluding inpatient care	Total Costs of All Programs Excluding Inpatient Care
42301	<del>Inpatient</del> Direct Service Technical <del>Assistants</del> Assistance Supports	Staff costs associated with <del>oversight of inpatient</del> mental health <del>services</del> Technical Assistance	<del>Total Cost of Inpatient Programs</del> Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Category 3 cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42303	<del>Policy and Legislative Liaison</del> Department Planning and Development	Staff costs associated with oversight of all policy development and assessment of impacts of legislative actions across the department	Total Cost of All Programs, Including Community Health and Inpatient Care
42304	<del>Clinical Director</del>	<del>Staff costs associated with the Clinical Director who oversees the adult and children's programs.</del>	<del>Total Cost of all Clinical Programs</del>
42305	Adult Services Utilization Director	Costs associated with the oversight of Housing Supports, Utilization Review, and Employment Supports	Full Time Equivalent Count across Housing, Utilization Review, and Employment Supports
42306	Inpatient Utilization Review	Costs associated with conducting utilization review activities for inpatient services	Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate
42307	Residential and Intensive Services Director	Responsible for overseeing technical assistance and secure residential staff	Full Time Equivalent Count across Technical Assistance and Secure Residential
42319	<del>Information and Data Management</del> Technology and Data Collection	Staff costs associated managing information and data received from all state and non-state facilities	Total Cost of All Programs, Including Community Health and Inpatient Care
42321	Legal Services – Inpatient	Legal services costs associated with Inpatient programs	Total Cost of All <del>Programs, Including</del> Inpatient Care <del>Programs</del>
42322	Legal Services – Community Mental Health	Legal services costs associated with Community Mental Health programs	Total Cost of All <del>Programs, Including</del> Community Health <del>Programs</del>
42401	<del>SAMHSA/FEMA Regular Services Program Grant for Adults</del>	<del>Program pays for SAMHSA/FEMA Crisis Counseling Assistance and Training Program for adults</del>	<del>Direct to SAMHSA/FEMA Regular Services Program Grant</del>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## VII. PLAN DEPARTMENTS AND ALLOCATION METHODOLOGIES

### Cost Center 1: State- and Agency-wide Costs

The State of Vermont, Agency of Human Services negotiates the annual State Wide Indirect Cost Allocation Plan (SWICAP) with the Federal Government. The approved statewide indirect costs applicable to DMH are included in the CAP and allocated to the appropriate benefiting objectives.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
1000.1	SWICAP	DMH Allocation of Statewide Indirect Costs	Relative Share of Department Salaries
1000.2	Financial Statement & Internal Control Reviews	DMH Allocation of Financial Statement & Internal Control Reviews Indirect Costs	Relative Share of Department Salaries
1000.3	Attorney General's Office	DMH Allocation of Attorney General's Office Costs; costs are allocated to DMH based on time studies performed by the attorneys	Relative Share of Department Salaries
1000.4	AHS Secretary's Office	DMH Allocation of AHS Secretary's Office	Relative Share of Department Salaries
1000.5	AHS Field Services	DMH Allocation of the costs of AHS Field Services	Relative Share of Department Salaries
1000.6	AHS Information Technology	DMH Allocation of AHS IT costs for salaries, fringe, and operating expenses; costs are allocated to DMH based time studies performed by IT staff	Relative Share of Department Salaries

*Cost Allocation Plan Guidance:*

References
2 CFR Part 225 OMB A-87, Attachment A, Section C (1) (a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## Cost Center 2: Administrative Services

This cost center is comprised of costs associated with running the department from an administrative, organizational standpoint. The Commissioner, Deputy Commissioner, Medical Director, and Executive Office Assistant, ~~and Policy and Legislative Liaison~~ are all included in this cost center.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
41639	ICD-10 - Contractual Costs	Contractor expenses - associated with the ICD-10 planning	Direct to ICD-10 IAPD
41640	ICD-10 Staff Costs	Conversations or work associated with the ICD-10 planning	Direct to ICD-10 IAPD
41642	MES – DDI Staff	Staff work associated with the development of the MES	Per Approved Health Enterprise IAPD
42014	DMH Administration	Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, <del>Director of Operations,</del> <del>Community Services Director,</del> <del>Operations Manager,</del> Administrative Support Coordinator, and Deputy Commissioner	Total Cost of All Programs, Including Community Health and Inpatient Care
<del>42303</del>	<del>Policy and Legislative Liaison</del>	<del>Staff costs associated with oversight of all policy development and assessment of impacts of legislative actions across the department</del>	<del>Total Cost of All Programs, Including Community Health and Inpatient Care</del>
42600	General Funded Activities and Services	Activities that are not eligible for reimbursement under other funding sources	Direct to General Fund
41499	MMIS-TA	Work that is related to MMIS Technical Assistance efforts	Direct to MMIS-TA (75%)
41618	SOA - Infrastructure Components - Staff	Staff Expenses related to Health Enterprise shared component design and development	Per Approved Health Enterprise IAPD

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### Cost Center 3: Operations

This cost-center is comprised of costs associated with department wide operations. Although the Administrative Support Services and Hospital and Direct Service Operations units falls under the Operations section of our organizational chart, these staff direct coded to the programs which they administer and the facilities to which their work is related.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
41499	MMIS TA	Work that is related to MMIS Technical Assistance efforts	Direct to MMIS TA (75%)
41618	SOA—Infrastructure Components—Staff	Staff Expenses related to Health Enterprise shared component design and development	Per Approved Health Enterprise IAPD
42005	Data Infrastructure	Non-staff time associated with the Federal Data Infrastructure Grant for the collection, analysis, and reporting on Mental Health System data	Direct to Data Collection Grant
42014	DMH Administration	Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, Director of Operations, Administrative Support Coordinator, and Deputy Commissioner	Total Cost of All Programs, Including Community Health and Inpatient Care
42318	Facilities and Planning	Staff costs related to overseeing space and facilities and related planning efforts	Total Cost of All State-Run Programs
42319	Information and Data Management	Staff costs associated managing information and data received from all state and non-state facilities	Total Cost of All Programs, Including Community Health and Inpatient Care
42771	Data Infrastructure Staff Costs	Costs related to data collection, analysis, and reporting conducted by staff members; grant covers costs that are otherwise allowable as an indirect cost	Allocated to Data Infrastructure grant and all DMH programs

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



### Cost Center 34: Legal

The Legal cost center is for all costs related to our legal services staff.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
42320	Legal Director and Assistant	Staff costs associated with the overall costs of the Legal Director and Assistant Legal Director	Total Cost of All Programs, Including Community Health and Inpatient Care
42321	Legal Services – Inpatient	Legal services costs associated with Inpatient programs	Total Cost of All Programs, Including Inpatient Care Programs
42322	Legal Services – Community Mental Health	Legal services costs associated with Community Mental Health programs	Total Cost of All Programs, Including Community Health Programs
42323	Legal Services – All Mental Health	Legal services costs associated with Mental Health programs	Total Cost of All Programs, Including Community Health and Inpatient Care

### Cost Center 45: Financial and Operations

Cost center 45 is comprised of all costs related to our financial and operations staff.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
42014	DMH Administration	Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, <del>Director of Operations</del> , Community Services Director, Operations Manager, Administrative Support Coordinator, and Deputy Commissioner	Total Cost of All Programs, Including Community Health and Inpatient Care
42313	Financial – All Programs	Staff costs within the financial unit associated with workers supporting all programs	Total Cost of All Programs, Including Community Health and Inpatient Care
42314	Financial – Adult Programs	Staff costs within the financial unit associated with workers supporting all adult programs	Total Cost of All Adult Programs
42315	Financial – Children Programs	Staff costs within the financial unit associated with workers supporting all children programs	Total Cost of All Children Programs

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

### Cost Center 45: Financial and Operations cont'd

Cost center 45 is comprised of all costs related to our financial and operations staff.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
42316	Financial – Inpatient Programs	Staff costs within the financial unit associated with workers supporting all inpatient programs	Total Cost of All Inpatient Programs

### Cost Center 56: Quality and Care Management Assurance

This cost center houses costs related to DMH's quality assurance and care management procedures services.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
42005	Data Infrastructure	Non-staff time associated with the Federal Data Infrastructure Grant for the collection, analysis, and reporting on Mental Health System data	Direct to Data Collection Grant
42317	Quality Assurance	Staff costs associated with quality assurance, outcomes, and reporting efforts across the department, including coordination of oversight activities with other departments within AHS	Total Cost of All Programs, Including Community Health and Inpatient Care
42302	Care Management	Costs associated with care management of adult individuals who are in the custody of the department or voluntary psychiatric inpatient.	Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate
42319	Information and Data Management Technology and Data Collection	Staff costs associated managing information and data received from all state and non-state facilities	Total Cost of All Programs, Including Community Health and Inpatient Care
42771	Data Infrastructure Staff Costs	Costs related to data collection, analysis, and reporting conducted by staff members; grant covers costs that are otherwise allowable as an indirect cost	Allocated to Data Infrastructure grant and all DMH programs

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 67: Other Mental Health Support Clinical Services**

This cost center is comprised of costs associated with oversight of the programs that the department provides for children and adults.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
420145	<del>Community Services Director</del> DMH Administration	<del>Allocated Care Management to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate</del> Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, <del>Director of Operations,</del> Community Services Director, Operations Manager, Administrative Support Coordinator, and Deputy Commissioner	<del>Total Cost of All Programs, Excluding Inpatient Care</del> Total Cost of All Programs, Including Community Health and Inpatient Care
42304	<del>Clinical Director</del>	<del>Staff costs associated with the Clinical Director who oversees the adult and children's programs.</del>	<del>Total Cost of all Clinical Programs</del>
42301	<del>Inpatient Direct Service</del> Technical Assistants Assistance Supports	Staff costs associated with oversight of <del>inpatient</del> mental health services-Technical Assistance	<del>Total Cost of Inpatient Programs</del> Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate
42303	<del>Policy and Legislative Liaison</del> Department Planning and Development	Staff costs associated with oversight of all policy development and assessment of impacts of legislative actions across the department	Total Cost of All Programs, Including Community Health and Inpatient Care
42307	Residential and Intensive Services Director	Responsible for overseeing technical assistance and secure residential staff	Full Time Equivalent Count across Technical Assistance and Secure Residential
42916	Secure Residential Recovery	Staff Time and Operating Costs associated with running the Secure Residential Recovery Facility	Direct to SRR (GC)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 78: ~~Clinical Services~~— Adult Services Unit**

All costs associated with providing clinical services to adults are associated with this cost center.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
37712	Medicaid Program – Adults	Medicaid Fee for Service costs associated with mental health services for adults	Direct to Global Commitment (Program)
37800	Social Services Block Grant	Social Services Block Grant costs associated with the hospital diversion program and as part of the Community Rehabilitation and Treatment program for adults	Direct to Social Services Block Grant
42006	Pre-Admission Screen and Resident Review (PASARR)	PASSAR contracted activities related to all mental health clients	Direct to Global Commitment Professional Medical
42015	Community <del>Mental Health Administration – Adults and Children</del>	<del>Allocated Care Management to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate</del> Staff time and operating costs associated with overall administration of adult and children’s mental health programs, excluding inpatient care	Total Costs of All Programs Excluding Inpatient Care
42302	<del>Care Management</del>	<del>Costs associated with care management of adult individuals who are in the custody of the department or voluntary psychiatric inpatient.</del>	<del>Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate</del>
42305	Adult Services Utilization Director	Costs associated with the oversight of Housing Supports, Utilization Review, and Employment Supports	Full Time Equivalent Count across Housing, Utilization Review, and Employment Supports
42306	Inpatient Utilization Review	Costs associated with conducting utilization review activities for inpatient services	Direct to Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate
42401	<del>SAMHSA/FEMA Regular Services Program Grant for Adults</del>	<del>Program pays for SAMHSA/FEMA Crisis Counseling Assistance and Training Program for adults</del>	<del>Direct to SAMHSA/FEMA Regular Services Program Grant</del>

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 78: ~~Clinical Services~~— Adult Services Unit cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42410	Refugee Program	Costs Associated with the Federal Refugee Program	Direct to Refugee Program (Federal)
42520	Homeless Block Grant for Adults	Mental Health Services for Homeless adults	Direct to Homeless Block Grant
42531	Mental Health Block Grant for Adults	Grant pays for respite, community outreach, and CRT efforts	Direct to MHBG
42580	Olmstead Grant for Adults	Grant for contracted activities that promote recovery and community integration for adults	Direct to the Olmstead Grant
42641	Special Services – Adults	The operating costs of dental services, eye glasses, adaptive equipment, and other ancillary services for adults not covered by Medicaid	Direct to Global Commitment (Investment)
42643	Mental Health Consumer Support Program – Adults	The costs to provide peer education, support and advocacy to adults with serious mental illness, their families, and the community to promote resiliency and recovery	Direct to Consumer Support (Investment)
42646	Emergency Mental Health for Adults	The costs associated with 24/7 triage, assessment, mobile outreach, short-term family stabilization, and referral and screening for hospitalization or hospital diversion for adults experiencing a mental health crisis	Direct to Adult Emergency Mental Health (Investment)
42648	Adult Division Only	Staff and operating costs associated with all adult programs administered by the department	Total Cost of All Programs, Including Community Health and Inpatient Care
42730	Case Rate Payments	Payments to designated agencies for the provision of services for the adult CRT population	Direct to CRT

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 78: ~~Clinical Services~~— Adult Services Unit cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42740	CRT Doc/Hospital for Adults	Inpatient or Private Psychiatric services provided to adult CRT patients	Direct to CRT
42758	Jail Diversion Grant	Contracted activities associated with a grant from SAMHSA for the implementation of a jail diversion and trauma recovery program for adult Veterans	Direct to Jail Diversion (Fed)
42760	Outpatient Services for Adults	The costs associated with mental health assessment, counseling, case management, medication management, care coordination, and outreach supports for adults	Direct to Global Commitment (Investment)
42763	CRT Community Support Services for Adults	The costs associated with assessment and treatment, medication management, case management, community support, transportation, employment supports, and housing supports for adults who have a severe and persistent mental illness	Direct to Community Rehab and Treatment (CRT Investment)
42767	CRT Staff Secure Transportation	The costs associated with adults placed in involuntary care who require transport to receiving hospitals and who will have access to alternative transportation options that reduce traumas, provide safety, and are the least restrictive options available.	Direct to Staff Secure Transport (CRT Investment)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 78: Clinical Services— Adult Services Unit cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42768	Peer Supports for Adults	Funds to develop peer-run or peer-guided recovery and peer support services for adults	Direct to Peer Supports (Investment)
42769	Recovery Housing	Funds to support approximately 100 - 150 adult CRT or pending CRT consumers to obtain or retain housing, prevent homelessness, allowing timely step-down from psychiatric inpatient settings, preventing unnecessary hospitalization, providing rental assistance or subsidy, security deposits, and providing apartment set-up and cover other one-time housing expenditures	Direct to Recovery Housing – MCO Investment (CRT)
42773	Severely Functional Impairment (SFI)	Costs associated with service provision required under the comprehensive community service plan to an adult who has been determined to have an SFI	Direct to SFI (Investment)
42774	Transformation Grant	Costs of implementing new techniques to make Vermont's adult mental health services more computer-driven and recovery-oriented	Direct to MH Transformation Grant
42775	Challenge for Change (C4C) - Community Initiatives-Health Care and Rehabilitative Services (HCRS)	Costs associated with the implementation of the HCRS interagency community safety net initiative for adults	Direct to C4C Community Initiatives – HCRS (Investment)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 78: ~~Clinical Services~~— Adult Services Unit cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42776	C4C - Community Initiatives- Counseling Services of Addison County (CSAC)	Costs associated with the implementation of the CSAC local integrated crisis support services initiative for adults	Direct to C4C Community Initiatives – CSAC (Investment)
42778	Employment Development Initiative Grant	Activities to support knowledge of evidence based employment practices and strengthen MH/SA treatment, and develop Supported Employment Champions workforce, including workshops, trainings, and consultation activities for adults	Direct to Employment Development Initiative
42779	Transformation Transfer Initiative (TTI)	Activities to develop peer based prevention and early intervention services and supports for young adults at risk of serious mental illness	Direct to TTI
42784	Housing Subsidies	Costs for housing subsidies as part of a comprehensive treatment plan.	Direct to Housing Subsidies (Investment)
<del>42916</del>	<del>Secure Residential Recovery</del>	<del>Operating Costs associated with running the Secure Residential Recovery Facility</del>	<del>Direct to SRR (GC)</del>

**Cost Center 89: ~~Clinical Services~~— Children, Adolescents, and Families Unit**

All costs associated with providing ~~clinical~~ services to children are associated with this cost center.

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
39757	EPSDT Administration Functions	Costs related to grants that pay for consultation and education services	Direct to Global Commitment Administration
39851	Children's Health Insurance Plan (CHIP)	Children's Health Insurance Plan billings associated with children's mental health	Direct to CHIP

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.



**Cost Center 89: ~~Clinical Services~~— Children, Adolescents, and Families Unit cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42532	Mental Health Block Grant for Children and Families	Grant pays for Children's Hospital Diversion, Respite, Emergency, Peer Support Services, Community Outreach, and Community Rehabilitation and Treatment Services Program for children	Direct to MHBG
37713	Medicaid Program – Children	Medicaid Fee for Service costs associated with mental health services for children	Direct to Global Commitment (Program)
42642	Special Services – Children	The operating costs of dental services, eye glasses, adaptive equipment, and other ancillary services for children not covered by Medicaid	Direct to Global Commitment (Investment)
42644	Mental Health Consumer Supports Program – Children	The costs to provide peer education, support and advocacy to children with serious mental illness, their families, and the community to promote resiliency and recovery	Direct to Consumer Support (Investment)
42645	Emergency Mental Health for Children	The costs associated with 24/7 triage, assessment, mobile outreach, short-term family stabilization, and referral and screening for hospitalization or hospital diversion for children, youth, and families	Direct to Children's Emergency Mental Health (Investment)
42649	Children's Division Only	Staff and operating costs associated with all children's programs administered by the department	Total Cost of All Programs, Including Community Health
42757	Youth In Transition	Contracted activities associated with a grant from SAMHSA to develop a system of care for young adults, ages 16 – 21, with serious mental health problems	Direct to Youth In Transition Grant

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 89: ~~Clinical Services~~— Children, Adolescents, and Families Unit cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42764	Children's Community Services	The costs associated with clinical assessment and individualized treatment, individual, group and family therapy, psychiatric evaluation, medication management and consultation, case management, community support, community education, transportation, and housing supports for children who have been diagnosed with a serious emotional disturbance	Direct to Children's Community Services (Investment)
42766	Respite Services for Youth with SED and their Families	The costs associated with respite services for short-term support and relief to the families of children and adolescents with significant mental health issues	Direct to Respite for SED Youth (Investment)
42770	Child Trauma Grant	The costs of all activities associated with a grant from SAMHSA for the implementation and evaluation of effective trauma-focused and trauma-informed treatment and services for youth in community settings and youth-serving service systems	Direct to Child Trauma Grant
42777	C4C - Community Initiatives- Rutland Mental Health Services (RMHS)	Costs associated with the implementation of the RMHS community based hospital diversion initiative for children	Direct to C4C Community Initiatives – RMHS (Investment)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

## Cost Center 910: Inpatient Services

This cost center houses all costs associated with the provision of inpatient services.

Plan Dept.	Plan Dept. Name	Description	Allocation Method
<del>42301</del>	<del>Inpatient Supports</del>	<del>Staff costs associated with oversight of inpatient mental health services</del>	<del>Total Cost of Inpatient Programs</del>
42647	Brattleboro Retreat – CRT Clients	Costs associated with CRT Billings at Brattleboro	Direct to Global Commitment (Investment)
42780	Direct Acute Patient Care - All Facilities Excluding Springfield	State staff and operating costs associated with direct acute patient care in all locations other than Springfield; post dislocation due to Tropical Storm Irene	Direct to Global Commitment (Investment)
42781	Direct Acute Patient Care - Springfield	State staff and operating costs associated with direct acute patient care at Springfield; post dislocation due to Tropical Storm Irene	Direct to State General Fund
42782	Admin and Program Support for Acute Care	Non-direct staff time and operating costs; post dislocation due to Tropical Storm Irene	Allocated to direct acute patient care cost centers based on FTE
42783	Staff and Operating Expenses Not Related to a Specific Site	Costs that are not related to Springfield or other direct care sites or GC Admin, including staff time not worked, that cannot reasonably be related to the admin cost center that is being stepped down	Direct to State General Fund
42785	Psych Inpatient – RRMC – GC Invest	Rutland Regional Medical Center – Costs associated with Level One Care	Direct to RRMC Psych Inpatient final receiver (Investment)
42786	Psych Inpatient –BR – GC Invest	Brattleboro Retreat - Costs associated with Level One Care	Direct to BR Psych Inpatient final receiver (Investment)
42787	Psych Inpatient – RRMC – GC XIX	Rutland Regional Medical Center – Costs associated with Level One Care Medicaid Billings – GC Medicaid	Direct to RRMC Psych Inpatient Medicaid
42788	Psych Inpatient – FAHC – GC Invest	Fletcher Allen Health Care – Costs associated with Level One Care – GC Investment	Direct to FAHC Psych Inpatient (Investment)

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 940: Inpatient Services cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42789	Psych Inpatient – FAHC – GC XIX	Fletcher Allen Health Care – Costs associated with Level One Care Medicaid Billings – GC Medicaid	Direct to FAHC Psych Inpatient Medicaid
42790	Psychiatric Services – Doctor A	For professional psychiatric services for DMH provided by contracted doctors to clients in the inpatient setting	Costs allocated to Psych Inpatient final receivers based on number of beds for Doctor A
42791	Psychiatric Services – Doctor B	For professional psychiatric services for DMH provided by contracted doctors to clients in the inpatient setting	Costs allocated to Psych Inpatient final receivers based on number of beds for Doctor B
42792	Psychiatric Services – Doctor C	For professional psychiatric services for DMH provided by contracted doctors to clients in the inpatient setting	Costs allocated to Psych Inpatient final receivers based on number of beds for Doctor C
42793	Psychiatric Services – Doctor D	For professional psychiatric services for DMH provided by contracted doctors to clients in the inpatient setting	Costs allocated to Psych Inpatient final receivers based on number of beds for Doctor D
42794	Psychiatric Services – Doctor E	For professional psychiatric services for DMH provided by contracted doctors to clients in the inpatient setting	Costs allocated to Psych Inpatient final receivers based on number of beds for Doctor E
42901	Emergency VSH Patient Relocation	Costs incurred to relocate VSH patients during Hurricane Irene between 8/28/11 and 8/29/11	Direct to FEMA
42902	Relocation Expenses	Includes all staff overtime, mileage, and other expenses necessary due to the relocation of VSH patients	Direct to FEMA
42903	Brattleboro Retreat Renovations	Includes all expenses related to the necessary renovations to BR in order to temporarily care for the acute level of the VSH patients	Direct to FEMA

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 910: Inpatient Services cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42904	Rutland Regional Medical Center Renovation	Includes all expenses related to the necessary renovations to RRMC in order to temporarily care for the acute level of the VSH patients	Direct to FEMA
42905	State Run Acute Inpatient Morrisville	Includes all expenses related to the necessary renovations to in order to temporarily care for the acute level of the VSH patients	Direct to FEMA
42906	Rent at the Brattleboro Retreat	Includes the cost to rent the BR for VSH patients	Direct to FEMA
42907	Rent at the Fletcher Allen Health Care	Includes the cost to rent FAHC for VSH patients	Direct to FEMA
42908	Rent at the Rutland Regional Medical Center	Includes the cost to rent RRMC for VSH patients	Direct to FEMA
42909	Temporary Acute Inpatient Facility Start Up	Costs of furnishing, fixtures, and other equipment for the temporary inpatient location in Morrisville	Direct to FEMA
42910	Acute Inpatient Facility Planning and Development	Costs associated with the planning, development, and construction of the new 15-25 bed state run inpatient facility	Direct to FEMA
42911	Secure Residential Recovery Facility	Costs associated with building renovations, furnishings, fixtures, and other equipment of secure residential recovery facilities	Direct to FEMA
42913	Duxbury Residential Program	Costs associated with the Duxbury Residential Program	Direct to GC
42914	Morrisville Facility Lease	Includes the costs to lease the temporary inpatient facility in Morrisville	Direct to GC
42915	Secure Residential Lease	Includes the costs to lease the state run Secure Residential Facility	Direct to GC
42920	Admin & Gen/Exec/BO/QA	Staff time and operating costs associated with administration of the Green Mountain Psychiatric Care Center (GMPCC), including the Executive Office, QA, Admissions, Switchboard and other related services	Direct to GC

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 910: Inpatient Services cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42921	Adult Gen Routine Psych Care	Staff time and operating costs associated with general routine patient care at GMPCC, including unit staff, clinical, psychology and social services	Direct to GC
42922	Social Service Admin/Vol & Lib	Non-direct service staff time and operating costs associated with the social services, volunteer and library services at GMPCC	Direct to GC
42923	Medical Records	Staff time and operating costs associated with medical records at the GMPCC	Direct to GC
42924	Nursing Administration	Staff time and operating costs associated with nursing administration and maintaining staffing levels at the GMPCC	Direct to GC
42925	Nursing Ed	Operating costs associated with the education of nursing and psychiatric technician staff at the GMPCC	Direct to GC
42926	Ancillary & Laboratory Services	Staff time and operating costs associated with ancillary services at the GMPCC	Direct to GC
42927	Occupational Therapy	Staff time and operating costs associated with occupational therapy at the GMPCC	Direct to GC
42928	Physical Therapy	Staff time and operating costs associated with physical therapy at the GMPCC	Direct to GC
42929	Pharmacy	Staff time and operating costs associated with pharmacy services at the GMPCC	Direct to GC
42930	Housekeeping	Staff time and operating costs associated with housekeeping at the GMPCC	Direct to GC
42931	Dietary	Staff time and operating costs associated with food service at the GMPCC	Direct to GC

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.

**Cost Center 910: Inpatient Services cont'd**

<b>Plan Dept.</b>	<b>Plan Dept. Name</b>	<b>Description</b>	<b>Allocation Method</b>
42932	Barber/Beauty shop	Staff time and operating costs associated with the barber and beauty shop at the GMPCC	Direct to GC
42940	Berlin Administration	Costs Associated with the Berlin Site	Direct to Berlin (GCI)

*Cost Allocation Plan Guidance:*

<b>References</b>
2 CFR Part 225 OMB A-87, Attachment A, Section C (1) (a), and Attachment A, Section B.1.

\* With the October 1, 2005 implementation of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate.