



State of Vermont

AGENCY OF HUMAN SERVICES

OFFICE OF THE SECRETARY
280 State Drive
Waterbury, Vermont 05671-1000

December 30, 2016

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

Mr. Mayes:

Attached is the Vermont Agency for Human Services' (AHS) cost allocation plan amendment, effective October 1, 2016 with required certifications.

This cost allocation plan (CAP) amendment has no major organizational changes. On 10/24/16 the State of Vermont, Agency of Human Services received approval from CMS for a renewal of the 1115 Global Commitment Waiver effective 1/1/17-12/31/21. One of the changes requested by CMS has been implemented in this quarter, the remaining will be implemented in the 1/1/17-3/31/17 quarter submission.

We continue our efforts to improve our narrative format, content, and design to provide more efficient and effective presentation to our federal partners. Included in this quarter submission is a revised Cost Impact Statement which identifies all new or deleted programs codes regardless of FFP impact as well as any changes to program codes which effect FFP. The Cost Impact Statement identifies the AHS department and federal programs impacted by the change as well as the estimated quarterly FFP impact, if any.

In order to reduce the size of this document, and considering we have been operation for a full year using the two new RMTS for eligibility in Human Services and Health Care, we will start including the RMTS material only when there is a change to the materials. We will include a statement in section XI. Time Tracking and Time Study Information indicating that there were no changes in the quarter being submitted to affirm this understanding. The time study information will be retained in our CAP files and will be available upon request.

Please contact Jill Gould at (802)-241-0442 or Jill.Gould@Vermont.gov if you have any questions.

Sincerely,

Hal Cohen
Secretary
Agency of Human Services

cc: AHS Department Financial and CAP staff



State of Vermont Agency of Human Services

Cost Allocation Plan

Effective as of October 1, 2016

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I. CERTIFICATIONS

CERTIFICATION OF OUTSIDE COSTS

I hereby certify that wherever costs are claimed for services provided by a governmental agency outside the State of Vermont Agency of Human Services 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 State of Vermont Agency of Human Services Public Assistance cost allocation plan. The person signing the certifications must have at least a high level understanding of the plan and its purpose.

I declare that the foregoing is true and correct.

Vermont Agency of Human Services
Government Unit

Signature

Sarah Clark
Name of Official

Agency Chief Financial Officer
Title

December 30, 2016
Date of Execution

State and Local Cost Allocation Plans

CERTIFICATION OF PUBLIC ASSISTANCE COST ALLOCATION PLAN

This is to certify that, in accordance with 45 CFR 95.507(a)(8) I have reviewed the cost allocation plan submitted herewith and to the best of my knowledge and belief:

- (1) The information contained in this cost allocation plan is prepared in conformance with the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, effective December 26, 2014.
- (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 this cost allocation plan.
- (4) The information provided in support of the proposed cost allocation plan is accurate.

I declare that the foregoing is true and correct.

Vermont Agency of Human Services
Government Unit

Signature

Sarah Clark
Name of Official

Agency Chief Financial Officer
Title

December 30, 2016
Date of Execution

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

II. COST IMPACT STATEMENT

| Dept. | Program Code | Program Code Name | Description | Allocation Method | Comment/Impact | Federal Programs Impacted | Quarterly FFP Impact |
|-------|------------------|--|---|-----------------------------------|---|--|----------------------|
| AHS | 37964 | SerVermont—Keurig | Keurig funding to support projects to improve the water quality of Lake Champlain. | Direct to Keurig Grant | This had no federal funds | N/A | \$0 |
| AHS | 37970 | SerVermont Training & Technical Assistance (TTA) | Costs associated with carrying training and technical assistance for SerVermont programs | Direct to CNCS TTA Grant | This was a new federal award that was received. | Corporation for National and Community Service CFDA: 94.009 | \$22,523 |
| AHS | 37989 | SIMS YR 3 Testing – Contracts | Contractual expenses related to SIM | Direct to SIM Grant | This code was established to track Year 3 spending and replaces Program Code 37988. | CMS, State Innovation Systems CFDA: 93.624 | \$0 |
| AHS | 37990 | SIMS YR 1 Testing—Contracts | Contractual expenses related to SIM | Direct to SIM Grant | Not used as of 5/31/16. | CMS, State Innovation Systems CFDA: 93.624 | \$0 |
| AHS | 37993 | SIMS YR 2 Testing—Financial Manager | Financial staff position assigned directly to the SIM Grant | Direct to SIM Grant | Not used as of 7/31/16 and was replaced with Program Code 37994 | CMS, State Innovation Systems CFDA: 93.624 | \$0 |

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|-----|--------|--|--|--|--|---|---------|
| DCF | 41783 | Registry Review Unit | This code is used for staff and operating costs for the Registry Review Unit, which is the intermediate administrative appeal system for Family Services Division decisions to substantiate child abuse and neglect. These staff process appeals related to foster care license revocation or denial and appeals of placement changes, listen to appeals cases across the state, and manages the state's Child Abuse Registry. | Direct to State Fund | New code to better identify the tasks performed by the Registry Review Unit. Costs were previously included in program code 41777.101. No impact. | State Only | \$0 |
| DCF | 38015 | Office of Child Support – General IT Support | This code is used for all salary costs associated with the general IT support of the Office of Child Support. | Total Salaries Across OCS (not including fringe) | New code to track IT general support services separately from IT purchases. Costs were previously included in program code 38090.901. Negative FFP impact. | ACF: IVD | (\$125) |
| DCF | 40470* | Business Office - IT Purchases | Hardware and software purchases for the Business Office, including Staff equipment and general systematic updates. | Total Salaries Across All DCF Staff (not including fringe) | New code to track IT purchases separately from IT general support services. Costs were previously included in program code 41260.901. No impact. | CMS: Medicaid & CHIP Admin ACF: IVE, IVD, IVB, TANF, LIHEAP, CCDF FNS: SNAP | \$0 |
| DCF | 40471* | Non-DCF IT Projects | This code is used for salary costs related to non-DCF (AHS and other AHS department) specific projects and support. | Total Salaries Across the Information Technology Department (not including fringe) | New code to track the support of AHS and non-DCF IT projects. Costs were previously included in program code 41038.901. No impact. | CMS: Medicaid & CHIP Admin ACF: IVE, IVD, IVB, TANF, LIHEAP, CCDF FNS: SNAP | \$0 |

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|-----|--------|--|---|--|--|--|---------|
| DCF | 40472* | Economic Services Division – General IT Support | This code is used for all salary costs associated with the general IT support of the Economic Services Division. | Total Salaries Across Economic Services (including field services, not including fringe) | New code to track IT general support services separately from IT purchases. Costs were previously included in program code 41200.901. No impact. | CMS: Medicaid & CHIP Admin ACF: LIHEAP & TANF FNS: SNAP | \$0 |
| DCF | 40473* | Economic Services Division - IT Purchases | Hardware and software purchases for the Economic Services Division, including Staff equipment and general systematic updates. | Total Salaries Across Economic Services (including field staff, not including fringe) | New code to track IT purchases separately from IT general support services. Costs were previously included in program code 41200.901. No impact. | CMS: Medicaid & CHIP Admin ACF: LIHEAP & TANF FNS: SNAP | \$0 |
| DCF | 40474 | Woodside – IT Purchases | Hardware and software purchases for the Woodside Treatment Facility, including Staff equipment and general systematic updates. | Direct to Woodside – State | New code to track Woodside IT purchases separately from FSD IT purchases. Costs were previously included in program code 40200.901. No impact. | CMS: Medicaid Program | (\$160) |
| DCF | 40475* | Family Services Division – General IT Support | This code is used for all salary costs associated with the general IT support of the Family Services Division. | Total Salaries Across Family Services (including Field Staff, not including fringe) | New code to track IT general support services separately from IT purchases. Costs were previously included in program code 40050.901. No impact. | CMS: Medicaid Admin & Program ACF: IVE & TANF OJP: JJDP | \$0 |
| DCF | 40476 | Youth Assessment and Screening Instrument (YASI) | This code is used for salary and operating costs associated with the maintenance of the Youth Assessment and Screen Instrument (YASI) system. | Direct to State Fund | New code to track work performed on the YASI IT system. Minimal FFP reduction. | State Only | \$0 |

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| DCF | 40477* | Comprehensive Child Welfare Information System (CCWIS) | This code is used for salary and operating costs associated with the maintenance of the Comprehensive Child Welfare Information System (CCWIS). | Direct to Title IV-E CCWIS Operational Costs | New code to track work performed on the CCWIS. Costs were previously included in program code 41037.901. Minimal FFP impact. | CMS: Medicaid Admin & Program ACF: IVE & TANF | \$0 |
| DCF | 40478* | Child Development Division – General IT Support | This code is used for all salary costs associated with the general IT support of the Child Development Division. | Total Salaries Across Child Development (not including fringe) | New code to track IT general support services separately from IT purchases. Costs were previously included in program code 40100.901. No impact. | CMS: Medicaid Admin ACF: IVE, TANF, IVB, CCDF, RTT | \$0 |
| DCF | 40479* | ACCESS Health Care | This code is used for salary costs associated with the support of Health Care data that is stored in the ACCESS system. | ACCESS Case Count between CHIP Admin and GC Admin 50% | New code to track ACCESS services related to health care separately from other ACCESS services provided by the IT unit. Costs previously included in program code 41779.901. Positive FFP impact is the difference in costs previously allocated to VHC Sustainability, which will now be allocated to CHIP and GC Admin. | CMS: CHIP & Medicaid Admin | \$1,200 |
| DCF | 44110 | Office of Economic Opportunity - IT Purchases | Hardware and software purchases for the Office of Economic Opportunity, including Staff equipment and general systematic updates. | Total Salaries Across OEO (not including fringe) | New code to track IT purchases separately from IT general support services. Costs were previously included in program code 44100.901. No impact. | ACF: CSBG HUD: ESG | \$0 |

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| DCF | 44120 | Office of Economic Opportunity – General IT Support | This code is used for all salary costs associated with the general IT support of the Office of Economic Opportunity. | Total Salaries Across OEO (not including fringe) | New code to track IT general support services separately from IT purchases. Costs were previously included in program code 44100.901. No impact. | ACF: CSBG HUD: ESG | \$0 |
| DCF | 40530.998 (Effective 7/1/16) | IV-E Prior Quarter Adjustments | This code is used for various Title IV-E prior quarter adjustments, as needed. | Direct to IV-E Prior Quarter Adjustments | New suffix to identify prior quarter adjustments in the CAP. No impact. | ACF: IVE | \$0 |
| DCF | 40702.302 | GC-MCO Investment Medical Sub Care Services | Costs directly associated with sub care treatment | Direct to GC-MCO Investment Medical Services | New suffix to identify GC-MCO Medical Services. No change in FFP claiming. | CMS: Medicaid Program | \$0 |
| DCF | 40714 | Lund Residential - GC-MCO Investments Substance Abuse Services | GC-MCO costs for substance abuse services offered to clients 21 years and older, provided by Lund Residential. | Direct to GC-MCO Investment–Lund Home | New code to differentiate GC-MCO Substance Abuse services from GC-MCO Mental Health services. Costs were previously included in program code 40703.108. No impact. | CMS: Medicaid Program | \$0 |
| DCF | 41164.998 (Effective 7/1/16) | SNAP Quality Assurance Prior Quarter Adjustment (PQA) | This code is used for various SNAP prior quarter adjustments, as needed. | Direct to SNAP Prior Quarter Adjustments | New suffix to identify prior quarter adjustments in the CAP. No impact. | FNS: SNAP | \$0 |
| DCF | 41181.998 (Effective 7/1/16) | SNAP New Investment Prior Quarter Adjustment (PQA) | This code is used for various SNAP prior quarter adjustments, as needed. | Direct to SNAP Prior Quarter Adjustments | New suffix to identify prior quarter adjustments in the CAP. No impact. | FNS: SNAP | \$0 |

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| DCF | 41319 | ESD Operating Costs – Eligible for SNAP Bonus Award | This code is used for the tracking of staff salaries and operating costs associated with the Economic Services Division, which are eligible for SNAP Bonus funding through approved spending plans. | Total-Salaries Across Economic Services (including field services, not including fringe) | New code to track the use of SNAP Bonus Award(s). Positive FFP impact. | CMS: Medicaid & CHIP Admin ACF: LIHEAP & TANF FNS: SNAP | \$43,274 |
| DCF | 41418 | RU Lund Residential– Private Nonmedical Institutions (PNMI) / Mental Health Services | GC program costs for PNMI and mental health services offered to clients 20 years and younger, provided by Lund Residential. | Direct to GC - Program | New code to differentiate GC Program PNMI/Mental Health Services from GC Program Substance Abuse Services. Costs were previously included in program code 41419.108. No impact. | CMS: Medicaid Program | \$0 |
| DCF | 41537 | Home Heating Subsidies – Supplemental Fuel Benefits for GA Clients | This code is used for the cost of direct LIHEAP assistance to GA clients. | Direct to State Fund | New code to track the LIHEAP benefits paid to GA recipients. Costs were previously included in program code 41532.109. No impact. | ACF: LIHEAP | \$0 |
| DCF | 44451 | Supportive Housing – Global Commitment | Global Commitment portion of Family Supportive Housing | Direct to Global Commitment Program | New code to track new GC-Program costs related to the Family Supportive Housing grant. New payments will flow through the HP system. Positive FFP impact based on three billing cycles. | CMS: Medicaid Program | \$11,000 |

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|-----|-------|--|--|--|---|-----------------------|-------------|
| DCF | 44650 | Continuum of Care Program (HUD Award) | This code is used for the administration and benefit expenditures for the Continuum of Care Program, which provides rental assistance and supportive services to individuals and families experiencing homelessness in VT. | Direct to Continuum of Care Program | New code to track new Dept. of Housing and Urban Development (HUD) Award. FFP impact this quarter is estimate of known invoices to be paid by 12/31/16. | HUD: COC | \$6,500 |
| DCF | 38090 | Office of Child Support – IT Purchases Data Processing & IT costs | Hardware and software purchases for the Office of Child Support, including Staff equipment and general systematic updates. Costs from the State’s central data processing facility and information technology costs, for both hardware and software that directly support the Title IV-D program. | Total Salaries Across OCS (not including fringe) Direct to Title IV-D | Updated allocation method to spread general IT purchases across all OCS benefitting programs. Negative FFP impact. | ACF: IVD | (\$125) |
| DCF | 40200 | Woodside - Admin | Personal services and operating expenses directly associated with the operation of the Woodside Juvenile Treatment Facility. | Direct to Woodside – State Total salaries across Woodside (not including fringe) | Effective 10/1/16 the Woodside Treatment Facility is no longer Medicaid/Global Commitment (GC) eligibility. Negative FFP impact. | CMS: Medicaid Program | (\$124,000) |
| DCF | 40210 | Woodside – Treatment | Costs associated with the treatment services provided by the Woodside Juvenile Treatment Facility | Direct to Woodside – State Total Global Commitment eligible population compared to total population | Effective 10/1/16 the Woodside Treatment Facility is no longer Medicaid/Global Commitment (GC) eligibility. Negative FFP impact. | CMS: Medicaid Program | (\$647,000) |

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|------|--|---|---|---|---|---|------------|
| DCF | 41261 | EBT Financial Administrator | 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. All costs associated with the EBT Financial Administrator are coded here. | Case Count Across TANF, SNAP Benefits Issued, and Fuel, and WIC | Effective 4/30/16, the DCF EBT Financial Administrator no longer produces WIC cards. Negative FFP impact. | FNS: WIC | (\$300) |
| DCF | 40530-773 (Effective 4/1/16) | Child Care Subsidy March 2016 Adjustment | Child care subsidy payments made on behalf of IV-E eligible foster children | Direct to Title IV-E Child Development | Deleting old suffix that was used to more easily identify a prior quarter adjustment in the CAP. No impact. | ACF: IVE | \$0 |
| DCF | 37728 | Exchange lvl 1C IT Staff | This code is used for IT Salary and Operating costs related to the Level 1C CCHO Exchange Grant. | Direct to Exchange Level 1C | Deleting old IAPD code as DCF is no longer performing Exchange Level 1C activities. Negative FFP impact. | CMS: CCHO | (\$12,000) |
| DAIL | 37999 | SIM Grant – year 3 | Year 3 SIM Grant (State Innovation Model) | Direct to SIM Grant | A new code was created to help track year 3 SIM grant expenses. | CMS, State Innovation Systems CFDA: 93.624 | \$25,000 |
| DAIL | 37998 | SIM Grant – year 2 | Year 2 SIM Grant expenses related to staff | Direct to SIM Grant | Deleting an old code. | CMS, State Innovation Systems CFDA: 93.624 | \$0 |

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|------|------------------|------------------------------------|---|---|--|--|------------|
| DAIL | 37988 | SIM Grant – year 2 | Year 2 SIM Grant expenses for contracts | Direct to SIM Grant | Deleting an old code | CMS, State Innovation Systems CFDA: 93.624 | \$0 |
| DAIL | 43020 | Division Director & Staff costs | Voc Rehab 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. | Total Costs Across VR (Method A2) – minus participant support costs | Were instructed by RSA to remove participant support costs from Voc Rehab total cost method for VR indirects. | VR federal programs. Section 110, Title VI-B, VR independent Living Grant, | (\$75,000) |
| DAIL | 43020 | Division Director & Staff costs | DBVI expenses associated with the Division Director, the Casework Supervisor and Administrative Secretary who have broad responsibilities for programs operated within the division. | Total Costs Across DBVI (Method A2) – minus participant support costs | Were instructed by RSA to remove participant support costs from DBVI's total cost method for DBVI's indirects. | DBVI federal programs. Section 110, Title VI-B, Blind Independent Living Grant, Mobile Low Vision Grant, | (\$5,000) |
| DVHA | 41469 | Acupuncture Pilot Study Grant | Cost associated with the Acupuncture Pilot Study, related IT staff and operating expenses | Direct to State Only Admin | Zero Federal Impact | N/A | \$0 |
| DVHA | 37729 | EBCP Staff LIC | Staff Expenses associated with the Enterprise Business Capability Platform | Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD – E&E/VIEWS DDI (90%) & Exchange Level IC (100%) | Zero Federal Impact | N/A | \$0 |
| VDH | 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 | Grant Expired | CFDA# 93.505 HRSA | \$0 |

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| VDH | 39187 | 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 | Project Complete | N/A | \$0 |
| VDH | 39049 | Antibiotic Stewardship | Costs associated with antibiotic resistance and stewardship | Direct to Antibiotic Stewardship | Vermont Legislative directive, State funded | N/A | \$0 |
| VDH | 39165 | 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 | Project Complete | N/A | \$0 |
| VDH | 39345 | 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 | Project Complete | N/A | \$0 |
| VDH | 39386 | 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 | Project Complete | N/A | \$0 |
| VDH | 39387 | Hospital Data Council/Ambulatory Surgery Study | Staff time and other costs associated with producing data for this HDC contract. | Direct to Hospital Data Council | Project Complete | N/A | \$0 |
| VDH | 39391 | Population/Estimates | Costs associated with activities related to the production of the population estimates. | Direct to Population | Project Complete | N/A | \$0 |

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| VDH | 39392 | Population/Other | Staff time and other costs of responding to requests for information related to the population estimates. | Direct to Population | Project Complete | N/A | \$0 |
| VDH | 39471 | Laboratory—Radiological, Vermont Yankee | Costs and activities associated with Vermont Yankee surveillance. | Direct to VRERP | Code consolidation | N/A | \$0 |
| VDH | 39597 | ILEHP | Staff time and other costs associated with the Interdisciplinary Leadership Education for Health Professionals program. | Direct to MCH Grant | Project Complete | CFDA# 93.994 HRSA | \$0 |
| VDH | 39377 | Cervical Cancer Diagnosis and Treatment | All costs associated with cervical cancer diagnosis and treatment. | Direct to Cervical Cancer. | Project Complete | N/A | \$0 |
| VDH | 39039 | Cross Jurisdictional Sharing (CJS) Mini Grant | All costs of those activities and staff associated with the CJS Mini Grant. | Direct to CJS Mini Grant | New code to track activities and staff associated with the CJS Mini Grant | N/A | \$0 |
| VDH | 39132 | Potassium Iodide Distribution | All staff time and other costs associated with distribution of potassium iodide. | Direct to VRERP | Code consolidation | N/A | \$0 |

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| VDH | 39212 | Emergency Response Plan VT Yankee Post-Close Monitor | Costs associated with activities related to implementation of the VRERP, including participation in emergency | Direct to VRERP—Direct to Vermont Yankee bill back | Code consolidation | N/A | \$0 |
|-----|-------|--|---|--|--------------------|-----|-----|

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| | | | response drills, exercises and updating the plan. Costs incurred for post-closure monitoring activities at the Vermont Yankee nuclear power plant. | | | | |
| VDH | 39212 | Emergency Response Plan VT Yankee Post-Close Monitor | Costs associated with activities related to implementation of the VRERP, including participation in emergency response drills, exercises and updating the plan. Costs incurred for post-closure monitoring activities at the Vermont Yankee nuclear power plant. | Direct to VRERP Direct to Vermont Yankee bill back | Code consolidation | N/A | \$0 |
| VDH | 39213 | Environmental Radiation Surveillance | Costs associated with sampling and evaluation of ambient air, water, milk, vegetation and similar media around Vermont Yankee and Yankee Atomic nuclear power plants and technical advice on radioactive waste. | Direct to VRERP | Code consolidation | N/A | \$0 |
| VDH | 39214 | VRERP Training | All training and educational activities related to implementation of the VRERP (Vermont Radiological Emergency Response Plan). | Direct to VRERP | Code consolidation | N/A | \$0 |
| VDH | 39215 | Tritium Leak 2010 | All costs associated with the investigation of elevated tritium levels from Vermont Yankee | Direct to VRERP | Code consolidation | N/A | \$0 |

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| VDH | 39216 | NRC Agreement State | Costs incurred for activities related to becoming and operating as an NRC agreement state. | Direct to NRC Agreement State | New Code to track activities related to becoming and operating as an NRC agreement state | N/A | \$0 |
| VDH | 39824 | Rx Drug Disposal Activities | All costs associated with the new legislation authorizing Prescription Drug Disposal Activities (s.243 Legislation) | Direct to Rx Drug Disposal Activities | Vermont Legislative directive, State funded | N/A | \$0 |
| VDH | 39846* | Payments to EDS for Global Commitment: General | Direct payments: | Direct to Global Commitment Program | Code consolidation | N/A | \$0 |

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III. AMENDMENT TABLE

| DCA Code | | Quarter Ending | Status | App Letter Date |
|----------|------|----------------|----------|-----------------|
| 0540 | 17-1 | 09/30/16 | Pending | |
| 0540 | 16-4 | 06/30/16 | Pending | |
| 0540 | 16-3 | 03/30/16 | Pending | |
| 0540 | 16-2 | 12/31/15 | Pending | |
| 0540 | 16-1 | 9/30/2015 | Pending | |
| 0540 | 90 | 6/29/2015 | Pending | |
| 0540 | 89 | 3/31/2015 | Approved | 2/1/2016 |
| 0540 | 88 | 12/31/2014 | Approved | 12/21/2015 |
| 0540 | 87 | 9/30/2014 | Approved | 12/15/2015 |
| 0540 | 86 | 6/30/2014 | Approved | 7/20/2015 |
| 0540 | 85 | 3/31/2014 | Approved | 7/16/2015 |
| 0540 | 84 | 12/31/2013 | Approved | 9/3/2014 |
| 0540 | 83 | 9/30/2013 | Approved | 7/15/2015 |
| 0540 | 82 | 6/30/2013 | Approved | 7/14/2015 |
| 0540 | 81 | 3/31/2013 | Approved | 3/14/2014 |
| 0540 | 80 | 12/31/2012 | Approved | 11/25/2014 |
| 0540 | 79 | 9/30/2012 | Approved | 12/9/2014 |
| 0540 | 78 | 6/30/2012 | Approved | 6/26/2013 |
| 0540 | 77 | 3/31/2012 | Approved | 2/10/2015 |
| 0540 | 76 | 12/31/2011 | Approved | 7/12/2012 |
| 0540 | 75 | 9/30/2011 | Approved | 4/24/2012 |
| 0540 | 74 | 6/30/2011 | Approved | 6/5/2012 |
| 0540 | 73 | 3/31/2011 | Approved | 12/21/2011 |
| 0540 | 72 | 12/31/2010 | Approved | 9/22/2011 |
| 0540 | 71 | 9/30/2010 | Approved | 3/15/2011 |
| 0540 | 70 | 6/30/2010 | Approved | 11/23/2010 |
| 0540 | 69 | 3/31/2010 | Approved | 7/29/2010 |
| 0540 | 68 | 12/31/2009 | Approved | 5/4/2010 |
| 0540 | 67 | 9/30/2009 | Approved | 3/15/2010 |
| 0540 | 66 | 6/30/2009 | Approved | 11/10/2009 |
| 0540 | 65 | 3/31/2009 | Approved | 7/27/2009 |
| 0540 | 64 | 12/31/2008 | Approved | 2/26/2009 |
| 0540 | 63 | 9/30/2008 | Approved | 2/6/2009 |
| 0540 | 62 | 6/30/2008 | Approved | 10/30/2008 |
| 0540 | 61 | 3/31/2008 | Approved | 5/27/2008 |
| 0540 | 60 | 12/31/2007 | Approved | 5/1/2008 |
| 0540 | 59 | 9/30/2007 | Approved | 3/13/2008 |
| 0540 | 58 | 6/30/2007 | Approved | 1/31/2008 |

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| | | | | |
|------|----|------------|----------|-----------|
| 0540 | 57 | 3/31/2007 | Approved | 1/29/2008 |
| 0540 | 56 | 12/31/2006 | Approved | 12/4/2007 |
| 0540 | 55 | 9/30/2006 | Approved | 8/13/2007 |
| 0540 | 54 | 6/30/2006 | Approved | 7/18/2007 |
| 0540 | 53 | 3/31/2006 | Approved | 7/12/2007 |
| 0540 | 52 | 12/31/2005 | Approved | 7/10/2007 |
| 0540 | 51 | 9/30/2005 | Approved | 9/12/2006 |
| 0540 | 50 | 6/30/2005 | Approved | 9/11/2006 |
| 0540 | 49 | 3/31/2005 | Approved | 9/8/2006 |
| 0540 | 48 | 12/31/2004 | Approved | 3/8/2006 |
| 0540 | 47 | 9/30/2004 | Approved | 2/28/2006 |

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IV. INTRODUCTION

The Vermont Agency of Human Services (AHS) mission is to improve the conditions and well-being of Vermonters and protect those who cannot protect themselves. Whether helping a family access health care or child care, protecting a young child from abuse, supporting youth and adults through addiction and recovery, providing essential health promotion and disease prevention services, reaching out to elder Vermonters in need of at-home or nursing home assistance, enabling individuals with disabilities to have greater independence, or supporting victims and rehabilitating offenders, AHS serves Vermonters with compassion, dedication, and professionalism. AHS has operated since 1969 to serve as the umbrella organization for all human service activities within state government.

The Departments under AHS are: Department of Children and Family Services (DCF), Department of Disabilities, Aging and Independent Living (DAIL), Department of Vermont Health Access (DVHA), Vermont Department of Health (VDH), Department of Mental Health (DMH), and the Department of Corrections (DOC). Appropriate costs allocated as benefitting the Secretary's Office are further reallocated across all other agency-specific benefitting objectives, as described throughout this narrative.

For the administration of the CAP, AHS and the Departments use a web-based software tool to calculate the quarterly CAP results. AHS and each of the Departments have their own unique version of the application to run their costs through the software. Effective 7/1/2015, AHS switched to the web-based, proprietary cost allocation software, AlloCAP™; therefore, the quarter ending 9/30/2015 is the first quarter that will be processed using the software. The software was configured specific to the needs of AHS and each of the Departments' expenditures to appropriately allocate costs as described in the CAP narrative herein. The AlloCAP™ software is hosted on the vendor's server; the vendor is Public Consulting Group, Inc. (PCG). AHS is responsible for processing the CAP and does so at the close of each quarter using the vendor's software.

AlloCAP™ allows the user to import quarterly expenditure data. The data is coded according to the codes assigned to the costs in the state's accounting system and utilized to identify costs in the CAP narrative. These common cost pools are then applied against the appropriate statistics for allocation purposes, as described in the rest of this CAP narrative. Statistics allocate cost pools (Program Codes) using a four step-down methodology. Cost pools and assigned allocation statistics are identified further in this CAP narrative. Statistics used include time study results, total cost methodologies, case counts, position counts, etc. Through AlloCAP™, AHS and the Departments also have access to reports that describe where the money gets allocated to, which allocation methods are used for each cost pool, and what statistics are assigned for each allocation method.

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V. ACRONYM LIST

| | |
|--------|--|
| AAA | Area Agency on Aging |
| AABD | Aid to the Aged, Blind, & Disabled |
| AAG | Assistant Attorney General |
| ABLES | Adult Blood Lead Epidemiology Surveillance |
| ABAWD | Able-Bodied Adults without Dependents |
| ABD | Aged, Blind and Disabled |
| ACA | Affordable Care Act |
| ACCESS | The computer software system used by DCF and DVHA to track program eligibility information as well as economic services and child support activity |
| ACCS | Assistive Community Care Services |
| ACF | Administration for Children & Families |
| ADAP | Alcohol and Drug Abuse Programs |
| ADRC | Aging and Disability Resource Center Program |
| ADO | St. Albans District Office |
| ADPC | Application Document Processing Center |
| AHC | Arbour Health Care |
| AHCPR | Agency for Health Care Policy & Research |
| AHECs | Area Health Education Center |
| AHERA | Asbestos Hazard Emergency Response Act |
| AHS | Agency of Human Services |
| AHSCO | Agency of Human Services Central Office |
| AIDS | Acquired Immunodeficiency Syndrome |
| ALF | American Legacy Foundation |
| AMAP | Aids Medication Assistance Program |
| AoA | Agency of Administration |
| AoA | Administration on Aging |
| APD | Advance Planning Document |
| ARRA | American Recovery and Reinvestment Act |
| ASD | Adult Services Division |
| ASP | Attendant Services Program |
| AT | Assistive Technology |
| BDO | Burlington District Office |
| BFIS | Building Bright Futures Information System |
| BICS | Behavioral Intervention in Child Support Services |
| BO | Business Office |
| BOND | Grant from the University of Massachusetts Medical School for Social Security Demonstration |
| BPS | Benefits Programs Specialist |
| BR | Brattleboro Retreat |
| BRACE | Building Resilience Against Climate Change Effects in VT |
| C4C | Challenges For Change |
| CAP | Cost Allocation Plan |
| CAPTA | Child Abuse Prevention and Treatment Act |
| CAQH | Committee for Affordable Quality Healthcare |
| CBCAP | Community Based Child Abuse Prevention |
| CC | Care Coordination |
| CCDF | Child Care Development Fund |
| CCFAP | Child Care Financial Assistance Program |

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| | |
|---------------|---|
| CCIIO | Center for Consumer Information and Insurance Oversight |
| CCMP | Chronic Care Management Program |
| CCWIS | Comprehensive Child Welfare Information System |
| CDC | Centers for Disease Control and Prevention |
| CDD..... | Child Development Division |
| CECH | Clinicians Enhancing Child Health |
| CFC..... | Choices for Care |
| CFDA | Catalog of Federal Domestic Assistance |
| CFR..... | Code of Federal Regulations |
| CHAMPPS | Coordinated Healthy Activity, Motivation, and Prevention Programs |
| CHIP | Children's Health Insurance Program |
| CIS | Children's Integrated Services |
| CIT | Central Information Technology |
| CM..... | Case Management |
| CMHI..... | Child Mental Health Initiative |
| CME | Continuing Medical Education |
| CMS..... | Centers for Medicare & Medicaid Services (formerly HCFA) |
| CNCS..... | Corporation for National and Community Service |
| CPU | Central Processing Unit |
| CRASH..... | Drinking Driver Rehabilitation Program |
| CRI | Cities Readiness Initiative |
| CRT | Community Rehabilitation & Treatment |
| CSBG..... | Community Services Block Grant |
| CSHN | Children with Special Health Needs |
| CSRE | Comprehensive Systems Reform Effort |
| CSTE | Council of State and Territorial Epidemiologist |
| CVPS | Central Vermont Power Systems |
| DAs..... | Designated Agencies |
| DAIL..... | Department of Disabilities, Aging and Independent Living |
| DBA..... | Database Administrator |
| DBVI | Division for the Blind and Visually Impaired |
| DCF..... | Department for Children and Families |
| DD | Disability Determination |
| DDC..... | Developmental Disabilities Council |
| DDI..... | Design, Development & Implementation |
| DDS | Disability Determination Services |
| DDS | Developmental Disabilities Services |
| DDRP | Drunk Driver Rehabilitation Program |
| DDS..... | Disability Determination Services (part of DCF) |
| DDSD..... | Developmental Disabilities Services Division |
| DHHS | Department of Health & Human Services (United States) |
| DII..... | Department of Information and Innovation |
| DLP..... | Division of Licensing and Protection |
| DMH..... | Department of Mental Health Services |
| DO..... | District Office |
| DOC..... | Department of Corrections |
| DOE..... | Department of Education |
| DOE..... | Department of Energy |
| DOH | Department of Health |
| DPS..... | Department of Public Safety |

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| | |
|-------------|--|
| DS | Developmental Services |
| DSH | Disproportionate Share Hospital |
| DSHP | Designated State Health Programs |
| DUALS | State Demonstrations to Integrate Care for Dual Eligible Individuals |
| DUR | Drug Utilization Review (Board) |
| DVHA | Department of Vermont Health Access |
| EA | Emergency Assistance |
| EAP | Employee Assistance Program |
| EBCP | Enterprise Business Capability Platform |
| EBT | Electronic Benefit Transfer |
| ECCS | Early Childhood Comprehensive Systems |
| ECFMH | Early Childhood and Family Mental Health |
| EDI | Electronic Data Interchange |
| EDS | Electronic Data Systems Corporation (now Hewlett Packard) |
| E&E | Eligibility and Enrollment |
| EFT | Electronic Funds Transfer |
| EHR | Electronic Health Record |
| EI | Early Intervention |
| ELC | Epidemiology and Laboratory Capacity |
| ELC | Early Learning Challenge |
| EMS | Emergency Medical Services |
| EP | Essential Person |
| EPSDT | Early & Periodic Screening, Diagnosis & Treatment |
| EQR | External Quality Review |
| EQRO | External Quality Review Organization |
| ESD | Economic Services Division (of the DCF) |
| E&T | Employment and Training |
| FAHC | Fletcher Allen Health Center |
| FEMA | Federal Emergency Management Agency |
| FFP | Federal Financial Participation |
| FFY | Federal Fiscal Year |
| FICA | Federal Insurance Contribution Act |
| FITP | Family Infant Toddler Program |
| FMAP | Federal Medicaid Assistance Participation |
| FPL | Federal Poverty Level |
| FSD | Family Services Division |
| FTE | Full Time Equivalent |
| FQHC | Federally Qualified Health Center |
| GA | General Assistance |
| GC | Global Commitment for Health 1115 Waiver |
| GCI | Global Commitment Investment |
| GF | General Fund |
| GMP | Green Mountain Power, Inc. |
| GMPPC | Green Mountain Psychiatric Care Center |
| HAEU | Health Access Eligibility Unit |
| HCCVT | Healthy Child Care Vermont |
| HBKF | Healthy Babies, Kinds and Families |
| HC | Health Care |
| HCB | Home and Community Based |
| HCR | Health Care Reform |

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| | |
|--------------|--|
| HDC..... | Hospital Data Council |
| HDO..... | Hartford District Office |
| HHA..... | Home Health Agency |
| HHS..... | Health and Human Services |
| HIE | Health Information Exchange |
| HIV..... | Human Immunodeficiency Virus |
| HIPAA..... | Health Insurance Portability & Accountability Act |
| HIT | Health Information Technology |
| HMIS | Housing Management Information System |
| HP..... | Hewlett Packard (Formerly EDS) |
| HPDP..... | Health Promotion and Disease Prevention |
| HR..... | Human Resources |
| HRSA..... | Health Resources and Services Administration |
| HSB..... | Human Services Board |
| HSE..... | Health Services Enterprise |
| HUD | Housing and Urban Development |
| IAPD..... | Implementation Advance Planning Document |
| ICD | International Classification of Diseases |
| ICF..... | Intermediate Care Facility |
| ICF/MR..... | Intermediate Care Facility for Individuals with Mental Retardation |
| IDA | Individual Development Account |
| IDT | Interdepartmental Transfer |
| IE | Integrated Eligibility |
| IFS | Integrated family Services |
| IGA..... | Intergovernmental Agreements |
| IID..... | Individuals with Intellectual Disabilities |
| ILEHP..... | Interdisciplinary Leadership Education for Health Professionals |
| INS..... | Insurance |
| IT | Information Technology |
| IV&V..... | Independent Verification and Validation |
| JAIBG..... | Juvenile Accountability Incentive Block Grant |
| JDO..... | St. Johnsbury District Office |
| JFI..... | Jobs for Independence |
| JJDP..... | Juvenile Justice and Delinquency Prevention |
| LAUNCH | Linking Actions for Unmet Needs in Children's Health |
| LDO..... | Brattleboro District Office |
| LIHEAP..... | Low-Income Home Energy Assistance Program |
| LIS/MSP..... | Low Income Subsidy/Medicare Savings Program |
| LTC..... | Long-Term Care |
| MAB..... | Medicaid Advisory Board |
| MAC..... | School Based Medicaid Administration Claiming |
| MAGI | Modified Adjusted Gross Income |
| MAP | Medicaid Assistance Program |
| MAPIR | Medical Assistance Provider Incentive Repository |
| MCE | Managed Care Entity |
| MCH..... | Maternal and Child Health |
| MCO..... | Managed Care Organization (Investments) |
| MDO..... | Barre District Office |
| MDS | Minimum Data Set |
| MEA | Medicare Enrollment Assistance |

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| | |
|--------|---|
| MES | Medicaid Enterprise System |
| MFP | Money Follows the Person |
| MH | Mental Health |
| MHBG | Mental Health Block Grant |
| MIPPA | Medicare Patients and Providers Act |
| MIS | Management Information System |
| MKT | Market |
| MMA | Medicare Modernization Act |
| MMIS | Medicaid Management Information System |
| MOE | Maintenance of Effort |
| MOU | Memorandum of Understanding |
| MTCR | Middlesex Therapeutic Community Residence |
| NATAC | Nursing Assistant Testing and Competency |
| NATCP | Nurse Assistance Training and Competency |
| NFS | Nursing and Family Support |
| NICU | Newborn Intensive Care Unit |
| NOA | Notice of Award |
| NSIP | Nutrition Service Incentive Program |
| OAA | Older Americans Act |
| OADP | Operation Advance Planning Document |
| OASIS | Outcome and Assessment Information Set |
| OCCHIO | Office of Consumer and Insurance Oversight |
| OCS | Office of Child Support |
| OEO | Office of Economic Opportunity |
| OLH | Office of Local Health |
| OMB | Office of Budget and Management |
| ONC | Office of National Coordinator |
| OOJJP | Office of Juvenile Justice and Delinquency Prevention |
| OR | Outreach |
| PASARR | Pre-Admission Screen and Resident Review |
| PASRR | Pre-Admission Screening and Record Review |
| PATH | Department of Prevention, Assistance, Transition, & Health Access |
| PCAP | Public Assistance Cost Allocation Plan |
| PCG | Public Consulting Group, Inc. |
| PERM | Payment Error Rate Measurement |
| PETS | Pre-Employment Transition Services |
| PFOA | Perfluorooctanoic Acid |
| PHEP | Public Health Emergency Preparedness |
| PHHS | Preventive Health and Health Services Block Grant |
| PIP | Performance Improvement Project |
| PMPM | Per Member Per Month |
| PMO | Project Management Office |
| PNML | Private Non-Medical Institution |
| PSI | Patient Safety Initiative |
| PT | Physical Therapy |
| QA | Quality Assurance |
| QI | Quality Initiatives |
| RMA | Refugee Medical Assistance |
| RMTS | Random Moment Time Study |
| RRMC | Rutland Regional Medical Center |

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| | |
|--------------|---|
| RTT..... | Race to the Top |
| RU..... | Reach Up Program |
| RWJ | Robert Wood Johnson |
| SAMHSA..... | Substance Abuse and Mental Health Services Administration |
| S&C | Survey and Certification |
| SA..... | Substance Abuse |
| SAP..... | Student Assistance Programs |
| SAPT | Substance Abuse Prevention and Treatment |
| SBIRT..... | Screening, Brief Intervention, and Referral to Treatment |
| SCHIP..... | State Children’s Health Insurance Plan |
| SE | Supported Employment |
| SED..... | Serious Emotional Disturbance |
| SIM..... | State Innovative Model |
| SIREN..... | Statewide Incident Reporting Network for Emergency Medical Services |
| SDO..... | Springfield District Office |
| SEOW | State Epidemiological Outcomes Workgroup |
| SERC | Sustainable Energy Resources for Consumers |
| SFI | Serious Functional Impairment |
| SFY..... | State Fiscal Year |
| SNAP | Supplemental Nutrition Assistance Program |
| SNF..... | Skilled Nursing Facility |
| SOA | Service Oriented Architecture |
| SPA..... | State Plan Amendment |
| SPE | Strategic Prevention Enhancement |
| SPF | Strategic Prevention Framework |
| SMP | Skilled Medical Professional |
| SPMP..... | Skilled Professional Medical Professionals |
| SRS..... | (Department of) Social & Rehabilitative Services |
| SSA..... | Social Security Administration |
| SSA..... | Specialized Service Agency |
| SSBG | Social Services Block Grant |
| SSF | Solely State Funded |
| SSI | Supplemental Security Income |
| SSMIS..... | Social Services Management Information System |
| SRR..... | Secure Residential Recovery |
| ST | Speech Therapy |
| STD..... | Sexually transmitted Disease |
| SUA | State Unit on Aging |
| SWICAP..... | State Wide Indirect Cost Allocation Plan |
| T&TA | Training and Technical Assistance |
| TANF..... | Temporary Assistance for Needy Families (Reach Up in VT) |
| TB | Tuberculosis |
| TBI..... | Traumatic Brain Injury |
| TDO..... | Bennington District Office |
| THMs..... | Trihalomethanes |
| T-MSIS | Transformed Medicaid Statistical Information System |
| TTI..... | Transformation Transfer Initiative |
| UMASS | University of Massachusetts |
| USDA | United States Department of Agriculture |
| UVM..... | University of Vermont |

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| | |
|---------------|--|
| VADIC | Vermont Alcohol and Drug Information Clearinghouse |
| VCHIP | Vermont Child Health Improvement Project |
| VCHRYP | Vermont Coalition of Runaway and Homeless Youth Program |
| VDH..... | Vermont Department of Health |
| VDO..... | Morrisville District Office |
| VDOL | Vermont Department of Labor |
| VHAP | VT Health Access Plan |
| VHC..... | Vermont Health Connect |
| VHCIP | Vermont Health Care Innovation Project |
| IEWS | Vermont Integrated Eligibility Workflow System |
| VISION..... | Vermont's Integrated Solution for Information and Organizational Needs – the statewide accounting system |
| VISTA | Volunteers In Service To America |
| VLA..... | Vermont Legal Aid |
| VLITE..... | Vermont Low Income Trust for Electricity |
| VOCs | Volatile Organic Compounds |
| VPCH | Vermont Psychiatric Care Hospital |
| VPQHC..... | VT Program for Quality in Health Care |
| VR..... | Vocational Rehabilitation |
| VRERP | Vermont Radiological Emergency Response Plan |
| VSA..... | Vermont Statutes Annotated |
| VSH..... | Vermont State Hospital |
| VSNIP..... | Vermont Spay and Neuter Incentive Program |
| VT..... | Vermont |
| VTracks | CDC Vaccine Tracking System |
| WIC | Women Infants and Children |
| WTF..... | Weatherization Trust Fund |
| WX | Weatherization |
| QHP..... | Qualified Health Plan |
| YASI..... | Youth Assessment and Screening Instrument |
| YDO..... | Middlebury District Office |
| YR..... | Year |
| ZDO..... | State Office/Central Office (Waterbury) |

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VI. ADVANCE PLANNING DOCUMENTS AND MEMORANDUM OF UNDERSTANDING

| Document ID | Name | Description | Approving Entity | Type | Submitted (S) Revised (R) Date | Approval Date |
|-------------|---------------------|---|------------------|--------------|--------------------------------------|----------------------------------|
| AHS-1 | EBCP | HSE Platform (Infrastructure, Hosting, Security) and VHC DDI | CMS E&E | IAPDU | S 9/8/16 | 10/31/16 |
| AHS-2 | HITECH | HIE Expansion, EHRIP Operations (Program and Audit), HIT funded SMHP activities, and HSE PMI allocation | CMS-HIT | IAPDU | S 8/15/16 | 12/20/16 |
| AHS-3 | E&E | Integrated Eligibility Program, VHC E&E DDI, and HSE PMO allocation | CMS-E&E | IAPDU | S 9/1/16 | 9/23/16 |
| AHS-4 | MMIS | MMIS Replacement Program (PBM, Care Mgt, Core Ops, Specialized Program,) MAPIR, and HSE PMO allocation | CMS-MMIS | IAPDU | S 8/15/16 | 12/21/16 |
| DCF-1 | OCS | Child Support Enforcement System – ACCESS - 2016 | ACF-OCS | OAPDU | S June 2016 | Pending |
| DCF-2 | SSMIS | Vermont Child Welfare Information Technology System | ACF- | OAPDU | S 10/22/15 | A 10/30/15 |
| DCF-2 | SSMIS | Vermont Child Welfare Information Technology System - 2017 | ACF- | OAPDU | S 9/30/16 | Pending |
| DVHA-1 | ICD-10 | Health Insurance Portability and Accountability Act ICD-10 Modifications | CMS - MMIS | IAPD PAPD | S xx/xx/xx R 4/1/12 | S 12/16/11 R 8/1/12 |
| DVHA-2 | T-MSIS | Transformed Medicaid Statistical Information System | CMS-MMIS | APD | S 8/22/13 R 12/29/15 R 9/8/16 | R 11/13/13 3/28/16 |
| DVHA-3 | ACA-CAQH | Operating Rules Section 1104 of the Patient Protection and Affordable Care Act | CMS-MMIS | IAPD | S 3/20/13 | S 5/13/13 |
| DVHA-4 | Provider Enrollment | ACA 6028 Rules Section 1104 of the Patient Protection and Affordable Care Act | CMS-MMIS | IAPD | S 7/30/15 R 10/26/15 | 12/30/2015 |
| DVHA-5 | PIE | Payer Initiated Eligibility | CMS-MMIS | APD | S 5/5/2016 | Pending |
| DVHA-6 | OAPD | HSE Platform shared services architecture and governance | CMS-MMIS | OAPDU | 8/9/16 | 9/30/2016 |

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Secretary's Office (AHSCO)

| ID | Department | Name | Description |
|--------------------------------------|-----------------|------------------------------------|---|
| SW-1 | All | VISION Allocation | Costs for the State of Vermont Financial System - number of users and transactions |
| SW-2 | All | DHR Allocation | Costs for Costs of Human Resource Department – FTE Count |
| SW-3 | All | DII SLA | Costs for Service Level Agreement between AHS and Department of Information and Innovation – number of PC's and users |
| SW-4 | All | Fee For Space | Costs for Space occupied in State Owned Buildings - Square Footage |
| IGA – 6 | DOE | School Based Health Services | Effective and Efficient administration and recovery of costs related provision of School Based health Services to Medicaid eligible Children |
| Refugee | VDH | Refugee Health Program | Maintain and enhance a system for addressing the health needs of newly arriving refugees |
| 03400-MOU-15ACH-DEC-FY16 | DEC | SerVermont | Placing 15 full-time and 10 half-time AmeriCorps members with municipalities and non-profit organizations |
| 03400-13AFH-VCCVS-FY17 | VCCVS | SerVermont | To research and develop an effective and efficient AmeriCorps program to place dedicated victim liaisons within an array of restorative justice programs. |
| 03400-MOU-KEURIG-DEC-FY16 | DEC | SerVermont | Assignment of one full-time AmeriCorps member with Vermont River Conservancy and Watersheds United to implement strategies to protect and improve water quality in the Lake Champlain watershed. |
| 03400-MOU-VHCIP-DDC-FY16 | DDC | State Innovation Models | Cost for staffing, operating and contract expenditures pursuant to the SIM grant |
| 03400-VHCIP-DAIL-02 A #1 | DAIL | State Innovation Models | Cost for staffing, operating and contract expenditures pursuant to the SIM grant |
| 03400-VHCIP-DVHA-02 | DVHA | State Innovation Models | Cost for staffing, operating and contract expenditures pursuant to the SIM grant –Year 2 |
| 03400-VHCIP-GMCB-02 A#1 | GMCB | State Innovation Models | Costs for staffing and contract expenditures pursuant to the SIM grant |
| 03400-VHCIP-GMCB-03-FY17 | GMCB | State Innovation Models | Costs for staffing and contract expenditures pursuant to the SIM grant |
| 03400-VHCIP-VDH-02-A#1 | VDH | State Innovation Models | Cost for staffing, operating and contract expenditures pursuant to the SIM grant –Year 2 |
| 03400-MOU-VHCIP-AOA-03 | AOA | State Innovation Models | Cost for staffing, operating and contract expenditures pursuant to the SIM grant – Year 3 |

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Department for Children and Family Services (DCF)

| ID | Department | Name | Description |
|---|---|--|--|
| 03440-MOU-VDH-17 (ADMIN/ESD) | Health (VDH) | SNAP Nutrition Education | Nutrition Education |
| 03440-10098-17 (ADMIN/ESD) | Disabilities Aging and Independent Living (DAIL) | AAA SNAP Outreach DAIL | SNAP Outreach Services |
| JFI-VDOL-16 (ADMIN/ESD) | VT Department of Labor (VDOL) | Jobs for Independence | JFI Federal Award |
| DEC_DCF_MOA_CETRF (ESD/LIHEAP) | Environmental Conservation (DEC) | Home Heating Fuel Assistance Program | Low Income Home Heating Oil tanks-crisis fuel tank replacement |
| 03440-ABAWD-17 (ESD/RU) | VT Department of Labor (VDOL) | Job Start T & TA | To Provide comprehensive employment services to Able-Bodied Adults Without Dependents (ABAWD) who are participants of the 3Squares VT program. |
| 03440-10170-17 (ESD LIHEAP) | VT Department of Environmental Conservation (DEC) | Low Income Home Energy Assistance Program (LIHEAP) | To provide replacement of fuel tanks for clients eligible to receive crisis assistance under LIHEAP. |
| SFMNP-DCF-DAIL-16-MOU (ADMIN/ESD) | DAIL | Senior Farmers Market Nutrition Program (SFMNP) | Farm to Family |
| JFI-VR-16 (ADMIN/ESD) | DAIL/VR | Jobs for Independence | Pilot assessment and case management services for the Supplemental Nutrition Assistance Program |
| 03440-10034-17 (ADMIN/RU) | DAIL | VR/BAM | CWS Salesforce Licenses for Employment Consultants at VABIR and VAL |
| 03440-10081-17 (ADMIN/RU) | DAIL | SSDI Application Assistance | To provide the Reach-Up population SSI and SSDI application assistance |
| 03440-10082-17 (ADMIN/GA) | DAIL | SSI and SSDI Application Assistance | To provide the General Assistance population SSI and SSDI application assistance |
| FSD-1 | Fish & Wildlife | Other Grants, Awards, Scholarships_&_ Loans | Camp for Kids: Camp fund for scholarships – Green Mountain Conservation Camp – Lake Bomoseen |
| FSD-2 | Forest, Parks & Recreation | Fam Preservation-Support | Family Park Passes: Pays for family passes |
| 03440-28333-MOU-DMH17 (FSD) | Dept of Mental Health | Child-Parent Psychotherapy Project (CPP) | To support the Child-Parent Psychotherapy Project (CPP) regarding consultation on clinical issues and service approaches including trauma, co-occurring conditions, attachment, and wraparound services. |

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| Woodside-3 FSD-3 | Vermont Agency of Education | School Lunch Program | DCF AP pays monthly to Woodside. Funding from AOE via transfer. Direct funding source |
| FSD-4 | Vermont Center for Crime Victims Services (CCVS) | VT Rural Domestic Violence Project | CAP federal money transfer |
| FSD-16 | Health (VDH) Division of Alcohol and Drug Abuse Programs (ADAP) | Sub-Care-Spee Contracted Prevent Child Abuse Vermont | Valley Vista: Reimburse VDH for FSD kids staying @ Valley Vista @ PNMI Rate for Room & Board. A consolidated grant between FSD and Prevent Child Abuse Vermont to deliver Nurturing Parent Program statewide. FSD receives payments from VDH |
| FSD-27 | Disabilities Aging and Independent Living (DAIL) | Miscellaneous Grants | Jobs Program: (Jump on Board for Success) Program to improve community functioning and employment outcomes of at risk transition aged youth to secure paid employment & community supports |
| 03420-6665 (FSD) | Health (VDH) | Miscellaneous | Pay DCF share of Child Abuse Physician Grant |
| 03440-20393 (FSD) | Judiciary (Office of Court Administrator) | JAIBG | Reimburse VT Judiciary Office of Court admin for FSD expenditures |
| 03440-20394 (FSD) | Judiciary (Office of Court Administrator) | JAIBG | Reimburse VT Judiciary Office of Court admin for FSD expenditures |
| 03440-20424-MOUCJA16 (FSD) | Vermont Department of Public Safety | Human Trafficking Training by GEMS | Continuous trainings on human trafficking presented by the Girls Educational Mentoring Services (GEMS) |
| 03440-20425-MOUCJA16 (FSD) | Office of the Defender General | Juvenile Law Seminar | One day training on Juvenile Law Seminar for all attorneys who practice juvenile law in Vermont. |
| 03440-20263-17 VCIC (FSD) | Vermont Department of Public Safety | Vermont Criminal Information Systems program | Processing of criminal records |
| 03440-28326-CJA16 (FSD) | State's Attorneys and Sheriffs | CHINS & TPR, Development Trauma in Child | Substance Abuse |
| 02160-14Rural-03440 (FSD) | Vermont Center for Crime Victim Services (VCCVS) | Domestic Violence | Rural Sexual Assault, Domestic Violence, Dating Violence and Stalking Assistance Program |

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| OCS-1 | Disabilities Aging and Independent Living (DAIL) | Work 4 Kids Pilot | To offer employment services and support to individuals who are delinquent in child support payments |
| OCS-2 | Judiciary (Office of Court Administrator) | Family Court Transfer | MOU Cooperative Agreement: Court fees to resolve parentage, child support and medical support court cases and ensure compliance with court orders |
| OCS-3 | Department of Corrections | Prison Industry Enhancement Certificate Program (PIECP) | Withholding of child support from remuneration received by incarcerated individuals participating in the VT Correctional Industries' Federal Prison Industry Enhancement Certification Program (PIECP) |
| 03440-28333- MOU-DMH17 (FSD) | Dept of Mental Health | Child-Parent Psychotherapy Project (CPP) | To support the Child-Parent Psychotherapy Project (CPP) regarding consultation on clinical issues and service approaches including trauma, co-occurring conditions, attachment, and wraparound services. |
| Woodside-1 | Vermont Agency of Education | Woodside Title 1 Neglected and Delinquent | MOU Cooperative Agreement: Provide supplemental educational services to youth in Woodside Juvenile Rehabilitation Center |
| Woodside -2 | Vermont Department of Corrections | Motion Pictures | Provide public performance site licenses that enables DCF to show motion pictures to juvenile youth housed within Woodside Rehabilitation Center |
| DDS-1 | SSA Social Security Administration | Disability Determinations | SSA Social Security Administration |
| CDD-1 | Vermont Department of Taxes | Children's Trust Fund | Community based and statewide primary prevention funds for high risk behaviors |
| 03420-6917 (CDD) | Vermont Department of Health | Maternal Early Childhood Sustained Home (MECSH) and Parents as Teachers (PAT) Trainings | Supporting the attendance of Home Health Agency and Parent Child Center staff at the MECSH and PAT trainings |

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Department for Disabilities, Aging, and Independent Living (DAIL)

| ID | Department | Name | Description |
|---------------------------------|----------------|---|--|
| 03440-10098-15-MOU | DCF | 3SquaresVT (3SVT) | Strengthening participation in the 3SquaresVT outreach program |
| DAIL-1 | AHS | VT Senior Corps Program (RSVP) | Administration and coordination of activities to develop, implement and operate the VT RSVP program |
| DAIL-2 | DCF & DVHA | VT Enhanced Options Counseling Medicaid Reimbursement Pilot | Development, implementation, operation, monitoring and evaluation of the ADRC Medicaid Reimbursement Pilot Project |
| DAIL-3 | AOA | Invest EAP | Farm First Program services for dairy producers and eligible dependents, administered by Invest EAP |
| DAIL-4 | DHR | Invest EAP | Providing Employee Assistance program services for State of Vermont employees and eligible dependents |
| DAIL-5 | DPS | Fire Safety | Facilitation and safety of residents and the public in facilities and to coordinate the fire safety and licensing activities of the respective departments |
| DAIL-6 | SOS | VT Board of Nursing | Ensuring a standard of education and competency of nursing assistants who seek to be, or are employed in, Vermont |
| DAIL-7 | VHCB | Home Access Program | Administration and operations for the VT Center for Independent Living Home Access Program |
| SMNP-DCF-DAIL-15-MOU | DCF | Senior Farmers Market Nutrition Program (SFMNP) | Implementation and management of the Farm to Family Program farmer's market coupon component of the SFMNP |
| SMNP-DCF-DAIL-16-MOU | DCF | Senior Farmers Market Nutrition Program (SFMNP) | Implementation and management of the Farm to Family Program farmer's market coupon component of the SFMNP |
| DAIL-8 | DMH | Jump on Board for Success (JOBS) | Operating and funding of JOBS program |
| DAIL-9 | VDH | ARIS hiring packets | VDH to reimburse DAIL for VDH share of ARIS costs to produce and mail out flyers providing caregiver registry information managed by Rewarding Work, Inc. |

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Department for Vermont Health Access

| ID | Department | Name | Description |
|---------------|------------|--|---|
| IGA - DAIL | DVHA | Global Commitment Waiver IGA | This IGA specifies the responsibilities of DVHA and DAIL under Vermont's Section 1115 waiver, with DVHA as the Public MCO (Managed Care Organization) |
| IGA - DCF | DVHA | Global Commitment Waiver IGA | This IGA specifies the responsibilities of DVHA and DCF under Vermont's Section 1115 waiver, with DVHA as the Public MCO (Managed Care Organization) |
| IGA - VDH | DVHA | Global Commitment Waiver IGA | This IGA specifies the responsibilities of DVHA and VDH under Vermont's Section 1115 waiver, with DVHA as the Public MCO (Managed Care Organization) |
| IGA - DMH | DVHA | Global Commitment Waiver IGA | This IGA specifies the responsibilities of DVHA and DMH under Vermont's Section 1115 waiver, with DVHA as the Public MCO (Managed Care Organization) |
| DVHA - 1 | DVHA | Vermont Veterans Home | MCE Investment in Care and Support Services |
| DVHA - 2 | DVHA | Vermont Agency of Agriculture, Food, and Markets | MCE Investment in Public Health |
| DVHA - 3 | DVHA | Vermont State Colleges | MCE Investment in Professional Health Training |
| DVHA - 4 | DVHA | Department of Corrections | MCE Investments in substance abuse and domestic violence programs for targeted DOC populations |
| DVHA - 5 | DVHA | UVM and State Agricultural College | MCE Investments in Vermont physician training programs |
| DVHA - 6 | DVHA | Department of Children and Families Exchange MOU | DCF Healthcare Employees Supporting VHC |
| 03410-1003-13 | DVHA | Green Mountain Care Board Exchange MOU | GMCB's role of establishing Health Benefit Exchange |
| 03410-1006-13 | DVHA | Department of Children and Families Exchange MOU | DCF's role of establishing Health Benefit Exchange |
| 03410-13-15 | DVHA | Department of Aging and Independent Living | Collaboration on the <i>Resilient Vermont</i> and <i>Behavioral Health Screening and Intervention</i> projects within InvestEAP-SIM |

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| 03420-6766 | DVHA | Breast Cancer Screening staff costs for Ladies First program | VDH will reimburse DVHA for a DVHA staff member who works on Ladies First program activities, which is a grant funded program that flows through VDH |
| 03410-17-15 | DVHA | Department of Human Resources | Senior Management Training and Development |
| Contract #25199 | DVHA | UVM and State Agricultural College | UVM is responsible for the non-federal share of Graduate Medical Education (GME) payments |
| 03420-6727 | DVHA | VDH, Alcohol and Drug Abuse Program (ADAP) | The Contractor will continue to contribute to the rigorous and timely support of provider practices to meet the NCQA PCMH or PCSP standards |
| 03420-MOU6853 | DVHA | VDH, Alcohol and Drug Abuse Program (ADAP) | The Contractor will support the Impaired Driver Rehabilitation Programs (IDRP), formerly known as Project CRASH |
| 03420-6839 | DVHA | VDH, Alcohol and Drug Abuse Program (ADAP) | This MOU is for the purpose of supporting the capacity of advancing primary care practices and community health teams to better serve individuals with substance abuse and co-occurring disorders |
| 03410-01-17 | DVHA | GMCB | Transfer of OneCare and VCHURES data for GMCB statutory duty. |

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Vermont Department of Health

| ID | Department | Name | Description |
|---------------------|---|-----------------------------------|---|
| 6839 | DVHA | Health Access Blueprint | Support people with substance abuse issues |
| 6816 | DCF Dept. of Children & Families | Part time physician at UVMHC | Part time child abuse physician |
| 6811 | DCF Dept. of Children & Families | Nurturing Parenting Program | Prevent child abuse |
| 6810 | DCF Dept. of Children & Families | Ladies First Program | Provide funding to the Farmers Market for Ladies First eligible clients |
| 16-7250- 8004-RA | US Dept. of Agriculture | Rabies Program | Technical phone assistance for questions about rabies. |
| 6801 | DOC | HIV oral Fluid tests | Given to jail/prison population |
| 6799 | DAIL | Shared Temp position | Shared position between DAIL and ADAP |
| 6792 | Secretary of State | Online business Service Center | Administer Commercial Code Laws and Regulations |
| 6785 | VT Agency of Transportation | Child passenger Safety | EMS to take on the day to day responsibilities of this program |
| 6765 | VT Housing and Conservation Board | Lead poisoning prevention. | Prevent lead poisoning. |
| 6727 | DVHA | Blueprint for Health | Patient Centered Medical homes to serve individuals with Chronic pain, substance use and co-occurring disorders |
| 6668 | Agency of Transportation | | Child Passenger Safety program |
| 6681 | Dept. of Mental health | MCH position | VDH RECEIVING \$20,000 to support a CDC assignee position |
| 6664 | AOT | SIREN project | Support a full-time staff position a VDH |
| 6656 | DCF | SNAP-ED program | Develop and implement Vermont's supplemental Nutritional Assistant Education Program |
| 6603 | UVM Dept. of Mathematics & Statistics | Interns | Allows VDH HP statistics to obtain 2-3 interns per academic year up to 10 hrs. per week per Intern. |

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| 6581 | Natural Resouces | Public water disinfectant hazards | To determine if a permit for the use of a new type of disinfectant for a public water system will result in a health effect that is likely to constitute a public health hazard. |
| 03520 | Attorney General | Legal Services | Provides legal services |
| 6468 | VT. Dept. of Environmental Conservation | Public Water systems | Public water systems. Regulations and hazardous site cleanups. |
| 6103 | Education | Physical activity | Support for the trainings and implementation of physical activity and physical education programs to youth. |
| 6427 | Education | Smoking prevention | Youth tobacco prevention education and activities. |
| 6417 | VTC Nursing | Clinical experience | To enable a specified number of students to obtain clinical experience in public health nursing. |

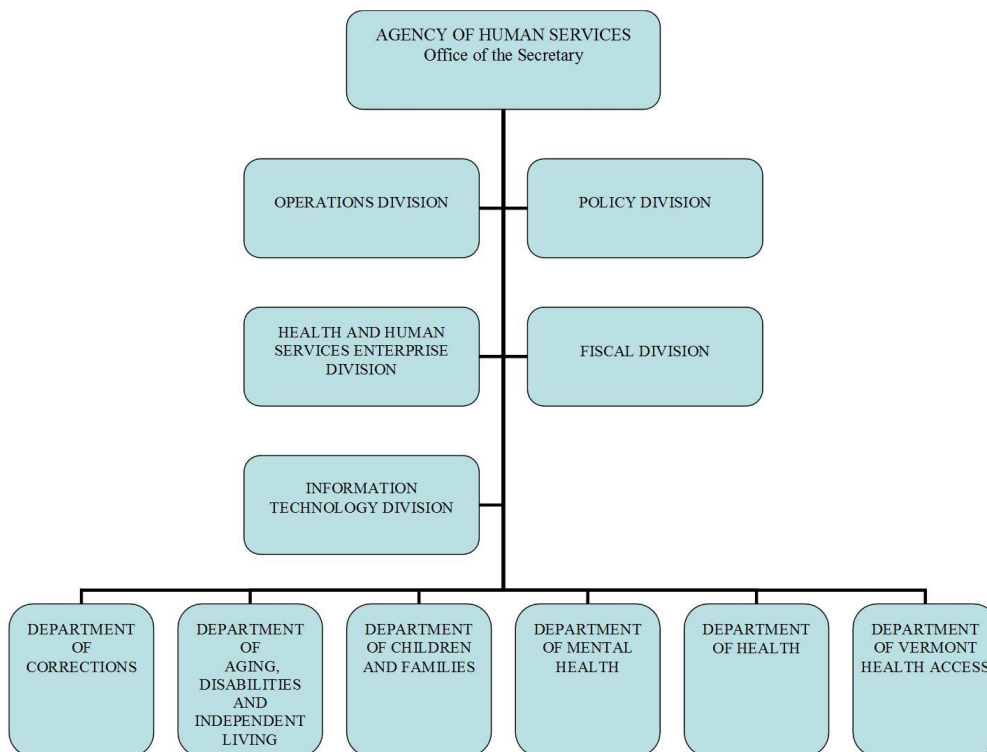
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Department of Mental Health

| ID | Department | Name | Description |
|-------------------------------|-------------------------|---------------------------|--|
| DMH - DAIL-1 | DAIL | Eldercare | Funding for contracts between CVCOA\DA's\DAIL |
| DMH-DAIL -2 | DAIL | CRT | MH-DS funding agreement for CRT client |
| DMH-DAIL -3 | DAIL | HC ARCH Bundle | DAIL funding that is in the DMH bundle payments |
| DMH-DAIL -4 | DAIL | DS Waiver Children | DS/MH Waiver joint funding agreements |
| DMH-DAIL -5 | DAIL | Guardianship Evaluations | MH reimbursement for evaluations paid for by DAIL |
| DMH-DAIL -6 | DAIL | DS Waiver Adult | DS/MH Waiver joint funding agreements |
| DMH-DAIL & DCF & DVHA-1 | DAIL & DCF & DVHA | Bundle CSAC | DAIL & DCF & DVHA funding that is in the DMH bundle payments |
| DMH-DAIL & DCF & DVHA & VDH-1 | DAIL & DCF & DVHA & VDH | Bundle NCSS | DAIL & DCF & DVHA & VDH funding that is in the DMH bundle payments |
| DMH-DAIL & DCF & DOC-1 | DAIL & DCF & DOC | JOBS | DAIL, DCF and DOC funding for the Jump On Board for Success program that is billed through DMH (part of this is the NCSS bundled rate and part of it dates back to many years ago) |
| DMH-DAIL & DCF-1 | DAIL & DCF | VT Federation of Families | Inter Agency Support Team funding for VFF contract for LIT Parent Representatives |
| DMH-DCF -1 | DCF | ISB | DCF funding for kids in DCF custody who have an Individual Service Budget and are billed through DMH |
| DMH-DCF -2 | DCF | Waivers | DCF funding for kids who are on DCF Waivers and are billed through DMH |
| DMH-DCF -3 | DCF | Bundle PCC | DCF funding that is in the DMH bundle payments |
| DMH-DCF -4 | DCF | Bundle NFI | NFI funding that is in the DMH bundle payments |
| DMH-DCF -5 | DCF | PNMI Park Street | Joint funding with DCF for a child at Park Street PNMI facility at Howard Center |
| DMH-DVHA -1 | DVHA | CPCS/CHASS Respite | DVHA funding for the Non-Categorical program that is billed through DMH |
| DMH-DVHA -2 | DVHA | Community Health Center | Funding from DVHA to pay for Community Health Center grant |

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VII. AGENCY-WIDE ORGANIZATIONAL CHART



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VIII. FEDERAL CFDA NUMBERS

| CFDA # | Federal Agency | Program Title |
|---------------|-----------------------|---|
| 10.551 | USDA-FNS | SNAP Food Stamps (Cash) |
| 10.551 | USDA-FNS | SNAP Food Stamps (EBT) |
| 10.557 | USDA-FNS | Special Supplemental Nutrition Program for Women, Infants, and Children |
| 10.561 | USDA-FNS | State Administrative Matching Grants for Food Stamp Program |
| 10.565 | USDA-FNS | Commodity Supplemental Food Program |
| 10.568 | USDA-FNS | Emergency Food Assistance Program (Administrative Costs) |
| 10.572 | USDA-FNS | WIC Farmers' Market Nutrition Program (FMNP) |
| 10.576 | USDA-FNS | Senior Farmers Market Nutrition Program |
| 10.578 | USDA-FNS | WIC Grants to State |
| 10.596 | USDA-FNS | JFI E&T Cluster |
| 14.231 | HUD | Emergency Shelter Grants Program |
| 14.267 | HUD | Continuum of Care Program |
| 16.523 | DOJ-JJDP | Juvenile Accountability Incentive Block Grants |
| 16.540 | DOJ-JJDP | Juvenile Justice and Delinquency Prevention - Allocation to States |
| 16.606 | DOJ-BJA | State Criminal Alien Assistance Program (SCAAP) |
| 16.727 | DOJ-JJDP | Enforcing Underage Drinking Laws Program |
| 16.735 | DOJ-BJA | Protecting Inmates and Safeguarding Communities (PREA -Prison Rape Elimination Act) |
| 16.740 | DOJ-BJA | Statewide Automated Victim Information Notification (SAVIN) |
| 16.754 | DOJ | Prescription Drug Monitoring - Enhanced |
| 16.812 | DOJ | Second Chance Act Prisoner Reentry Initiative |
| 17.235 | DOL | Senior Community Service Employment Program (SCSEP) |
| 17.261 | DOL | WIA Pilots, Demonstrations, and Research Projects |
| 66.032 | EPA-OAR | State Indoor Radon Grants |
| 66.701 | EPA-OECA | Toxic Substance Compliance Monitoring Cooperative Agreements |
| 66.707 | EPA-OPPTS | TSCA Title IV State Lead Grants - Certification of Lead-Based Paint Professionals |
| 81.042 | Energy | ARRA-Weatherization Assistance for Low - Income Persons |
| 81.042 | Energy | Weatherization Assistance for Low - Income Persons |
| 84.126 | DOE-OSERS | Rehabilitation Services - Vocational Rehabilitation Grants to States |
| 84.169 | DOE-OSERS | Independent Living - State Grants |
| 84.177 | DOE-OSERS | Rehabilitation Services - Independent Living Services for Older Individuals Who are Blind |
| 84.181 | DOE-OSERS | Special Education - Grants for Infants and Families with Disabilities |
| 84.186 | DOE-OESE | Safe and Drug-Free Schools and Communities - State Grants |
| 84.187 | DOE-OSERS | Supported Employment Services for Individuals with Severe Disabilities |
| 84.224 | DOE-OSERS | Assistive Technology |
| 84.265 | DOE-OSERS | Rehabilitation Training - State Vocational Rehabilitation Unit In-Service Training |
| 84.412 | DOE-OSERS | Race to the Top - Early Learning Challenge |
| 93.003 | DHHS-ASPR | Hospital Bioterrorism |
| 93.041 | DHHS-AOA | Special Programs for the Aging - Title VII, Chapter 3 - Programs for Prevention of Elder Abuse, Neglect, and Exploitation |

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| 93.042 | DHHS-AOA | Special Programs for the Aging - Title VII, Chapter2 - Long Term Care Ombudsman Services for Older Individuals |
| 93.043 | DHHS-AOA | Special Programs for the Aging-Title III, Part F - Disease Prevention and Health Promotion Services |
| 93.044 | DHHS-AOA | Special Programs for the Aging - Title III, Part B - Grants for Supportive Services and Senior Centers |
| 93.045 | DHHS-AOA | Special Programs for the Aging - Title III, Part C -Nutrition Services |
| 93.048 | DHHS-AOA | Special Programs for the Aging - Title IV - Training, Research and Discretionary Projects |
| 93.051 | DHHS-AOA | Alzheimer's Disease Demonstration Grants to States |
| 93.052 | DHHS-AOA | National Family Caregiver Support |
| 93.053 | DHHS-AOA | Nutrition Services Incentive |
| 93.069 | DHHS-CDC | Public Health Emergency Preparedness |
| 93.070 | DHHS-CDC | Environmental Public Health and Emergency Response |
| 93.071 | DHHS-CDC | Medicare Enrollment Assistance Program MIPPA |
| 93.074 | DHHS-CDC | Hospital Preparedness Program and Public Health Emergency Preparedness Aligned Cooperative Agreements |
| 93.079 | DHHS-CDC | Cooperative Agreements to Promote Adolescent Health through School-Based HIV/STD Prevention and School-Based Surveillance |
| 93.092 | DHHS-ACF | Affordable Care Act (ACA) Personal Responsibility Education Program |
| 93.103 | DHHS-FDA | Food and Drug Administration Research |
| 93.104 | DHHS-SAMHSA | Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (SED) |
| 93.110 | DHHS-HRSA | Maternal and Child Health Federal Consolidated Programs |
| 93.116 | DHHS-CDC | Project Grants and Cooperative Agreements for Tuberculosis Control Programs |
| 93.127 | DHHS-HRSA | Emergency Medical Services for Children |
| 93.130 | DHHS-HRSA | Primary Care Services - Resource Coordination and Development |
| 93.136 | DHHS-CDC | Injury Prevention and Control Research and State and Community Based Programs |
| 93.150 | DHHS-SAMHSA | Projects for Assistance in Transition from Homelessness (PATH) |
| 93.165 | DHHS-HRSA | Grants to States for Loan Repayment Program |
| 93.184 | DHHS-CDC | Disabilities Prevention |
| 93.217 | DHHS-OPA | Family Planning - Services |
| 93.224 | DHHS-HRSA | Consolidated Health Centers (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care) |
| 93.241 | DHHS-HRSA | State Rural Hospital Flexibility Program |
| 93.243 | DHHS-SAMHSA | Substance Abuse and Mental Health Services - Projects of Regional and National Significance |
| 93.251 | DHHS-HRSA | Universal Newborn Hearing Screening |
| 93.268 | DHHS-CDC | Immunization Grants |
| 93.268 | DHHS-CDC | Immunization Grants |
| 93.270 | DHHS-CDC | Adult Viral Hepatitis Prevention and Control |
| 93.283 | DHHS-CDC | Centers for Disease Control and Prevention - Investigations and Technical Assistance |
| 93.296 | DHHS-OS | State Partnership Grant Program to Improve Minority Health |

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| 93.301 | DHHS-HRSA | Small Rural Hospital Improvement Grants |
| 93.314 | DHHS-CDC | Early Hearing Detection and Intervention Information System (EHDI-IS) Surveillance Program |
| 93.323 | DHHS-CDC | Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) |
| 93.336 | DHHS-CDC | Behavioral Risk Factor Surveillance System |
| 93.500 | DHHS-OS | Pregnancy Assistance Fund Program |
| 93.505 | DHHS-HRSA | ACA Home Visiting Program |
| 93.507 | DHHS-CDC | Strengthening Public Health Infrastructure for Improved Health Outcomes |
| 93.517 | DHHS-AOA | Affordable Care Act – Aging and Disability Resource Center |
| 93.520 | DHHS-CDC | ACA – Communities Putting Prevention to Work |
| 93.521 | DHHS-CDC | The Affordable Care Act: Building Epidemiology, Laboratory, and Health Information Systems Capacity in the Epidemiology and Laboratory Capacity for Infectious Disease (ELC) and Emerging Infections Program (EIP) Cooperative Agreements |
| 93.525 | DHHS-OS | State Planning and Establishment Grants for the Affordable Care Act (ACA)'s Exchanges |
| 93.531 | DHHS-CDC | Community Transformation Grants |
| 93.538 | DHHS-CDC | ACA National Environmental Public Health Tracking Program |
| 93.539 | DHHS-CDC | Prevention and Public Health Fund Affordable Care Act - Immunization Program |
| 93.544 | DHHS-CDC | Coordinated Chronic Disease Prevention and Health Promotion Program |
| 93.550 | DHHS-ACF | Transitional Living for Homeless Youth |
| 93.556 | DHHS-ACF | Promoting Safe and Stable Families |
| 93.558 | DHHS-ACF | Temporary Assistance for Needy Families |
| 93.563 | DHHS-ACF | Child Support Enforcement |
| 93.564 | DHHS-ACF | BICS |
| 93.566 | DHHS-ACF | Refugee and Entrant Assistance - State Administered Programs |
| 93.568 | DHHS-ACF | Low-Income Home Energy Assistance |
| 93.569 | DHHS-ACF | Community Services Block Grant |
| 93.575 | DHHS-ACF | Child Care and Development Block Grant |
| 93.576 | DHHS-ACF | Refugee and Entrant Assistance - Discretionary Grants |
| 93.590 | DHHS-ACF | Community - Based Family Resource and Support Grants |
| 93.596 | DHHS-ACF | Child Care Mandatory and Matching Funds of the Child Care and Development Fund |
| 93.597 | DHHS-ACF | Grants to States for Access and Visitation Programs |
| 93.599 | DHHS-ACF | Chafee Education and Training Vouchers Program (ETV) |
| 93.600 | DHHS-ACF | Head Start |
| 93.609 | DHHS-CMS | ACA Medicaid Adult Quality Measures |
| 93.624 | DHHS-CMS | ACA State Innovation Models |
| 93.630 | DHHS-ACF | Developmental Disabilities Basic Support and Advocacy Grants |
| 93.643 | DHHS-ACF | Children's Justice Grants to States |
| 93.645 | DHHS-ACF | Child Welfare Services - State Grants |
| 93.658 | DHHS-ACF | Foster Care - Title IV-E |
| 93.659 | DHHS-ACF | Adoption Assistance |
| 93.667 | DHHS-ACF | Social Services Block Grant |
| 93.669 | DHHS-ACF | Child A&N |

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| 93.671 | DHHS-ACF | Family Violence Prevention and Services |
| 93.674 | DHHS-ACF | Chafee Foster Care Independent Living |
| 93.716 | DHHS-ACF | ARRA - Temporary Assistance for Needy Families (TANF) Supplement |
| 93.719 | DHHS-OS | ARRA - State Grants to Promote Health Information Technology |
| 93.733 | DHHS-CDC | Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance |
| 73.735 | DHHS-CDC | Tobacco Quitline |
| 93.753 | DHHS-CDC | Child Lead Poisoning Prevention Surveillance |
| 93.761 | DHHS-ACL | Fall Prevention |
| 93.767 | DHHS-CMS | State Children's Insurance Program |
| 93.767 | DHHS-CMS | State Children's Insurance Program |
| 93.777 | DHHS-CMS | State Survey and Certification of Health Care Providers and Suppliers |
| 93.778 | DHHS-CMS | Medical Assistance Program |
| 93.779 | DHHS-CMS | Centers for Medicare and Medicaid Services (CMS) Research, Demonstrations and Evaluations |
| 93.791 | DHHS-CMS | Money Follows the Person Demonstration |
| 93.815 | DHHS-CMS | Domestic Ebola Supplement to the Epidemiology and Laboratory Capacity for Infection Diseases |
| 93.817 | DHHS-ASPR | Hospital Preparedness Ebola |
| 93.889 | DHHS-OS | Bioterrorism Hospital Preparedness Program |
| 93.912 | DHHS-HRSA | Rural Health Care Services Outreach |
| 93.913 | DHHS-HRSA | Grants to States for Operation of Offices of Rural Health |
| 93.917 | DHHS-HRSA | HIV Care Formula Grants |
| 93.940 | DHHS-CDC | HIV Prevention Activities - Health Department Based |
| 93.944 | DHHS-CDC | Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance |
| 93.945 | DHHS-CDC | Assistance Programs for Chronic Disease Prevention and Control |
| 93.946 | DHHS-CDC | Cooperative Agreements to Support State-Based Safe Motherhood and Infant Health Initiative Programs |
| 93.958 | DHHS-SAMHSA | Block Grants for Community Mental Health Services |
| 93.959 | DHHS-SAMHSA | Block Grants for Prevention and Treatment of Substance Abuse |
| 93.977 | DHHS-CDC | Preventive Health Services - Sexually Transmitted Disease Control Grants |
| 93.994 | DHHS-HRSA | Maternal and Child Health Services Block Grant to the States |
| 94.003 | CNCS | State Commissions |
| 94.006 | CNCS | AmeriCorps |
| 94.007 | CNCS | Planning and Program Development Grants |
| 94.009 | CNCS | Training and Technical Assistance |
| 94.013 | CNCS | AmeriCorps-Volunteers in Service to America (VISTA) |
| 96.001 | SSA | Social Security - Disability Insurance |
| 96.008 | SSA | Work Incentives P&A Grant |

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IX. COST ALLOCATION METHODOLOGIES AND DEPARTMENTAL ORGANIZATIONAL CHARTS

This Narrative is organized by Department

AHS Secretary's Office

I. Introduction

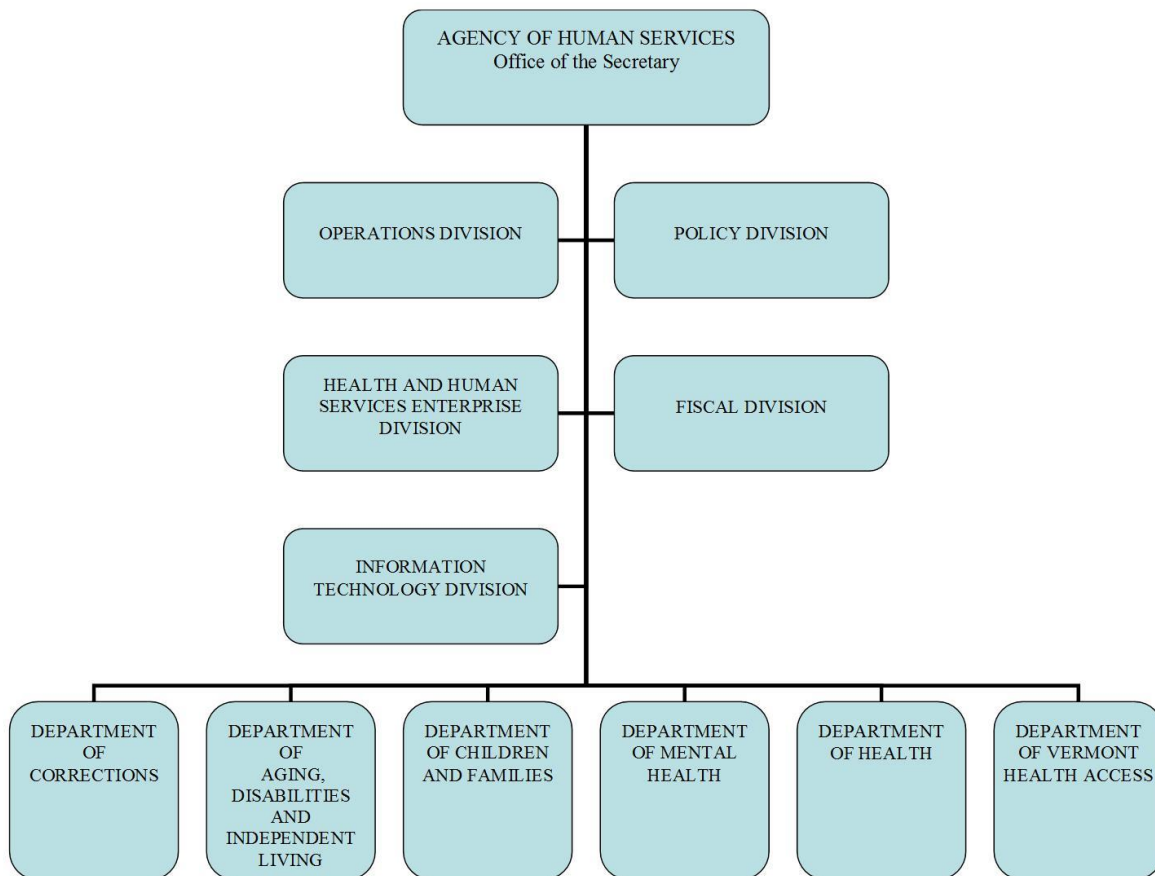
The following narrative represents the cost allocation plan (CAP) for the State of Vermont, Agency of Human Services (AHS). For purposes of this narrative, AHS is also referred to as the "Office of the Secretary", as it is the Secretary's Office, which through its six member Departments and a network of community partners and providers, is responsible for the implementation and delivery of all human service programs within the state. Each Department has a distinct area of focus and responsibility and contributes to the creation and sustenance of an entire system of human service supports. As a single entity, the Agency builds a continuum of care that protects and supports vulnerable Vermonters, addresses individual, family and regional crises as they arise, develops and promotes whole population approaches to physical and behavioral health works to build economic self-sufficiency and keeps Vermont communities safe. The Departments are: Department of Children and Family Services (DCF); Department of Disabilities, Aging and Independent Living (DAAIL); Department of Vermont Health Access (DVHA); the Vermont Department of Health (VDH); Department of Mental Health (DMH) and the Department of Corrections (COR). Appropriate costs allocated as benefitting the Secretary's Office are further reallocated across all other agency-specific benefitting objectives.

The Agency of Human Services strives to improve the health and well-being of Vermonters today and tomorrow and to protect those among us who are unable to protect themselves. In carrying out this mission, the Agency vision to ensure this is to:

- The reduction of the impacts of poverty in our state and the creation of pathways out of poverty
- The promotion of health, well-being and safety in our communities
- An enhanced focus on accountability and effectiveness in achieving our goals
- The assurance of high quality health care for all Vermonters

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II. Organizational Chart



* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

III. Secretary's Office Cost Allocation Methodologies

Organizational Unit 1: Indirect Cost Allocations

Nature and Extent of Services: The Agency of Human Services Secretary's Office is assessed costs from the State of Vermont, Agency of Administration who 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.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|-------------------|--|-------------------|
| 10000.1 | SWICAP- AHS | AHS Allocation of State Wide Indirect Costs | Direct to AHS |
| 10000.2 | SWICAP- DAIL | DAIL Allocation of State Wide Indirect Costs | Direct to DAIL |
| 10000.3 | SWICAP- DOC | DOC Allocation of State Wide Indirect Costs | Direct to DOC |
| 10000.4 | SWICAP- VDH | VDH Allocation of State Wide Indirect Costs | Direct to VDH |
| 10000.5 | SWICAP- DVHA | DVHA Allocation of State Wide Indirect Costs | Direct to DVHA |
| 10000.6 | SWICAP- DCF | DCF Allocation of State Wide Indirect Costs | Direct to DCF |
| 10000.7 | SWICAP- DMH | DMH Allocation of State Wide Indirect Costs | Direct to DMH |

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Organizational Unit 2: Secretary's Office

Nature and Extent of Services: The Secretary's Office for the Agency of Human Services oversees the operations of the Agency (including the General Counsel, Integrated Family Services and Administrative Support), its Divisions, and Departments.

The Health Care Operations, Compliance & Improvement unit serves to ensure that health care operational, compliance and improvement initiatives that cross multiple departments are planned and implemented consistently and effectively. Medicaid policy development and interpretation for eligibility and coverage including the Global Commitment to Health Waiver, Medicaid State Plan and Children's Health Insurance Program; administers grievances, appeals and fair hearings; processes public records requests; directs quality improvement activities, and oversight of compliance activities.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|---|--|
| 37210* | Secretary's Office Staff | Costs associated with the Office of the AHS Secretary and Staff | Positions Across AHS |
| 37101* | Health Care Operations, Compliance and Improvement Staff | Project work assigned by the AHS Secretary's Office. | Quarterly enrollment for GC, CHIP, and all other benefiting programs |
| 37110* | Health Care Operations, Compliance and Improvement Support Staff | Support staff provides assistance for the Division. | Quarterly enrollment for GC, CHIP, and all other benefiting programs |
| 37730* | Medicaid Policy Unit | Costs associated with Medicaid Policy | Quarterly enrollment for GC, CHIP, and all other benefiting programs |
| 37260 | Integrated Family Services (IFS) | Operating costs related to Integrated Family Services | Direct to Administrative Funds |

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Organizational Unit 3: Operations Division

Nature and Extent of Services: The Chief Operations Officer oversees many of the day to day activities of the Secretary's Office, at the direction of the Agency deputy secretary. The duties can vary considerably from working to improve operational efficiency, problem solving and handling logistics to acting as EEO and ADA Officer for the agency. This wide range of responsibilities includes the following Secretary's Office units/operations:

Developmental Disabilities Council – The Vermont Developmental Disabilities Council is a state-wide board led by people with developmental disabilities and their families. It is charged with conducting comprehensive review and analysis of services & supports in Vermont, and informing the Governor and other policymakers about issues impacting the lives of individuals with developmental disabilities.

Emergency Management – The Director of Emergency Management directs all aspects of activities for State Support Function 6 (mass care, emergency assistance, housing and human services) and coordinates with all AHS Departments to meet the Agency's responsibilities for all-hazards emergency response.

Facilities – Facilities manages all of the spaces that AHS occupies in both State-owned property and leased space.

Human Services Board – The Board is a citizen's panel consisting of seven members. 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 the Agency of Human Services.

Investigations Unit – The Agency of Human Services' Investigations Unit is a specialized unit responsible for conducting the Agency's labor investigations.

The Tobacco Evaluation and Review Board – This board works in partnership with AHS and VDH in establishing the annual budget, program criteria and policy development, and review and evaluation of the tobacco prevention and treatment programs.

Workforce Development – Workforce development provides resources, programs, and training including leadership development, new employee orientation, and process improvement. Included in this effort is engaging the workforce in professional development, continuous improvement and organizational and cultural change.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|------------------------------------|---|--|
| 37050* | Operational Services | Costs associated with Operational Services | Positions Across AHS |
| 37190* | 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 | Quarterly update based on caseload data provided by VT Legal Aid |

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| 37220* | Human Services Board | This unit conducts fair hearings regarding clients who feel that they have been disadvantaged within the Agency of Human Services system. | Quarterly update based on Case Count of Results of Human Services Board fair hearings. |
| 37250 | Human Resources Investigation Staff | Investigation of Personnel Issues | Quarterly update based on Case Count of Results of HR Investigations case count |
| 37650 | DDC Administration | Administrative costs associated with the Developmental Disabilities Council. | Direct to Developmental Disabilities Council |
| 37651 | DDC Steering Committee | Costs associated with the Developmental Disabilities Council Steering Committee. | Direct to Developmental Disabilities Council |
| 37653 | DDC Leadership Series | Costs associated with Developmental Disabilities Council Leadership Series | Direct to Developmental Disabilities Council |
| 37654 | DDC Grants | Sub-grants used in the Developmental Disabilities Council Program. | Direct to Developmental Disabilities Council |
| 37900 | Tobacco Evaluation and Review 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. | Direct to Tobacco Funds |
| 37961 | SerVermont – Competitive grant | National and Community Service Act of 1990 for community based initiatives | Direct to CNCS AmeriCorps Competitive Grant |
| 37962 | SerVermont – Formula grant | National and Community Service Act of 1990 for community based initiatives | Direct to CNCS AmeriCorps Formula Grant |
| 37964 | SerVermont—Keurig | Keurig funding to support projects to improve the water quality of Lake Champlain. | Direct to Keurig Grant |
| 37965 | SerVermont – Administrative | Administrative cost for staff to support community based initiatives in education, public safety, health, and the environment. | Direct to CNCS AmeriCorps Operations Grant |
| 37966 | SerVermont – Administration – General Funds | Administrative cost for staff to support community based initiatives in education, public safety, health, and the environment. | Direct to State General Funds |

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| 37968 | SerVermont – CNCS Withholding | Administrative time for administering the competitive and formula grants | Direct to CNCS Withholding |
| 37969 | SerVermont – Volunteers in Service to America (VISTA) Supervision | VISTA provides full-time members to nonprofit, faith-based and other community organizations, and public agencies to create and expand programs that bring low-income individuals and communities out of poverty. | Direct to VISTA |
| 37970 | SerVermont Training & Technical Assistance (TTA) | Costs associated with carrying training and technical assistance for SerVermont programs | Direct to CNCS TTA Grant |

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Organizational Unit 4: Policy Division

Nature and Extent of Services: The Policy Division is responsible overseeing the direction of policy and planning efforts across the Agency of Human Services and its six departments. Work involves a wide range of complex policy initiatives across the spectrum of health and human services and ensuring a coordinated and integrated approach to policy development, strategic planning and direction setting, and direction setting for Agency priorities and the development, implementation and support of a culture of performance accountability. The division is responsible in defining scope, direction and priorities for AHS major legislative projects and planning.

The AHS Director of Housing oversees the stable, safe, affordable housing that is critical to all of the clients of the Agency of Human Services.

The State Refugee Office director is a federally mandated position (45 CFR 400.2) and directs the US Resettlement Program for the state, in compliance with federal statutes and regulations.

Field Services which 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.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|---|---|---|
| 37530 | Refugee Social Services | Funding to provide employability services to refugees | Direct to Refugee Social Services Grant |
| 37531 | State Refugee Administration | Costs associated with the coordinator for administration of the federal refugee programs | Direct to Refugee Cash and Medical Assistance (CMA) Grant |
| 37532 | Refugee School Impact | Funding to Vermont schools for refugee children. | Direct to Refugee School Impact Grant |
| 37535 | Refugee Discretionary Targeted Assistance | Funding to provide youth employment services to refugees | Direct to Refugee Discretionary Targeted Assistance Grant |
| 37536 | Refugee Formula Targeted Assistance | Funding to provide social services to refugees | Direct to Refugee Formula Targeted Assistance Grant |
| 40450* | AHS Policy | Costs associated with the Policy Division staff salaries and benefits. | Positions Across AHS Non-Institutional Staff |
| 41002* | Service Coordination | Sub-grants to provide service coordination for families and individuals referred through the State as short term or temporary lead case management. | Positions Across Non-Institutional AHS Staff |

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| 41003* | Direct Service Dollars | Sub-grants to provide direct supports and create community collaborations for individuals and families in need throughout the state. | Positions Across Non-Institutional AHS Staff |
| 42020 | 211 Contract – MCO Investment | Contract for call center services for health care. | Direct to GC-MCO Investment |
| 42021 | 211 Contract – General Fund | Contract for call center services for human services referrals | Direct to State General Funds |

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Organizational Unit 5: Health and Human Services Enterprise Division

Nature and Extent of Services: The Health and Human Services Enterprise Division (HSE) is a multi-year, multi-phased portfolio of programs that are aimed at reshaping and enhancing business processes, improving public/private sector partnerships, optimizing information management and modernizing the IT environment, which will result in an end-to-end transformation of the customer experience.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--------------------------------|--|---|
| 37003 | DCF Admin Costs | Staff costs associated with DCF related work | Direct to DCF |
| 37111 | HSE Program Director | Project work assigned by the AHS Secretary's Office | Total Salaries across Health and Human Services Enterprise Division |
| 41763 | Exchange Level 1C non-IT Staff | Non-IT Salary and Operating costs related to the Level 1C CCIIO Exchange Grant | Direct to Exchange Level 1C |

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Organizational Unit 6: Fiscal Division of Administrative Services

Nature and Extent of Services: Fiscal Operations 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 Unit develops financial status reports and manages Global Commitment funds state-wide, including associated federal reporting and fiscal compliance under the State's 1115 waiver. The Fiscal Unit also coordinates all federal block grant and statewide single audit functions, updates the federal cost allocation plans and manages the receipt and reconciliation of federal funds per year. In addition, the Unit is responsible for reviewing and approving all AHS contracts and grants for the Agency of Human Services and works to coordinate the financial interests of the Health & Human Services Enterprise (HSE).

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|--|---|
| 37010* | Staff Accountant – AHS – Operations Financial Staff | Financial staff assigned directly to Secretary's Office fiscal duties; responsibilities include budget development & monitoring, preparation of quarterly cost allocation, all financial reports, and fiscal support to grant programs administered through the Secretary's Office. | Total Salaries across all Secretary's Office staff. |
| 37011* | Audit Unit | Costs associated with monitoring A133 audit issues and with monitoring the agreements with sub-recipients throughout the Agency. | Quarterly results of the Audit Unit Time Study |
| 37013* | Medicaid Unit | Costs associated with monitoring and reporting of the health care expenses and revenues statewide | Quarterly enrollment for GC, CHIP, and all other benefiting programs |
| 37020 | Federal Funds Management Unit | This unit's primary responsibility is the management and accountability of federal funds. Duties performed within this unit include the development and preparation of Agency cost allocation & indirect cost plans, federal expenditure reporting, cash management of federal funds, and compliance with federal regulations. | Quarterly results of Federal Funds Management Unit Financial AHS Time Study |

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| 37021* | Fiscal Analysis & Development | Oversees Medicaid reporting and budget staff | Total salaries of the Budget Services Unit, Medicaid Unit, SIM Grant Financial Manager and Race to the Top ELC Grant Manager. |
| 37030 | Budget Services Unit | Performs budget over sight and monitoring agency wide | Positions Across AHS |
| 37040* | Agency Chief Fiscal Officer | 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. | Total salaries of Fiscal Division staff |
| 37170* | General Operating Expenses | Routine operating expenses that are not identifiable to a specific funding source are allocated to the various programs and departments. | Positions Across AHS |
| 37172 | General Operating Expenses – State Funded | Routine operating expenses that are not allocable to federal programs | Direct to State General Funds |
| 37180* | Misc. Grants and Contracts | Grants and contracts managed by the Secretary's Office | Positions Across AHS |
| 37120 | Single Audit-State Auditor's Office Financial Statement and Internal Controls along with OMB A-133 Compliance Reviews | AHS-CO The Secretary's Office 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). | Direct to departments based on State Auditor's Office invoice. |
| 37308* | Division of Rate Setting | Costs for the entire Rate Setting Unit | Direct to Global Commitment – Admin |
| 37415 | Rental Expenses – Brattleboro | Rental Expenses for Brattleboro Offices | Direct to Administrative Funds |
| 37420 | Rental Expenses – Middlebury | Rental Expenses for Middlebury Offices | Direct to Administrative Funds |
| 37425 | Rental Expenses – Morrisville | Rental Expenses for Morrisville Offices | Direct to Administrative Funds |

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| 37428 | Rental Expenses – Randolph | Rental Expenses for Randolph Offices | Direct to Administrative Funds |
| 37430 | Rental Expenses – Rutland – Merchants Row | Rental Expenses for Rutland Offices | Direct to Administrative Funds |
| 37431 | Rental Expenses – Berlin | Rental Expenses for the IT unit located in Berlin | Direct to Administrative Funds |
| 37433 | Rental Expenses – Hartford | Rental Expenses for Hartford Offices | Direct to Administrative Funds |
| 37434 | Rental Expenses – Winooski | Rental Expenses for Winooski Offices | Direct to Administrative Funds |
| 37435 | Rental Expenses – Burlington | Rental Expenses for Burlington Offices | Direct to Administrative Funds |
| 37436 | Rental Expenses – Williston | Rental Expenses for Williston Offices | Direct to Administrative Funds |
| 37437 | Rental Expenses – Montpelier | Rental Expenses for the Montpelier Offices | Direct to Administrative Funds |
| 37445 | Rental Expenses – St. Johnsbury | Rental Expenses for St. Johnsbury Offices | Direct to Administrative Funds |
| 37460 | Rental Expenses – St. Albans | Rental Expenses for St. Albans Offices | Direct to Administrative Funds |
| 37487 | Rental Expenses – Williston 289 | Rental Expenses for offices at Williston 289 | Direct to Administrative Funds |
| 37488 | Rental Expenses – Williston 291 | Rental Expenses for offices at Williston 291 | Direct to Administrative Funds |
| 37490 | Departmental Operating Expenses | Expenses for the Secretary’s Central Office | Direct to Administrative Funds |
| 37700* | Health Care Administration: Actuarial | Contractual payments for the PMPM limit actuarial certification | Direct to Global Commitment – Admin |
| 37709 | Global Commitment Payments | Expenses out of AHS Global Commitment appropriation | Direct to Global Commitment – Program |
| 37987 | DDC SIM Leaving Collaborative Training | Expenses related to SIM for Learning Collaborative Trainings | Direct to SIM |
| 37988 | SIMS YR 2 Testing – Contracts | Contractual expenses related to SIM | Direct to SIM Grant |
| 37989 | SIMS YR 3 Testing – Contracts | Contractual expenses related to SIM | Direct to SIM Grant |
| 37990 | SIMS YR 1 Testing – Contracts | Contractual expenses related to SIM | Direct to SIM Grant |
| 37993 | SIMS YR 2 Testing – Financial Manager | Financial staff position assigned directly to the SIM Grant | Direct to SIM Grant |
| 37994 | SIM YR 3 Testing – Financial Manager | Financial staff position assigned directly to the SIM Grant | Direct to SIM Grant |
| 37995 | Race to the Top ELC Grant | Costs associated with the Race to the Top Early Learning Challenge Grant | Direct to Race to the Top Grant |

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| 37997 | Race to the Top ELC Grant – Financial Manager | Financial staff position assigned directly to the Race to the Top Early Learning Challenge Grant | Direct to Race to the Top Grant |
| 37998 | SIMS YR 2 Testing – Staff | Non-IT Salary and Operating costs related to the SIM Grant | Direct to SIM Grant |
| 37999 | SIM YR 3 Testing – Staff | Non-IT Salary and Operating costs related to the SIM Grant | Direct to SIM Grant |
| 42016* | Health Care Administration: EQRO | Contractual payments for the External Quality Review of Global Commitment | Direct to Global Commitment – Admin |

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Organizational Unit 7: Information Technology

Nature and Extent of Services: The Information Technology Division provides project management, business analysis, IT procurement, applications management, enterprise content management, solution development and data services to the entire Agency. Its goal, in collaboration with the Department of Information and Innovation, is to plan, develop, implement, and maintain information technology and infrastructure to support the strategic goals of the Agency.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|-------------------------------|---|---|
| 37070* | IT General | Costs associated with IT non-direct project activities related to the Secretary's Office general functions and all leave time | Position across AHS Secretary's Office |
| 37071 | IT Technical Support | Costs associated with temporary IT technical staff | Positions across AHS Secretary's Office |
| 37072* | IT Management | Costs associated with IT management & operating costs | Total salaries across IT Division |
| 37073* | IT Agency General Staff Costs | Projects and support that benefit all of AHS and have an agency-wide impact | Positions across AHS |
| 37185 | IT Staff DCF Costs | Staff costs solely for work on DCF projects or assistance to DCF staff | Direct to DCF |
| 37186 | IT Staff DAIL Costs | Staff costs solely for work on D-DAIL projects or assistance to DAIL staff | Direct to DAIL |
| 37187 | IT Staff DVHA Costs | Staff costs solely for work on DVHA projects or assistance to DVHA staff | Direct to DVHA |
| 37188 | IT Staff VDH Costs | Staff costs solely for work on VDH projects or assistance to VDH staff | Direct to VDH |
| 37189 | IT Staff DMH Costs | Staff costs solely for work on DMH projects or assistance to DMH staff | Direct to DMH |
| 37191 | IT Staff DOC Costs | Staff costs solely for work on DOC projects or assistance to DOC staff | Direct to DOC |
| 37192 | IT Staff HSB Costs | Staff costs solely for work on Human Services Board projects or assistance to Human Services Board staff | Direct to Human Services Board |

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| 37193 | IT Staff RS Costs | Staff costs solely for work on Rate Setting projects or assistance to Rate Setting staff | Direct to Rate Setting |
| 37194 | IT Staff DDC Costs | Staff costs solely for work on Developmental Disability Council projects or assistance to DD Council staff | Direct to DD Council |
| 37716 | IE HC 90/10 Contracts | Contractual Expenses related to Health Enterprise Medicaid Eligibility DDI and IV&V | Direct to CMS-E&E (90/10) |
| 37717 | IE HC 90/10 Staff | Staff work related to Health Enterprise Integrated Eligibility DDI and IV&V | Direct to CMS-E&E/VIEWS DDI (90%) |
| 37725 | IT VHC System | Cost associated with VHC Maintenance and Operations related staff and operating expenses | Quarterly Case Count Across AHS and VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP |
| 37727 | EBCP Contracts Level 1C | Contractual costs associated with the Enterprise Business Capability Platform | Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD |
| 37728 | Exchange Level 1C IT Staff | IT Salary and Operating Costs related to the Level 1C CCIIO Exchange Grant | Direct to Exchange Level 1C |
| 37729 | EBCP Staff Level 1C | Staff expenses associated with the Enterprise Business Capability Platform | Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD |
| 41613 | MMIS – DDI Contracts | Contractual Expenses related to Health Enterprise MMIS DDI and IV&V | Direct to CMS-MMIS |
| 41618 | HSE PMO – Staff | Staff Expenses related to Health Enterprise shared component design and development | Per Approved HSE IAPDs: MMIS, E&E, HITECH |
| 41632 | HSE PMO – Contracts | Contractual Expenses related to Health Enterprise shared component design and development | Per Approved HSE IAPDs: MMIS, E&E, HITECH |
| 41640 | ICD-10 Staff Costs | Conversations or work associated with the ICD-10 planning | Direct to ICD-10 IAPD (90%) |
| 41642 | MMIS – DDI Staff | Staff work associated with the development of the MMIS | Direct to CMS-MMIS/MES – DDI (90%) |

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| 41693 | HIT: Implementation & Operations Staff | Staff Expenses related to Health Enterprise HIT HIE, EHR, and Public Health Development and Implementation | Direct to CMS-HIT IAPD (90%) |
| 41772 | CAQH ACA Staff | Staff expenses related to CAQH ACA IAPD | Direct to CAQH ACA (90%) |
| 41774 | T-MSIS Staff | Staff expenses related to T-MSIS IAPD | Direct to T-MSIS (90%) |

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Department of Children and Family Services (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 (GC) eligibility processes performed in Vermont.~~

It is the mission of DCF to promote the social, emotional, physical, and economic wellbeing 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 are the Child Development Division (CDD), the Office of Child Support (OCS), the Family Services Division (FSD), Economic Services Division (ESD), Disability Determination Services (DDS), and the Office of Economic Opportunity (OEO).

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.

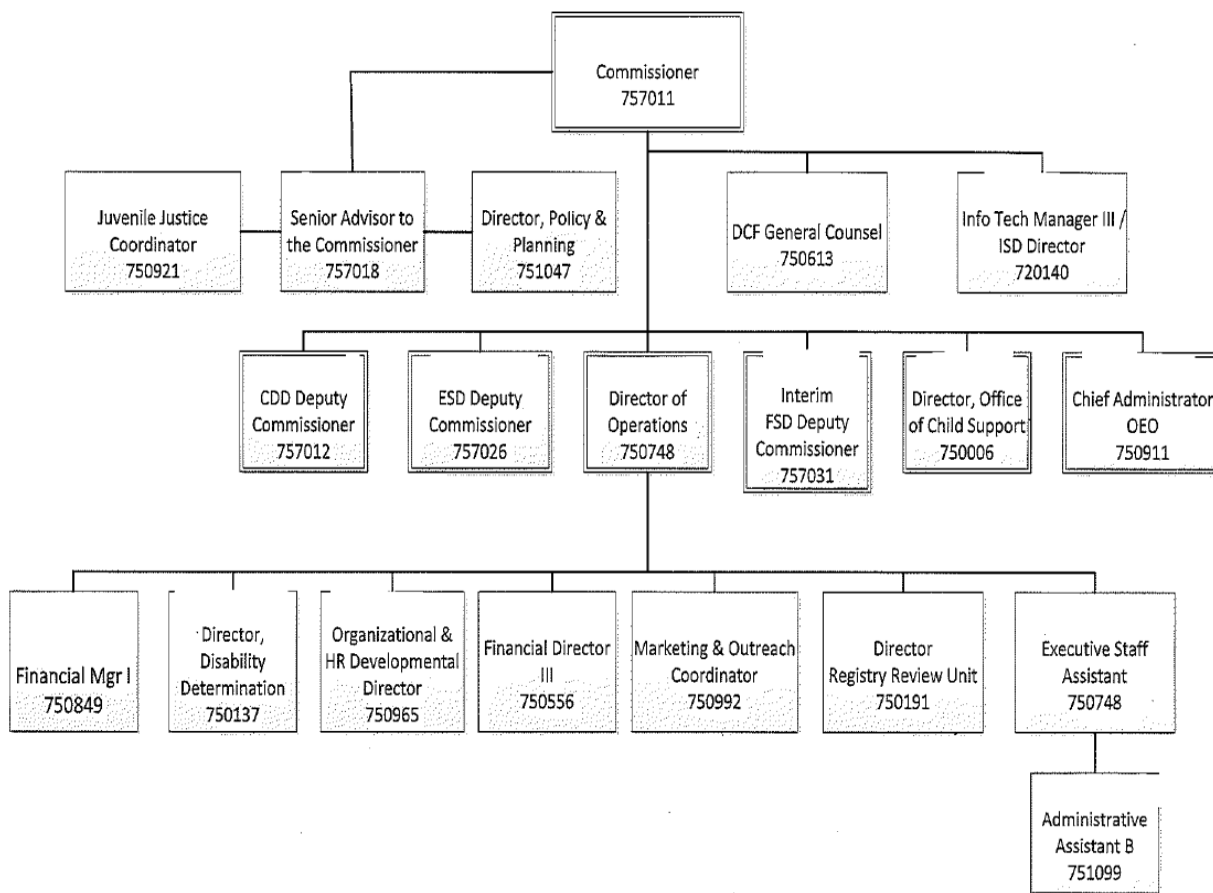
* With the October 1, 2005 implementation, of the Global Commitment to Health 1115 Waiver, all administrative costs allocated to the Global Commitment Waiver are now claimed at the program rate and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

II. DCF Organizational Charts

Department for Children and Families

| | |
|-----------------------------------|-------------------------------------|
| Office of the Commissioner | |
| | Indirect Cost Allocation |
| | Administration & Support |
| | Information Technology |
| | Family Services |
| | Economic Services |
| | Child Support Services |
| | Economic Opportunity |
| | Disability Determination |
| | Child Development |

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* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

III. DCF Cost Allocation Methodologies

Organizational Unit 1: Indirect Cost Allocations

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.

Detailed explanation of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|---|--|--|
| 1000.1* | Statewide Indirect Cost Allocation Plan (SWICAP) – DCF | DCF allocation of Statewide Indirect Costs. | Total Salaries Across All DCF Staff (not including fringe) |
| 1000.2* | AHS Audit Unit | DCF allocation of costs related to Audit expenses | Total Salaries Across All DCF Staff (not including fringe). |
| 1000.3* | AHS Secretary's Office | DCF allocation of AHS Secretary's Office costs | Total Salaries Across All DCF Staff (not including fringe) |
| 1000.4* | AHS – Information Technology (IT) | DCF allocation of costs related to AHS Information Technology expenses. | Total Salaries Across All DCF Staff (not including fringe) |
| 1000.5* | Financial Statement and Internal Control Audit Expenses | DCF allocation of costs related to Statewide Audit and Internal Control Audit expenses | Total Salaries Across All DCF Staff (not including fringe) |
| 1000. 6* | Human Services Board | DCF allocation of Human Service Board costs. | Total Salaries Across All DCF Staff (not including fringe) Quarterly Case Count Across Human Services Board by DCF Divisions. Within each division, costs are allocated based on salaries (not including fringe). |
| 1000.7* | Human Resources Investigation Staff | DCF allocation of Human Resources Investigation Staff | Total Salaries Across All DCF Staff (not including fringe) |
| 1000. 8* | AHS Policy | DCF allocation of costs | Total Salaries Across All DCF Staff (not including fringe) |
| 1000. 61* | Human Services Board CDD | DCF allocation of Human Service Board costs. | Total Salaries Across Child Development (not including fringe) |

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| 1000. 62* | Human Services Board FSD | DCF allocation of Human Service Board costs. | Total Salaries Across Family Services (including Field Staff, not including fringe) |
| 1000. 63* | Human Services Board ESD | DCF allocation of Human Service Board costs. | Total Salaries Across Economic Services (including field staff, not including fringe) |
| 1000. 64 | Human Services Board OCS | DCF allocation of Human Service Board costs. | Direct to Title IV-D |

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Organizational Unit 2: Administrative Services

Administrative Services support all operations and programs at DCF. Tasks performed include overseeing and supporting all DCF activities, managing and coordinating across Divisions and Offices, managing resources, and handling communication with providers, partners, citizens of Vermont, and other stakeholders in the community.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|--|--|
| 37717 | Integrated Eligibility Health Care (IEHC) 90/10 Staff | This code is used for staff salaries and operating costs associated with Health Enterprise Integrated Eligibility DDI and Independent Verification and Validation (IV&V). | Direct to CMS-Eligibility & Enrollment (E&E) (90/10) |
| 40430* | Human Resources | This code is used for all Human Resource staff dedicated to the ongoing oversight and management of DCF staffing. | Total Salaries Across All DCF Staff (not including fringe) |
| 40441 | DCF Special Assistant Staff Attorney | Legal Staff whose duties include: developing, managing and executing litigation plans in complex cases; preparing the preparation of pleadings and motion papers; representing the State, state officials, and state employees at motion hearings; trial presentation in complex civil litigation; representing the State in settlement and mediation proceedings and appeals. | Direct to State Fund |
| 40500.101 | Administrative Services General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Administrative Services. | Direct to State Fund |
| 40570.101 | CCDF Discretionary – Eligibility Determination | Costs associated with determining program eligibility | Direct to CCDF |
| 40777* | Unemployment Compensation | Costs associated with unemployment compensation charges. | Total Salaries Across All DCF Staff (not including fringe) |

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| 41020* | DCF Commissioner's Office Staff | The Commissioner's Office is responsible for overseeing all DCF activities. Commissioner's Office Staff work with all Divisions of DCF, liaison with external partners, manage cross-divisional contracts, and coordinate internal projects between Divisions. The Commissioner's Office is also responsible for providing professional development opportunities to all DCF staff, overseeing policy and policy changes, preparing the Department's budget, and handling all legislative and media matters, including marketing. | Total Salaries Across All DCF Staff (not including fringe) |
| 41260* | Business Office | The Business Office is responsible for managing all fiscal activities for DCF. Functions include managing accounts payable, accounts receivable, contracts, grants, payroll, budgets (preparation and tracking), cash receipts, and client benefit financial processing. The Business Office also prepares the quarterly cost allocation plan results and monitors the Department's sub-recipients | Total Salaries Across All DCF Staff (not including fringe) |
| 41294* | Legal Counsel | Legal Counsel staff function in support of the Commissioner's Office to provide legal advice, represent the Department in the Legislature, write rules, propose statutes, and answer legal questions. The Office of Child Support has its own legal counsel staff. | Total Salaries Across All DCF Staff excluding OCS (not including fringe) |

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| 41330.101 | Reach Up Verification - Staff | This code is used for staff salaries and operating costs associated with the requirement to verify work activity, documentation and attendance. | Direct to TANF |
| 41618 | HSE PMO - Staff | This code is used for staff expenses related to Health Enterprise shared component design and development. | Per approved HSE IAPDs: MMIS, E&E, HITECH - MMIS/MES DDI (90%), E&E/VIEWS DDI (90%) & HIT IAPD (90%). |
| 41642 | Medicaid Management Information System (MMIS)-DDI Staff | This code is used for staff salaries and operating costs associated with the design, development, and implementation of the Medicaid Management Information System (MMIS). | Direct to CMS-MMIS/MES-DDI (90%) |
| 41648 | Children's Health Insurance Program (CHIP) Audit Fees | Cost of audit fees related to the CHIP. | Direct to CHIP - Admin |
| 41776 | Administrative Services and Registry Review Unit - Contracted Employees | Cost of contracted staff to conduct administrative and registry review services | Direct to State Fund |
| 41777.101 | Administrative Services and Registry Review Unit | This code is used for general and administrative services. in addition to the Registry Review Unit, which is the intermediate administrative appeal system for Family Services Division decisions to substantiate child abuse and neglect. Staff in this unit include the director, contracted staff, and administrative support staff. These staff process appeals related to foster care license revocation or denial and appeals of placement changes, listen to appeals cases across the state, and manages the state's Child Abuse Registry. | Direct to State Fund |

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| 41783 | Registry Review Unit | This code is used for staff and operating costs for the Registry Review Unit, which is the intermediate administrative appeal system for Family Services Division decisions to substantiate child abuse and neglect. These staff process appeals related to foster care license revocation or denial and appeals of placement changes, listen to appeals cases across the state, and manages the state's Child Abuse Registry. | Direct to State Fund |
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* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Organizational Unit 3: Information Systems Division

The DCF Information Services Division (ISD) is responsible for all information technology (IT) systems and equipment, 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, schedule system upgrades, oversee agency strategy, and manage large-scale initiatives.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|------------------|--|--|---|
| 37717 | Integrated Eligibility Health Care (IEHC) 90/10 Staff | This code is used for staff salaries and operating costs associated with Health Enterprise Integrated Eligibility DDI and Independent Verification and Validation (IV&V). | Direct to CMS- Eligibility & Enrollment (E&E) (90/10) |
| 37728 | Exchange lvl 1C IT Staff | This code is used for IT Salary and Operating costs related to the Level 1C CCHO Exchange Grant. | Direct to Exchange Level 1C |
| 37995 | Race to the Top (RTT) Early Learning Challenge (ELC) Grant | This code is used for staff salaries and operating costs associated with the Race to the Top Early Learning Challenge Grant. | Direct to Race to the Top Grant |
| 38015 | Office of Child Support – General IT Support | This code is used for all salary costs associated with the general IT support of the Office of Child Support. | Total Salaries Across OCS (not including fringe) |
| 38090 | Office of Child Support – IT Purchases Data Processing & IT costs | Hardware and software purchases for the Office of Child Support, including Staff equipment and general systematic updates. Costs from the State's central data processing facility and information technology costs, for both hardware and software that directly support the Title IV-D program. | Total Salaries Across OCS (not including fringe) Direct to Title IV-D |

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| 40050* | Family Services IT Admin | All IT administrative costs incurred in the district office. The District Director and Staff manage the office and provide administrative support and supervision to the field staff. | Total Salaries Across Field Staff (within Family Services, not including fringe) |
| 40075* | Family Services IT Purchases Costs | Costs associated with hardware and software purchases for the Family Services Division, including Staff equipment and general systematic updates. specific to FSD. | Total Salaries Across Family Services (including Field Staff, not including fringe) |
| 40100* | Child Development Division IT Admin | IT administrative costs 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. | Total Salaries Across Child Development (not including fringe) |
| 40900 | IT Interdepartmental Transfers | Costs associated with interdepartmental agreements. | Direct to Interdepartmental Agreements |
| 40106 | Child Development Division – IT Purchases (Child Care) System Development Costs | Hardware and software purchases for the Economic Services Division, including Staff equipment and general systematic updates. This code is used for all operating costs associated with development of system and hardware or software costs specifically used by CDD. Contractual costs are also coded here. | Quarterly Child Subsidy Case Count |

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| 40470* | Business Office - IT Purchases | Hardware and software purchases for the Business Office, including Staff equipment and general systematic updates. | Total Salaries Across All DCF Staff (not including fringe) |
| 40471* | Non-DCF IT Projects | This code is used for salary costs related to non-DCF (AHS and other AHS department) specific projects and support. | Total Salaries Across the Information Technology Department (not including fringe) |
| 40472* | Economic Services Division – General IT Support | This code is used for all salary costs associated with the general IT support of the Economic Services Division. | Total Salaries Across Economic Services (including field services, not including fringe) |
| 40473* | Economic Services Division - IT Purchases | Hardware and software purchases for the Economic Services Division, including Staff equipment and general systematic updates. | Total Salaries Across Economic Services (including field staff, not including fringe) |
| 40474 | Woodside – IT Purchases | Hardware and software purchases for the Woodside Treatment Facility, including Staff equipment and general systematic updates. | Direct to Woodside – State |
| 40475* | Family Services Division – General IT Support | This code is used for all salary costs associated with the general IT support of the Family Services Division. | Total Salaries Across Family Services (including Field Staff, not including fringe) |
| 40476 | Youth Assessment and Screening Instrument (YASI) | This code is used for salary and operating costs associated with the maintenance of the Youth Assessment and Screen Instrument (YASI) system. | Direct to State Fund |
| 40477* | Comprehensive Child Welfare Information System (CCWIS) | This code is used for salary and operating costs associated with the maintenance of the Comprehensive Child Welfare Information System (CCWIS). | Direct to Title IV-E |
| 40478* | Child Development Division – General IT Support | This code is used for all salary costs associated with the general IT support of the Child Development Division. | Total Salaries Across Child Development (not including fringe) |

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| 40479* | ACCESS Health Care | This code is used for salary costs associated with the support of Health Care data that is stored in the ACCESS system. | ACCESS Case Count between CHIP Admin and GC Admin 50% |
| 41025 | ACCESS OCS | This code is used for all salary and operating costs associated with supporting the ACCESS system. for IT Operations, specifically associated with the Title IV-D program or on behalf of OCS projects, staff, or systems. | Direct to Title IV-D |
| 41032* | VT Department of Information and Innovation – IT Invoices DCF Information Services Costs Excluding DDS | Vermont Department of Information and Innovation (DII) costs associated with supporting DCF functions, including PC's, networks, databases, and servers, are coded here. These costs are in support of all Divisions and Offices in DCF except for DDS. | Total Salaries Across DCF (excluding DDS; not including fringe) |
| 41033* | ACCESS ESD | This code is used for all salary and operating costs associated with supporting the ESD ACCESS Mainframe. IT Operations for ESD only. This includes supporting and managing IT projects specifically on behalf of ESD staff or systems. | Case Count Across Economic Services (Duplicated) |
| 41034* | General ACCESS Maintenance (normally used only by the Database Administrator (DBAs)) | This code is used for all salary and operating costs for IT Operations associated with general ACCESS system maintenance, support, and ongoing operations. Costs specifically associated with one of the ACCESS user Divisions are not coded here. | Central Processing Unit (CPU) Usage Commands |

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| 41035* | Central Computer Charges (CIT) for ACCESS/FAMIS | Data processing costs and mainframe charges specifically associated with ACCESS/FAMIS are coded here. These costs are determined by DII and account for OCS and ESD system usage. | Central Processing Unit (CPU) Usage Commands |
| 41037* | Social Services Management Information System (SSMIS) and FSDNet (FSD, FSDNet, Youth Assessment and Screening Instrument (YASI)) | This code is used for all salary and operating costs associated with IT Operations for FSD only. This includes supporting and managing IT projects on behalf of FSD staff, or specifically related to the SSMIS and FSDNet systems. | Total Salaries Across Family Services Division Operational Staff Using the System (including Social Workers, Centralized Intake Staff, and Residential Licensing Staff, not including fringe) |
| 41038* | DCF IT Admin | This code is used for all salary and operating costs for general IT Operations. ISD staff meetings, overall administration, and other ISD oversight activities are all coded here. | Total Salaries Across the Information Technology Department (not including fringe) |
| 41045 | Bright Futures Information System (BFIS) (CDD, CIS, etc.) | This code is used for all salary and operating costs associated with IT Operations specifically supporting CDD staff and system needs. | Quarterly Child Subsidy Duplicated Case Count |
| 41161 | Jobs for Independence (JFI) Implementation | This code is used for staff salaries and operating costs associated with the implementation of the JFI pilot program. | Direct to State Fund |
| 41162 | Jobs for Independence (JFI) Award Pilot Project | This code is used for staff salaries and operating costs associated with the of the JFI pilot program. | Direct to JFI Pilot Project Award |
| 41182 | Able-Bodied Adults Without Dependents (ABAWD) New Investment | This code is used for staff salaries and operating costs associated with tracking the expense for the ABAWD new investment project. | Direct to ABAWD Reinvestment Activities (State Funds) |

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| 41200* | Economic Services District Directors and Support Staff IT Purchases | Hardware/software purchases for ESD district offices. The District Director and Staff manage the office and provide administrative support and supervision to the field staff. | Total Salaries Across Field Staff (within Economic Services, not including fringe) |
| 41260* | Business Office IT Purchases | Hardware/software purchases for the DCF Business Office, which manages all fiscal activities, and supports all operating and programmatic functions for the Department. | Total Salaries Across All DCF Staff (not including fringe) |
| 41618 | HSE PMO—Staff | This code is used for staff expenses related to Health Enterprise shared component design and development. | Per approved HSE IAPDs: MMIS, E&E, HITECH—MMIS/MES DDI (90%), E&E/VIEWS DDI (90%) & HIT IAPD (90%). |
| 41642 | Medicaid Management Information System (MMIS)—DDI Staff | This code is used for staff salaries and operating costs associated with the design, development, and implementation of the Medicaid Management Information System (MMIS). | Direct to CMS—MMIS/MES DDI (90%) |
| 41779* | VHC Operations Staff | Cost associated with VHC Maintenance and Operations related staff and operating expenses | Quarterly VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP |
| 44100 | OEO Administration IT Purchases | Hardware/software purchases for OEO Administrative Office, which oversees all OEO functions and provides supervision to office staff. | Direct to State Fund |
| 44110 | Office of Economic Opportunity - IT Purchases | Hardware and software purchases for the Office of Economic Opportunity, including Staff equipment and general systematic updates. | Total Salaries Across OEO (not including fringe) |

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| 44120 | Office of Economic Opportunity – General IT Support | This code is used for all salary costs associated with the general IT support of the Office of Economic Opportunity. | Total Salaries Across OEO (not including fringe) |
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Organizational Unit 4: Family Services Division

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 explanation of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|---|---|
| 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 | 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 Fund |
| 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 |
| 40007 | Canaday Grant (awarded via Stern Center) | Cost of temporary staff covering the duties of a Behavioral Interventionist for the Woodside facility. | Direct to Canaday Grant |
| 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. The Program being charged are State Funds, TANF, TCM (GC) and Title IV-E | Quarterly results of Family Services Time Study |

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| 40011 | Social Workers - Contracted Employees | Costs of contracted staff providing direct services to child welfare clients including case management, child abuse/neglect investigations, and eligibility determination. The Program being charged are State Funds, TANF, TCM (GC) and Title IV-E | Quarterly results of Family Services Time Study |
| 40015 | Social Worker District Supervisors | Supervisory personnel who plan, assign and review the work of district office Assessment & Ongoing Social Workers. The programs being charged are State Funds, TANF, TCM (GC), and Title IV-E. | Quarterly results of the 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 make the initial decision about whether to assign a district office social workers to conduct an assessment. | Direct to TANF |
| 40030* | Resource Coordinators – Recruitment Activities | Costs of staff that perform recruitment activities in response to local needs. | Quarterly Count of Eligible Cases Across Title IV-E, Global Commitment, & State Fund |
| 40031* | Resource Coordinators/ Contracted Employees – Recruitment Activities | Costs of contracted staff that perform recruitment activities in response to local needs. | Quarterly Count of Eligible Cases Across Title IV-E, Global Commitment, & State Fund |
| 40032* | Resource Coordinators – Placement Activities | Costs of staff that screen all foster care applications, and assist social workers to ensure relative and natural supports are identified, assessed and appropriately supported as placement resources for children and youth. | Quarterly Count of Eligible Cases Across Title IV-E, Global Commitment, & State Fund |

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| 40033* | Resource Coordinators/ Contracted Employees – Placement Activities | Costs of contracted staff that screen all foster care applications, and assist social workers to ensure relative and natural supports are identified, assessed and appropriately supported as placement resources for children and youth. | Quarterly Count of Eligible Cases Across Title IV-E, Global Commitment, & State Fund |
| 40034* | Resource Coordinators – Foster Parent Training | Costs of staff that provide foster care orientation and foundation training to all potential foster parents, and works with the training partnership to identify training needs and to arrange and coordinate on-going training to foster parents. | Quarterly Count of Eligible Cases Across Title IV-E, Global Commitment, & State Fund |
| 40035* | Resource Coordinators/ Contracted Employees – Foster Parent Training | Costs of contracted staff that provide foster care orientation and foundation training to all potential foster parents, and works with the training partnership to identify training needs and to arrange and coordinate on-going training to foster parents. | Quarterly Count of Eligible Cases Across Title IV-E, Global Commitment, & State Fund |
| 40040 | Adoption & Guardianship Services | The Adoption Unit manages all aspects of the adoption and guardianship subsidy programs, including post-adoption services. | Title IV-E Adoption Assistance Rate and Title IV-E Guardianship Rate |

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| 40050* | Family Services District Directors and Staff | 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. | Total Salaries Across Field Staff (within Family Services, not including fringe) |
| 40051* | Family Services District Directors and Staff - Contracted Employees | Cost of contractual staff 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. | Total Salaries Across Field Staff (within Family Services, not including fringe) |
| 40060* | Emergency Services 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. The Emergency Services Unit also takes report of alleged child abuse and neglect. | Quarterly Count of Eligible Cases Across Title IV-E & ,Global Commitment, & State Fund |
| 40063 | Residential Licensing and Special Investigations Unit (RLSI) Supervisors and Administrative Staff | This code is used for all salary and operating costs for the supervisors and administrative staff of the Residential Licensing and Special Investigations Unit (RLSI). | Total salaries across the Residential Licensing & Special Investigations Unit (not including fringe) |

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| 40064 | Residential Licensing and Special Investigations Unit (RLSI) Travel | This code is used for all travel costs for the Residential Licensing and Special Investigations Unit. | Total salaries across the Residential Licensing & Special Investigations Unit (not including fringe) |
| 40067* | Residential Licensing and Special Investigations Unit General Admin | This code is used for all salary and operating costs for general admin activities in the RLSI (Residential Licensing & Special Investigation) Unit. RLSI staff meetings, general training and paid leave are all coded here. | Total salaries across the Residential Licensing & Special Investigations Unit (not including fringe) |
| 40068 | Special Investigations | This code is used for salary and operating cost related to investigations of child abuse and neglect in all facilities regulated by the department. | Direct to TANF |
| 40069* | Residential and Foster Care Licensing | This code is used for salary and operating costs related to licensing foster homes and residential programs. | Quarterly Count of Eligible Cases Across Title IV-E & ,Global Commitment, & State Fund |
| 40075* | Family Services Deputy Commissioner's Office | Costs Associated with the administration of the Division, including activities related to Planning policy and Quality Assurance. | Total Salaries Across Family Services (including Field Staff, not including fringe) |
| 40085* | System of Care and Revenue Enhancement Unit | 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. | Quarterly Count of Eligible Cases Across Title IV-E & ,Global Commitment, & State Fund |

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| 40090 | UVM Social Work Students | Social Worker Students participating in the University of Vermont program. | Direct to Title IV-E Training (75%) (claimed using a Title IV-E eligibility rate across Adoption Assistance and Foster Care) |
| 40200 | Woodside - Admin | Personal services and operating expenses directly associated with the operation of the Woodside Juvenile Treatment Facility. | Direct to Woodside – State Total salaries across Woodside (not including fringe) |
| 40210 | Woodside – Treatment | Costs associated with the treatment services provided by the Woodside Juvenile Treatment Facility | Direct to Woodside – State 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 - State |
| 40400 | FSD Act 1 | Sexual Violence and Abuse Prevention activity per S.13 | Direct to State Fund |
| 40420 | Extended Foster Care Support | Cost associated with extending foster care support past the age of 18. | Direct to State Fund |
| 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 |
| 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 Foster Care Eligibility Rate |
| 40500.102 | Family Services General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Family Services. | Direct to State Fund |

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| 40502 | Nurturing Parent Program | Education programs that teach at-risk parents how to understand their children's developmental needs and behaviors, positively communicate with them and manage stress to create health, nurturing homes. | Direct to Managed Care Organization (GC-MCO Investment) – Prevent Child Abuse Vermont: Nurturing Parent |
| 40503 | Lamoille Valley Community Justice Project | To provide health-focused case management, referral, outreach and wrap services to children of incarcerated parents. | Direct to GC-MCO Investment – Lamoille Valley Community Justice Project |
| 40510 | Child Abuse Prevention and Treatment Act (CAPTA) | Costs associated with administration of CAPTA. | Direct to CAPTA (Child Abuse and Neglect) |
| 40530.102 | Family Services Title IV-E Maintenance Payments | Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation. | Direct to Title IV-E Foster Care Maintenance Payments |
| 40530.202 | Case Review Services/Foster Parent Recruitment | Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation. | Title IV-E Foster Care Eligibility Rate |
| 40530.302 | Foster Parent Trainings | Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation. | Title IV-E Foster Care Eligibility Rate (IV-E Training) |
| 40530.402 | Subsidized Adoptions – Recurring | Adoption Assistance payments made on behalf of Title IV-E eligible children | Direct to Title IV-E Adoption Assistance Payments |
| 40530.502 | Training University of Vermont (UVM) students in Social Worker studies (degree program) | Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation. | Direct to Title IV-E Foster Care Training (75%) (claimed using a Title IV-E eligibility rate across Adoption Assistance and Foster Care, with State match provided by UVM) |
| 40530.602 | Title IV-E Short Term Training | Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation. | Direct to Title IV-E – Training |

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| 40530.702 | Permanent Guardianship | Title IV-E eligible program expenditures including foster care, subsidized adoptions, training, transportation. | Direct to Permanent Guardianship |
| 40530.802 | Subsidized Adoptions – Non-Recurring | Adoption Assistance payments made on behalf of Title IV-E eligible children | Direct to Title IV-E Adoption Assistance Payments |
| 40530.902 | Training UVM students in Social Worker studies Adoption (degree program) | Title IV-E adoption training expenditures | Direct to Title IV-E Foster Care Training (75%) (claimed using a Title IV-E eligibility rate across Adoption Assistance and Foster Care, with State match provided by UVM) |
| 40530.998 (Effective 7/1/16) | IV-E Prior Quarter Adjustments | This code is used for various Title IV-E prior quarter adjustments, as needed. | Direct to IV-E Prior Quarter Adjustments |
| 40531 | IV-E Eligibility Determination | Staff handle all aspect of determining children’s eligibility for Title IV-E | Direct to Title IV-E (Eligibility Determination) |
| 40535 | Permanent Guardianship | Guardianship Assistance paid on behalf of Title IV-E eligible children | 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 |
| 40551 | Title IV-E Educational Training Vouchers (ETV) | Costs associated with Title IV-E Educational Training grant – ETV program | Direct to Title IV-E ETV |
| 40555.102 | Family Services - SSBG | Direct payments to foster parents and group homes. | Direct to SSBG |
| 40556 | SSBG TANF Transfer | To track expenditures for the TANF transfer to SSBG | 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 |
| 40610 | Domestic Violence Unit | Costs associated with staff administering the Domestic Violence Grant. | Direct to Domestic Violence Grants |

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| 40631 | Family Services—TANF | Direct payments to foster parents and group homes. | Direct to TANF |
| 40640 | Adoption Incentive | Expenditures allowable for Title IV-E Adoption Incentive | Direct to Adoption Incentive |
| 40700 | Family Services | Direct payments to group homes and treatment providers. | Direct to Global Commitment - Program |
| 40701* | Global Commitment | Cost associated with Medicaid administration. | Direct to Global Commitment -Admin |
| 40702.102 | GC-MCO Investment Medical Sub Care | Costs directly associated with sub care treatment | Direct to GC-MCO Investment – Residential Care for Youth/Substitute Care |
| 40702.302 | GC-MCO Investment Medical Sub Care Services | Costs directly associated with sub care treatment | Direct to GC-MCO Investment Medical Services |
| 40710 | GC Performance Contracts | Cost associated with Abusive Head Trauma Prevention-performance contracts | Direct to GC-MCO Investment - Prevent Child Abuse Vermont: Abusive Head Trauma Prevention |
| 40712 | Vermont Coalition of Runaway Homeless Youth Program (VCRHYP) Performance Grants | Programmatic expenses associated with VCRHYP | Direct To Global Commitment - Program |
| 40900 | Interdepartmental Transfers | Costs associated with interdepartmental agreements. | Direct to Interdepartmental Agreements |
| 41602 | Children’s Health Insurance Program (CHIP) Costs in VCHRYP Program | CHIP eligible costs in the VCHRYP program | Direct to CHIP - Program |
| 41777.102 | Family Services General Fund | This code is used for This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Family Services. | Direct to State Fund |

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Organizational Unit 5: Economic Services

The Economic Services Division (ESD) manages the 3Squares Program (SNAP program), Welfare-to-Work (Reach Up), Home Heating Assistance, General and Emergency Assistance, the Essential Person program (AABD), and Global Commitment and Children's Health Insurance Program (CHIP). Effective 7/1/16, the Health Care Eligibility Unit and Choices for Care staff were transferred to the Department of Vermont Health Access (DHVA) for program administration.

Detailed explanation of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
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| 37716 | Integrated Eligibility Health Care (IE HC) 90/10 Contracts | Contractual Expenses related to Health Enterprise Integrated Eligibility DDI and IV&V are coded here. | Direct to CMS-Eligibility & Enrollment (E&E) (90/10) |
| 37717 | Integrated Eligibility Health Care (IEHC) (IE HC) 90/10 Staff | This code is used for staff salaries and operating costs associated with Health Enterprise Integrated Eligibility DDI and Independent Verification and Validation (IV&V). | Direct to CMS-Eligibility & Enrollment (E&E) (90/10) |
| 37728 | Exchange lvl 1C IT Staff | This code is used for IT Salary and Operating costs related to the Level 1C CCHO Exchange Grant. | Direct to Exchange Level 1C |
| 39705 | Vermont Spay Neuter Incentive Program (VSNIP) | The VSNIP is an 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. All costs associated with VSNIP are coded here. | Direct to VSNIP |
| 40001* | Location Costs – Barre District Office | This code is used for location costs, such as land, building and/or rental fees, at the Barre District Office. | Quarterly employee count across Barre district office staff. |
| 40002* | Location Costs – St. Albans District Office | This code is used for location costs, such as land, building and/or rental fees, at the St. Albans District Office. | Quarterly employee count across St. Albans district office staff. |

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| 40003* | Location Costs – Burlington District Office | This code is used for location costs, such as land, building and/or rental fees, at the Burlington District Office. | Quarterly employee count across Burlington district office staff. |
| 40004* | Location Costs – Rutland District Office | This code is used for location costs, such as land, building and/or rental fees, at the Rutland District Office. | Quarterly employee count across Rutland district office staff. |
| 40005* | Location Costs – Springfield District Office | This code is used for location costs, such as land, building and/or rental fees, at the Springfield District Office. | Quarterly employee count across Springfield district office staff. |
| 40006* | Location Costs – Morrisville District Office | This code is used for location costs, such as land, building and/or rental fees, at the Morrisville District Office. | Quarterly employee count across Morrisville district office staff. |
| 40500.101 | Economic Services General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Economic Services. | Direct to State Fund |
| 40703 | Lund Residential - GC-MCO Investments Mental Health Services Lund Residential | GC-MCO costs for mental health services offered to clients 21 years and older, provided by related to Lund residential. services. | Direct to GC-MCO Investment– MCO Lund Home |
| 40705* | Health Care – Citizenship | Costs associated with verifying citizenship of applicants for health care eligibility | Direct to Global Commitment - Admin |
| 40714 | Lund Residential - GC-MCO Investments Substance Abuse Services | GC-MCO costs for substance abuse services offered to clients 21 years and older, provided by Lund Residential. | Direct to GC-MCO Investment–Lund Home |
| 40900 | Interdepartmental Transfers | Costs associated with interdepartmental agreements. | Direct to Interdepartmental Agreements |

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| 41075* | Health Care Policy Analyst | All costs associated with the Health Care Policy Analyst assists the Economic Services Policy, Planning, and Evaluation Director in the planning, development, and continuing assessment of Health Care programs, are coded here. | Quarterly combined AHS and VHC Enrollment for Claims GC, CHIP, & Designated State Health Programs (DSHP), and Qualified Health Plan |
| 41110* | General Admin - Global Commitment & CHIP | Costs related to CHIP & Global Commitment premiums and other related administrative costs. | Quarterly number of paid claims for GC, CHIP, and All Other benefiting Programs |
| 41141* | Long Term Care | This code is used for staff salaries and operating costs associated with processing long term care eligibility, including Operations and Quality Assurance staff. | Direct to Global Commitment - Admin |
| 41143* | PERM (Payment Error Rate Measurement) | This code is used for contractual costs associated with complying with the federal mandate for PERM. | Direct to Global Commitment - Admin |
| 41144* | ESD Health Care Admin LTC | This code is used for staff salaries and operating costs associated with LTC administrative and operating cost associated with training and operating staff. | Direct to Global Commitment Admin |
| 41155 | Reach Up (RU) Operations | This code is used for staff salaries and operating costs associated with the Welfare-to-Work Director and staff who administer the Reach Up programs, including the case management and financial assistance components of Reach Up. The Director acts as project manager for such endeavors as state welfare reform, TANF reauthorization, and program redesign. | Economic Case Count Across Reach Up (TANF and State Fund) |

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| 41161 | Jobs for Independence (JFI) Implementation | This code is used for staff salaries and operating costs associated with the implementation of the JFI pilot program. | Direct to State Fund |
| 41162 | Jobs for Independence (JFI) Award Pilot Project | This code is used for staff salaries and operating costs associated with the of the JFI pilot program. | Direct to JFI Pilot Project Award |
| 41163 | SNAP Other Support Services | This code is used for staff salaries associated with SNAP Support Services. | Direct to SNAP |
| 41164 | SNAP Quality Assurance Non-Mandated | This code is used for staff salaries associated with SNAP quality assurance functions, not mandated by FNS. | Direct to SNAP Administration |
| 41164.998 (Effective 7/1/16) | SNAP Quality Assurance Prior Quarter Adjustment (PQA) | This code is used for various SNAP prior quarter adjustments, as needed. | Direct to SNAP Prior Quarter Adjustments |
| 41165 | SNAP Mandated Quality Control | This code is used for staff salaries and travel costs associated with mandated SNAP quality control functions, involving 3Squares. This includes detailed analysis of sample cases to ensure actions are valid,-analyzing delivery and payment system for potential problems and recommending improvements. | Direct to SNAP Administration |
| 41167* | Quality Assurance Supervisor | Quality Assurance Supervisors supervise staff in the quality control unit who review cases involving Health Care and 3Squares. This includes detailed analysis of sample cases to ensure actions are valid, analyzing delivery and payment system for potential problems, and recommendations for improvements, including conducting trainings to address common errors. | Total salaries across the Quality Assurance Unit (not including fringe) |

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| 41168 | Reach Up Quality Assurance | This code is used for staff salaries and travel costs associated with non-mandated RU quality assurance functions. | Economic Case Count Across Reach Up (TANF and State Fund) |
| 41169 | Food and Nutrition Program Director | This code is used for the Director of the Food and Nutrition Team, for supervisory duties. | Total salaries across the Food and Nutrition Team (not including fringe) |
| 41170* | Quality Control Program Chief | The Quality Control Program Director supervises the Fraud & Quality Assurance Units. All costs associated with the Quality Control Director are coded here. | Total salaries Across Fraud Unit and the Quality Assurance Unit (not including fringe) |
| 41176 | SNAP Eligibility Work | This code is used for staff salaries and operating costs associated with district office personnel who interview and input data on applications to establish eligibility and determine continuing eligibility of clients by review of applications, interviews, correspondence and other sources for the SNAP Program. | Direct to SNAP Certification |
| 41180* | Quality Control/Treasury Offset Program Staff | This code is used for staff salaries and operating costs associated with quality control work involving SNAP, and Global Commitment programs. The program staff perform detailed analysis of sample cases to insure actions were valid and work on the Treasury Offset Program for SNAP. | Total Hours Reported by Program for TANF, SNAP, & GC |
| 41181 | SNAP New Investment | This code is used for contractual and operating costs associated with tracking the expense for the SNAP new investment project. | Direct to SNAP New Investment |
| 41181.998 (Effective 7/1/16) | SNAP New Investment Prior Quarter Adjustment (PQA) | This code is used for various SNAP prior quarter adjustments, as needed. | Direct to SNAP Prior Quarter Adjustments |

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| 41182 | Able-Bodied Adults Without Dependents (ABAWD) New Investment | This code is used for staff salaries and operating costs associated with tracking the expense for the ABAWD new investment project. | Direct to ABAWD Reinvestment Activities (State Funds) |
| 41183 | Cash Penalty | This code is used for costs associated with tracking the expenses for audit cash penalties. | Direct To State Fund |
| 41185* | Financial Eligibility Specialists/Interviewers/Call Center Agents | This code is used for staff salaries and operating costs associated with 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 programs. Benefit Programs Specialists (BPS) participate in an RMTS. | Quarterly Results of the Economic Assistance BPS RMTS |
| 41190* | Regional Managers/Economic Resource System & Economic Services Supervisors | This code is used for staff salaries and operating costs associated with District office supervisory personnel, who plan, assign and review the work of eligibility specialists. | Quarterly Results of the Economic Assistance BPS RMTS |
| 41195 | Aid to the Aged, Blind, and Disabled | General administrative expenses that are direct charged to AABD are coded here. | Direct to AABD |

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| 41200* | Economic Services District Directors and Support Staff | This code is used for staff salaries and operating costs associated with District office directors who manage the day-to-day operations of welfare district offices. District Directors are responsible for implementation of all assigned welfare programs according to Federal and State regulations and procedures. This Cost center includes Case Aides and supporting clerical staff. | Total Salaries Across Field Staff (within Economic Services, not including fringe) |
| 41207* | Application Document Processing Center (ADPC) ESD Programs | This code is used for staff salaries and operating costs associated with the ADPC that provides-administrative support services for ESD programs. | Duplicated Case Count Across Economic Services |
| 41208* | ADPC VHC Health Care | This code is used for staff salaries and operating costs associated with the Application Document Processing Center that provides administrative support services for VHC Health Care. | Quarterly VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP |
| 41209* | ADPC Administration | This code is used for staff salaries and operating costs associated with the Application Document Processing Center that provides administrative support services for ESD programs and VHC Health Care. | Total Salaries Across the ADPC (not including fringe) |
| 41210 | LIHEAP Benefits Program Staff | This code is used for staff salaries and operating costs associated with running the Home Heating Program. | Direct to Home Heating Program/LIHEAP |

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| 41211.101* | Economic Services Deputy Commissioner, Administrative Services Director, Operations Director and Support Staff | The Economic Services Deputy Commissioner is responsible for overseeing all of the Economic Services Division activities, including Support Staff that provide training and administrative support for all Economic Services programs. Costs associated with the Process and Performance, Quality Control and Fraud Units, which focus on data and policy analysis and case reviews for all Economic Services programs, are also coded here. The Commissioner's Office also supports the Economic Services Division with a Business Applications Support Unit (BASU), which liaisons between ESD business teams and ASD to ensure all systems, particularly ACCESS and VHC, are in proper working order and that cases get fixed in a timely manner so that Vermonters receive their benefits appropriately. All costs associated with the Economics Services Deputy Commissioner's Office and staff are coded here. | Total-Salaries Across Economic Services (including field services, not including fringe) |
| 41212 | Benefit Programs Administrator | This code is used for staff salaries and operating costs associated with supervising Home Heating Staff, Benefit Programs Support Staff and Systems Operations – Specialists. | Total-Salaries Across Heating (not including fringe) |
| 41220 | SNAP Medical Exams | Medical exams requested by Field Operations Staff as part of eligibility determination. | Direct to SNAP Administration |

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| 41245 | State Supplement Program – Social Security Administration (SSA) | This code is used for staff salaries and operating costs associated with-processing SSI checks as charged by the SSA | Direct to AABD |
| 41250 | Electronic Benefit Transfer (EBT) Financial Services | Contract costs for EBT financial services related directly to SNAP are coded here. | Direct to SNAP Admin |
| 41252 | EBT Farmers Market (MKT) | Costs associated with the POS equipment for farmers MKT are coded here. | Direct to EBT Farmers MKT |
| 41255 | EBT Financial Services | Contract costs for the EBT financial services related directly to TANF are coded here. | Direct to TANF |
| 41261 | EBT Financial Administrator | 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. All costs associated with the EBT Financial Administrator are coded here. | Case Count Across TANF, SNAP Benefits Issued; and Fuel, and WIC |
| 41270 | TANF General Administration | General administrative costs to be direct charged to TANF, including but not limited to expenditures related to meetings and employee insurance costs. | Direct to TANF |
| 41271 | Policy Analyst – Reach Up; | This code is used for staff salaries and operating costs associated with the policy analyst who specializes in TANF and/or RU planning, development, and assessment. | Direct to TANF |

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| 41275* | Fraud Investigators | Fraud Investigators and Staff investigate possible client fraud in all ESD programs, and assists attorney general and state attorney offices in preparation and prosecution of civil and criminal cases. All costs associated with Fraud Investigators are coded here. | Quarterly Count of Quarterly Percentage of Fraud Investigations Count of Case By Program |
| 41280 | Reach Up Case Management & Reach Up E&T General Admin | This code is used for staff salaries and operating costs associated with District office self-support personnel for Reach Up Case Management and Employment and Training programs. Reach Up Case Managers provide support services, counseling and job search assistance to clients seeking employment opportunities. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |
| 41285 | Reach Up Case Manager Supervisors | This code is used for staff salaries and operating costs associated with District office supervisory personnel, who plan, assign and review the work of social workers for Reach Case Management and Employment and Training programs. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |
| 41290 | General Assistance Administration | General administrative costs related to providing GA services are coded here. | Total Cost Across EA and GA (allocated to TANF and State Fund) |
| 41293* | Legal Division Administrative Staff | This code is used for staff salaries and operating costs associated with administrative staff. | Quarterly Results of the Legal Time Study |

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| 41295* | Assistant Attorney General (AAG) Legal Division | This code is used for staff salaries and operating costs associated with Attorneys and law clerk who represent the department in lawsuits and other legal matter especially regarding interpretation of Federal regulations pertaining to client rights. The staff also review department contractual agreements. | Quarterly Results of the Legal Time Study |
| 41300 | Home Heating General Administration | General administrative costs to be direct charged to Home Heating, including but not limited to specific project related expenditures to be direct charges are coded here. | Direct to Home Heating Program/LIHEAP |
| 41305 | SNAP General Administration | This code is used for staff salaries and operating costs associated with the General administrative costs to be direct charged to SNAP benefits, including but not limited to, specific project related expenditures to be direct charged are coded here. | Direct to SNAP Administration |
| 41306 | SNAP Program Coordination and Outreach | This code is used for staff salaries and operating costs associated with SNAP outreach functions. | Direct to SNAP Outreach |
| 41310 | RU - Employment Training | Provision of program activities and case management to Reach Up participants. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |
| 41311.108 | RU - Employment Training - (E&T) 100% | Provision of program activities and case management to Reach Up participants. Not matched. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |

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| 41311.201 | RU - Employment Training - (E&T) 100% | This code is used for staff salaries and operating costs associated with the provision of program activities and case management to Reach Up participants. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |
| 41313 | Fair Hearing 3SQRS | This code is used for staff salaries and operating costs associated with 3Squares Fair Hearings. | Direct to SNAP Fair Hearings |
| 41314 | Job Retention Support Services <90 days | This code is used for costs associated with 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. | Economic Services Case Count Across Reach Up (TANF and State Fund) |
| 41315 | SNAP Outreach | This code is used for costs associated with providing SNAP outreach services to eligible low-income persons. | Direct to SNAP Outreach |
| 41316 | SNAP Outreach (100% Other Entity Match) | This code is used for costs associated with providing SNAP outreach services to eligible low-income persons. Private match provided by sub-recipients. | Direct to SNAP Outreach |
| 41318 | SNAP E&T Non Duals | This code is used for costs associated with the provision of program activities and case management to ABAWD participants. | Direct to SNAP E&T Non Duals |

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| 41319 | ESD Operating Costs – Eligible for SNAP Bonus Award | This code is used for the tracking of staff salaries and operating costs associated with the Economic Services Division, which are eligible for SNAP Bonus funding through approved spending plans. | Total-Salaries Across Economic Services (including field services, not including fringe) |
| 41320 | SNAP Nutrition Education | This code is used for costs associated with providing 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 | This code is used for costs associated with providing nutrition education services to SNAP recipients and applicants and to other eligible low-income persons. | Direct to SNAP Nutrition Education |
| 41330.108 | Reach Up Verification - Services | This code is used for costs associated with case management to Reach Up participants and parent/child employment services. | Direct to TANF |
| 41336 | United States Department of Agriculture (USDA) E&T 50% Fed/50% Other Entity Match | This code is used for costs associated with the 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. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) (This code is used for cost where the 50% match is paid by an entity other than the State) |
| 41345 | SNAP Employment and Training Transportation | This code is used for costs related to transportation to related services. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |

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| 41360 | Farm to Family - Non-WIC | This code is used for programmatic costs associated with Farm to Family Program. | Direct to Farm to Family Non-WIC (State Fund) |
| 41361 | Farm to Family - Senior Coupons | This code is used for programmatic costs associated with Farm to Family Program. | Direct to Farm to Family Senior Coupons (Interdepartmental Funds) |
| 41362 | Farm to Family - WIC | This code is used for programmatic costs associated with Farm to Family Program. | Direct to Farm to Family WIC (Federal) |
| 41363 | Farm To Family Ladies First | This code is used for programmatic costs associated with Farm to Family Program. | Direct to Farm to Family (State Fund) |
| 41365 | Farm to Family Administration | This code is used for staff and operating costs associated with vouchers used at farmers markets. | Direct to Farm to Family Administration (Federal) |
| 41370 | DCF - Child Nutrition – Clinicians Enhancing Child Health (CECH) | This code is used for costs associated with supporting Child Nutrition Program services that cannot be funded with SNAP outreach money. | Direct to State Fund |
| 41401 | Reach Up Basic Assistance/Shelter | This code is used for costs associated with Reach Up benefits. | Direct to TANF |
| 41411 | Reach Up (Unemployed Parents) | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41415 | RU Support Services – State Only | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41417 | Reach Up Basic Assistance/Solely State Funded (SSF) | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41418 | RU Lund Residential– Private Nonmedical Institutions (PNMI) / Mental Health Services | GC program costs for PNMI and mental health services offered to clients 20 years and younger, provided by Lund Residential. | Direct to GC - Program |

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| 41419 | RU Lund Residential– Private Nonmedical Institutions (PNMI) Substance Abuse (SA) Services LUND-GC Cost | GC program costs for substance abuse services offered to clients 20 years and younger, provided by Lund Residential. This code is used for treatment cost paid to the Lund Center | Direct to GC - Program |
| 41421 | Reach Up Support Services– Education and Training | This code is used for the direct cost of cash assistance payments for education and training support. | Direct to TANF |
| 41431 | Reach Up Support Services – Work Supports | This code is used for the direct cost of cash assistance payments for supporting work search and retention. | Direct to TANF |
| 41432 | Reach First | This code is used for assistance paid to a family the first four months of Reach Up eligibility | Direct to TANF |
| 41433 | Reach Ahead | This code is used for food assistance for client coming off Reach Up and going to work. These costs are considered Maintenance of Effort (MOE). | Direct to TANF-MOE |
| 41458 | Disposals | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41461 | Single Parent – State Only | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41462 | Two Parents – State Only | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41467 | Two Parents over 60 month limit | This code is used for payments paid by State after the 60 month limit | Direct to State Fund |
| 41468 | Single Parent over 60 month limit | This code is used for payments paid by State after the 60 month limit | Direct to State Fund |
| 41471 | Child Only with Single Parent on SSI | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41472 | Cash Assistance Payments (Post- Secondary Education) | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |

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| 41473 | Child Only with Two Parents on SSI | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41476 | Two Parents Not Meeting Work Requirements | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41478 | Childcare/Caretaker Deferment | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41479 | Single Parent Working | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41480 | Single Parent not Meeting Work | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41481 | Cash Assistance Payments (minor parent not living with parent) | This code is used for the direct cost of cash assistance payments. | Direct to State Fund |
| 41484 | Absence | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41485 | Two Parent Working | This code is used for the direct cost of cash assistance payments. | Direct to TANF |
| 41501* | State Supplement Program – AABD-EP-Supplemental Security Income (SSI) | This code is used for AABD-Essential Persons-SSI payments. | Direct to GC-MCO Investment – Essential Person Program |
| 41502.105 | State Supplement Program – AABD- SSA | This code is used for AABD – State Supplement benefits – SSI payments. | Direct to AABD |
| 41502.205* | State Supplemental Program – AABD CCL Level 3 | This code is used for AABD – State Supplement benefits – SSI payments. | Direct to GC-MCO Investment- AABD CCL Level 3 |
| 41502.305* | State Supplemental Program – AABD RES Level 3 | This code is used for AABD – State Supplement benefits – SSI payments. | Direct to GC-MCO Investment -AABD RES Level 3 |
| 41502.405* | State Supplemental Program – AABD RES Level 4 | This code is used for AABD – State Supplement benefits – SSI payments. | Direct to GC-MCO Investment -AABD RES Level 4 |
| 41532 | Home Heating Subsidies – Supplement Fuel Benefits | This code is used for the cost of direct assistance to families. | Direct to Home Heating Program/LIHEAP |
| 41533 | Home Heating Subsidies – Emergency Fuel Benefits | This code is used for the cost of direct assistance to families. | Direct to Home Heating Program/LIHEAP |
| 41534 | Home Heating Subsidies – State Portion of Supplemental Fuel Benefits | This code is used for supplemental fuel benefits funded by the State | Direct to State Fund |

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| 41535 | Home Heating Subsidies – State Portion of Emergency Fuel Benefits | This code is used for emergency fuel benefits funded by the State | Direct to State Fund |
| 41537 | Home Heating Subsidies – Supplemental Fuel Benefits for GA Clients | This code is used for the cost of direct LIHEAP assistance to GA clients. | Direct to State Fund |
| 41542 | SNAP Cashout Payments – Over 65 no SSI | This code is used for the direct cost of food stamps given to eligible clients. | Direct to SNAP Cashout |
| 41544 | SNAP Cashout Payments – Over 65 with SSI | This code is used for the direct cost of food stamps given to eligible clients. | Direct to SNAP Cashout |
| 41546 | SNAP Cashout Payments – With SSI Disability | This code is used for the direct cost of food stamps given to eligible clients. | Direct to SNAP Cashout |
| 41555.101 | SNAP State Exchange - State | This code is used for costs associated with travel expenditures for meetings and conferences relating to the administration of the Food Stamps Program. | Direct to State Fund |
| 41555.201 | SNAP State Exchange -Federal | This code is used for costs associated with travel expenditures for meetings and conferences relating to the administration of the Food Stamps Program. | Direct to SNAP Federal State Exchange |
| 41555.301 | Prior Federal Fiscal Year SNAP State Exchange - Federal | This code is used for costs associated with travel expenditures for meetings and conferences relating to the administration of the Food Stamps Program. | Direct to SNAP Federal State Exchange |
| 41618 | HSE PMO—Staff | This code is used for staff expenses related to Health Enterprise shared component design and development. | Per approved HSE IAPDs: MMIS, E&E, HITECH—MMIS/MES-DDI (90%), E&E/VIEWS DDI (90%) & HIT IAPD (90%). |
| 41631 | Gearwar | This code is used for programmatic costs associated with Gearwar | Direct to Global Commitment Program |
| 41642 | Medicaid Management Information System (MMIS)-DDI Staff | This code is used for staff salaries and operating costs associated with the development of the MMIS. | Direct to CMS-MMIS/MES-DDI (90%) |
| 41712 | General Assistance – Direct Payments for General Assistance | This code is used for the direct costs related to providing GA services. | Direct to State Fund |

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| 41714 | General Assistance –Direct Payments for a household with children | This code is used for the direct costs related to providing GA services. | Direct to State Fund |
| 41716 | General Assistance – Direct payments for pending SSI cases | This code is used for the direct costs related to providing GA services. | Direct to State Fund |
| 41721 | GA Emergency Assistance | This code is used for the direct costs related to providing Emergency Assistance. | Direct to TANF |
| 41722 | GA/GA Dental | This code is used for the direct costs related to providing Emergency Assistance. | Direct to GC-MCO Investment – General Assistance (GA) Medical Expenses |
| 41726 | GA Pharmacy | This code is used for the direct costs related to providing Emergency Assistance. | Direct to GC-MCO Investment - GA Medical Expenses |
| 41727 | GA Abortions | This code is used for the direct costs related to providing Emergency Assistance. | Direct to State Fund |
| 41728 | GA Vision/Physician | This code is used for the direct costs related to providing Emergency Assistance. | Direct to GC-MCO Investment – GA Medical Expenses |
| 41777.106 | General Assistance General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures for the General Assistance program within the Economic Services Division. | Direct to State Fund |
| 41777.108 | Reach Up General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures for the Reach Up program within the Economic Services Division. | Direct to State Fund |
| 41777.109 | LIHEAP General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures for the LIHEAP program within the Economic Services Division. | Direct to State Fund |

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| 44235 | VT Gas program | This code is used for costs associated with the VT GAS Utility discount program. | Direct to VT Gas Utility Eligibility |
| 44245 | Vermont Low Income Trust for Electricity (VLITE) | This code is used for costs associated with VLITE grant to Weatherization. | Direct to VLITE |
| 44340.101 | LIHEAP Outreach | This code is used for costs associated with providing 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 |
| 44345 | Utility Eligibility | This code is used for costs associated with GMP expenditures in administrative appropriation | Direct to Utility Eligibility |

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Organizational Unit 6: Office of Child Support

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

Detailed explanation of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--------------------------|--|--|
| 38010 | Administration | 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. | Total Salaries Across OCS (not including fringe) |
| 38020 | Cash Receipts Unit | 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. | Quarterly Case Count Across IV-D and Non-IV-D |

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| 38030 | Customer Service Unit | 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. | Quarterly Customer Contacts Across IV-D and Non-IV-D |
| 38040 | Records Center | 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. | Quarterly Case Count Across IV-D and Non-IV-D |
| 38060 | Interstate Central Registry | 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. | Direct to Title IV-D |

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| 38070 | Legal | Costs incurred by the legal unit including but not limited to recording fees. This cost pool does not include family court cost, staff attorney or paralegal positions. | Direct to Title IV-D |
| 38071 | Sheriff Services | Costs incurred for sheriff services, return of service and non-service, including mileage reimbursement, postage, coping costs, etc. | Direct to Title IV-D |
| 38075 | Family Court Costs | 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 Motions, Petitions, And Requests (MPRS) in a county and at the individual rates calculated for each county. | Direct to Title IV-D |
| 38080 | Paternity Testing | Costs in this cost pool are for Contracts with private laboratories for genetic and other blood tests for use in paternity determination. | Direct to Title IV-D |
| 38100 | Intercept Unit | 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. | Direct to Title IV-D |
| 38110 | Training | 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. | Direct to Title IV-D |

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| 38141 | Behavioral Interventions for Child Support Services (BICS) Grant | To test and evaluate proposed behavioral interventions aimed at positively impacting child support collections for Vermont families. | Direct to BICS |
| 38150 | Employer Services Unit | 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 | Direct to Title IV-D |
| 38210.104 | OCS Regional Director and Staff | These units establish, modify, and enforce child support orders for TANF cases and in instances where the custodial parent has applied for OCS services. | Direct to Title IV-D |
| 38210.204 | IV-D Incentive Award | This code is used for costs associated with the Title IV-D incentive award | Direct to Title IV-D |
| 40500.104 | Child Support Services General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Child Support. | Direct to State Fund |
| 41777.104 | Child Support General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Child Support | Direct to State Fund |

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Organizational Unit 7: Office of Economic Opportunity (OEO)

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.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|--|--|
| 40500.110 | Office of Economic Opportunity (OEO) General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within OEO. | Direct to State Fund |
| 41310 | RU - Employment Training | Provision of program activities and case management to Reach Up participants. | ESD Reach Up Case Count Excluding Child, Federal Deferred and Sanctioned (TANF & State Fund) |
| 41729 | Challenges for Change (C4C) Community Initiative – HOPE | This code is used for case management and coordination to access medical, social, substance abuse and other essential services for homeless persons and families, including re-housing and housing retention services and support. | Direct to GC-MCO Investment– Challenges for Change: DCF |
| 41777.110 | Office of Economic Opportunity (OEO) General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within OEO | Direct to State Fund |
| 44100 | OEO Administration | State funded portion of costs to oversee all OEO functions and provides supervision to office staff. | Direct to State Fund |
| 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) |

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| 44210 | Department of Energy (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 Weatherization (WX) & Weatherization Trust Fund (WTF) | Costs associated with salary and operations using both DOE WX & WTF funding | Direct to Weatherization (state funded) |
| 44300 | Community Services Block Grant (CSBG - Discretionary) | Federal funds-The primary goal is to eliminate poverty and provide training and technical assistance. | Direct to CSBG |
| 44305 | CSBG Administration | Administrative costs associated with CSBG. | Direct to CSBG |
| 44310 | 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 |
| 44340.111 | LIHEAP Weatherization Program | This code is used for costs associated with providing the Fuel Assistance program as part weatherization initiatives for the low income population. | 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 Fund |

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| 44451 | Supportive Housing – Global Commitment | Targeted Case Management (TCM) portion of Family Supportive Housing | Direct to Global Commitment Program |
| 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 | Department of Housing and Urban Development (HUD) Operations | Operations cost associated with the HUD Grant | Direct to Emergency Solutions Program (Federal) |
| 44462 | HUD Essential Social Services | Social Services cost associated with the HUD Grant | Direct to Emergency Solutions Program (Federal) |
| 44463 | HUD Prevention | Prevention cost associated with the HUD Grant | Direct to Emergency Solutions Program (Federal) |
| 44464 | HUD Rapid Re-Housing | Rapid Re-Housing cost association with the HUD grant. | Direct to Emergency Solutions Program (Federal) |
| 44465 | HUD HMIS Data Collection | HMIS Data Collection cost associated with the HUD grant. | Direct to Emergency Solutions Program (Federal) |
| 44600 | Job Start Training and Technical Assistance (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 |

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| 44650 | Continuum of Care Program (HUD Award) | This code is used for the administration and benefit expenditures for the Continuum of Care Program, which provides rental assistance and supportive services to individuals and families experiencing homelessness in VT. | Direct to Continuum of Care Program |
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Organizational Unit 8: Disability Determination Services (DDS)

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.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|--|------------------------------|
| 40225 | Disability Determinations Director and Staff | 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. | Direct to Social Security |
| 40226 | DD Clerical | 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. | Direct to Social Security |
| 40227 | DD Examiners | DDS collects medical and vocational evidence on each applicant sufficient to apply the above definition, interpreted by the Social Security Administration policy manual. | Direct to Social Security |
| 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 |
| 40500.113 | Disability Determination Services (DDS) General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within DDS. | Direct to State Fund |

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| 41100 | DDS Medical Exams | Review of medical evidence records necessary for Global Commitment eligibility determinations. | Direct to Social Security |
| 41777.113 | Disability Determination Services (DDS) General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within DDS | Direct to State Fund |

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Organizational Unit 9: Child Development Division (CDD)

The Child Development Division ensures a statewide system that promotes and supports safe, accessible, quality childcare for Vermont families

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|--|---|---|
| 37540 | Building Bright Futures Direct Services (formerly Success by Six Program) | Costs for direct services to Building Bright Futures Program | GC-MCO Investment Criteria Percentage and General Fund |
| 37560 | Parent Child Centers | Costs associated with Parent Child Centers. | Direct to State Fund |
| 37610 | Community Based Child Abuse Prevention Grant (CBCAP) | Costs associated with CBCAP grants. | Direct to CBCAP |
| 37611 | CBCAP-Administration | Administrative costs associated with CBCAP grants. | Direct to CBCAP |
| 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/ Juvenile Justice and Delinquency Prevention (JJDP) | Costs associated with Children's Trust Fund Grant but charged to Juvenile Justice and Delinquency Prevention (JJDP) grants. | Direct to Juvenile Justice and Delinquency Prevention (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 |
| 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 |
| 37995 | Race to the Top (RTT) Early Learning Challenge (ELC) Grant | This code is used for staff salaries and operating costs associated with the Race to the Top Early Learning Challenge Grant. | Direct to Race to the Top Grant |
| 37988 | YR 2 SIM Testing – Contracts | Contracts approved by CMS using YR 2 testing and approved carryover identified subcontract funds. | Direct to SIM Grant |

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| 37989 | YR 3 SIM Testing - Contracts | Contracts approved by CMS using YR 3 testing and approved carryover identified subcontract funds. | Direct to SIM Grant |
| 37998 | YR 2 SIM Testing – Staff | Direct staff and operating costs that are related to SIM activities for YR 2 testing activities and approved carryover activities. | Direct to SIM Grant |
| 39600 | IDEA Part C (formerly Early Intervention (EI), and formerly Family Infant and Toddler Program) | Programmatic Costs associated with the Infant and Toddler Program. | Direct to Part-C Family Infant and Toddler Program |
| 39750.1* | Nursing and Family Support (NFS) – Skilled Professional Medical Personnel (SPMP) | Staff costs associated with administering the NFS program for skilled medical professionals. | Direct to Global Commitment - Admin |
| 39750.2* | Nursing and Family Support (NFS) Grant | Programmatic Costs associated with the NFS Program. | Direct to Global Commitment - Admin |
| 39751* | Nursing and Family Support (NFS) – Non- Skilled Professional Medical Personnel (SPMP) | Staff costs associated with administering the NFS program. | Direct to Global Commitment - Admin |
| 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. | Total Salaries Across Child Development (not including fringe) |

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| 40105 | Child Development Division - Operations and Licensing | Personal services and operating expenses for operational functions of the division, evaluation and investigatory work required for licensing day cares, pre-schools, non-recurring care and in-home care services. This code excludes eligibility determination functions/support. | BFIS Case Count |
| 40107 | Child Development Division – Child Care Financial Assistance Program (CCFAP) Eligibility Determinations and Operational Support | Personal services and operating expenses for CDD CCFAP eligibility determination functions and support | BFIS 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 GC-MCO Investment– Strengthening Families |
| 40500.103 | Child Development General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Child Development. | Direct to State Fund |
| 40530.703 | Child Care Subsidy | IV-E eligible program expenditures for child subsidy payments | Direct to Title IV-E Child Development |
| 40530.773 (Effective 4/1/16) | Child Care Subsidy March 2016 Adjustment | Child care subsidy payments made on behalf of IV-E eligible foster children | Direct to Title IV-E Child Development |
| 40530.803 (Effective 4/1/16) | Child Care Subsidy - Adoption | Child care subsidy payments made on behalf of adopted IV-E eligible children | Direct to Title IV-E Adoption Assistance |
| 40540 | Family Support Daycare Program | Administrative costs associated with Family Support Daycare Program | Direct to Title IV-B Child Welfare Services |
| 40555.103 | Child Development - SSBG | Child Care Subsidy – Family Support | Direct to SSBG |
| 40556 | SSBG TANF Transfer | To track expenditures for the TANF transfer to SSBG | Direct to SSBG |
| 40570.103 | Child Care Development Fund (CCDF) –Discretionary | Administrative costs associated with administrative of CCDF. | Direct to CCDF – Discretionary |

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| 40570.203 | CCDF Discretionary – Subsidy Protective and Family Services | Costs associated with protective and family services | Direct to CCDF |
| 40570.303 | CCDF Discretionary – Subsidy Employment and Training | Costs associated with employment and training | Direct to CCDF |
| 40570.403 | CCDF Discretionary – Transportation | Costs associated with transportation | Direct to CCDF |
| 40570.503 | CCDF Discretionary – Quality Enhancements | Costs associated with quality enhancements | Direct to CCDF |
| 40570.603 | CCDF Discretionary – Resource Training | Costs associated with resource training | Direct to CCDF |
| 40570.703 | CCDF Discretionary – Infant Toddler Earmark | Costs associated with the infant toddler earmark | Direct to CCDF |
| 40570.803 | CCDF Discretionary – After School Certificate | Costs associated with after school certificate | Direct to CCDF |
| 40570.903 | CCDF Discretionary – Referral | Costs associated with referrals | Direct to CCDF |
| 40575 | Child Care Quality Improvement | Training and support for child care workers/teachers in licensed centers, funded by the Vermont Department of Labor (VDOL) grant. | Direct to VDOL grant |
| 40600.203 | CCDF Mandatory and Matching - Subsidy Protective and Family Services | Costs associated with protective and family services | Direct to CCDF |
| 40600.303 | CCDF Mandatory and Matching – Subsidy Employment and Training | Costs associated with employment and training | Direct to CCDF |
| 40600.403 | CCDF Mandatory and Matching – Transportation | Costs associated with transportation | Direct to CCDF |
| 40600.503 | CCDF Mandatory and Matching - Quality Enhancements | Costs associated with quality enhancements | Direct to CCDF |
| 40600.603 | CCDF Mandatory and Matching - Resource Training | Costs associated with resource training | Direct to CCDF |
| 40600.703 | CCDF Mandatory and Matching - Infant Toddler Earmark | Costs associated with the infant toddler earmark | Direct to CCDF |
| 40600.803 | CCDF Mandatory and Matching - After School Certificate | Costs associated with after school certificate | Direct to CCDF |
| 40600.903 | CCDF Mandatory and Matching - Referral | Costs associated with referrals | Direct to CCDF |
| 40615 | Bright Futures | Costs associated with the Bright Futures Infrastructure Program | Direct to State Fund |
| 40631.103 | Child Development – TANF | Payments for Transportation and Subsidy eligibility. | Direct To TANF |

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| 40633 | Child Development - TANF-MOE Only | Child subsidy payments | Direct to TANF MOE |
| 40707* | GC Early Childhood & Family Mental Health (ECFMH) Program Staff | Program staff working on the ECFMH program | Direct to Global Commitment - Admin |
| 40708 | Children's Integrated Services (CIS) Early Intervention (EI) | To support the work of CIS EI | Direct to GC-MCO Investment – CIS EI |
| 40711 | Children's Integrated Services | Programmatic expenses associated with CIS grants. | Direct to Global Commitment - Program |
| 40713 | Therapeutic Child Care - Bonus | Rate differential paid for children with special needs to providers with special training. | Direct to GC-MCO Investment - Therapeutic Child Care |
| 41602 | Children's Health Insurance Program (CHIP) Costs in Family Infant Toddler Program (FITP) and Healthy Babies Kids and Families (HBKF) | CHIP eligible costs in CIS. | Direct to CHIP - Program |
| 41642 | Medicaid Management Information System (MMIS)-DDI Staff | This code is used for staff salaries and operating costs associated with the design, development, and implementation of the Medicaid Management Information System (MMIS). | Direct to CMS-MMIS/MES-DDI (90%) |
| 41777.103 | Child Development General Fund | This code is used for staff, operating, direct and miscellaneous non-federal expenditures within Child Development | Direct to State Fund |

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Department of Disabilities, 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 (DAIL). DAIL is responsible for administering Title III funded programming, Section 110 programming, and developmental disabilities case management services for the State of Vermont.

DAIL 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:

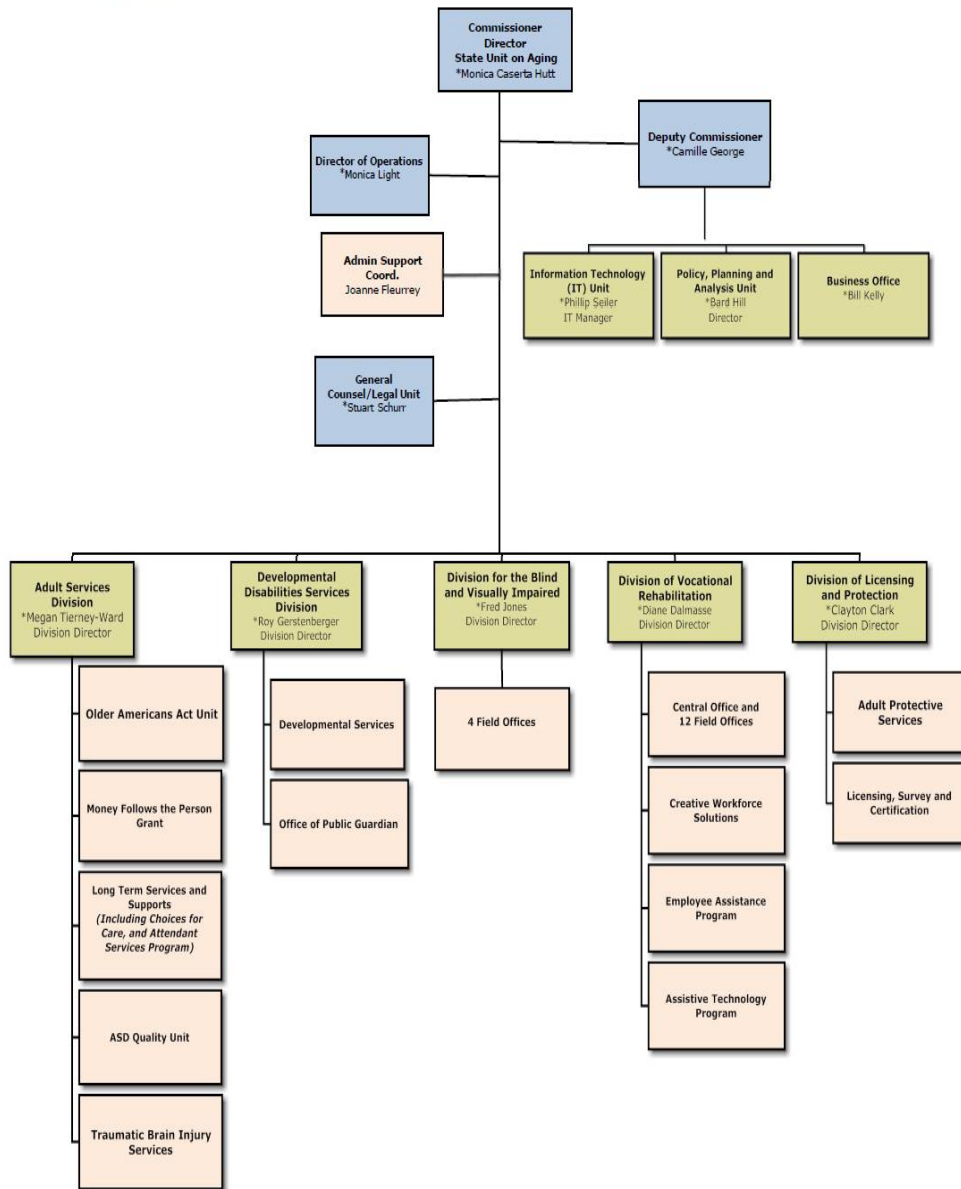
- Assist older persons and adults with physical disabilities to live as independently as possible.
- Assist persons with disabilities to find and maintain meaningful employment.
- Assure quality of care and life to individuals receiving health care and/or long term care services from licensed or certified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

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

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II. DAIL Organizational Chart

Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart State Unit on Aging (SUA)



As of 1/1/2016

* = Identifies contacts for DAIL Senior Leadership

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III. Department of Disabilities, Aging and Independent Living Cost Allocation Methodologies

Organizational Unit 1: Indirect Cost Allocations

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

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|--|---|
| 1000.1* | SWICAP | DAIL allocation of Statewide Indirect Costs | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.2* | AHS Audit Unit | DAIL allocation of costs related to the AHS Audit Unit | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.3* | AHS Secretary's Office | DAIL allocation of costs related to the AHS Secretary's Office | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.4* | AHS Information Technology | DAIL allocation of costs related to AHS Information Technology | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.5* | Financial Statement and Internal Controls Audit | DAIL allocation of costs related to the Single Audit – Financial Statement and Internal Controls | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.6* | Human Services Board | DAIL allocation of costs related to the Human Services Board | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.7* | Human Resources Investigations Unit | DAIL allocation of costs related to the Human Resources Investigations Unit | Total Salaries Across DAIL less Attendant Services Salaries |
| 1000.8* | AHS Policy | DAIL allocation of costs related to AHS Policy | Total Salaries Across DAIL less Attendant Services Salaries |

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Organizational Unit 2: Commissioner's Office

The Commissioner's Office administers oversight to DAIL and enables the department to meet its mission: to make Vermont the best state in which to grow old or to live with a disability, with dignity, respect and independence.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|------------------|---|--|--|
| 37700* | Global Commitment Administration | Staff and related expenses for administering DAIL's Medicaid programs. | Direct to Global Commitment Administration |
| 37717 | IE HC 90/10 Staff | Integrated Eligibility Health Care – DDI (Development) costs. | Direct to CMS-E&E (90/10) |
| 37998 | YR2 SIM Testing—Staff | DAIL staff, including Limited Service positions, time spent on SIM-related work | Direct to SIM Grant |
| 37988 | YR2 SIM Testing—Contracts | CMS-approved contract expenditures pursuant to the SIM grant | Direct to SIM Grant |
| 37999 | Year 3 SIM Grant | Year 3 SIM grant costs for staff and operating only. | Direct to SIM Grant |
| 41607 | VEWS – 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 | DAIL Allocation of State Wide Indirect Costs | Total Salaries Across DAIL less Attendant Services Salaries |
| 43040 | Leave Time | Timesheet code for all hours reported not worked. | Quarterly Results of Individual Employees Positive Reporting |

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|--------|---|--|--|
| 43403 | GC-MCO Investments - SASH | Support and services at home (SASH) | Direct to GC-MCO Investments |
| 43404 | GC-MCO Investments - HomeSharing | HomeSharing | Direct to GC-MCO Investments |
| 43405 | GC-MCO Investments – Self-Neglect | Self-neglect initiative | Direct to GC-MCO Investments |
| 43500 | General Fund | Expenses that are entirely State funded | Direct to State Fund |
| 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 |
| 43955* | GC-MCO Investments | State expense reportable under the Global Commitment Waiver | Direct to GC-MCO Investments |
| 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 |
| 43976 | VT Coordinated Legal Assistance for Seniors | Direct expenses related to the Vermont Coordinated Legal Assistance for Seniors federal award. | Direct to VT Coordinated Legal Assistance for Seniors |

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Organizational Unit 3: Adult Services Division (ASD)

The Adult Services Division administers long-term services and supports to older Vermonters and adults with physical disabilities. ASD works with private organizations to provide a broad array of long term services and supports, including: residential support, community support, case management, family supports, respite, employment support, crisis services, clinical interventions, assistance with activities of daily living, assistive technology, guardianship services, nursing home level of care, rehabilitation services, support to live at home, information and referral, integrated health care and personal care, and traumatic brain injuries. The Division supports older Vermonters and adults with physical disabilities to live as they choose, pursuing their goals and preferences within their chosen communities. ASD seeks to ensure their basic human and civil rights, health, well-being and safety, provides effective leadership for disability and aging policy and services in Vermont, and meets federal and state mandates by developing and managing public resources effectively.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|------------------|---|--|--|
| 37998 | YR2 SIM Testing—Staff | DAIL staff, including Limited Service positions; time spent on SIM related work | Direct to SIM Grant |
| 37988 | YR2 SIM Testing—Contracts | CMS approved contract expenditures pursuant to the SIM grant | Direct to SIM Grant |
| 41607 | IEWS – Eligibility and Enrollment | Staff work related to Health Enterprise Eligibility and enrollment DDI and IV&V. | Per Approved Health Enterprise IAPD |
| 43030* | ASD Managers and Support Staff | Managers and support staff in the Adult Services Division | Total Salaries Across ASD (Method M) |
| 43040 | Leave Time | Timesheet code for all hours reported not worked. | Quarterly Results of Individual Employees Positive Reporting |
| 43070* | ASD Division Director and Support Staff | Expenses associated with the Division Director and Administrative Staff who have broad responsibilities for programs operated within the division. | Total Costs Across ASD (Method A2) |

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| 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 Administration |
| 37710 | Global Commitment Program | Expenses related to Global Commitment programs (TBI, ICF-IID, Waiver, Clinic, Adult Day and ASP Personal Care) | Direct to Global Commitment Program |
| 37800 | Social Services Block Grant | Expenses related to Social Services Block Grant | Direct to Social Services Block Grant |
| 39727 | Commodities Supplemental Food Program | Delivery of Commodities to primarily Seniors | Direct to Commodities Supplemental Food Program |
| 41602 | State Children's Health Insurance Program | Expenses related to the CHIP Program | Direct to CHIP |
| 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 |
| 42016* | Nurse SMP Time | Expenses related to Nurse Professional time to administer Global Commitment Program. | Direct to Global Commitment Administration |

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| 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. | Allocated to Title III-E, State Fund and Global Commitment Administration based on client count (Method O) |
| 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 |
| 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 |
| 43820 | ASD Transportation –Adult Day Centers | Expenses related to ASD Transportation | Direct to State Fund |

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| 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 |
| 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 |
| 43952 | 1115 LTC Waiver extra admin - 50% | New costs incurred for the purpose of implementing the 1115 LTC Waiver | Direct to Global Commitment Administration |
| 43953 | 1115 LTC Waiver extra admin - 75% SMP | 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 Global Commitment Administration |
| 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 |
| 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 |

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| 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 |
| 43991 | Senior Community Service Employment Program | Federal Grant related to employment services for elders | Direct to Senior Community Service Employment Program |
| 43992 | Elderly & Disabled Transportation | Expenses related to a federal transportation grant | Direct to Elderly & Disabled Transportation |
| 43998 | CMS Long Housing & Supports Grant | Expenses related to the CMS Long Housing & Supports Grant | Direct to CMS Long Housing & Supports |
| 43500 | General Fund | Programs that are entirely State funded | Direct to State Fund |
| 43403 | GC-MCO Investments - SASH | Support and services at home (SASH) | Direct to GC-MCO Investments |
| 43404 | GC-MCO Investments - HomeSharing | HomeSharing | Direct to GC-MCO Investments |
| 43405 | GC-MCO Investments – Self-Neglect | Self-neglect initiative | Direct to GC-MCO Investments |

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Organizational Unit 4: Division for the Blind and Visually Impaired (DBVI)

The Division for the Blind and Visually Impaired administers programs to assist Vermonters who are blind or have a visual impairment, to enter or return to work. DBVI also provides some funding for independent living services, to help blind or visually impaired individuals to live in and contribute to their communities. The major programs in DBVI include: The core rehabilitation work, known as Section 110 services and the Older Blind Program.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|---|---|--|
| 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. | Total Costs Across DBVI (Method A2) – minus participant support costs |
| 43040 | Leave Time | Timesheet code for all hours reported not worked. | Quarterly Results of Individual Employees Positive Reporting |
| 43620 | Independent Living Part B | Expenses related to the Independent Living grant | Direct to Independent Living Grant Part B |
| 43630 | Mobile Low Vision Grant Title VII | Grant for elders with low vision | Direct to Mobile Low Vision |
| 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 | DBVI Pets to Students | Expenses related to Pets to Students | Direct to Section 110 |

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| | | | |
|-------|--|--|-------------------------------|
| 43660 | Supported Employment Title VI-C | Supported Employment services | Direct to Title VI-C |
| 43661 | Title VI SE Services to Youths | Supported Employment services for youth. | 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 Fund |
| 43400 | GC-MCO Investments – Mobility Training - Elderly Visually Impaired | Mobility Training/Other Services – Elderly Visually Impaired | Direct to GC-MCO Investments |

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Organizational Unit 5: Division of Vocational Rehabilitation (VR)

The Division of Vocational Rehabilitation administers a wide variety of programs and individual support services to assist Vermonters with a disability to enter or re-enter the work force. The core program (VR Section 110) enables Vermonters with a disability to assess their skills and abilities, identify a vocational goal, develop an Individualized Plan for Employment and receive services leading to meaningful employment. VR invests heavily to service people with the most significant disabilities through supported employment programs and has developed a network of specialized Transition Counselors to support young adults from school to work. The Division operates the VR Reach Up program to serve TANF recipients with disabilities, a state wide Benefits Counseling Program to support Social Security beneficiaries to work, and the Assistive Technology (AT) Project that provides Vermonters with information and training on AT devices and services.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|------------------|--|--|--|
| 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. | Total Costs Across VR (Method A2) – minus participant support costs |
| 43040 | Leave Time | Timesheet code for all hours reported not worked. | Quarterly Results of Individual Employees Positive Reporting |
| 37998 | YR2 SIM Testing—Staff | DAIL staff, including Limited Service positions, time spent on SIM related work | Direct to SIM Grant |
| 37988 | YR2 SIM Testing—Contracts | CMS approved contract expenditures pursuant to the SIM grant | Direct to SIM Grant |
| 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. | Total Costs Across VR (Method R) – minus participant support costs |

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| | | | |
|-------|---|---|--|
| 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 |
| 43701 | EAP VHCIP (SIM) | MOU with DVHA funded by SIM Grant | Direct to EAP VHCIP (SIM) |
| 43730 | Supported Employment Title VI-B | Expenses related to Supported Employment grant | Direct to Supported Employment Title VI-B |
| 43731 | Title VI SE Services to Youths | Supported Employment services for youth. | Direct to Title VI-C |
| 43750 | VR Independent Living Grant Part B | Direct expenses related to the Grant | Direct to Independent Living Grant Part B |
| 43760 | Rehabilitation Training Grant | Staff Training Grant | Direct to Rehab Training Grant |
| 43765 | VR Quality Training Grant | Staff Training Grant | Direct to VR Quality Training Grant |
| 43770 | Section 110 (VR) | Expenses related to Section 110 grant. | Direct to Section 110 (VR) |
| 43771 | VDOL Evaluations | Expenses related to VDOL Evaluations | Direct to VDOL Evaluations |
| 43775 | VR Pets to Students | Expenses related to Pets to Students | Direct to Section 110 |
| 43780 | VR UMASS BOND | Expenses related to grant from UMASS for Social Security Demonstration | Direct to VR UMASS BOND |
| 43785 | UMASS Progressive Employment | Expenses in developing and testing of VR's Progressive Employment Program as evidence-based program for job placements. | Direct to UMASS Progressive Employment |
| 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 |
| 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 |
| 43891 | Senior Community Service Employment Program - Supplemental | Federal Grant related to employment services for elders | Direct to Senior Community Service Employment Program - Supplemental |

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| | | | |
|-------|---|---|---|
| 43895 | Reach Up Non VR | Expenses related to Reach Up grant | Direct to Reach Up – Non VR |
| 43954 | Corrections Disability Tracking | Expenses related to Corrections SSA Billing | Direct to Corrections SSA Billing |
| 43961 | Work Incentives Planning & Assistance Grant | Expenses related to the Work Incentives Planning & Assistance Grant | Direct to Work Incentives Planning & Assistance Grant |
| 43991 | Senior Community Service Employment Program | Federal Grant related to employment services for elders | Direct to Senior Community Service Employment Program |
| 43500 | General Fund | Programs that are entirely State funded | Direct to State Fund |
| 43695 | Assistive Technology - DPS Equipment Distribution Program | MOU with DPS; expenses related to the administration of the AT Equipment Distribution Program, per V.S.A. §218a | Direct to Equipment Distribution Program |
| 43702 | EAP – Jobs for Independence Pilot | MOU with DCF (SNAP); expenses related to Federal Grant for employment pilot | Direct to EAP Jobs for Independence Pilot |

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Organizational Unit 6: Division of Licensing and Protection (DLP)

The Division of Licensing and Protection administers various programs to ensure the quality of many health care services and to protect vulnerable adults from abuse, neglect and exploitation. Major programs in DLP include: Survey and Certification which conducts inspections and surveys of all Medicare and Medicaid facilities and organizations including nursing home and home health agencies, state licensure of residential care homes and other facilities, and Adult Protective Services which investigates allegations of abuse, neglect and exploitation against vulnerable adults

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|------------------|--------------------------------------|--|---|
| 37998 | YR2 SIM Testing—Staff | DAHL staff, including Limited Service positions, time spent on SIM-related work | Direct to SIM Grant |
| 37988 | YR2 SIM Testing—Contracts | CMS approved contract expenditures pursuant to the SIM grant | Direct to SIM Grant |
| 43020* | Director, Nurse Survey & Staff | Expenses associated with the Division Director and Administrative Staff who have broad responsibilities for programs operated within the division. | Total Salaries Across DLP (Method J) |
| 43040* | Leave Time | Timesheet code for all hours reported not worked. | Quarterly Results of Individual Employees Positive Reporting |
| 43070* | Director and Administrative Support | Expenses for the Division director and administrative support that supports entire division. | Total Salaries Across DLP (Method I) |
| 43100* | Public Safety Fire Prevention | Expenses for staff of the Division of Fire Safety that work with the Survey and Certification staff on the licensure of facilities. | Total Salaries Across DLP programs that require facility inspections (Method H) |

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| | | | |
|-------|---|--|---|
| 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 | Costs incurred in the survey of Vermont Home Health Agencies to ensure compliance with all federal regulations related to HHA | Allocation Between Medicare (XVIII Funds), Medicaid (XIX Funds), and State Funds based on CMS directive |
| 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 Fund |
| 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) |

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|--------|---|--|---|
| 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 Funds |
| 43170* | LTC – Multi, Licensure of Nursing Facilities | Expenses incurred in the surveys, follow-up visits, occurring in nursing facilities that are federally certified for participation in the Title XVIII & XIX program. | Allocation between Medicare (XVIII Funds) and Medicaid (XIX Funds) based on dually certified facilities. |
| 43190 | ICF/IIDs | Expenses incurred in the enforcement of federal ICF/IID requirements. | Direct to Medicaid (XIX Funds) |
| 43200 | Residential Care Homes & Therapeutic Community Residences | Expenses related to Level III & Level IV Residential Care Homes and Therapeutic Community Care Homes | Direct to State 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 |

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|--------|--|--|---|
| 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 a 1115 Waiver resident in a residential care home. | Direct to Global Commitment Administration |
| 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* | NATCEP 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 Medicare (XVIII Funds), Medicaid (XIX Funds) and State Fund based on CMS directive |
| 43310* | Training ICF/IID | Covers expenses incurred by staff in attending in-services, conferences, and workshops related to the enforcement of federal regulations in ICF/IID | Direct to Medicaid (XIX Funds). |
| 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 (XVIII Funds) |
| 43330 | Home Health Hotline | Costs for operating the Home Health Hotline. | Direct to Medicare (XVIII Funds) |

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|--------|--|---|--|
| 43340* | Nursing Home Complaints | Expenses related to nursing home complaints | Allocation between Medicare (XVIII Funds) and Medicaid (XIX Funds) based on dually certified facilities. |
| 43350* | Nurse Aid Training and Competency (NATCEP) | 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 Fund |
| 43370 | Patient Safety Initiative | Expenses related to PSI surveys | Direct to Medicare (Title XVIII) |
| 43380 | Hospice Surveys | Expenses incurred while certifying Hospice Agencies (includes complaints) | Direct to Medicare Non-SNF Personnel |
| 43390 | S&C Case Mix | Time spent mining data from nursing home assessments to be sent to Rate Setting. | Direct to S&C State General Funds |
| 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* | GC-MCO Investments | State expenses reportable under the Global Commitment Waiver | Direct to GC-MCO Investments |
| 55555* | Communication | Expenses related to communication | Total Cost of Program Funds Expended in Quarter |
| 66666* | Supplies | Expenses related to Supplies | Total Cost of Program Funds Expended in Quarter |
| 77777* | Space | Expenses related to space | Total Cost of Program Funds Expended in Quarter |
| 88888* | Equipment | Expenses related to equipment | Total Cost of Program Funds Expended in Quarter |
| 43500 | General Fund | Programs that are entirely State funded | Direct to State Fund |

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Organizational Unit 7: Developmental Disabilities Services Division (DDSD)

The Developmental Disabilities Services Division administers services to people with developmental disabilities, guardianship services to adults with developmental disabilities and older Vermonters. DDSD works with private organizations to provide a broad array of long term services and supports, including: service coordination, family supports, community supports, employment supports, guardianship services, residential support, crisis support, clinical intervention, respite and rehabilitation services. The Division supports older Vermonters and Vermonters with disabilities to live as they choose, pursuing their individual goals and preferences within their chosen community. DDSD seeks to ensure their basic human and civil rights, health, well-being and safety, provides effective leadership for disability and aging policy and services in Vermont, and meets federal and state mandates by developing and managing public resources effectively.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|------------------|--|--|--|
| 37998 | YR2 SIM Testing—Staff | DAIIL staff, including Limited Service positions; time spent on SIM related work | Direct to SIM Grant |
| 37988 | YR2 SIM Testing—Contracts | CMS approved contract expenditures pursuant to the SIM grant | Direct to SIM Grant |
| 41607 | VEIEWS – Eligibility and Enrollment | Staff work related to Health Enterprise Eligibility and enrollment DDI and IV&V. | Per Approved Health Enterprise IAPD |
| 43030* | DDSD Managers and Support Staff | Managers and support staff in the Developmental Disabilities Services Division | Total Salaries Across DDSD (Method M) |
| 43040 | Leave Time | Timesheet code for all hours reported not worked. | Quarterly Results of Individual Employees Positive Reporting |
| 43070* | DDSD Division Director and Support Staff | Expenses associated with the Division Director and Administrative Staff who have broad responsibilities for programs operated within the division. | Total Costs Across DDSD (Method A2) |

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| | | | |
|--------|---|--|--|
| 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 Administration |
| 37710 | Global Commitment Program | Expenses related to Global Commitment programs (TBI, ICF- IID, Waiver, Clinic, Adult Day and ASP Personal Care) | Direct to Global Commitment Program |
| 37800 | Social Services Block Grant | Expenses related to Social Services Block Grant | Direct to Social Services Block Grant |
| 41602 | State Children's Health Insurance Program | Expenses related to the CHIP Program | Direct to CHIP |
| 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 |
| 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 |
| 42011 | Guardianship Services Specialists | Provide Guardianship services to the eligible developmentally disabled population | Direct to DDS/D Guardianship |
| 42006* | PASRR | Expenses related to Preadmission Screening and Record Review (PASRR). | Direct to PASRR |
| 43021 | Otto Johnson Trust | Expenses paid using Otto Johnson Special Fund revenue. | Direct to Otto Johnson |

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| | | | |
|-------|--|--|------------------------------|
| 43500 | General Fund | Programs that are entirely State funded | Direct to State Fund |
| 43401 | GC-MCO Investments – DS Special Payments | DS special payments for medical services | Direct to GC-MCO Investments |
| 43402 | GC-MCO Investments – FFF/FMR | Flexible family/respice funding | Direct to GC-MCO Investments |
| 43406 | GC-MCO Investments – Seriously Functionally Impaired (SFI) | Seriously functionally impaired | Direct to GC-MCO Investments |

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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. Effective July 1st, 2016, the Health Access Eligibility and Enrollment Unit and Long Term Care Unit transferred from the Department of Children and Families to the Department of Vermont Health Access. This organizational shift was enacted at the legislative level, with the intent of aligning the functions of eligibility and enrollment with DVHA's management of Vermont's publicly funded health insurance programs. DVHA will benefit from increased efficiency and the ability to streamline numerous processes with eligibility workers situated within the Department. At the time of transfer, 147 employees from HAEEU and 27 employees from Long Term Care became part of DVHA. We have reflected these changes throughout the narrative, including DVHA's organizational chart. The acronym used for HAEEU was changed from HAEU beginning in State Fiscal Year 2016 to properly reflect the activities of both Eligibility and Enrollment from the unit. HAEEU now refers to the Health Access Eligibility and Enrollment Unit. Eligibility and Enrollment into Vermont's publicly funded programs is managed by the DVHA through the Health Access Eligibility and Enrollment Unit (HAEEU). 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.

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 Waiver 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.

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

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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.

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.
- Inpatient psychiatric services at Brattleboro Retreat, Rutland Regional Medical Center, University of Vermont Medical Center, and Vermont Psychiatric Care Hospital (VPCH - at the Morrisville location) provide 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. Vermont opened a new twenty-five bed acute care hospital called Vermont Psychiatric Care Hospital (VPCH at the Berlin location) on July 3, 2014.

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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.
- NATAAC 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)

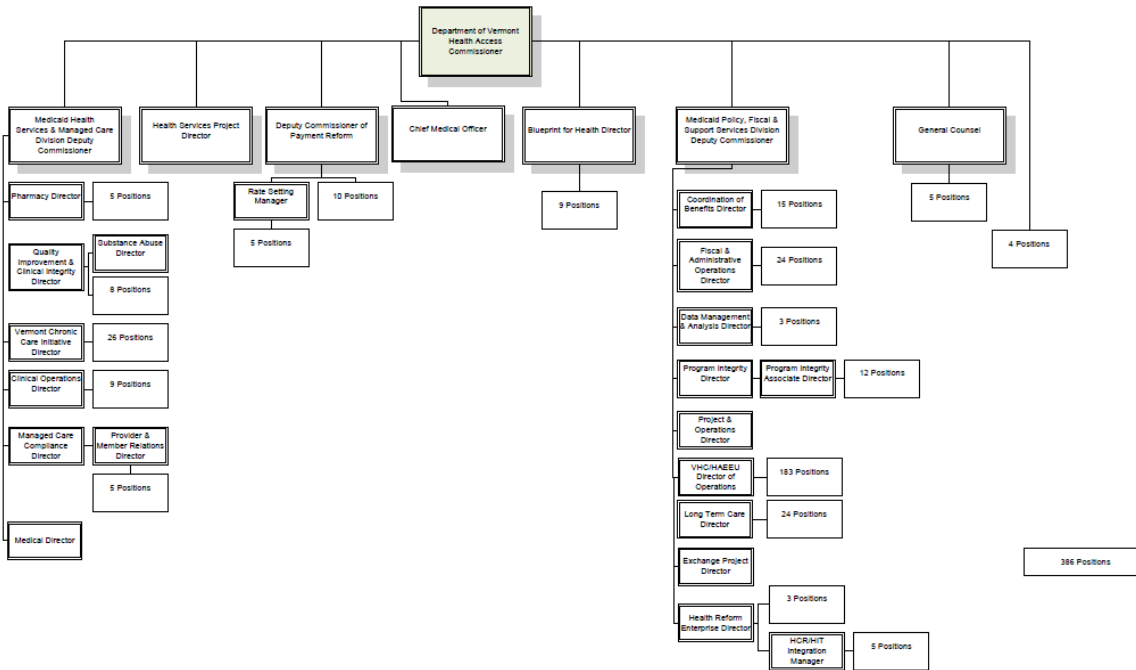
- Medicaid outreach and eligibility.
- Medical Practice Division (Quality Assurance).
- Selected Skilled Professional Medical Personnel.

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

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II. DVHA Organizational Chart

Department of Vermont Health Access



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III. Department of Vermont Health Access Cost Allocation Methodologies

Organizational Unit 1: Indirect Cost Allocations

Department of Vermont Health Access 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.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|--|---|
| 1000.1* | SWICAP | DVHA Allocation of Statewide Indirect Costs | Total Hours Across All Non-Indirect Program Codes |
| 1000.2 | AHS – Audit Unit | DVHA Allocation of costs related to the AHS Audit Unit | Total Hours Across All Non-Indirect Program Codes |
| 1000.3* | AHS – Secretary’s Office | DVHA Allocation of costs related to the AHS Secretary’s Office | Total Hours Across All Non-Indirect Program Codes |
| 1000.4* | AHS Information Technology | DVHA Allocation of costs related to AHS Information Technology | Total Hours Across All Non-Indirect Program Codes |
| 1000.5* | Financial Statement and Internal Controls | DVHA Allocation of costs related to the Single Audit – Financial Statement and Internal Controls | Total Hours Across All Non-Indirect Program Codes |
| 1000.7* | Human Resources Investigations Unit | DVHA Allocation of the costs associated with the Human Resources Investigations Unit | Total Hours Across All Non-Indirect Program Codes |
| 1000.8 | AHS Policy | DVHA Allocation of Field Services Costs | Total Hours Across All Non-Indirect Program Codes |

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Organizational Unit 2: Administration

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.

| Program Code | Program Name | Description | Allocation Method |
|--------------|-------------------------------|---|---|
| 37006 | EBCP Contracts DDI | Contractual Costs Associated with the Enterprise Business Capability Platform | Per Approved EBCP IAPD |
| 37702 | Exchange Level 1C IT Contract | IT Consulting and contractual costs related to the Level 1c CCIIO Exchange Grant | Direct to Exchange Level 1C (100%) |
| 37704 | HIE Contracts - Fair Share | Contractual Costs related to Health Information Exchange Expansion | Per Approved HIT IAPD |
| 37706 | VIEWS Training Contracts | Contractual Expenses related to Health Enterprise Eligibility and Enrollment training | Per Approved Health Enterprise IAPD |
| 37707 | VIEWS Training Staff | Staff work related to Health Enterprise Eligibility and Enrollment training | Per Approved Health Enterprise IAPD |
| 37708 | VHC/MAGI - E&E - Staff 1C | Staff work related to Health Enterprise Eligibility and Enrollment DDI and IV&V | Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD - E&E/VIEWS DDI (90%) & Exchange Level 1C (100%) |
| 37716 | IE HC 90/10 Contracts | Contractual Expenses related to Health Enterprise Integrated Eligibility DDI and IV&V | Direct to CMS-E&E/VIEWS DDI (90%) |

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|------------------|--|--|--|
| 37717 | IE HC 90/10 Staff | Staff work related to Health Enterprise Integrated Eligibility DDI and IV&V | Direct to CMS-E&E/VIEWS DDI (90%) |
| 37718 | HSE Analytics Contracts | Costs associated with HSE Shared Analytics | Per Approved Health Enterprise IAPD |
| 37719 | HSE SOA Software | Contractual cost related to SOA infrastructure licenses | Per Approved Health Enterprise IAPD |
| 37727 | EBCP Contracts L1C | Contractual Costs associated with the Enterprise Business Capability Platform | Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD - E&E/VIEWS DDI (90%) & Exchange Level 1C (100%) |
| 37728 | Exchange Level 1C – IT Staff and Operating | Cost associated with Exchange Level 1C related IT staff and operating expenses | Direct to Exchange Level 1C (100%) |
| 37729 | EBCP Staff L1C | Staff Expenses associated with the Enterprise Business Capability Platform | Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD - E&E/VIEWS DDI (90%) & Exchange Level 1C (100%) |
| 37988 | SIM YR 2 Testing-Contracts | Contracts approved by CMS using YR 2 Testing and approved Carryover identified subcontract Funds | Direct to SIM Grant |
| 37989 | SIM YR 3 Testing-Contracts | Contracts approved by CMS using YR 3 Testing and approved Carryover identified subcontract Funds | Direct to SIM Grant |

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| | | | |
|--------|-----------------------------------|---|---|
| 37998 | YR 2 SIM Testing- Staff | Direct Staff and operating costs that are related to SIMS activities for YR 2 Testing Activities and approved Carryover Activities are coded here | Direct to SIM Grant |
| 37999 | SIM YR 3 Testing-Staff | Direct Staff and operating costs that are related to SIMS activities for YR 3 Testing Activities and approved Carryover Activities are coded here | Direct to SIM Grant |
| 39374 | Breast & Cervical Cancer Admin | Direct Salary and Fringe for one FTE performing duties funded by a VDH grant | Direct to State Only Admin |
| 41050* | Enrollment Broker Services | Benefits counseling enrollment outreach and member services | Quarterly Case Count Across AHS and VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP |
| 41051* | Pharmacy Benefit Manager Services | Pharmacy Benefit Manager Services | Quarterly number of Pharmacy Claims paid for Global Commitment, CHIP, and All Other benefiting Programs |

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| | | | |
|--------|---------------|--|---|
| 41085* | DUR/MAB Board | 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&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 | Quarterly Enrollment for Global Commitment, CHIP, and all other benefiting programs |
| 41090* | SPMP | Cost of time staff in positions requiring a professional medical certification or degree spent on duties and responsibilities that require professional medical knowledge and skills | Direct to Global Commitment Admin |

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| 41120* | Fiscal Intermediary | 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 | Quarterly number of paid claims for Global Commitment, CHIP, and All Other benefiting Programs |
| 41141 | Health Access Eligibility and Enrollment Unit Long Term Care Eligibility | Processes member applications and determines eligibility for Long Term Care coverage | Direct to Global Commitment Admin |
| 41150 | Health Access Eligibility and Enrollment Unit | Processes member applications and determines eligibility for Health Care Programs | Per RMTS enhanced OAPD statistic |
| 41151 | DVHA Health Care Admin | Support Health Access Eligibility and Enrollment Unit | Per RMTS OAPD statistic |
| 41152 | Health Access Eligibility and Enrollment Unit Supervisors | Oversee processing of member applications and eligibility determinations. Support Health Access Eligibility and Enrollment Unit staff | Per RMTS enhanced OAPD statistic |
| 41469 | Acupuncture Pilot Study Grant | Cost associated with the Acupuncture Pilot Study, related IT staff and operating expenses | Direct to State Only Admin |
| 41470 | State Only Expenses | Administrative expenses for "State Only" programs | Direct to State Only Admin |

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|--------|--------------------------|--|---|
| 41482 | Program Improvement | DVHA Oversight and Monitoring unit which will be the key liaison for Federal, State, and independent audits and examinations, as well as an intermediary and advocate for DVHA setting a basis of understanding and expectation for Regulators, Examiners, Auditors, Independent Auditors, and State Senior Leadership | Total Hours Across All Other Program Codes |
| 41486* | Commissioner's Office | 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 | Total Hours Across All Other Program Codes |
| 41487* | Data Analysis Management | 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 | Quarterly Enrollment for Global Commitment, CHIP, and All Other benefiting Programs |

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|--------|-------------------|--|--|
| 41488* | Pharmacy Unit | Implements and manages the pharmacy benefits for Medicaid and the 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 | Quarterly number of Pharmacy Claims paid for Global Commitment, CHIP and other benefiting Programs |
| 41489* | Program Integrity | Responsible for maintaining 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, CHIP, and All Other benefiting Programs |

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|--------|-----------------------------|---|---|
| 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, 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, 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, CHIP, and All Other benefiting Programs |

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| 41496* | Coordination of Benefits | 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 | Quarterly Enrollment for Global Commitment, and All Other benefiting Programs |
| 41497* | Administrative Services | 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 | Total Hours Across All Other Program Codes |
| 41613 | MMIS-DDI Contracts | Contractual Expenses related to Health Enterprise MES DDI and IV&V | Direct to CMS-MMIS/MES – DDI (90%) |
| 41614 | ICD-10 Data Storage | Contractor expenses - associated with the ICD-10 planning | Direct to ICD-10 IAPD (90%) |
| 41618 | HSE PMO - Staff | Staff Expenses related to Health Enterprise shared component design and development | Per Negotiated PMO allocation of HSE sources |
| 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 direct code time as appropriate to other Program codes |

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| 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 |
| 41628* | Blueprint – Partnerships | Costs associated with Contractual and grant | Bi-Annual % of State population eligible for Medicaid to GC Admin remainder to MCO |
| 41629* | Quality Improvement Division | 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 | Quarterly Enrollment for Global Commitment, CHIP, and All Other benefiting Programs |
| 41632 | HSE PMO - Contracts | Contractual Expenses related to Health Enterprise shared component design and development | Per Negotiated PMO allocation of HSE sources |
| 41634 | Provider Directory – Staff & DII Project Management | Salary, operating and DII staff expenses related to Health Enterprise provider directory | Per Approved Health Enterprise IAPD |
| 41636 | MAPIR – EHR Incentive Payments | EHR Incentive Payments to providers | Direct to CMS - HIT EHRIP 100% |
| 41637 | MAPIR – State Customization – Contractual Costs | Contractor expenses – State Customization – contract associated with the Medical Assistance Provider Incentive Repository Program | Direct to CMS-MMIS/MES – DDI (90%) |
| 41639 | ICD-10 – Contractual Costs | Contractor expenses – associated with the ICD-10 planning and Implementation | Direct to ICD-10 IAPD (90%) |

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| 41640 | ICD-10 – Staff Costs | Work associated with the ICD-10 planning and Implementation | Direct to ICD-10 IAPD (90%) |
| 41642 | MMIS – DDI Staff | Staff work related to the development of the MMIS | Direct to CMS-MMIS/MES – DDI (90%) |
| 41692* | HCR/HIT – Contracts | Compuware, Bi-state and any other “non-base” HCR expense | 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 |
| 41693 | HIT: Implementation and Operation- Staff | Staff Expenses related to Health Enterprise HIT, HIE, EHR, and Public Health Development and Implementation | Direct to CMS-HITECH IAPD (90%) |
| 41694 | HIT: Implementation and Operation- Contractors | Contractual Costs related to Health Enterprise HIT HIE, EHR, and Public Health Development and Implementation | Direct to CMS-HITECH IAPD (90%) |
| 41695 | MAPIR Incentive Payments | EHR Incentive Payments for Eligible Hospitals | Direct to CMS - HIT EHRIP 100% |
| 41697* | Reimbursement Unit | 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 | Quarterly Enrollment for Global Commitment, CHIP, and All Other benefiting Programs |
| 41698* | Substance Abuse Initiative | Expenses associated with the execution of substance abuse targeted programs including the “Team Care” and the “Hub and Spoke” models | Quarterly Enrollment for Global Commitment, CHIP, and All Other benefiting Programs |

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|--------|--------------------------------------|---|---|
| 41699* | Managed Care and Compliance | Executive salary expenses associated with Program Integrity, Provider and Member Services, and the Substance Abuse initiative | Quarterly Enrollment for Global Commitment, CHIP, and All Other benefiting Programs |
| 41703* | GC Administrative Contracts | Contract Expenses associated with Administrative services charged to GC | Quarterly Enrollment for Global Commitment, CHIP, and All Other benefiting Programs |
| 41761 | HSE Infrastructure Staff w/ Level 1C | Staff Expenses related to Health Enterprise shared component design and development | Per Negotiated PMO allocation of HSE sources |
| 41763 | Exchange Level 1C non-IT Staff | Non-IT Salary and Operating costs related to the Level 1c CCIIO Exchange Grant | Direct to Exchange Level 1C (100%) |
| 41764 | Exchange Level 1C non-IT Contract | Non-IT Consulting and contractual costs related to the Level 1c CCIIO Exchange Grant | Direct to Exchange Level 1C (100%) |
| 41773 | CAQH ACA IAPD Contract | Cost associated with Vermont CAQH (Committee for Affordable Quality Healthcare) Core Operating Rules project related contract and consulting expenses | Direct to ACA CAQH (90%) |
| 41774 | TMSIS Staff | Cost associated with TMSIS project related staff and operating expenses | Direct to T-MSIS (90%) |
| 41775 | TMSIS Contract | Cost associated TMSIS project related contract and consulting expenses | Direct to T-MSIS (90%) |
| 41778* | VHC Operations Contract | Cost associated with VHC Maintenance and Operations related contract expenses | Quarterly VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP |

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| 41779* | VHC Operations Staff | Cost associated with VHC Maintenance and Operations related staff and operating expenses | Quarterly VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP |
| 41780 | VHC Eligibility – (OAPD) Contracts | Cost associated with hosting, security, and maintenance & operations of VHC Medicaid eligibility related contract expenses, eligible for 75% match | Quarterly VHC Enrollment for Medicaid, CHIP, Designated State Health Programs (DSHP) and QHP |
| 41781 | Provider 6028 IAPD Staff | Staff costs associated with the introduction of new processes or modification of existing MMIS software to eliminate gaps between current Vermont procedures under ACA Rule 6028 and the MMIS system | Per approved Provider Enrollment IAPD |
| 41782 | Provider 6028 IAPD Contracts | Contractual costs associated with the introduction of new processes or modification of existing MMIS software to eliminate gaps between current Vermont procedures under ACA Rule 6028 and the MMIS system | Per approved Provider Enrollment IAPD |

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Organizational Unit 3: Program

Nature and Extent of Services: The following Program Codes, Program Code Names, Descriptions, and Allocation Methods are for other programmatic costs associated with DVHA programs not including, salary, benefits, travel, and medical services contracts.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|------------------------------------|---|---|
| 37714 | Graduate Medical Education Payment | Graduate Medical Education Payment | Direct to Global Commitment Program |
| 41470 | State Only Expenses | Healthcare related expenditures as identified on the MMIS quarterly expenditure reports | Direct to General Fund |
| 41601 | Medicaid | Healthcare related expenditures as identified on the MMIS quarterly expenditure reports | Total Costs Across Global Commitment, Other Benefiting Programs (41601.115) (.116) GC - MCO Investments (.117) Based on CMS Invoice Billing |
| 41602 | CHIP Payments | Healthcare related expenditures as identified on the MMIS quarterly expenditure reports | Direct to CHIP - Program |
| 41605 | State-Only Pharmacy | Healthcare related expenditures as identified on the MMIS quarterly expenditure reports | Direct to General Fund |
| 41610 | HIV/INS | Healthcare related expenditures as identified on the MMIS quarterly expenditure reports | Direct to G-C –MCO Investments— HIV Drug Coverage |
| 41615 | Buy-in Part A | Medicare Part A premiums paid on behalf of Vermont residents | Total costs across GC, CHIP, and Other Benefitting Programs Based on CMS Invoice Billing |

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| | | | |
|-------|----------------------------|---|--|
| 41620 | Refugee Program | Healthcare related expenditures as identified on the MMIS quarterly expenditure reports | Direct to 99999.9009 Refugee Medical Assistance - Program |
| 41625 | Vermont Legal Aid MAP | Payments to Vermont Legal Aid for services related to the Medicare Advocacy Project | Direct to Global Commitment Program |
| 41631 | GEARWAR | Financial transactions resulting from outcome of Gearwar vs. Wilson legal action | Direct to Global Commitment Program |
| 41641 | Buy-in Part B | Medicare Part B premiums paid on behalf of Vermont residents | Total costs across GC, CHIP, and Other Benefiting Programs Based on CMS Invoice Billing |
| 41643 | Vermont Premium Assistance | Premium Assistance payments made on behalf of eligible members enrolled in a Qualified Health Plan | Direct to Global Commitment Program or Direct to General Funds, Based on validation of remittance to carrier |
| 41644 | Cost Sharing reduction | Payments made on behalf of eligible members enrolled in a Qualified Health Plan, to assist with out of pocket medical costs | Direct to General Fund |
| 41645 | DSH | Medicaid Disproportionate Share Hospital Payments | Direct to DSH |
| 41647 | Drug Rebate | Drug Rebates received based on eligible Pharmacy expenditures | Allocated to Global Commitment Program, CHIP and Other Benefiting Programs by percent of total pharmacy spend for prior 4 quarters |
| 46405 | Medicare Clawback | Per person per month payments made to CMS for Part D beneficiaries | Direct to General Fund |

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Department of Health (VDH)

I. Introduction

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

Administration appropriation

- Administration division

Public Health appropriation

- Emergency Preparedness, Response, and Injury Prevention
- Health Surveillance
- Chief Medical Examiner
- 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

VDH's mission statement is as follows:

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

Vision: Healthy Vermonters living in healthy communities.

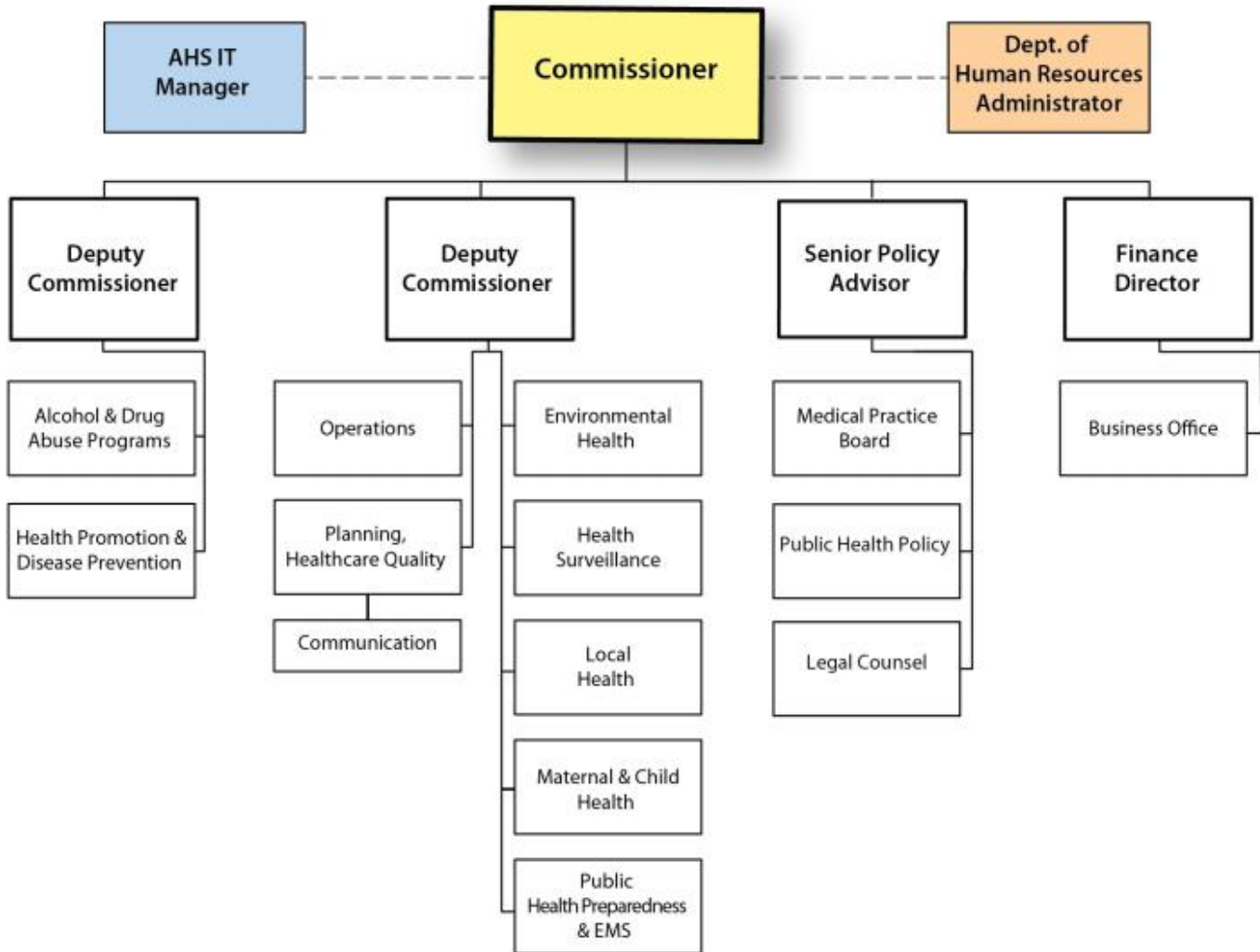
Goals:

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, the program code associated with the function, and the allocation method for each function.

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II. Organizational Chart



4.2013

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

III. Vermont Department of Health Cost Allocation Methodologies

Organizational Unit 1: Indirect Cost Allocations

Vermont Department of Health 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.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|---|---------------------------|
| 1000.1* | SWICAP | VDH allocation of Statewide Indirect Costs | Total Salaries Across VDH |
| 1000.2* | AHS Audit Unit | VDH allocation of costs related to the AHS Audit Unit | Total Salaries Across VDH |
| 1000.3* | AHS Secretary's Office | VDH allocation of costs related to the AHS Secretary's Office | Total Salaries Across VDH |
| 1000.4* | AHS Information Technology | VDH allocation of costs related to AHS Information Technology | Total Salaries Across VDH |
| 1000.5* | Financial Statement and Internal Controls Audit | VDH allocation of costs related to the Single Audit - Financial Statement and Internal Controls | Total Salaries Across VDH |
| 1000.6* | Human Services Board | VDH allocation of costs related to the Human Services Board* | Total Salaries Across VDH |
| 1000.7* | Human Resources Investigations Unit | VDH allocation of costs related to the Human Resources Investigations Unit | Total Salaries Across VDH |
| 1000.8* | AHS Policy | VDH allocation of costs related to AHS Policy | Total Salaries Across VDH |

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Organizational Unit 2: Administration

The following program codes, descriptions, and allocation methods are for costs associated with the Commissioner's Office; Information Technology Services; Health Planning; Department Operations, and the Business Office. It had been 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 until the May 16, 2013 payday. At that time the State of Vermont converted to a new payroll system. The only Cost Allocation implication of this new payroll system is that employees are given a limited number of program codes from which to choose. However, the practice is to add program codes to employees' list of available codes upon request so that any program code is made available to any employee. There have not been changes in the pattern of time reporting as a result. These program codes are shown within this Division as an approximate guide to the most likely users of these codes.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|------------------------------------|--|--|
| 37999 | SIM YR 3 Testing – Staff | Direct Staff and operating costs that are related to SIMS activities for YR 3 testing | Per Approved SIM NOA |
| 39001* | Administration-Departmental | Costs associated with overall management of VDH including: legal services, policy, development, planning, public affairs, administrative support, financial management and Board of Health activities. | Total Salaries Across VDH |
| 39009* | Administration-Leave Time | Time code for all staff paid for time not worked such as vacations, holidays, sick leave, personal time and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |
| 39011 | Public Health Training Center | Costs associated with VDH participation in the New England Public Health Workforce Development Alliance. | Direct to Public Health Training Center |
| 39012 | Organ Donation | All costs of grants from the Department of health related to organ donation. | Direct to Organ Donation. |
| 39013 | Corrections Dept Quality Oversight | Expenditures associated with Quality Oversight of the Corrections Department. | Direct to Department of Corrections Quality Oversight |

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| 39014* | Duty Officer Time | Standby time and work time associated with assignment as Duty Officer outside of normal business hours. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39016* | Patient Safety Surveillance | All costs associated with activities related to patient safety surveillance and improvement system. | Allocated 50% to Global Commitment Investment and 50% to State Funds |
| 39023 | Hospital Licensing | Expenses related to license applications, developing rules and monitoring compliance with same, issuance of licenses and other activities. | Direct to Hospital Licensing |
| 39040* | 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 Global Commitment Investment. |
| 39042* | 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 Global Commitment Administration |

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| 39043* | 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 Global Commitment Investment. |
| 39044 | Prescription Drug Education | Payments to support an evidence-based prescription drug education program, including Academic Detailing teams, for health care professionals. | Direct to Prescription Drug Education (Evidence-Based Education and Advertising special fund) |
| 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 |
| 39048 | Building a Culture of Health | All costs of those activities associated with incorporating factors associated with quality-of-life into the State's analysis of health resources and expenditures. | Direct to Building a Culture of Health |
| 39523* | Poison Control and Surveillance Activities | Activities associated with poison control and surveillance, including services currently provided by the Northern New England Poison Center. | Allocated 27% to Global Commitment Admin based on the percentage of the State's population on Medicaid, and then to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |

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| 39530 | Primary Care | Costs related to Primary Care Cooperative Agreement, including personnel, operating expenses and grants. | Direct to Primary Care |
| 39532 | Rural Health Office | Costs associated with activities related to the establishment and operation of a State Office of Rural Health. | Direct to Rural Health Office |
| 39534 | 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 Grant |
| 39538 | Hospital Preparedness | Costs associated with a program to support hospitals and other health care entities in preparing public health emergencies. | Direct to Hospital Preparedness |
| 39539* | Vermont Loan Repayment | Costs associated with grants to support educational loan repayment to health care professionals. | Direct to Global Commitment Investment. |
| 39541 | 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 Grant |
| 39546 | State Loan Repayment Program | All costs of those activities associated with the State Loan Repayment Program, funded under the grant from HRSA | Direct to State Loan Repayment Program. |

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| 39574 | Oral Health Workforce | All personnel costs and associated expenditures for the Public Health Dental Hygienist covered by the UVM Medical Center grant. | Direct to Oral Health Workforce |
| 41639 | ICD-10 Contractual Costs | Contractual work associated with the ICD-10 planning & Implementation | Direct to ICD-10-IAPD |
| 41640 | ICD-10 - Staff | Direct staff work associated with the ICD-10 planning & Implementation | Direct to ICD-10-IAPD |
| 41642* | MMIS - DDI Staff | Staff work that is related to the replacement of the current MMIS. Medicaid claims payment system. Also known as Medicaid Enterprise System (MES) Design. | Direct to CMS-MMIS |
| 41693 | HIT: Implementation and Operation Staff. | Direct Staff work associated with State Medicaid Health Plan (SMHP) - HIT Implementation and Operation: HIE, EHR Incentive program, and Public Health | Direct to CMS-HIT |
| 41694 | HIT: Implementation and Operation Contract | Contractual work associated with State Medicaid Health Plan (SMHP) - HIT Implementation and Operation: HIE, EHR Incentive program, and Public Health | Direct to CMS-HIT |

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Organizational Unit 3: Emergency Preparedness, Response, and Injury Prevention

The following program codes, descriptions, and allocation methodologies are for costs primarily associated with the following programs: Public Health Emergency Preparedness, and Injury Prevention (e.g., child passenger safety, elderly falls prevention) 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 program codes are shown within this Division as an approximate guide to the most likely users of these codes.)

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|---|--|
| 39101* | Office of Public Health Preparedness Administration | Staff time and operating costs associated with overall administration of the Office of Public Health Preparedness. | Total Salaries across Office of Public Health Preparedness. |
| 39109* | Office of Public Health Preparedness Leave Time | Time code for time not worked, such as vacations, holidays, sick leave, personal leave, and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |
| 39171 | 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 |
| 39174 | PHEP Ebola Supplement | All Costs associated with a project to support accelerated public health preparedness planning and response for Ebola. | Direct to PHEP Ebola Supplement |

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| 39179* | EMS Special Fund | All costs to improve EMS services in Vermont through training and other activities underwritten by the insurance companies via a Special Fund. Costs eligible for Special Funds will not receive GC reimbursement. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39181* | 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. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39182* | 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. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |

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| 39184 | EMS – Highway Safety | Costs associated with the EMS Highway Safety Program. | Direct to EMS Highway Safety |
| 39183 | EMS for Children | Staff time, contracts and other payments for the EMS for Children project. | Direct to EMS for Children |
| 39187 | 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 |
| 39189 | Siren MOU with DPS | All costs associated with the SIREN project funded by the VT Dept. of Public Safety | Direct to IDT SIREN. |
| 39190 | 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 |
| 39191 | Opioid Antagonist Pilot Program | All Costs associated with the development and administration of a statewide pilot program for the purpose of distributing opioid antagonists as required by Act 75 of 2013 | Direct to Opioid Antagonist Pilot Program |
| 39192 | Evidence-Based Fall Prevention Program | All costs of those activities associated with decreasing the number of falls, injuries, hospitalizations and deaths among older adults and older adults with disabilities. | Direct to Evidence-Based Fall Prevention Program |
| 39270 | PH Emergency Response | All costs associated with activities in response to public health emergency events or exercises. | Direct to PHEP ELC Ebola Supplement |

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| 39543 | Hospital Preparedness Program Ebola | All costs associated with a program to support hospitals and other health care entities in preparing for Ebola public health emergencies | Direct to Hospital Preparedness Program Ebola |
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Organizational Unit 4: Health Surveillance

The following program codes, descriptions, and allocation methodologies are for costs associated the Health Surveillance Division.

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.
- Research and Statistics - the analysis, collection, and reporting of data, research, and records that inform and guide our work to protect and promote the health of Vermonters. These resources provide the public with access to information about population health status and contributors to 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 program codes are shown within this Division as an approximate guide to the most likely users of these codes.)

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|------------------------------------|---|--|
| 37717* | IE HC 90/10 Staff | Staff work related to Health Enterprise Integrated Eligibility DDI and IV&V | Per Approved Health Enterprise IAPD |
| 39049 | Antibiotic Stewardship | Costs associated with antibiotic resistance and stewardship | Direct to Antibiotic Stewardship |
| 39165 | 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 |
| 39230 | Immunization VTrcks | All costs associated with a project to integrate the CDC Vaccine Tracking System (VTrcks) with the Vermont Immunization Registry | Direct to Immunization VTrcks |
| 39231* | Vermont Vaccine Purchasing Program | All costs associated with Providing vaccines for all Vermonters | Direct to Vermont Vaccine Purchasing Program |
| 39232* | Medicaid Vaccines for Adults | Costs associated with providing vaccines to Medicaid eligible Adults | Direct to Global Commitment Program |

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| 39240 | Epi Lab Capacity non-PPHF | All Costs of those activities of the Epi Lab Capacity program which are not funded by Prevention and Public Health Funds | Direct to Epi Lab Capacity |
| 39241 | ELC Ebola Supplement | All costs associated with a project to enhance healthcare infection control and laboratory biosafety under the Ebola supplement to the Epidemiology and laboratory Capacity Grant | Direct to ELC Ebola Supplement |
| 39301* | Health Surveillance Administration | Staff time and operating costs associated with overall administration of the Health Surveillance Division | Total Salaries Across Health Surveillance Program |
| 39309* | 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. | Quarterly Results of Individual Employees Positive Reporting |
| 39311 | Vaccines | Vaccine purchases | Direct to Vaccines |
| 39313 | Vaccinations | Costs of administration of vaccines to individuals by nurses, except when these activities are included in a more specific cost center, for example, Rabies Control or Hepatitis B. | Direct to Vaccines |
| 39314 | 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 |
| 39315 | 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 |

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| 39316 | 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 |
| 39317* | 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. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39318* | Epidemiology – Outbreak Management | Costs associated with episodic outbreak control. Use specific control or investigation codes, if available. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39322 | 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 |
| 39323 | Refugee Health | Costs associated with refugee health activities. | Direct to Refugee Health |
| 39324 | 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 |
| 39325 | State-funded HIV Prevention Activities | Payments to service organizations using State funds appropriated for HIV Prevention activities. | Direct to AIDS Services Support |
| 39327 | AIDS Surveillance | Costs associated with activities having to do with active surveillance for AIDS or HIV infection. | Direct to AIDS Surveillance |

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| 39328 | 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 |
| 39329 | HIV Care | Costs associated with the Ryan White (Title II) HIV Care project. | Direct to HIV Care |
| 39330 | AMAP Payments to EDS | Payments to EDS for their reimbursement on behalf of the AIDS Medication Assistance Program. | Direct to HIV Care |
| 39331 | Sexually Transmitted Diseases | Costs of the STD program, time, supplies, travel, etc., not to include AIDS. | Direct to Sexually Transmitted Diseases |
| 39332* | 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 Allocated to Tuberculosis Control and Global Commitment Investment based on availability of Tuberculosis Control grant award. |
| 39333* | TB Medical Services | Costs of clinical services and medication provided to tuberculosis patients in Vermont. | Allocated 90% to Global Commitment Investment and 10% to State Funds based on the Medicaid share enrolled percent of total TB Patients. |
| 39334 | Rabies Control | Staff time and other costs associated with prevention of rabies in humans and animals. | Direct to Rabies Control |
| 39336 | 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 |

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| 39344* | Enhanced Immunization Program | Time, expenses and vaccine purchases associated with the Enhanced Immunization Program | Direct to Global Commitment Investment. |
| 39345 | 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 |
| 39347 | Adult Viral Hepatitis | All activities associated with the prevention of adult viral hepatitis | Direct to Adult Viral Hepatitis |
| 39349 | Epi Lab Capacity PPHF | All costs funded through the Prevention and Public Health Fund (PPHF) and associated with a project to build and strengthen the Department's epidemiology, laboratory and health information systems. | Direct to Epi Lab Capacity |
| 39351* | Epidemiology – Chronic Disease | Costs associated with supervising of performing activities related to chronic disease epidemiology. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39352 | Chronic Disease Epidemiologist | Salary and fringe costs of the position of Chronic Disease Epidemiologist. | Direct to Epidemiology |
| 39355 | Asthma | Costs associated with asthma planning and epidemiology. | Direct to Asthma |
| 39356 | Cancer Registry | Costs associated with the Vermont Cancer Registry. | Direct to Cancer Registry |
| 39365 | Komen Breast Services | Costs of mammograms for women aged 40-44. | Direct to Komen Breast Services |
| 39381* | Vital Registration | Costs associated with the registration, collection, preservation, amendment and certification of vital records and the processing and publication of vital statistics. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |

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| 39382* | Vital Statistics | Costs associated with the analysis and dissemination of vital statistics. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39384* | 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. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39385 | 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 |
| 39386 | 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 |
| 39387 | Hospital Data Council/Ambulatory Surgery Study | Staff time and other costs associated with producing data for this HDC contract. | Direct to Hospital Data Council |
| 39388 | 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 |
| 39390 | 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 |
| 39391 | Population/Estimates | Costs associated with activities | Direct to Population |
| 39392 | Population/Other | Staff time and other costs of responding to requests for information related to the population estimates. | Direct to Population |

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| 39393 | Health Risk Survey | Staff time and other costs associated with the Health Risk Survey. | Direct to Health Risk Survey |
| 39394 | 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 |
| 39395 | Pregnancy Risk Assessment Monitoring | Costs associated with planning, developing and implementing a pregnancy risk assessment monitoring system. | Direct to Pregnancy Risk Assessment Monitoring |
| 39397 | 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. |
| 39398 | Advanced Directives Registry | All costs associated with advanced directives registry. | Direct to Advanced Directives Registry |
| 39432* | Laboratory Certification | Costs and activities associated with certification of other laboratories, except CLIA activities. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39434* | Laboratory Administration | Costs and activities associated with the overall administration of the laboratory which are 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. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39451* | Laboratory Drinking Water, Microbiology | Costs and activities associated with microbiological water testing. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |

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| 39452* | Laboratory Drinking water, Organic | Costs and activities associated with organic testing of drinking water related to VOCs and THMs (EPA method 524.2). | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39453* | Laboratory – Drinking Water, Inorganic, Other | Costs and activities associated with organic drinking water testing except for VOCs and THMs. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39454* | Laboratory Drinking Water, Inorganic | Costs and activities associated with inorganic testing of drinking water for metals. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39455* | Laboratory – Inorganic Drinking Water, Other | Costs and activities associated with inorganic testing of drinking water except for metals and radiological testing. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39456* | Laboratory – Miscellaneous Chemistry | Costs and activities associated with environmental lead, special projects and other chemistry work that is not described under other codes. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |

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| 39458* | Urine Drug Program | Time and materials for urine drug analysis of clinical and correction samples | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39470* | Laboratory Radiochemistry | Costs and activities associated with radiochemistry water testing. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39471 | Laboratory – Radiological, Vermont Yankee | Costs and activities associated with Vermont Yankee surveillance. | Direct to VRERP |
| 39472* | Laboratory – Radiological, Other | Costs and activities associated with radiological testing except water and Vermont Yankee surveillance. | Direct to Laboratory |
| 39481* | Laboratory Microbiology | Costs and activities associated with serology such as hepatitis, HIV, measles, mumps, rubella, syphilis and similar tests. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39482* | Laboratory – Diagnostic Microbiology, Other | Costs and activities associated with parasitology and virology or other diagnostic microbiology excluding serology. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |

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| 39484 | 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 |
| 39485* | Laboratory – Clinical Toxicology | Costs and activities associated with clinical toxicology, including blood lead testing. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39490 | 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 |
| 39515 | Injury Prevention Program | Costs associated with the Injury Prevention Program. | Direct to Injury Prevention Program |
| 39526 | 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 |
| 39537 | Minority Health | All costs associated with implementing the objectives of the Department's Minority Health Strategic Plan. | Direct to Minority Health |
| 39544 | 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 |
| 39545 | Domestic and Sexual Violence Prevention | To support the development of a state prevention plan on domestic and sexual violence. | Direct to Domestic and Sexual Violence Prevention |

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Organizational Unit 5: Chief Medical Examiner

The Medical Examiner's Office has statutory authority under Vermont law to investigate deaths when a person dies:

- from violence; suddenly, when in apparent good health; unattended by a physician or a recognized practitioner of a well-established church; by casualty; by suicide; as a result of injury; in jail or prison or in a mental institution; in any unusual, unnatural or suspicious manner; or
- in circumstances involving a hazard to public health, welfare, or safety.

If the Chief Medical Examiner deems it necessary, and in the interest of public health, welfare and safety, or in the furtherance of the administration of the law, the Chief Medical Examiner has authority under Vermont law to order an autopsy to be performed. Autopsy reports may be provided to next of kin.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|-----------------------------------|--|-------------------------------|
| 39161 | Medical Examiners Program | Expenses incurred in performing autopsies and maintaining the Office of the Chief Medical Examiner. | Direct to Medical Examiner |
| 39164 | 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 |
| 39167 | Cremation Permits | All receipts and disbursements of cremation permit fees from funeral homes, etc. to assistant medical examiners. | Direct to Medical Examiner |
| 39168 | 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 |

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Organizational Unit 6: Maternal and Child Health

The following program codes, descriptions, and allocation methodologies are costs associated with the various programs in support of Maternal and Child Health, including the following:

- 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.
- 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 program 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 Medicaid Administration Claiming (MAC) program, code 39758. A key element in this program is the web-based random moment time study (RMTS) designed and implemented by the University of Massachusetts, our contractor, in cooperation with the Vermont Department of Health (VDH). VDH submitted descriptions of the RMTS to the Division of Cost Allocation and then to CMS in 2010 and 2011. There were a series of phone conversations with CMS and revisions and re-submission of documents describing the implementation of the RMTS during 2011. A letter approving Vermont's RMTS was sent by CMS Region I on May 16, 2013. Vermont did not receive this letter, however, until a copy was forwarded by DCA on November 25, 2014. The CMS letter approved the RMTS subject to ten conditions. Vermont accepts these conditions. Specifically,

1. Vermont agrees to amend this Cost Allocation Plan whenever there is a change from the RMTS methodology approved by CMS.
2. Vermont agrees that any CMS guidelines related to RMTS or other elements of our claims will be promptly incorporated into our program on a prospective basis.
3. Vermont agrees to seek CMS advance review of any forms or documents that are subsequently developed for this program.
4. Vermont agrees to continue to monitor the overall implementation of the RMTS and to review all claims submitted.
5. Vermont agrees to monitor the RMTS for appropriateness of the use of activity codes by coders and for the proper implementation of the RMTS methodology.
6. Vermont agrees to report to CMS any changes in: the number of RMTS moments to be included in the sample (as described in the "VDH Implementation Guide for Statewide RMTS," Section 1(B) and Appendix A, Section II); the statistical validity of the sample selection and sample results; any changes in the criteria for inclusion of contractual staff in the sample; and any changes in services or administrative activities performed.
7. Vermont agrees to provide oversight of any outside entity contracted to operate or monitor the time study, as described in the "VDH Implementation Guide for Statewide RMTS," Section II, "Oversight and Monitoring."
8. Vermont agrees to submit any changes from the approved plan to CMS prior to implementation. Any such changes will be submitted as a change to this Cost Allocation Plan.
9. Vermont agrees that any costs claimed are subject to review or audit.
10. Vermont agrees to monitor the time study to assure proper use of activity codes and proper application of the methodology.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|---|---|
| 37995 | Race to the Top-ELC Grant | All costs associated with a State-wide project to improve early learning and development programs for children with high needs | Direct to Race to the Top |
| 39517 | 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 |
| 39540 | Rape Prevention and Education Program | Costs associated with a program for rape prevention and education. | Direct to Rape Prevention and Education Program |
| 39551 | 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 |
| 39552 | Family Planning – SSBG | Costs associated with grants and contracts for the family planning program. | Direct to Social Services Block Grant |
| 39553* | Family Planning | Costs associated with grants and contracts for the family planning program funded by General Funds. | Direct to Global Commitment Investment. |
| 39554* | Family Planning Look-alike | Grant payments in support of the family planning Medicaid initiative | Direct to Global Commitment Investment. |
| 39581 | 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 |
| 39582 | CSHN Payments to HP for Treatment Services | CSHN payments to HP for authorized therapies. | Direct to MCH Grant |
| 39583 | CSHN – Case Management | Staff positions and operating costs directly related to case management as defined in the SPRANS grant application. | Direct to MCH Grant |

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| 39584 | 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 |
| 39585 | 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 |
| 39586 | CSHN – Myelo Clinic | Staff time, clinical costs and treatment costs related to children followed through CSHN Myelo Clinic. | Direct to MCH Grant |
| 39587 | CSHN – Hearing Impairment | Expenses directly related to the diagnosis and treatment of hearing impairment, including contractual services, hearing aids, etc. | Direct to MCH Grant |
| 39588 | HOP | Staff time and other costs related to the hearing screening program for infants and toddlers. | Direct to MCH Grant |
| 39589 | 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 |
| 39590 | CSHN – Epilepsy | Costs directly related to the diagnosis and treatment of epilepsy and seizure control, including physician services and pharmacy. | Direct to MCH Grant |
| 39591 | CSHN – Metabolic | Staff time, clinical costs and treatment costs directly related to diagnosis and treatment of metabolic disorders. | Direct to MCH Grant |
| 39592 | CSHN – Cystic Fibrosis | Costs associated with the diagnosis and treatment of cystic fibrosis. | Direct to MCH Grant |
| 39593 | CSHN – Special Services | Costs associated with congenital conditions not covered by other, more specific, Handicapped Children Services programs. | Direct to MCH Grant |
| 39594 | Jamie Rosen Fund | Costs associated with the care of children within the guidelines of the Rosen Fund as authorized by the CSHN Director. | Direct to Jamie Rosen Fund |

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| 39595 | CSHN – Cardiac | Costs associated with a pediatric congenital heart condition. | Direct to MCH Grant |
| 39596 | Child Development Clinic | Costs associated with the Child Development Clinic. | Direct to MCH Grant |
| 39597 | ILEHP | Staff time and other costs associated with the Interdisciplinary Leadership Education for Health Professionals program. | Direct to MCH Grant |
| 39598 | NICU | Staff time and other costs related to services for children at the Newborn Intensive Care Unit. | Direct to MCH Grant |
| 39599* | Renal Disease | Payments made to the Vermont Kidney Association for Renal Patient Fund. | Direct to Global Commitment Investment. |
| 39600 | Part C | Costs associated with the implementation of an early intervention program for children aged 0-36 months. | Direct to Part C |
| 39603 | 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 |
| 39606 | 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 |
| 39607* | ILEHP Services | All costs associated with grant payments to UVM for ILEHP services for Global Commitment eligible children. | Direct to Global Commitment Administration |
| 39608 | Integrated Community Systems for CSHCN | All costs of those activities associated with the Integrated Community Systems for CSHN, funded under a grant from HRSA | Direct to Integrated Community Systems for CSHCN |
| 39610 | Autism | All costs associated with a project to improve services for children youth with Autism Spectrum Disorder and other developmental disabilities | Direct to Autism |
| 39701* | Maternal & Child Health Division Administration | Staff time and operating costs associated with overall administration of the Maternal Child Health Division. | Total Salaries Across MCH/ OLH |
| 39709 | MCH/OLH Leave Time | Time code for time not worked such as vacations, holidays, sick leave, personal leave, and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |

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| 39719 | WIC MIS Planning & Implementation | Costs associated with Planning for replacement of the legacy WIC MIS system and transfer & implementation of the chosen replacement system | Allocated to WIC MIS Planning & Implementation and Global Commitment Investment based on availability of WIC MIS Planning & Implementation grant award. |
| 39721 | WIC Supplemental Food | Costs of WIC food and formula paid directly to dairies and drug companies. | Direct to WIC Supplemental Food |
| 39725* | WIC General Administration | Costs (direct or indirect) generally considered to be 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. | Allocated to WIC Admin and Global Commitment Investment based on availability of WIC Admin grant award. |
| 39731* | WIC Breastfeeding Peer Counselor Project | All costs associated with development and implementation of a WIC breastfeeding peer counselor demonstration project. | Allocated to Breastfeeding Peer Counselor Project and to Global Commitment Investment based on availability of WIC Breastfeeding Peer Counseling grant award. |
| 39735 | WIC Infrastructure | All Costs associated with a WIC Infrastructure funded under a grant from the USDA | Direct to WIC Infrastructure |
| 39736 | 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 |
| 39738 | WIC2Five | All costs associated with a project to use mobile health education messaging to support WIC program retention | Direct to WIC2Five |

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| 39737 | WIC EBT Planning | All costs associated with grant-funded WIC EBT planning activities | Direct to WIC EBT Planning. |
| 39741 | 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 |
| 39742 | 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 |
| 39743 | Newborn Screening | Staff and contract activity related to the Newborn Screening Program. | Direct to Newborn Screening |
| 39758* | School Based MAC | Payments to schools of Federal Global Commitment funds to reimburse costs of the School Based MAC | Direct to Global Commitment Administration |
| 39759* | VCHIP Non-SPMP | 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 Administration |
| 39760* | VCHIP SPMP | All SPMP Costs associated with VCHIP | Direct to Global Commitment Administration |
| 39790 | 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 |
| 39792 | 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 |
| 39793 | 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 |

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Organizational Unit 7: Health Promotion and Disease Prevention

The following program codes, descriptions, and allocation methodologies are costs associated with the Health Promotion and Disease Prevention division: Tobacco Control, Health Promotion, 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 program codes are shown within this Division as an approximate guide to the most likely users of these codes.)

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|---|----------------------------------|
| 39354 | Arthritis | Costs associated with arthritis planning and epidemiology. | Direct to Arthritis |
| 39357 | Breast and Cervical Cancer Screening Services | Costs associated with screening services provided under the breast and cervical cancer early detection program. | Direct to Cancer Screening |
| 39358 | Breast and Cervical Cancer Public Education Activities | Costs associated with public education activities under the breast and cervical cancer early detection program. | Direct to Cancer Screening |
| 39359 | Breast and Cervical Cancer Case Management Services | Costs associated with case management services provided under the breast and cervical cancer early detection program. | Direct to Cancer Screening |
| 39360 | Breast and Cervical Cancer Case Professional Education Activities | Costs associated with professional education and quality assurance activities under the breast and cervical cancer early detection program. | Direct to Cancer Screening |
| 39361 | Breast and Cervical Cancer Case Evaluation Activities | Costs associated with program evaluation activities under the breast and cervical cancer early detection program. | Direct to Cancer Screening |
| 39362 | Ladies First Donations | All receipts and costs associated with donations for the Ladies First Program - non Komen Foundation fund related. | Direct to Ladies First Donations |
| 39363 | Ladies First Education and Marketing | Costs of education and marketing for the Ladies First program. | Direct to Ladies First |
| 39368 | Wisewoman Administration | Costs not allocated to outreach, screening, case management or intervention. | Direct to Wisewoman |
| 39369 | Wisewoman Intervention | Costs associated with activities which may improve participants' awareness of cardiovascular disease risk. This includes counseling, nutrition classes and physical activity classes. | Direct to Wisewoman |

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| 39370 | Wisewoman Screening | Costs associated with activities that collect medical information and provide professional assessments of individual health profiles. | Direct to Wisewoman |
| 39371 | Wisewoman Case Management | Costs associated with activities that assure high-risk individuals receive required attention. | Direct to Wisewoman |
| 39372 | Wisewoman Outreach | Costs associated with outreach activities. | Direct to Wisewoman |
| 39374 | Breast and Cervical Cancer Administration | Costs allocated to assure infrastructure development and mortality in New England. | Direct to Cancer Screening |
| 39376 | Comprehensive Cancer Control | Costs associated with the activities of the Comprehensive Cancer Control component of the Cancer Prevention and Control Program. | Direct to Comprehensive Cancer Control |
| 39377 | Cervical Cancer Diagnosis and Treatment | All costs associated with cervical cancer diagnosis and treatment. | Direct to Cervical Cancer. |
| 39501* | HPDP Administration | Staff time and operating costs associated with overall administration of the Health Promotion and Disease Prevention Division. | Total Salaries Across Health Promotion & Disease Prevention |
| 39509* | HPDP Leave Time | Time code for time not worked, such as vacations, holidays, sick leave, personal leave, and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |
| 39511 | 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 |
| 39512 | Education and Community Services | Costs associated with promotion, prevention and surveillance activities for communities or special populations. | Direct to PHHS Block Grant |
| 39513 | Conference Costs | Costs associated with conferences underwritten by the Department to be offset by conference fees or transfers. | Direct to Conference Costs |
| 39521 | Obesity Prevention | Costs associated with a program for nutrition and physical activity to prevent obesity and other chronic diseases. | Direct to PHHS Block Grant |
| 39527 | FINI SNAP Incentive | All costs of those activities and staff associated with the Food Insecurity Nutrition Incentive grant. | Direct to FINI SNAP Incentive |

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| 39563* | 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 |
| 39564* | Dental Services – Global Commitment Administration | Costs associated with claims processing for the Global Commitment program. | Direct to Global Commitment Administration |
| 39565 | Dental Services – All Other Programs | Costs associated with General Assistance, 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 |
| 39566* | 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 |
| 39567 | 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 |
| 39569* | Fluoridation | Costs associated with school and community fluoridation, promotion, systems management time spent preparing contracts and correspondence. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39575* | Dental Public Health in D.O.'s | All costs associated with public health dental hygienists in district offices. | Direct to Global Commitment Administration |
| 39576 | 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 |
| 39621 | Tobacco Control | Costs associated with the Tobacco Prevention and Control project. | Direct to Tobacco Control |
| 39623 | 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 |

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| 39626* | Tobacco Countermarketing - GC Investment | Costs associated with tobacco countermarketing activities | Direct to Global Commitment Investment. |
| 39627 | Tobacco Community Based | Costs associated with tobacco community based programs. | Direct to Tobacco Settlement |
| 39628 | Tobacco Countermarketing | Costs associated with tobacco countermarketing activities. | Direct to Tobacco Settlement |
| 39629 | Tobacco Cessation | Costs associated with tobacco cessation programs. | Direct to Tobacco Settlement |
| 39630 | Tobacco Statewide | Costs associated with tobacco statewide programs. | Direct to Tobacco Settlement |
| 39631 | Tobacco Surveillance and Evaluation | Costs associated with tobacco surveillance and evaluation programs. | Direct to Tobacco Settlement |
| 39634 | Tobacco Control Supplement - CDC | All costs associated with Tobacco Control Supplement funded activities | Direct to Tobacco Control Supplement - CDC |
| 39635 | 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 |
| 39637 | Public Health Actions (1305) | All costs associated with funding to be used to prevent and manage obesity and associated chronic conditions with an emphasis on nutrition, activity, hypertension and diabetes awareness. | Direct to Public Health Actions (1305) |
| 39638 | Public Health Actions-Heart Disease (1305) | All costs associated with enhanced heart disease & stroke prevention awareness | Direct to Public Health Actions (1305) |
| 39639 | Public Health Actions – Diabetes (1305) | All costs associated with enhanced diabetes awareness | Direct to Public Health Actions (1305) |
| 39640 | Public Health Actions – School Health (1305) | All costs associated with school health awareness | Direct to Public Health Actions (1305) |
| 39641 | Public Health Actions - Obesity (1305) | All costs associated with obesity prevention | Direct to Public Health Actions (1305) |
| 41320 | SNAP Nutrition Education | All costs Associated with the development and implementation of Vermont's Supplemental Nutrition Assistance Program Education (SNAP-Ed) nutrition education state Plan. | Direct to IDT SNAP Nutrition Education |

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Organizational Unit 8: Office of Local Health

The following program codes, descriptions, and allocation methodologies are costs associated with the twelve District Offices around the State.

- The 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
 - 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;

(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 program codes are shown within this Division as an approximate guide to the most likely users of these codes.)

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---------------------------------------|--|---|
| 39702* | Office of Local Health Administration | District Office (DO) staff time and other DO costs attributable to completion of administrative functions in support of VDH programs, including office-level planning and goal-setting (not related to a program); staff meetings (not program specific); supervision; general correspondence, paperwork, budget tasks and non-program-specific public meetings, trainings, workshops, and conferences, etc. | Total Salaries Across VDH |
| 39709* | MCH/OLH Leave Time | Time code for time not worked such as vacations, holidays, sick leave, personal leave, and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |
| 39711* | Clinic Activities – SPMP | Time of skilled medical personnel and other costs related to clinic services including intake, assessment, diet screening, nutrition education and food delivery administration. This cost center also includes activities performed by directly supporting staff providing functions supporting the activities above. | Allocated to Global Commitment Administration and to WIC Administration based on Medicaid Eligibility Rate for WIC Clients. |

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| 39712* | Clinic Activities – Non-SPMP | Time of staff other than skilled professional medical personnel and other costs related to clinic services, including intake, assessment, diet screening, nutrition education and food delivery administration. | Allocated to Global Commitment Administration and to WIC Administration based on Medicaid Eligibility Rate for WIC Clients. |
| 39722* | WIC Client Services | Costs expended to deliver food and other client services and benefits. Examples include: WIC staff salaries/benefits and medical supplies and equipment necessary to conduct diet and health assessments required in the certification process, salary/benefits of WIC staff that issue food instruments and explain their use. WIC staff salary/benefits and other costs necessary to refer clients to other health care and social services, to coordinate services with other programs, to participate in activities which promote a broader range of health and social services for participants and to conduct the impact of WIC on its participants. | Allocated to WIC Admin and Global Commitment Investment based on availability of WIC Admin grant award. |
| 39723 | WIC Nutrition Education | Costs associated with all WIC nutrition education activities. | Direct to WIC Admin |
| 39724* | 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. | Allocated to WIC Admin and Global Commitment Investment based on availability of WIC Admin grant award. |
| 39744 | 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 |
| 39745 | 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 |
| 39746 | 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 |

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| 39747 | 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 |
| 39749 | OLH Maternal & Child Health Coordinators | Costs associated with staff time and expenses related to MCH coordination in Local Health District Offices | Direct to MCH Grant |
| 39750* | 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 Administration |
| 39751* | 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 |

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| 39756* | 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 Administration |
| 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; 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 | Direct to Global Commitment Administration |

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| | | clients and arranging transportation; eligibility determination; legal services including administrative appeals; and contract management. | |
| 39766 | 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 |
| 39771* | 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 |
| 39772* | EPSDT Systems/Infrastructure Building (SPMP) | 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 |
| 39773* | 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 |
| 39774* | 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 |
| 39775* | 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 |

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| 39776* | 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 |
| 39778* | 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 |
| 39780 | 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. |
| 39030* | 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 Global Commitment Investment. |
| 39032* | 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 Global Commitment Investment and Global Commitment Administration (Based on Medicaid eligible population as a % of the total state population .) |
| 39039 | Cross Jurisdictional Sharing (CJS) Mini Grant | All costs of those activities and staff associated with the CJS Mini Grant. | Direct to CJS Mini Grant |

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Organizational Unit 9: 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 program codes, descriptions, and allocation methodologies are for costs associated with the Board of Medical Practice.

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|-------------------------------------|---|--|
| 39020 | Medical Practice Board | Costs associated with the Medical Practice Board except those costs specifically described elsewhere. | Direct to Medical Practice Board. |
| 39021 | Vermont Practitioner Health Program | Costs associated with the Vermont Medical Society. | Direct to Medical Practice Board. |
| 39029 | Medical Practice Board Leave Time | Time code for time not worked, such as vacations, holidays, sick leave, personal leave and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |

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Organizational Unit 10: Environmental Health

The following program codes, 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 program codes are shown within this Division as an approximate guide to the most likely users of these codes.)

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|---|--|
| 39111 | Environmental Toxicology – General | All costs associated with the investigation or control of environmental toxins, which cannot be coded to a more specific cost center. | Direct to Environmental Toxicology |
| 39112 | Fish Testing | Costs associated with testing fish from Vermont waters for mercury | Direct to Fish Testing |
| 39115 | Indoor Radon Surveillance | Cost associated with providing information to general public, contractors, etc., concerning basic description of radon and methods of abatement of high levels of radon. Includes attendance at workshops and seminars concerning joint State/EPA radon activities. Extensive mailings may be involved. | Direct to Indoor Radon Surveillance |
| 39118 | Act 125 IAQ Schools | Costs associated with Act 125 legislations. | Direct to Asthma |
| 39119 | Lead Investigation | Staff time and other costs associated with investigating sources of exposure for severely lead poisoned children. | Direct to Lead Investigation |
| 39120* | Healthy Homes Case Management & Outreach | All costs associated with the Healthy Homes activities, including case management for children with elevated lead levels and community outreach and education. Follow-up activities for Global Commitment-eligible clients are coded to EPSDT Administration functions. | Direct to Global Commitment Investment. |
| 39121 | 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 |

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| 39122* | 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 | Direct to Global Commitment Investment. |
| 39123 | 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 |
| 39124 | Lead Poisoning Prevention & Surveillance | Costs associated with the CDC Lead Poisoning Prevention & Surveillance grant. Activities include data surveillance, community outreach and education, and prevention activities. | Direct to Lead Poisoning Prevention |
| 39125 | 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 |
| 39126 | 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 |
| 39127 | 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 |
| 39128 | 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 |
| 39129 | Health Officer Assistance | Costs associated with any work dealing with Health Officers or local health issues. | Direct to PHHS Block Grant |
| 39132 | Potassium Iodide Distribution | All staff time and other costs associated with distribution of potassium iodide. | Direct to VRERP |
| 39136 | ABLES | All costs and receipts associated with the Adult Blood Lead epidemiology Surveillance Program from CDC. | Direct to ABLES |
| 39137 | 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 |

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| 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 |
| 39139 | PFOA response Bennington County | All costs associated with the public health response to the perfluorooctanoic Acid (PFOA) contamination incident in Bennington County | Direct to PFOA response Bennington County |
| 39140 | Chemical Disclosure Program | All Costs associated with the management and operation of the Chemicals of High Concern to Children program. | Direct to Chemical Disclosure Program. |
| 39141 | Support for Public Drinking Water Programs (SPDWP) | All costs of those activities to improve drinking water program efficacy. | Direct to Support for Public Drinking Water Programs (SPDWP) |
| 39142 | BRACE Climate Change | All costs of those activities and staff associated with the Building Resilience Against Climate Change grant from the CDC. | Direct to BRACE Climate Change |
| 39151 | 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 |
| 39152 | 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 and Lodging |
| 39153 | Food and Lodging – Data Management | Cost associated with computer time, data entry, programming, work with programmer and statistician, data retrieval, etc. | Direct to Food and Lodging |
| 39154 | 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. |
| 39155 | 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 |

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| 39156 | National Retail Food Regulatory Program Standards (NRFRPS) | All costs of those activities to advance conformance with the elements of retail standards. | Direct to National Retail Food Regulatory Program Standards (NRFRPS) |
| 39210 | 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 |
| 39211 | 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 |
| 39212 | Emergency Response Plan–VT Yankee Post-Close Monitor | Costs associated with activities related to implementation of the VRERP, including participation in emergency response drills, exercises and updating the plan. Costs incurred for post-closure monitoring activities at the Vermont Yankee nuclear power plant. | Direct to VRERP Direct to Vermont Yankee bill back |
| 39213 | Environmental Radiation Surveillance | Costs associated with sampling and evaluation of ambient air, water, milk, vegetation and similar media around Vermont Yankee and Yankee Atomic nuclear power plants and technical advice on radioactive waste. | Direct to VRERP |
| 39214 | VRERP Training | All training and educational activities related to implementation of the VRERP (Vermont Radiological Emergency Response Plan). | Direct to VRERP |
| 39215 | Tritium Leak 2010 | All costs associated with the investigation of elevated tritium levels from Vermont Yankee | Direct to VRERP |
| 39216 | NRC Agreement State | Costs incurred for activities related to becoming and operating as an NRC agreement state. | Direct to NRC Agreement State |
| 39401 | Environmental Health Administration | Staff time and operating costs associated with overall administration of the Environmental Health Division. | Total Salaries Across Environmental Health. |
| 39409 | Environmental Health Leave Time | Time code for time not worked such as vacations, holidays, sick leave, personal leave, and compensatory time | Quarterly Results of Individual Employees Positive Reporting |

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Organizational Unit 11: Alcohol and Drug Abuse Programs

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 program codes are shown within this Division as an approximate guide to the most likely users of these codes.)

Detailed explanations of individual functions are included below.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|--|--|
| 39801* | Alcohol and Drug Abuse Programs Administration | Staff time and operating costs associated with overall administration of the Alcohol and Drug Abuse Programs | Total Salaries Across ADAP Program |
| 39809* | Alcohol and Drug Abuse Programs – Leave Time | Time code for time not worked, such as vacations, holidays, sick leave, personal leave and compensatory time. | Quarterly Results of Individual Employees Positive Reporting |
| 39811 | 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 |
| 39812 | Vermont Alcohol & Drug Information Clearinghouse | All costs associated with Vermont Alcohol and Drug Information Clearinghouse (VADIC) / Prevention communications activities. | Direct to Substance Abuse Grant |
| 39814 | OJJDP | Costs associated with combating underage drinking through public policy enforcement. | Direct to OJJDP |
| 39816 | ADAP SBIRT Gant-Infrastructure | Infrastructure component of the SBIRT Gant | Direct to SBIRT |
| 39817 | ADAP SBIRT Gant-Data Collection | Data Collection component of the SBIRT Grant | Direct to SBIRT |
| 39818 | ADAP SBIRT Gant-Administration | Administration component of the SBIRT Grant | Direct to SBIRT |
| 39819 | ADAP SBIRT Gant-Direct SBIRT Services | Direct Services component of the SBIRT Grant | Direct to SBIRT |
| 39822 | 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 |
| 39824 | Rx Drug Disposal Activities | All costs associated with the new legislation authorizing Prescription Drug Disposal Activities (s.243 Legislation) | Direct to Rx Drug Disposal Activities |

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| 39825 | 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) |
| 39827 | Strategic Prevention Framework Partnership for Success -- Community (SPF-PFS) | All community subgrant costs associated with the Strategic Prevention Framework Partnership for Success Grant. | Direct to Strategic Prevention Framework Partnership for Success (SPF-PFS) |
| 39829 | SEOW Supplement | All costs associated with activities of the State Epidemiological Outcomes Workgroup (SEOW) | Direct to Partnerships for Success III |
| 39831* | Medication Assisted Treatment | All costs associated with a program to expand/enhance treatment service systems and recovery support services to individuals with opioid use disorders. | Direct to Medication Assisted Treatment |
| 39832 | Block Grant Administration | Costs associated with administration of grant. | Direct to Substance Abuse Grant |
| 39833* | DDRP | Costs associated with the Drinking Driver Rehabilitation Program including DWI assessments and CRASH schools. | Allocated to HE ADAP DDRP Fees based on availability of revenue funds, then to Global Commitment Administration and Substance Abuse Block Grant based on the quarterly Medicaid eligibility rate for ADAP clients |
| 39834* | Public Inebriate Program | Costs associated with program. | Direct to Global Commitment Investment. |
| 39838* | Payments to Providers for Treatment – Residential | Direct payments. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |

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| 39841* | Payments to Providers for Treatment: Half-Way | Direct payments. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39844* | Payments to Providers for Treatment: Special Populations | Direct payments. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39845* | Alcohol and Drug Abuse Programs Provider Monitoring | Costs associated with monitoring activities. | Allocated between Global Commitment Administration and Substance Abuse Block Grant based on the quarterly Medicaid eligibility rate for ADAP clients |
| 39846* | Payments to EDS for Global Commitment: General | Direct payments. | Direct to Global Commitment Program |
| 39847* | GC Program: Outpatient | All costs associated with GC Program: Outpatient | Direct to Global Commitment Program |
| 39848* | GC Program: Opiate | All costs associated with GC Program: Opiate | Direct to Global Commitment Program |
| 39849* | GC Program: Residential | All costs associated with GC Program: Residential | Direct to Global Commitment Program |
| 39851 | Payments to EDS for CHIP | Payments to EDS on behalf of children eligible for the Children's Health Insurance Program. | Direct to CHIP Program |
| 39853* | Treatment Improvement | Costs associated with tracking funds for accreditation and provider data collection. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |

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| 39854* | Performance Outcome Indicators | Costs associated with performance indicators, including support for development of processes for monitoring treatment outcome indicators used for continuous treatment improvement. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39855 | Service Planning and Coordination | Costs associated with Service and Planning Coordination funded through the Preventative Health Block Grant. | Direct to PHHS Block Grant |
| 39859 | Payments to Providers for Residential Treatment – Non Block Grant Expenses | Direct payments. | Direct to Payments to Providers for Residential Treatment – Non Block Grant Expenses |
| 39860* | 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 |
| 39861 | Adolescent Treatment System Enhancement Grant - Infrastructure | Infrastructure costs associated with the Adolescent Treatment System Enhancement grant. | Direct to Adolescent Treatment System Enhancement Grant |
| 39862 | Payments to Providers for Opiate Treatment | Payments to Providers for Opiate Treatment for Non-Medicaid Eligible Patients | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39863* | Student Assistance Program (SAP) – Treatment Grants | Payments to providers for treatment: SAP | Allocated to Substance Abuse Grant and Global Commitment Admin based on Medicaid allowable share of costs. |

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| 39866* | Payments to Providers – Bradford Operations | Payments to OAS, LLC for residential treatment at the Valley Vista Facility. | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39867 | Payment to Provider Non Resident Non Block Grant | To identify payments to providers for non-residential services that are non-block grant expenditures. | Direct to Payment to Provider Non Resident Non Block Grant |
| 39868 | Adolescent Treatment System Enhancement Grant - Direct Services | Direct services costs associated with the Adolescent Treatment System Enhancement grant. | Direct to Adolescent Treatment System Enhancement Grant |
| 39869 | Prescription Drug Monitoring Program | Costs associated with developing and maintaining a program to prevent prescription drug abuse in Vermont. | Direct to Prescription Drug Monitoring |
| 39870 | Prescription Drug Monitoring Program - Enhanced | All costs associated with enhancing an existing program to prevent prescription drug abuse in Vermont | Direct to Prescription Drug Monitoring Program - Enhanced |
| 39873 | School-Based Surveillance | Costs associated with the implementation, analysis, and dissemination of the Youth Risk Behavior Survey and the School Health Profiles survey. | Direct to School-Based Surveillance |
| 39880* | 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 Global Commitment Investment. |
| 39884* | 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. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39885 | Transitional Housing-Charitable Choice | Charitable Choice Grants that are non-Block Grant expenses. | Direct to Transitional Housing-Charitable Choice (state funds) |
| 39886 | Partnerships for Success III Community | All community costs associated with a program to reduce underage drinking, prescription drug misuse & abuse, and marijuana use among 12-25 year olds. | Direct to Partnerships for Success III |

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| 39887 | Partnerships for Success III State | All state costs associated with a program to reduce underage drinking, prescription drug misuse & abuse, and marijuana use among 12-25 year olds. | Direct to Partnerships for Success III |
| 39888* | Methadone Treatment – NonBlock Grant Eligible | Methadone costs not eligible for SAPT Block Grant reimbursement | Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population. |
| 39889 | 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 |
| 39890 | Substance Abuse Prevention Community Grants Program | All costs associated with Substance Abuse Prevention Community grants program. | Direct to Substance Abuse Grant |
| 39891 | Substance Abuse Prevention Community – Project Rocking Horse. | All costs associated with the Project Rocking Horse grant program. | Direct to Substance Abuse Grant |
| 39892* | Substance Abuse Workforce Development | All costs associated with substance abuse workforce development and training. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39893* | Direct Outpatient Treatment Services | All costs associated with outpatient, intensive outpatient, or clinical case management services. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |

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| 39894* | 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. | Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding. |
| 39895* | Prescription Drug Overdose Prevention | All costs associated with a program to enhance efforts to prevent overdose deaths related to prescription opioids. | Direct to Prescription Drug Overdose Prevention |
| 39896* | Public Inebriate Services, Challenges for Change, Global Commitment | Crisis intervention for Mental Health and substance abuse issues; non-categorical case mgt; development of a detoxification bed program | Direct to Global Commitment Investment. |

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Department of Mental Health (DMH)

I. 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.

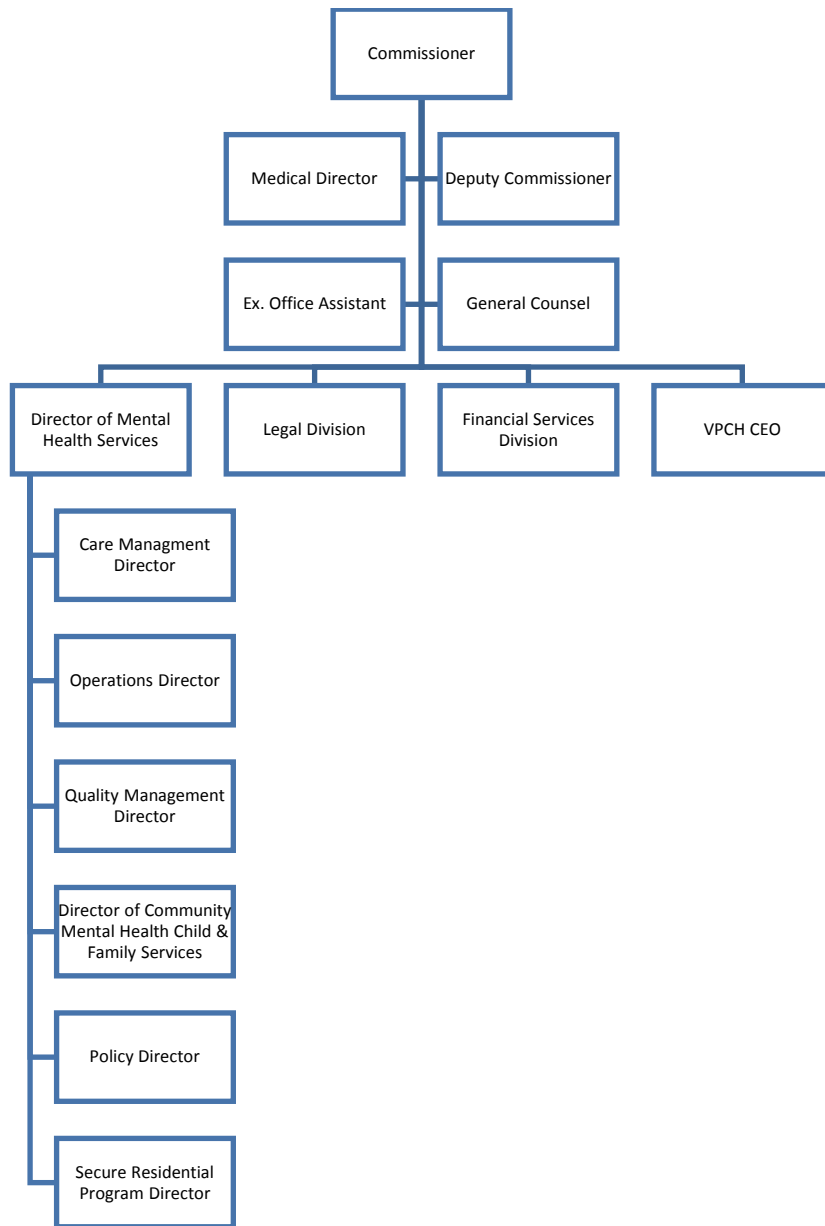
Staff at DMH direct code their time to the programs they support throughout their work day. DMH staff enters their time into the state's payroll system. When staffs enter timesheet information, they "direct code" their time and the data feeds the VISION accounting system. Staff performing support functions 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. Staff who works 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.

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II. Organizational Chart

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



I.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

III. Vermont Department of Mental Health Cost Allocation Methodologies

Organizational Unit 1: Indirect Cost Allocations

Nature and Extent of Services: Vermont Department of Mental Health 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.

| Program Code | Program Name | Description | Allocation Method |
|---------------------|---|---|-----------------------------------|
| 1000.1* | SWICAP | DMH Allocation of Statewide Indirect Costs | Total Salaries across departments |
| 1000.2* | AHS Audit Unit | DMH Allocation of costs related to the AHS Audit Unit | Total Salaries across departments |
| 1000.3* | AHS Secretary's Office | DMH Allocation of costs related to the AHS Secretary's Office | Total Salaries across departments |
| 1000.4* | AHS Information Technology | DMH Allocation of costs related to AHS Information Technology | Total Salaries across departments |
| 1000.5* | Financial Statement and Internal Controls Audit | DMH Allocation of costs related to the Single Audit – Financial Statement and Internal Controls | Total Salaries across departments |
| 1000.6* | Human Services Board | DMH Allocation of costs related to the Human Services Board | Total Salaries across departments |
| 1000.7* | Human Resources Investigations Unit | DMH allocation of costs related to the Human Resources Investigations Unit | Total Salaries across departments |
| 1000.8* | AHS Policy | DMH allocation of costs related to AHS Policy | Total Salaries across departments |

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Organizational Unit 2: Administrative Services

Nature and Extent of 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 are all included in this cost center.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|--|--|---|
| 37703 | VHC Open Enrollment | Staff work related to VHC Open Enrollment | IDT |
| 37988 | SIM YR 2 Testing – Contracts | Contractual expenses related to SIM | Direct to the SIM Grant (federal) |
| 37991 | SIMS Testing - Staff | Non-IT salary and operating costs related to the SIM (State Innovation Models) grant | Direct to the SIM Grant (federal) |
| 41618 | HSE PMO – Staff Costs (Match from GF and Capital Budget – DII) | Staff Expenses related to Health Enterprise shared component design and development | Per Negotiated PMO allocation of HSE sources |
| 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 | MMIS – DDI Staff | Staff work associated with the development of the MMIS | Direct to CMS-MMIS |
| 42014* | DMH Administration | Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, General Counsel, Operations Manager, Administrative Support Coordinator, and Deputy Commissioner | Total Cost of All Programs, Including Community Health and Inpatient Care |
| 42600 | General Funded Activities and Services | Activities that are not eligible for reimbursement under other funding sources | Direct to General Fund |

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Organizational Unit 3: Legal

Nature and Extent of Services: The Legal cost center is for all costs related to our legal services staff.

| Program Code | Program Code 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 | Cost of All Inpatient Care Programs |
| 42322* | Legal Services – Community Mental Health | Legal services costs associated with Community Mental Health programs | Total Cost of All 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 |

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Organizational Unit 4: Financial and Operations

Nature and Extent of Services: Financial and Operations is comprised of all costs related to our financial and operations staff.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--------------------------------|--|---|
| 42014* | DMH Administration | Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, General Counsel, 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 |
| 42316 | Financial – Inpatient Programs | Staff costs within the financial unit associated with workers supporting all inpatient programs | Total Cost of All Inpatient Programs |

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Organizational Unit 5: Quality Management

Nature and Extent of Services: This cost center houses costs related to DMH's quality management services.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---------------------------------|--|---|
| 42005 | Data Infrastructure | Non-staff time associated with Data Infrastructure for the collection, analysis, and reporting on Mental Health System data | Direct to Data Infrastructure |
| 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 |
| 42319* | 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 | Allocated to Data Infrastructure and all DMH programs |

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Organizational Unit 6: Other Mental Health Support

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

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|--|--|
| 42014* | DMH Administration | Staff costs associated with overall management of DMH programs, including Commissioner, the Medical Director, Executive Office Assistant, General Counsel, Operations Manager, Administrative Support Coordinator, and Deputy Commissioner | Total Cost of All Programs, Including Community Health and Inpatient Care |
| 42301 | Direct Service Technical Assistance Supports | Staff costs associated with mental health-Technical Assistance | Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate |
| 42303* | 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 |

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Organizational Unit 7: Adult Clinical and Operations

Nature and Extent of Services: All costs associated with providing clinical services to adults are associated with this cost center.

| Program Code | Program Code Name | Description | Allocation Method |
|--------------|--|---|--|
| 2000.1 | CRT Billings | Medicaid Billings for the CRT Program | Direct to CRT Global Commitment |
| 2000.2 | VPCH Revenue | Client Billings, Medicare and Other Revenues | Direct to VPCH GCI |
| 2000.3 | MTCR Revenue | Client Billings and Other Revenues | Direct to Community Rehab and Treatment (CRT Program and MCO Investment) |
| 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 Admin |
| 42015* | Community Mental Health Administration – Adults and Children | 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* | Care Management | Costs associated with care management of adult individuals who are in the custody of the department or voluntary psychiatric inpatient. | Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate |
| 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 | Global Commitment Program or Investment by Statewide Medicaid Eligibility Rate |

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| 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 |
| 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 Special Services (Global Commitment Investment) |
| 42643 | CRT 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 CRT Consumer Support (CRT Program and MCO 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 Adult Programs |
| 42651 | Emergency Mental Health For Adults - CRT | The costs associated with 24/7 triage, assessment, mobile outreach, short-term family stabilization, and referral and screening for hospitalization or hospital diversion for CRT adults experiencing a mental health crisis. | Direct to CRT Adult Emergency Mental Health (CRT Program and MCO Investment) |
| 42730 | Case Rate Payments | Payments to designated agencies for the provision of services for the adult CRT population | Direct to Case Rate Payments |
| 42740 | CRT Doc/Hospital for Adults | Inpatient or Private Psychiatric services provided to adult CRT patients | Direct to CRT Doc Hospital |
| 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) |

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| 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 Outpatient Services for Adults (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 Program and MCO 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 Community Rehab and Treatment (CRT Program and MCO Investment) |
| 42768 | CRT Peer Supports for Adults | Funds to develop peer-run or peer-guided recovery and peer support services for adults | Direct to Community Rehab and Treatment (CRT Program and MCO Investment) |
| 42769 | Emergency Supports | 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 – (CRT Program and MCO Investment) |
| 42773 | Serious 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 |

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| 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 | CRT Housing Subsidies | Costs for housing subsidies as part of a comprehensive treatment plan. | Direct to Community Rehab and Treatment (CRT Program and MCO Investment) |
| 42916 | CRT Secure Residential Recovery | Staff Time and Operating Costs associated with running the Secure Residential Recovery Facility | Direct to Community Rehab and Treatment (CRT Program and MCO Investment) |

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Organizational Unit 8: Children, Adolescents, and Families Unit

Nature and Extent of Services: All costs associated with providing services to children are associated with this cost center.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|---|---|---|
| 37713 | Medicaid Program – Children | Medicaid Fee for Service costs associated with mental health services for children | Direct to Global Commitment (Program) |
| 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 |
| 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 |
| 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 Special Services (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 Children’s 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 |

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| 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) |

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Organizational Unit 9: Inpatient Services

Nature and Extent of Services: This cost center houses all costs associated with the provision of inpatient services.

| Program Code | Program Code Name | Description | Allocation Method |
|---------------------|--|---|--|
| 42647 | Brattleboro Retreat – CR | Costs associated with CRT Billings at Brattleboro | Direct to Community Rehab and Treatment (CRT Program and MCO Investment) |
| 42650 | Brattleboro Retreat – M | Costs associated with CRT Medicaid billings at Brattleboro Retreat | Direct to (CRT program and MCO 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 Acute Care – Non-Springfield (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 Direct Acute Care – Springfield (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 |

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| 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 (Investment) |
| 42786 | Psych Inpatient –BR – GC Invest | Brattleboro Retreat - Costs associated with Level One Care | Direct to BR Psych Inpatient (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) |
| 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 |
| 42795 | Psych Inpatient – Brattleboro Medicaid | Brattleboro Retreat – Medicaid costs associated with Level One care | Direct to BR Psych Inpatient Medicaid |
| 42796 | Psych Inpatient – AHC – GC Investment | Arbour Health Care – Costs associated with Level One care – GC Investment | Direct to AHC Psych Inpatient (GC Investment) |

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| 42797 | Psych Inpatient – AHC – GC Medicaid | Arbour Health Care – Costs associated with Level One care – GC Medicaid | Direct to AHC Psych Inpatient (GC Medicaid) |
| 42798 | Psychiatric Inpatient RRMC Cost Settlement and Rate Setting | DMH’s reimbursement to DVHA for Rutland Regional Medical Center’s Involuntary Psychiatric Rate Setting expenses | Direct to RRMC Psych Inpatient (Investment) |
| 42799 | Psychiatric Inpatient BR Cost Settlement and Rate Setting | DMH’s reimbursement to DVHA for Brattleboro Retreat’s Involuntary Psychiatric Rate Setting expenses | Direct to BR Psych Inpatient (Investment) |
| 42800 | Psychiatric Inpatient FAHC Cost Settlement and Rate Setting | DMH’s reimbursement to DVHA for Fletcher Allen Health Care’s Involuntary Psychiatric Rate Setting expenses | Direct to FAHC Psych Inpatient (Investment) |
| 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 |

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| 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 |
| 42940 | Berlin Administration | Costs Associated with the Berlin Site | Direct to Berlin (GCI) |

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|-------|---------------------------------|---|---|
| 42942 | Admin & Gen/Exec/BO/QA | Staff time and operating costs associated with administration of the Vermont Psychiatric Care Hospital (VPCH), including the Executive Office, QA, Admissions, Switchboard and other related services | Direct to VPCH (GCI) |
| 42943 | Adult Gen Routine Care | Staff time and operating costs associated with general routine patient care at VPCH | Direct to VPCH (GCI) |
| 42944 | Treatment Team | Staff time and operating costs associated with the VPCH Treatment Team | Direct to VPCH (GCI) |
| 42945 | Medical Records | Staff time and operating costs associated with medical records at the VPCH | Direct to VPCH (GCI) |
| 42946 | Nursing Administration | Staff time and operating costs associated with nursing administration and maintaining staffing levels at the VPCH | Allocated to direct Secure Res Recovery Operating (MTCR) and Adult General (VPCH) cost centers based on FTE count |
| 42947 | Ancillary & Laboratory Services | Staff time and operating costs associated with ancillary services at the VPCH | Direct to VPCH (GCI) |
| 42948 | Occupational Therapy | Staff time and operating costs associated with occupational therapy department at the VPCH | Direct to VPCH (GCI) |

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| 42949 | Physical Therapy | Staff time and operating costs associated with physical therapy at the VPCH | Direct to VPCH (GCI) |
| 42950 | Pharmacy | Staff time and operating costs associated with pharmacy services at the VPCH | Direct to VPCH (GCI) |
| 42951 | Housekeeping | Staff time and operating costs associated with housekeeping at the VPCH | Direct to VPCH (GCI) |
| 42952 | Dietary | Staff time and operating costs associated with food service at the VPCH | Allocated to Secure Residential Recovery Operating (MTCR) and Adult General (VPCH) based on meal count |
| 42953 | Laundry and Linen | Operating costs associated with laundry and linen services at the VPCH | Direct to VPCH (GCI) |
| 42954 | Electronic Health Record – VPCH | Operating costs associated with the Electronic Health Record at VPCH | Direct to VPCH (GCI) |
| 42955 | Social Service Admin/Vol & Lib | Non-direct service staff time and operating costs associated with the social services, volunteer and library services at VPCH | Direct to VPCH (GCI) |

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X. STATISTICAL INFORMATION

AHS Secretary's Office

Position across AHS Secretary's Office:

Costs associated with IT non-direct project activities related to the Secretary's Office general functions and all leave time. As well as costs associated with temporary IT technical staff.

Positions Across AHS:

Costs associated with the Office of the AHS Secretary and Staff, Operational Services, Budget Services Unit, General Operating Expenses, Miscellaneous Grants and Contracts, IT Agency General Staff Costs to support and benefit all AHS and have an agency-wide impact are allocated based on the number of positions Agency-wide.

Positions Across AHS Non-Institutional Staff:

Costs associated with the Policy Division

Positions Across Non-Institutional AHS Staff:

Costs associate with Service Coordination grants provided service coordination for families and individuals referred through the State as short term or temporary lead case management and Direct Service Dollar grants that provide direct support and create community collaboration for individuals and families in need throughout the state are allocated based on the number of non-institutional staff Agency-wide.

Quarterly Case Count Across AHS and VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP:

Costs associate with specific program are allocated based on the quarterly case count and enrollment numbers during the quarter.

Quarterly enrollment for GC, CHIP, and all other benefiting programs:

Costs associate with specific program are allocated based on the quarterly enrollment numbers during the quarter.

Quarterly enrollment for QHP and Medicaid, per pending EBCP IAPD:

Costs associate with specific program are allocated based on the quarterly enrollment numbers during the quarter.

Quarterly results of Federal Funds Management Unit Financial AHS Time Study:

Costs associated with specific programs are allocated based on results of submitted time studies on projects specific to Agency departments during the quarter.

Quarterly results of the Audit Unit Time Study:

Costs associated with the monitoring A133 audit issues and monitoring the agreements with sub-recipients throughout the Agency are allocated based on hours spent on monitoring specific to Agency departments during the quarter.

Quarterly update based on Case Count:

Costs associate with specific programs are allocated based on results of case count for each specific program during the quarter.

Quarterly update based on caseload:

Costs associate with specific programs are allocated based on results of case load for each specific program during the quarter.

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Total Salaries:

Salaries and expenses of selected program are allocated across programs based on a ratio of total direct salary costs expended in the quarter by each respective program.

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Department of Children and Family Services

Quarterly Child Subsidy Case Count:

Using the Excel file (CAP FYXX) in the email received monthly from CDD Operations, enter the unduplicated count in cell D1, then use formula (Count of party ID Child/Grand Total of Count of party ID Child) to determine the percentage of each case count. Then use the formula (Unduplicated count * Percentage obtained in previous formula) to determine unduplicated case count for the month, and enter these figures under the reporting month in the cells corresponding to the program code in the CAP FYXX file received. This entry in CAP is a three month total.

Quarterly Child Subsidy Duplicated Case Count:

Using the Excel file (CAP FYXX) in the email received monthly from CDD Operations, enter the “Count of Party ID Child” amounts under the reporting month in the cells corresponding to the program code in the CAP FYXX file received. This entry in CAP is a three month total.

Central Processing Unit (CPU) Usage Commands:

Using the Excel file in the email received monthly from DCF Systems Analyst Dan Hegarty, which can also be found here: \AHS ALL SHARE\DCF Shared Financial Information\DII Billing\Fiscal Year 2016, enter the amount listed next to “Commands” in the reporting month column in the cells corresponding to the systems listed in column A. This entry in CAP is a three month total.

Case Count Across TANF, SNAP Benefits Issued, Fuel, and WIC:

Using the Excel file in the email received monthly from the EBT Director, enter the figures for the reporting month as follows: 3 squares VT + FSCO under Food Stamp-Issue, Fuel under Fuel, Cash under TANF (RU), and WIC under Direct to WIC. This entry in CAP is a three month total.

Total Hours Reported by Program for TANF, SNAP & GC:

Using the email received from Fraud and Claims Unit Supervisor monthly, enter the total hours into tab J1 in the DCF Cap Stats file. Then update the Fraud Unit Quality Assurance tab in the file per procedures. This will update the Total allocation formulas, then transfer the updated allocation figures to the Statsum spreadsheet. This entry in CAP is a three month total.

IV-D Cases Vs Non IV-D Cases:

Using the Case Stats tab on the Excel file in the email received quarterly from the DCF Business Office Finance Manager I, take the quarterly number of IV-D Cases highlighted, then enter this number on the Statsum spreadsheet in the corresponding cell to Title IV-D. Take the quarterly number of Non IV-D/Registry cases highlighted, then enter this number on the Statsum spreadsheet in the corresponding cell to State Funded. This entry in CAP is a three month total.

IV-D Customer Contacts vs Non IV-D Customer Contacts:

Using the Case Stats tab on the Excel file in the email received quarterly from the DCF Business Office Finance Manager I, take the quarterly number for sub-total IV-D under column mnth totals, and enter this number on the Statsum spreadsheet in the corresponding cell to Title IV-D. Take the quarterly number for sub-total non IV-D under column mnth totals, and enter this number on the statsum spreadsheet in the corresponding cell to State Funded. This entry in CAP is a three month average.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Total Cost across EA and GA (allocated to TANF and State Fund):

Use a detailed expenditure query from our account system, VISION, to determine cost. Run Vision query VT_Account_Exp_AllFields_DTL_C using reporting month's dates, GL Business Unit 03440, and Department 344006%. Copy all data in query from column A to column X down to the last line with data on it, then paste this into the GA and EA Statistic QX spreadsheet for the corresponding month found here:

\\ahs\ahsfiles\CO\Share\DCFBusinessOffice\FISCAL\SFY1X Files\CAP Stats FY20XX\QX SFYXX Month 201X\GA & EA (Method E). Update pivot table by changing data source to include all new data pasted from query. Enter GA Sum in State Funded cell under corresponding month on Statsum spreadsheet. Enter TANF Sum in TANF (RU) cell under corresponding month on Statsum spreadsheet. This entry in CAP is a three month total.

Quarterly number of paid claims for GC, CHIP and All Other benefiting Programs:

Using the Excel file in the email received quarterly from DVHA, use the total amount listed under the Paid Claims count from the tab labeled Qtr Stats. This total will be the sum of Draw Sections: GC and Former CFC + CHIP. The entry in CAP is a three month total.

Quarterly Count of Case by Program:

Using the Fraud cost Allocation Formula Report received monthly from the Fraud and Claims Supervisor, enter the amounts from the allocation column to the statsum sheet as: FS-Food Stamp Issue, RU-TANF (RU), EP-AABD, HC-Global Commitment Admin, SF-Home Heating program/Liheap, GA-State Funded. The entry in CAP is a three month total.

Quarterly Count of Eligible Cases Across Title IV-E &, Global Commitment, & State Fund:

Using the Sofhie2.ace report provided by the Financial Specialist III in the DCF Business Office quarterly, enter the amounts in the correct month within the table titled Method-Title IV-E & Medicaid Eligibility Rate in the FSD Stats tab as follows: Gen-State Funds, Title IV-E Foster Care Case Planning/Management, and Global Commitment. These figures will also post in the Statsum tab to complete this entry. The entry in CAP is a three month average.

Title IV-E Foster Care Eligibility Rate:

Using the Frepay.ace and Frepay4e.ace reports provided monthly by the Financial Specialist III, enter the amounts from the lines marked totals for each category in the FSD Stats tab. The total amount will update monthly when these entries are made, and will update the Statsum tab throughout the quarter. The entry to CAP is a three month average.

Total Global Commitment eligible population compared to total population:

Open monthly statewide foster care payroll listing (paylst.pdf) found here: Y:\AHS ALL SHARE\Reports\FSD District SSMIS docs\Business Office\Foster Care Monthly Reports\20XX-XX-XX. Search for Woodside Juvenile Rehab information in report. Add the number of days for clients with \$0 in the total column, then input this number as Regular (Non-Medicaid) amount under the corresponding month in the Statsum sheet. Subtract the above number of days from the total number of days for Woodside residents, then input this number in the GC (Medicaid) cell for the corresponding month. The entry to CAP is a three month total.

Quarterly Results of the Legal Time Study:

Using the Excel file in the email received quarterly from the AAG Administrative services coordinator; enter the hours worked into the AAG Time Study tab in the corresponding cells. The entry to CAP will be a total of the hours for 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Duplicated Case Count across Economic Services:

Open file copy of copy of DupCaseloadcount_ESD updated monthly by the Performance Manager found here: Y:\AHS ALL SHARE\DCF Shared Financial Information\Financial_Monitoring\ADMIN & ESD Bnfts\ESD Caseloads_CAP. Update Statsum sheet with three most recent months, if quarter is not complete, email ESD Process and Performance manager for update. When update is made to Excel file you can update Statsum sheet. The entry to CAP is the total for the quarter.

Title IV-E Adoption Assistance Rate and Title IV-E Guardianship Rate:

Using the Frepay.ace and Frepay4e.ace reports provided by the Financial Specialist III in the DCF Business Office monthly, enter the total amount in the sub adoption category from the Frepay.ace report under Method-Title IV-E Adoption Assistance Rate (Total in Custody) in the FSD Stats tab. Enter the amounts from the lines marked totals on the Frepay reports for each category in the FSD Stats tab in the Method-Title IV-E Eligibility Rates table, then enter the total amount in the sub adoption category from the Frepa4e.ace report in the IV-E Eligible table as Subsidized Adoption All. Using the Guardianship Cases Spreadsheet provided quarterly by the Financial Specialist III in the DCF Business Office input the number of guardianship cases in the corresponding month to the Method – Title IV-E Adoption Assistance Rate table as Total in Guardianship IVE Eligible to complete the formula for IV-E Eligible cases. The total amount will update monthly when these entries are made, and will update the Statsum tab throughout the quarter. The entry to CAP is a three month average.

Economic Services Case Count across Reach Up (TANF and State Fund):

Open file copy of copy of DupCaseloadcount_ESD updated monthly by the Performance Manager found here: Y:\AHS ALL SHARE\DCF Shared Financial Information\Financial_Monitoring\ADMIN & ESD Bnfts\ESD Caseloads_CAP. Update Statsum sheet with three most recent months, then using only the RU totals, updated the RU case count method. This entry in CAP is a three month total.

Quarterly Results of Family Services Time Study:

Using the email received from ssdb@ahs-ssmis-prod1.ahs.state.vt.us after generating the Random Moment Timer Statistic (RMTS) report in the SSMIS data base using the following method: Click on the link to the SSMIS data base to gain access, login with username and current password. Press <enter> to continue, input number 1 then press <enter> input the pay period dates for report required using the following format: Enter the first working day and the last working day in the date range you are requesting (!getts 00/00/0000 00/00/0000) press <enter>. Press the letter e to return to the main menu. Type exit to log out of the SSMIS data base. Once these steps are completed an automatic e-mail is generated providing the RMTS data for the period. Enter the numbers in the email next to the corresponding letters on the FSD Stats tab monthly and reallocate general admin and leave. This will also post to the Statsum tab. Entry to CAP is total for the quarter.

Quarterly Results of the Economic Assistance BPS RMTS:

Copy the entire Sample Results Report from EasyRMTS™ into the first tab of the Excel Results template. Using the spreadsheet used to review subsample responses throughout the quarter, copy only the incorrect subsample responses into the Subsample Invalidations tab. Make sure the value in cell C17 says “CHECK” before proceeding on the results matrix tab. In the Allocap tab in column D subtract one from each incorrect response from the subsample invalidations tab. Make sure the value in cell I141 says “CHECK” before proceeding. The formulas on the “AlloCAP” tab of the spreadsheet reallocate general admin & general training and paid time off to all other activities. Enter the amounts in Column H to the CAP. The entry to CAP is a total for the quarter.

Economic Services Reach Up E&T Case Count:

Using the e-mail from Karolyn White, ESD. Update Statsum sheet with caseload data for the current period. This entry in CAP is a three month total.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Quarterly Employee Count Across ESD District Office Staff:

Obtain on a monthly basis from Pam Dalley, DCF Operations, a head count of ESD employees versus LTC employees in the following ESD District Office locations (Note- these are the only districts location with LTC staff): Barre, St. Albans, Burlington, Rutland, Springfield and Morrisville. The entry into CAP is specific to each district office location, and is the average number of ESD employees for the period, and the average number of LTC employees for the period.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Department of Disabilities, Aging and Independent Living

Total Cost:

Salaries and expenses of selected programs are allocated across divisions based on a ratio of total direct program costs expended in the quarter by each respective division.

Total Salaries:

Salaries and expenses of selected programs are allocated across divisions based on a ratio of total salary costs expended in the quarter by each respective division.

Method A1 “Salary Cost Allocation of Indirect Costs to Divisions”:

Salaries and expenses related to SWICAP and Commissioner’s Office are allocated across all DAIL Divisions based on a ratio of total salary costs expended in the quarter by DAIL staff.

Method A2 “Total Cost; Ratio of Total Direct Program Funds Expended in Quarter (ASD)”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total direct program costs expended in the quarter by ASD.

Method A2 “Total Cost; Ratio of Total Direct Program Funds Expended in Quarter (Blind and Visually Impaired)”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total direct program costs expended in the quarter by DBVI.

Method A2 “Total Cost; Ratio of Total Direct Program Funds Expended in Quarter (DS)”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total direct program costs expended in the quarter by DDSD.

Method A2 “Total Cost; Ratio of Total Direct Program Funds Expended in Quarter (Licensing and Protection)”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total direct program costs expended in the quarter by DLP.

Method A2 “Total Cost; Ratio of Total Direct Program Funds Expended in Quarter (Voc Rehab)”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total direct program costs expended in the quarter by Voc Rehab.

Method H “Costs for Buildings/Programs Requiring Inspections (Total Salary)”:

Expenses related to fire Safety prevention services performed by the Department of Public Safety, on behalf of the Division of Licensing and Protection, are allocated to all programs serving health care facilities within the division. Allocation is based on a ratio of total salary costs expended in the quarter by DLP.

Method I “Total Salaries; Salary & Expenses in Quarter – Director of Division of Licensing and Protection (Personal Services)”:

Salaries and expenses related to the Division Director and Administrative Staff within the Division of Licensing and Protection are allocated based on a ratio of total salary costs expended in the quarter by DLP.

Method J “Total Salaries; Salary & Expenses in Quarter – Licensure (Personal Services)”:

Salaries and expenses related to the Division Director and Nurse Survey Staff within the Division of Licensing and Protection, are allocated based on a ratio of total salary costs expended in the quarter by DLP.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Method M “Total Salaries; Percentage of Salary Dollars Directly Charged (DS) 43030”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total salary costs expended in the quarter by DDS.

Method M “Total Salaries; Percentage of Salary Dollars Directly Charged (ASD) 43030”:

Salaries and expenses related to the Division Director and Administrative Staff are allocated based on a ratio of total salary costs expended in the quarter by ASD.

Method O “Persons Served in Quarter by ASD”:

Administrative expenses related to the Attendant Services Program are allocated to Title III-E, State Fund and Global Commitment Administration, based on number of persons served in the State Fund PDAC and Personal Services programs over the age 60, under the age 60, and total number of persons served in the Medicaid PDAC program, respectively.

Method Q “Number of ACCS Beds Paid by Title XIX Billed by 15th/Total ACCS Beds on 15th”:

Expenses related to the licensure of Level III Residential Care Homes are allocated to State Funds and Medicaid Administration based on a ratio of ACCS beds paid by Title XIX. The number of beds paid by Title XIX is a point in time statistic, as of the 15th day following the month being reported.

Method Q “Number of ACCS Beds Paid by Title XIX Billed by 15th/Total ACCS Beds on 15th - Travel”:

Travel expenses related to the licensure of Level III Residential Care Homes are allocated to State Funds and Medicaid Administration based on a ratio of ACCS beds paid by Title XIX. The number of beds paid by Title XIX is a point in time statistic, as of the 15th day following the month being reported.

Method R “Ratio of Total Direct Program Funds Expended in Quarter by Regional Staff (Voc Rehab)”:

Salaries and expenses related to the Division’s regional staff and operating expenses are allocated based on a ratio of total direct program costs expended in the quarter by Voc Rehab.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Department of Vermont Health Access

PU - CMS HIT 83% HIT Fund 17%:

This method is used to allocate contractual costs for Health Information Exchange contracts, specifically agreements using HIT Fair Share funds. It is updated periodically per the IAPD Program Code allocation guide sent by AHS Central Office, and a change is only made if indicated in red font.

PU - MCO Blueprint State Pop %:

This method is used for Administrative and Contractual costs for the DVHA Blueprint for Health Program. This population distribution is dictated by AHS Central Office. It has been set up as a periodic update if a decision is made to change it, but has been unchanged since its creation.

PU - MCO VITL State Pop %:

This method is used for Health Care Reform and HIT Grants and Contracts. It is dictated by AHS Central Office, and is similar to the method described above – the exception is that the “MCO – Vermont Blueprint for Health” final receiver is replaced by “MCO - Vermont Information Technology Leaders/HIT/HIE/HCR.”

PU - MMIS 48.24%, E&E90 38.34%, CMS-HIT 13.42%:

This allocation is used for HSE PMO Staff and Contractual expenses. It is updated periodically per the IAPD Program Code allocation guide sent by AHS Central Office, and a change is only made if indicated in red font.

QU - Quarterly combined AHS and VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP:

This method is used to allocate costs to DVHA’s Enrollment Broker Services contract. It is updated every quarter according to the average enrollment count for CHIP, Global Commitment, and QHP populations specifically with Vermont Premium Assistance (VPA). The source data comes from the VHC Effectuation Report and AHS Central Office Enrollment Report.

QU - Quarterly Enrollment for Global Commitment, CHIP, and all other benefiting programs:

This method is used for the admin costs of a variety of different units within DVHA, including: Data Unit, Program Integrity, Clinical Unit, VCCI, the Reimbursement unit, etc. This data is updated quarterly according to the average enrollment count for Global Commitment, CHIP and QHP populations without VPA. The source data comes from the VHC Effectuation Report and AHS Central Office Enrollment Report.

QU - Quarterly number of paid claims for Global Commitment, CHIP, and All Other benefiting Programs:

This method is used to allocate dollars paid to DVHA’s Fiscal Intermediary. The method is updated quarterly and utilizes paid claim counts to Global Commitment and CHIP. The data is sourced from Hewlett-Packard Enterprise’s Draw Summary files.

QU - Quarterly number of Pharmacy Claims paid for Global Commitment, CHIP, and All Other benefiting Programs:

This method is used to allocate costs to the DVHA Pharmacy unit and Pharmacy Benefit Manager. The method is updated quarterly and utilizes pharmacy paid claim count to Global Commitment and CHIP. The data is sourced from an MMIS-based query that is run by the DVHA Business Office.

QU - Quarterly VHC enrollment for GC, DSHP (75% FMAP), CHIP and QHP:

This method is similar to “Case Count between CHIP, VHC, and Medicaid 75%” with the exception that the final receiver is labeled “OAPD”, and is used for OAPD related contractual and staff costs.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

QU - Quarterly VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP:

This method is used to allocate costs to DVHA VHC Operations program codes. This data is updated quarterly according to the average enrollment count for Global Commitment, CHIP and QHP populations with VPA. The source data comes exclusively from the VHC Effectuation Report.

QU - Quarterly VHC enrollment for MAGI and DSHP (90/10) and QHP Level 1C:

This allocation method is used for Exchange Level 1 and Level 2 EBCP Contracts and Staff. The data is updated quarterly according to the average enrollment of QHP without VPA (allocating to Level 1C Final Receiver). A second line contains Medicaid, CHIP, and QHP with VPA which allocates to a 90/10 Integrated Eligibility IAPD. The source data comes exclusively from the VHC Effectuation Report.

Quarterly Results of the HAEEU RMTS:

Due to the varying nature of HAEEU's work, CMS and AHS Central Office agreed to the utilization of a Random Moment Time Study (RMTS) to allocate staff costs based activity. Each activity corresponds with a specific set of funding sources by population or by direct activity type. Throughout the quarter HAEEU staff are required to populate a randomized study and are prompted with questions about their most recent activities. These Sample Results from EasyRMTS™ feed into a spreadsheet that is used to manually populate intermediate codes in AlloCAP™ by activity type. A designated HAEEU supervisor reviews subsample responses throughout the quarter and invalidates incorrect responses. Based on the percentage splits in the intermediate codes, the funding is broken out by final receiver and program code. The data source for these samples is EasyRMTS™, and the data is uploaded quarterly. It becomes available on the first business day of the month after the end of a quarter.

Quarterly Results of the HAEEU RMTS - Not Enhanced:

This allocation method is identical to the one described above, with the exception that only non-enhanced Global Commitment activities are included in the data. Some examples of enhanced activities NOT included in the data are VHC eligibility determinations, case reviews, eligibility notices, etc. This method is updated quarterly, and the data source for samples is EasyRMTS™.

Total hours across all program codes:

This allocation method is used to distributed indirect costs for AHS Central Office. Based on a distribution of the DVHA staff hours per program code, the AlloCAP™ system is set up to group those codes by the appropriate Final Receiver. This data is updated quarterly, and is populated by the State of Vermont's VTHR system data.

Total hours across all program - less BO:

This allocation method is used for the DVHA Business Office and functions as described above, however the hours from the Business Office itself are removed as to not skew the distribution.

Total hours across all program - less Commissioner's Office:

This allocation method is used for the DVHA Commissioner's Office and functions as described above, however the hours from the Commissioner's Office itself are removed as to not skew the distribution.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Department of Health

Allocated 27% to Global Commitment Admin and then to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population:

Allocated to GC Admin based on Medicaid eligible population as a % of the total state population. Remainder allocated to GC-MCO investment and state funds per AHSCO determined rate.

Allocated 50% to Global Commitment Investment and 50% to State Funds:

Allocated per legislative budget directive.

Allocated 90% to Global Commitment Investment and 10% to State Funds based on the Medicaid share of total TB Patients:

90% of persons receiving TB services are Medicaid eligible.

Allocated between Global Commitment Administration and Substance Abuse Block Grant based on the quarterly Medicaid eligibility rate for ADAP clients:

Medicaid eligibility rate based on Medicaid clients as percent of total clients served by the ADAP preferred provider network, and as reported to VDH by these providers.

Allocated Between Global Commitment Investment and Global Commitment Administration (Based on Medicaid eligible population as a % of the total state population.):

Allocated to GC Admin based on Medicaid eligible population as a % of the total state population, remainder to GC-MCO investment.

Allocated to Breastfeeding Peer Counselor Project and to Global Commitment Investment based on availability of WIC Breastfeeding Peer Counseling grant award:

Expenses are charged direct to Breastfeeding Peer Counselor Project grant first. If those funds are exhausted, the remaining quarterly expenses are charged to GC-MCO Investment.

Allocated to Global Commitment Administration and to WIC Administration based on Medicaid Eligibility Rate for WIC Clients:

Medicaid eligibility rate is based on Medicaid enrollees as percent of total clients served by WIC clinics in the quarter.

Allocated to Global Commitment Investment and to State Funds based on the Medicaid, Uninsured, and Underinsured, share of total state population:

Allocated to GC-MCO investment and state funds per AHSCO determined rate.

Allocated to HE ADAP DDRP Fees based on availability of revenue funds, then to Global Commitment Administration and Substance Abuse Block Grant based on the quarterly Medicaid eligibility rate for ADAP clients:

Expenses are charged direct to HE ADAP DDRP Fees first. If revenue is less than expenses, the remaining quarterly expenses are allocated between GC-MCO Investment and state funds per the Medicaid eligibility rate based on Medicaid clients as percent of total clients served by the ADAP preferred provider network, and as reported to VDH by these 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Allocated to Substance Abuse Block Grant and to Global Commitment Investment based on availability of Substance Abuse Block Grant funding:

Expenses are charged direct to Substance Abuse Block Grant first. If those funds are exhausted, the remaining quarterly expenses are allocated to GC-MCO investment and state funds per AHSCO determined rate.

Allocated to Substance Abuse Grant and Global Commitment Admin based on Medicaid allowable share of costs:

The Medicaid allowable share of costs is based on the number of Medicaid eligible students as a percent of the entire student population in the supervisory union or district.

Allocated to WIC Admin and Global Commitment Investment based on availability of WIC Admin grant award:

Expenses are charged direct to WIC Administration grant first. If those funds are exhausted, the remaining quarterly expenses are charged to GC-MCO Investment.

Allocated to WIC MIS Planning & Implementation and Global Commitment Investment based on availability of WIC MIS Planning & Implementation grant award:

Expenses are charged direct to WIC MIS Planning & Implementation grant first. If those funds are exhausted, the remaining quarterly expenses are charged to GC-MCO Investment.

Total Salaries Across ADAP Program:

Expenses related to ADAP Administration are allocated based on a ratio of total salary costs expended in ADAP in the quarter by VDH staff.

Total Salaries Across Environmental Health:

Expenses related to Environmental Health Administration are allocated based on a ratio of total salary costs expended in Environmental Health in the quarter by VDH staff.

Total Salaries Across Health Promotion & Disease Prevention:

Expenses related to Health Promotion & Disease Prevention Administration are allocated based on a ratio of total salary costs expended in Health Promotion & Disease Prevention in the quarter by VDH staff.

Total Salaries Across Health Surveillance Program:

Expenses related to Health Surveillance Administration are allocated based on a ratio of total salary costs expended in Health Surveillance in the quarter by VDH staff.

Total Salaries Across MCH/OLH:

Expenses related to MCH Administration are allocated based on a ratio of total salary costs expended in MCH in the quarter by VDH staff.

Total Salaries across Office of Public Health Preparedness:

Expenses related to Office of Public Health Preparedness Administration are allocated based on a ratio of total salary costs expended in Office of Public Health Preparedness in the quarter by VDH staff.

Total Salaries Across VDH:

Expenses related to AHSCO and OLH and VDH Administration are allocated based on a ratio of total salary costs expended in the quarter by all VDH staff.

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

Department of Mental Health

Allocated to Data Infrastructure and all DMH programs:

DMH statistical unit's time and travel is direct coded to 42771. A journal entry is done in the business office to move the amount relating to statistic's time and travel in the amount of the quarterly letter given to the department for payment received from Behavioral Health Services Information System in accordance with Synectics for one quarter of the federal \$ to 42005. The statistic allocates the remainder of DMH's statistical unit's time to 42015.

Allocated to direct Secure Res Recovery Operating (MTCR) and Adult General (VPCH) cost centers based on FTE count:

This statistic allocates costs of staff time associated with VPCH Nursing Administration to MTCR based on # of FTE of direct care staff at each facility.

Allocated to direct Secure Res Recovery Operating (MTCR) and Adult General (VPCH) cost centers based on meal count:

This statistic allocates costs associated with VPCH dietary costs to MTCR based on # of meals for the facility.

Full Time Equivalent Count across Housing, Utilization Review, and Employment Supports:

This statistic is the allocation of 42305 costs to 42015, 42306, and 42648 by FTE count in each program code.

Mental Health Distribution for Entire System of Care:

This statistic allocates costs from 42014 to all receivers that are in that statistic as a % of each receiver.

Mental Health Distribution Including Community Care:

This statistic allocates costs from 42015 to all receivers that are in that statistic as a % of each receiver.

Statewide Medicaid Eligibility Rate:

This statistic allocates 42301, 42302, and 42306 to Global Commitment program vs MCO Investment by patient by new admissions to level 1 for the quarter.

Total Cost of All Adult Programs:

42648 is allocated to all adult programs. This statistic is created from actual quarterly cost from department dept Id 3150070500. It is spread as a % of the total costs in 3150070500.

Total Cost of All Children's Programs, Including Community Health:

42649 is allocated to all children's programs. This statistic is created from actual quarterly cost from department dept Id 3150070600. It is spread as a % of the total costs in 3150070600.

Total Costs of All Inpatient Programs:

42321 is allocated to all inpatient programs. This statistic is created from actual quarterly cost from department dept Id 3150070300, 3150070700, and 3150070800. It is spread as a % of the total costs in 3150070300, 3150070700, and 3150070800.

Total Salaries across DMH Staff:

AHS indirect costs are allocated by this statistic. Costs are provided by AHS

* 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 and reported on line 49 of the CMS-64. Those Program Codes with the asterisk are affected by Global Commitment. The Global Commitment Waiver was renewed on January 1, 2015.

XI. TIME TRACKING AND TIME STUDY INFORMATION

ESD Time Study

The random moment time study (RMTS) is a survey process that includes all of the activities performed by the Economic Services Division (ESD), Benefit Programs Specialists (BPS) within the Vermont Department for Children and Families (DCF). An updated study begins on July 1, 2015. Participating staff are those who support multiple programs administered by DCF in ESD. Based on these observations, the total effort of a group of employees is determined with a high degree of confidence that approximates the same results as having observed employees for 100% of their time at work. The results of the RMTS are used in the quarterly cost allocation plan (CAP) to allocate department costs to reimbursable and non-reimbursable areas. This level of detail is required for DCF to participate in federal claiming efforts.

The RMTS must be conducted on a continuous basis to support quarterly claiming efforts.

We thank participants in advance for their time and cooperation. Please direct all questions to either Public Consulting Group, Inc. (PCG) at vtdcfbps@pcgus.com or DCF at AHS.DCFESDOverdueReport@state.vt.us. Participants may also call the PCG hotline at 866-912-2983.

How to Complete the Random Moment Time Study

Participants receive an e-mail that directs them to a website via a web link. Participants log in to the system and then answer several different questions. Depending on the answers to the questions, they select from a list of individual activity and program codes.

After answering all of the questions provided, the user selects a Submit button to respond to the survey. The surveys must be completed within 72 hours. Participants receive a reminder e-mail 24-hours and 48-hours after each moment if the survey has not yet been completed. If a participant is working on a case, the worker is asked to provide the client's first initial, last name, and last four digits of the client's social security number (SSN) as a unique case identifier.

The RMTS is mandatory and must be completed in a timely manner. Every survey that is assigned must be completed! Moments stay 'live' in the system for 72 hours so if a participant is on leave for a short time, they must still complete the moment upon their return.

RECORDING VHC ACTIVITIES

DCF BPS staff may connect Medicaid applicants to the Vermont Health Connect (VHC, the State's Health Insurance Exchange) to seek enrollment in a qualified health plan and premium tax credit and cost sharing reduction programs through the federal exchange. Staff activities in support of Medicaid or VHC eligibility determinations are considered to be part of the Medicaid program for the purpose of completing this time study.

For example: If participants direct a client to VHC, provide them with the website or phone number for VHC, connect them with HAEU staff, or provide the applicant with information on how to apply for the health insurance programs offered by the VHC, participants would select the following activity and program code combination:

Case Specific Activity Code: ~~Referrals to Medicaid and/or Medical/Behavioral Health Services Eligibility Determination or Redetermination Work~~

Program Code: Medicaid or SSI

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ROOT QUESTION

The following describes each of the activities available to RMTS participants. Activities performed and programs administered on behalf of the client are described below. *Please note that meetings, phone calls, e-mails, filing, driving, and similar other administrative tasks should be tied to the activity that they are in support of; these are not general administrative activities unless they are truly not tied to a case.*

The first question a participant is asked when completing the time study is: Were you working on a Case or on behalf of a client? The participant responds Yes or No.

For the purpose of the RMTS, a case is any client where you are actively working on assisting the client to access or continue accessing state or federal benefit programs. Please review the following examples for clarity.

- 1. If you are performing lobby monitoring to assist a potential client apply for a federal or state assistance program, regardless of whether a case has been opened, it is considered a case-related activity; select the Eligibility Determination and Redetermination activity and then select the federal or state program to which the client is applying.*
- 2. If you are performing lobby monitoring and directing a potential client to the Vermont Health Insurance Exchange, it is considered a case-related activity; select the Eligibility Determination and Redetermination activity and then select the Medicaid program.*
- 3. If you are performing lobby monitoring and there is no one in the lobby at the time of your assigned moment, it is not considered a case-related activity; select General Administrative and General Training Activities as your activity and you will not be asked to select a program(s) that the effort was in support of.*

After selecting Yes or No, the participant is asked to first identify their activity, and then select the program(s) the activity is associated with.

CASE SPECIFIC ACTIVITY CODES

Please select the activity you are performing at the time of your moment, not the type of case.

1. Eligibility Determination or Redetermination

This activity includes all efforts made to determine or redetermine eligibility for a program on behalf of a client. Examples include:

- a. Scheduling and conducting client initial interviews;
- b. Reviewing case records for initial eligibility determination or redetermination;
- c. Verifying documents;
- d. Conducting verification requests;
- e. Verifying factors related to eligibility;
- f. Preparing calculation entries or computations;
- g. Data entry for eligibility purposes (including filling out forms specifically used for Reach Up Financial Assistance);
- h. Issuing vouchers for prescriptions, dental emergencies, or durable medical equipment (specifically for General Assistance clients);
- i. Completing necessary online forms to determine eligibility;
- j. Discussing eligibility determination requirements with a client or a DCF case participant; and
- k. Following up on "To-Do's" related to eligibility determination or redetermination requirements.

These activities may be completed when the client is present or on the telephone. Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

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2. Utility Eligibility, Outreach, and Referrals

This activity includes all efforts made to determine or redetermine eligibility for Vermont Gas or Green Mountain Power. This activity should also be used for outreach or referrals to a utility program. This activity should only be used when performing these activities related to Vermont Gas or Green Mountain Power. ***Please note that the only Program allowed for selection after choosing this activity is “Utility Discount”.*** Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

3. Active Case Updates/Changes

This activity should be selected when documenting case notes or a change to the case in a client record. Examples include but are not limited to any of the following:

- a. Documenting changes regarding employment status;
- b. Documenting changes regarding the number of children in the household;
- c. Supporting an audit request/case read by rerunning/correcting budgets or producing documents missing from the file;
- d. Reviewing or performing a case read for accuracy;
- e. Processing a 218E;
- f. Splitting a case or transferring a case to another worker, county, or district;
- g. Processing over/under payments;
- h. Performing QA variances;
- i. Cleaning up the case file;
- j. Generating, printing/copying, and/or mailing notification letters to clients; and
- k. Closing a case or previewing a pending closure case due to “unable to locate”.

Time spent following up on “To-Do’s” or “Dailys” related to updates or changes on active cases should also be coded here. Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

4. Fraud Referrals

This activity includes all tasks involved in processing fraud referrals and responses. This activity includes:

- a. Referring to and communicating about potential fraud to a Supervisor, the Fraud Unit, or the Investigations Unit at DCF;
- b. Gathering information and documenting the referral for submission;
- c. Processing over/under payments; and
- d. Conducting QA variances due to potential fraud.

Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

5. Fair Hearings and Appeals

This activity involves all worker tasks related to fair hearings and appeals, including but not limited to:

- a. Responding to fair hearing requests;
- b. Meeting with the client for pre-hearing conferences;
- c. Attending administrative hearings;
- d. Testifying at administrative hearings;
- e. Attending an appeals case; and
- f. Preparing pre-process or post-hearing paperwork or other documentation for any of these scenarios, including the 113 report.

Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

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6. Reach Up Sanctions

This activity should be selected when performing activities related to Reach Up Sanctions, including processing payments to landlords on behalf of the Reach Up client until the client complies with penalties and attends a follow up meeting with the BPS. Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here. ***Please note that the only Program allowed for selection after choosing this activity is “Reach Up”.***

7. Reach Up Controlled Vendor Payments

This activity should be selected when monitoring and making controlled vendor payments for various expenses, including money mismanagement or processing payment requests from the client. Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here. ***Please note that the only Program allowed for selection after choosing this activity is “Reach Up”.***

8. Outreach and Education Activities

This activity should be used when performing activities related to outreach about the assistance programs offered by DCF. This activity includes any time spent:

- a. Conducting outreach about services offered by the programs BPS administers;
- b. Educating potential clients about the benefits and availability of services;
- c. Encouraging clients to access state and federal services and programs;
- d. Compiling and distributing educational materials about assistance programs; and
- e. Assisting a client fill out a program application.

Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

9. Referrals to Medicaid and/or Medical/Behavioral Health Services

This activity includes referral of a client to Medicaid or other governmental or private agencies for Medical/Behavioral Health services that are not part of the services offered by BPS. This activity includes time spent:

- a. Working with Community Connections related to the medical needs of the client;
- b. Connecting clients with medical/behavioral health services; and
- c. Coordinating medical/behavioral health services for the client.

Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here. ***Please note that the only Program allowed for selection after choosing this activity is “Medicaid” or “SSI”.***

10. Referrals to Non-Medicaid/Non-Medical, Community Services

This activity includes referral of client to social services, housing agencies, Family Services, or other governmental or private agencies for Non-Medical services that are not part of the services offered by BPS. This activity includes time spent:

- a. Working with Community Connections related to the non-medical needs of the client;
- b. Connecting clients with non-medical/non-behavioral health services such as social or religious groups or affiliations; and
- c. Coordinating non-medical/non-behavioral health services for the client.

This activity should not be used to record activities associated with the utility programs. Meetings, phone calls, collateral calls, e-mails, filing, driving, mailing, contact with case managers, working in ININ, and other similar administrative tasks associated with this activity should also be coded here.

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NON-CASE SPECIFIC ACTIVITY CODES

1. Program Specific Training or Reporting

This activity should be used for program specific trainings related to your job as a BPS participant. This activity should also be used for any time you spend creating, editing, or updating program specific reports. The trainings and reports can be on any specific program you support clients with. Examples include trainings and reports on topics such as:

- a. Reach Up Financial Assistance;
- b. 3Squares;
- c. Fuel;
- d. Medicaid;
- e. SSI;
- f. General Assistance/Emergency Assistance;
- g. Essential Person;
- h. Utility Discount;

You will be asked to select which program(s) the training or report covered. Any administrative efforts related to this activity should also be coded here.

2. General Administrative and General Training Activities

This code includes activities performed not related to case work and specific clients but necessary for your job. Please use this activity code for tasks such as:

- a. Attending work-related conferences within your office;
- b. Attending conferences or one-on-ones with your supervisor to discuss non-case related issues;
- c. Attending general trainings not specifically related to your job as a BPS participant, such as:
 - a. Domestic Violence;
 - b. Long Term Care;
 - c. Eligibility Redetermination;
 - d. Interview Training;
 - e. Using the ININ phone system;
 - f. Email system usage;
 - g. Fire drills;
 - h. RMTS training;
 - i. General office procedures trainings; or
 - j. Mentoring New Workers on any of these programs.
- d. Bathroom or Personal Breaks;
- e. Cleaning or organizing your workspace;
- f. Completing your timesheet;
- g. Filling out or looking at the "Daily Duties" spreadsheet;
- h. Preparing for or involvement in office functions;
- i. Covering the front desk (greeting clients and answering phones);
- j. Filling out personnel forms for human resources;
- k. Attending general staff meetings not related to your cases;
- l. Processing general mail/faxes/e-mails not related to a case;
- m. Testing computer systems or working with IT to fix a computer problem; and
- n. Reading new office policies not specific to any of the programs you work with.

You will be asked to describe the activity in your own words, and this activity should not be used for any phone call, collateral calls, e-mail, documentation activity, travel to/from meetings with clients or required trainings that you attend, or filing activity if you can tie it to a specific case. Any administrative efforts related to this activity should also be coded here.

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NON-WORK RELATED ACTIVITY CODES

1. Paid Time Off (Annual/Sick/School/Administrative Leave/Comp)

This activity is used when the participant is not working but is being paid for the time off. Examples include using regular annual leave for vacation, sick time, Family Medical Leave Act (FMLA), banked leave time, union leave, or approved personal educational leave. Paid days not working due to a weather emergency would also be recorded here.

2. Unpaid Time Off: Lunch or Not Scheduled to Work/Flex Time

Any approved leave you take that you are not paid for should be coded here. Use this activity code if you were either not scheduled to work at the time of the observation, (i.e., it is before your regular start time, or after your regular end time, or the sample is received at a time when you are not scheduled to work due to your adjusted work schedule). For example,

- a) you flex on Monday and the sample is received on Monday.
- b) the sample is before or after your regular work hours (e.g., at 7:49 a.m. and you do not start until 8:00 a.m.).

Sick, vacation, annual leave, and “snow or weather” days should not be coded here unless you are not paid for the time off.

3. Non-DCF Activity or Other Emergency Situation

This activity should be used when the participant performs an activity unrelated to any responsibility that they would normally have as an employee of DCF. Examples may include performing a function for another state agency or working on non-human services activities in the event of a natural disaster. Participants are required to provide a brief description of the activity being performed when this activity is chosen.

PROGRAM CODES

Please select the program/program combinations you are supporting at the time of your moment. If you are assisting a client with one activity that supports multiple programs, please select the appropriate combination of programs.

1. Reach Up

Reach Up provides temporary cash and financial assistance to families with children and pregnant women who meet certain financial and nonfinancial eligibility factors in order to help them pay for living expenses such as rent, heat, utilities, clothing, food, and personal care items. This program includes two-parent families and incapacitated families, and also includes time spent on Reach First and Reach Ahead.

2. 3 Squares

3Squares provides temporary food assistance benefits to eligible households and individuals with low income to increase their food purchasing power.

3. Fuel

The Fuel program assists applicants with safe, decent, affordable housing and other essential needs, as well as assistance to help with household heat, electric, and home repair costs, when an emergency situation arises.

4. General Assistance (GA) and Emergency Assistance (EA)

General Assistance provides financial assistance to disabled adults who are not eligible for Reach Up to meet their basic personal and shelter needs such as dental and housing assistance.

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5. Essential Person (also called “Aid to the Aged, Blind, and Disabled (AABD)”)

Essential Person provides financial assistance to help aged, blind, and disabled people who have little or no income with a cash benefit to help contribute to the cost of having someone live with them to provide essential care.

6. Medicaid

The Medicaid program provides medical assistance to those who meet the financial and nonfinancial eligibility factors to ensure that essential health care services are made available to those who otherwise would not have financial resources to purchase them.

7. Social Security Income (SSI)

SSI is a Federal income supplement program designed to help aged, blind, and disabled people who have little or no income with a cash benefit to provide for basic needs such as food, clothing, and shelter.

8. Utility Discount

The Utility Discount programs through Green Mountain Power and Vermont Gas provide financial assistance to eligible households with low income to help with household energy and natural gas.

9. Reach Up/3 Squares

Includes activities in support of a Reach Up/3 Squares multi-program case or application, when the worker is assisting a client with both programs with the same activity.

10. Reach Up/GA and EA

Includes activities in support of a Reach Up/GA and EA multi-program case or application, when the worker is assisting a client with both programs with the same activity.

11. Reach Up/Fuel

Includes activities in support of a Reach Up/Fuel multi-program case or application, when the worker is assisting a client with both programs with the same activity.

12. Reach Up/3 Squares/Fuel

Includes activities in support of a Reach Up/3 Squares/Fuel multi-program case or application, when the worker is assisting a client with the three programs with the same activity.

13. Reach Up/3 Squares/Fuel/GA and EA

Includes activities in support of a Reach Up/3Squares/Fuel/GA and EA multi-program case or application, when the worker is assisting a client with the four programs with the same activity.

14. 3 Squares/Fuel

Includes activities in support of a 3 Squares/Fuel multi-program case or application, when the worker is assisting a client with both programs with the same activity.

15. 3 Squares/Essential Person

Includes activities in support of a 3Squares/Essential Person multi-program case or application, when the worker is assisting a client with both programs with the same activity.

16. 3 Squares/GA and EA

Includes activities in support of a 3Squares/GA and EA multi-program case or application, when the worker is assisting a client with both programs with the same activity.

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17. 3 Squares/Fuel/Essential Person

Includes activities in support of a 3Squares/Fuel/Essential Person multi-program case or application, when the worker is assisting a client with the three programs with the same activity.

18. 3 Squares/Fuel/GA and EA

Includes activities in support of a 3Squares/Fuel/GA and EA multi-program case or application, when the worker is assisting a client with the three programs with the same activity.

19. 3 Squares/Fuel/GA and EA/Essential Person

Includes activities in support of a 3Squares/Fuel/GA and EA/Essential Person multi-program case or application, when the worker is assisting a client with the four programs with the same activity.

20. Fuel/GA and EA

Includes activities in support of a Fuel/GA and EA multi-program case or application, when the worker is assisting a client with both programs with the same activity.

21. Fuel/GA and EA/Essential Person

Includes activities in support of a Fuel/GA and EA/Essential Person multi-program case or application, when the worker is assisting a client with the three programs with the same activity.

22. GA and EA/Essential Person

Includes activities in support of a GA and EA/Essential Person multi-program case or application, when the worker is assisting a client with both programs with the same activity.

23. All Programs: Reach Up/3 Squares/Fuel/GA and EA/Essential Person

Includes activities in support of a Reach Up/3Squares/Fuel/GA and EA/Essential Person multi-program case or application, when the worker is assisting a client with the five programs with the same activity.

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HAEEU Time Study – Training Materials

The random moment time study (RMTS) is a survey process that includes all of the activities performed by the Economic Services Division (ESD), Health Access Eligibility and Enrollment Unit (HAEEU) workers within DVHA. The time study began on July 1, 2015. Participating staff are those who support multiple programs administered by DVHA in HAEEU. Based on these observations, the total effort of a group of employees is determined with a high degree of confidence that approximates the same results as having observed employees for 100% of their time at work. The results of the RMTS are used in the quarterly cost allocation plan (CAP) to allocate department costs to reimbursable and non-reimbursable areas. This level of detail is required for DVHA to participate in federal claiming efforts.

The RMTS must be conducted on a continuous basis to support quarterly claiming efforts.

We thank participants in advance for their time and cooperation. Please direct all questions to either Public Consulting Group, Inc. (PCG) at vtdvhahaeu@pcgus.com or DVHA at AHS.DCFHAEUSupervisor@state.vt.us. Participants may also call the PCG hotline at 866-912-2984.

How to Complete the Random Moment Time Study

Participants receive an e-mail that directs them to a website via a web link. Participants log in to the system and then answer several different questions. Depending on the answers to the questions, they select from a list of individual activity and program codes that fall under their subsequent programs.

After answering all of the questions provided, the user selects a Submit button to respond to the survey. The surveys must be completed within 72 hours. Participants receive a reminder e-mail 24 hours and 48 hours after each moment if the survey has not yet been completed. If a participant is working on a case, the worker is asked to provide the client's contact ID from VHC or UID from ACCESS as a unique case identifier.

The RMTS is mandatory and must be completed in a timely manner. Every survey that is assigned must be completed! Moments stay 'live' in the system for 72 hours so if a participant is on leave for a short time, they must still complete the moment upon their return.

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Root Questions

The following describes each of the activities available to RMTS participants. Activities performed and programs administered on behalf of the client are described below. The RMTS is a decision-tree based process whereby the response provided to each question determines what the subsequent question is.

Please note that meetings, phone calls, e-mails, filing, driving, service requests, and similar other administrative tasks should be tied to the activity that they are in support of; these are not general administrative activities unless they are truly not tied to a case.

The first question a participant is asked when completing the time study is: Were you working on a Case or on behalf of a current or potential customer at the time of your moment?

The participant responds Yes or No.

If the participant selects “Yes”, the second question asks: Which eligibility system were you working in at the time of your moment?

The participants responds “Vermont Health Connect (VHC)” or “ACCESS”.

After selecting one of the two responses, the participant is asked to identify their activity. Of the “Case Specific Activity Codes”, only certain activities are available for selection in the RMTS system when the worker selects VHC or ACCESS.

Please refer to the table following the “Case Specific Activity Codes” section for a crosswalk.

Participants are also asked to provide a Case Identifier. In VHC, this is the Contact ID; in ACCESS, this is the UID.

If the participant selects “No”, the participant is asked to choose from a “Non-Case Specific Activity” or “Non-Work Related Activity”.

Case Specific Activity Codes

Please select the case-specific activity you are performing in the eligibility system at the time of your moment.

1. Collection, Review, and Reconciliation of Application and Data

This activity includes conducting interviews, preliminary review of application forms, verification of documents, data entry, and documenting application/data in VHC or ACCESS. Any other related work that can be conducted in the office, in the field, by mail, or by telephone should also be coded here, including receiving information from others who may be filling out or compiling application on behalf of the client. This activity should only be selected if the worker is physically performing these activities, or related administrative tasks, within the VHC or ACCESS system.

2. Processing Change of Circumstances and/or Updating a Case

This activity should be selected when (documenting case notes or) processing a change of circumstance to the case (in a client record). Related to factors such as changes in employment status or number of children, supporting an audit request/case read by rerunning/correcting budgets or producing documents missing from the file, reviewing or performing a case read for accuracy, splitting a case, processing over/under payments (performing QA variances), or cleaning up the case file. This activity also includes generating notification letters and printing/copying and/or mailing notification letters to clients. This activity should only be selected if the worker is physically performing these activities, or related administrative tasks, within the VHC or ACCESS system.

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3. Issuing Eligibility Notices to Customers

This activity should be selected when generating or printing eligibility notices to send to clients, including using the manual notification tool (MNT). This includes annual review (per year requests), term letters, denial letters, or a letter request for more information. This activity should only be selected if the worker is physically performing these activities, or related administrative tasks, within the VHC or ACCESS system.

4. On-going Case Reviews or Renewals

This activity includes reviewing case records, scheduling and conducting client interviews for renewal purposes, verifying documents, answering verification requests, data entry for eligibility renewal purposes, completing necessary online forms for eligibility reviews and renewals, and discussing eligibility review and renewal with a client or a DVHA case participant. This activity can be completed when the client is present or on the telephone. This activity should only be selected if the worker is physically performing these activities, or related administrative tasks, within the VHC or ACCESS system.

5. Processing Cases for Eligibility Determinations

This activity includes scheduling and conducting client intake, reviewing case records, verifying documents, answering verification requests, preparing calculation entries or computations, data entry for eligibility purposes, completing necessary online forms to determine eligibility, and discussing eligibility determination requirements with a client or a DVHA case participant. This activity can be completed when the client is present or on the telephone. This activity should only be selected if the worker is physically performing these activities, or related administrative tasks, within the VHC or ACCESS system.

6. Customer Service and E-mail/Portal Response Processing related to Eligibility Determination Issues

This activity should be selected when reviewing or responding to client's comments and questions via phone or e-mail/ helpdesk portal. This includes time spent researching and reviewing the client's case, as well as researching policy regarding eligibility to make clear to the client what they qualify for. This activity can be completed when the client is on the telephone, through e-mail, or through the VHC portal inbox. This activity should only be selected if the worker is physically performing these activities, or related administrative tasks, within the VHC or ACCESS system.

7. Customer Service Response Processing related to General Processing Issues (not related to Eligibility Determinations)

This activity should be selected when reviewing or responding to client's comments and questions. This includes time spent researching and reviewing the client's case, answering questions related to premium processing, reconciling payment discrepancies, as well as researching policy specific to the question or concern being dealt with. This activity can be completed when the client is on the telephone, or through ~~e-mail~~ e-mail. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

8. Documenting, Initiating, Answering Case-related Questions for, or Testifying about Appeals (for the Appeals Unit to Process)

This activity involves responding to fair hearing requests, meeting with the client for pre-hearing conferences, attending administrative hearings, testifying at administrative hearings, attending an appeals case, or preparing pre-process or post-hearing paperwork or other documentation for any of these scenarios, including the 113 report. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

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9. On-going Case Maintenance related to Plan Choice, including Referring Customers to Carriers

This activity should be selected when educating and advising a client on the plan options available to them. This also includes any time you spend researching the plans and providing the client with the contact information for the providers. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

10. Policy Development and Research related to Eligibility Determination Standards and Methodologies

This activity should be selected when reading, reviewing, or researching policy related to eligibility determination for a client. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

11. Phone-based Assistance to Fill Out Applications

This activity should be selected when assisting a client over the phone with filling out an eligibility related form or application, including answering any client questions about the form or necessary backup and supplemental documentation for the VHC system. Meetings, phone calls, e-mails, filing, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

12. Referring Customers to Navigators

This activity should be selected when referring a client to a navigator for additional assistance in learning about their health insurance options and select/enroll in a health insurance plan. Meetings, phone calls, ~~e-mails~~ e-mails, filing, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

13. General Outreach and Marketing Activities, related to Open Enrollment

This activity should be used when performing activities related to education and outreach about the assistance programs offered by DVHA. This activity includes any time spent educating clients about the benefits and availability of services, attending community events or fairs to speak to Vermonters about VHC, as well as encouraging clients to access the services and programs. This activity also includes all time spent compiling and distributing educational materials about the assistance program or assisting a client fill out a program application. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

14. Premium Tax Credit Form (1095-A) Processing

This activity involves reviewing all 1095-A forms to ensure accuracy (dates, premiums, address, etc.) and to also ensure every form is mailed to clients. This activity also includes following up with client complaints regarding their 1095-A, correcting errors, and resending the form if necessary. Meetings, phone calls, e-mails, filing, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

15. Referrals to Medicaid and/or Medical/Behavioral Health Services

This activity includes referral of client to medical or other governmental or private agencies for Medical/Behavioral Health services that are not part of the services offered by HAEEU. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests and other similar administrative tasks associated with this activity should also be coded here.

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16. Referrals to Non-Medicaid/Non-Medical, Community Services

This activity includes referral of client to social services, housing agencies, or other governmental or private agencies for Non-Medical services that are not part of the services offered by HAEEU. This activity includes time spent working with Community Connections and Community Partners. Meetings, phone calls, e-mails, filing, driving, mailing, contact with case managers, service requests, and other similar administrative tasks associated with this activity should also be coded here.

| Activity | VHC | ACCES |
|---|-----|-------|
| Collection, Review, and Reconciliation of Application and Data | X | X |
| Processing Change of Circumstances and Other Data Edits | X | X |
| Issuing Eligibility Notices to Customers | X | X |
| Ongoing Case Reviews or Renewals | X | X |
| Processing Cases for Eligibility Determinations | X | X |
| Customer Service and E-mail/Portal Response Processing related to Eligibility Determination Issues | X | X |
| Customer Service Response Processing related to General Processing Issues (not related to Eligibility Determinations) | X | X |
| Documenting, Initiating, Answering Case-related Questions for, or Testifying about Appeals (for the Appeals Unit to Process | X | X |
| On-going Case Maintenance related to Plan Choice, including Linking Referring Customers to Carriers | X | |
| Policy Development and Research related to Eligibility Determination Standards and Methodologies | X | X |
| Phone-based Assistance to Fill Out Applications | X | X |
| Referring Customers to Navigators | X | |
| General Outreach and Marketing Activities, related to Open Enrollment | X | |
| Premium Tax Credit Form (1095-A) Processing | X | |
| Referrals to Medicaid and/or Medical/Behavioral Health Services | X | X |
| Referrals to Non-Medicaid/Non-Medical, Community Services | X | X |

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Non-Case Specific Activity Codes

1. Delivery of or Participation in HAEEU -Specific Training and Staff Development

This activity should be used for trainings related to your job as a ~~HAEEU Vermont Healthcare Service Specialist (formerly HAEEU worker) worker~~. ~~The~~ These trainings can be on any specific program you support clients with. Examples include trainings on topics such as Siebel, ADA, ACCESS, ~~De-escalation (phone), Release One~~, Health Plan Selection, Customer Service, Eligibility Rules, Paper Application Processing, Wex, ~~professional development trainings, Systems 101, Interview Training~~, ININ phone system training, New Worker training, email system usage, fire drills, time study trainings, general office trainings. You will be asked to select which program/topic the training covered. Any administrative efforts related to this activity should also be coded here.

2. All Staff or Supervision Meetings

Please use this activity code for work-related conferences within your office or one-on-one with your supervisor to discuss non-case related issues. All meetings related to clients should be coded to a ~~Case-Specific Case-Specific~~ Activity Code. Any administrative efforts related to this activity should also be coded here.

3. General Administrative Activities

This activity includes activities performed not related to case work and specific clients but necessary for your job. Examples include cleaning or organizing workspace, timesheet completion, preparation for or involvement in office functions, filling out personnel forms for human resources, mentoring new staff without a client present, general staff meetings not related to your cases, processing mail/faxes/e-mails not related to a case, testing computer systems, working with IT to fix a computer problem, reading new policies, completing general service requests not related to your cases, etc. You will be asked to describe the activity in your own words, and this activity should not be used for any phone call, email, documentation activity, travel to/from meetings with clients or required trainings that you attend, or filing activity if you can tie it to a specific case. Any administrative efforts related to this activity should also be coded here.

Non-Work Related Activity Codes

1. Paid Time Off (Annual/Sick/School/Administrative Leave/Comp)

This activity is used when the participant is using regular annual leave for vacation, sick hours, Family Medical Leave Act (FMLA), banked leave time, union leave, or approved personal educational leave. Paid days not working due to a weather emergency would also be recorded here.

2. Lunch/Break

Scheduled or unscheduled breaks (bathroom trips, lunch break, coffee breaks, and personal phone calls) should be coded here.

3. Not Scheduled to Work/Flex

Use this activity code if you were either not scheduled to work at the time of the observation, (i.e., it is before your regular start time, or after your regular end time, or the sample is received at a time when you are not scheduled to work due to your adjusted work schedule.) For example, you flex on Monday and the sample is received on Monday. The sample is before or after your regular work hours (e.g., at 7:49 a.m. and you do not start until 8:00 a.m.). Sick, vacation, annual leave, and “snow or weather” days should not be coded here.

4. Unpaid Time Off

Any leave you take that you are not paid for should be coded here.

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5. Non-HAEEU Activity or Other Emergency Situation

This activity should be used when the participant performs an activity unrelated to any responsibility that they would normally have as a HAEEU worker at DVHA. Examples may include performing a function for another state agency or working on non-human services activities in the event of a natural disaster.

Participants are required to provide a brief description of the activity being performed when this activity is chosen.

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HAEEU Random Moment Time Study Matrix

| Program/Activity | VHC | ACCESS | Non Case-Specific | Non-Work |
|--|--|--|--|-----------------------|
| Collection, Review, and Reconciliation of Application and Data | Case Count between CHIP, VHC, and Medicaid 75% | Case Count between CHIP and Medicaid 50% | | |
| Processing Change of Circumstances and/or Updating a Case | Case Count between CHIP, VHC, and Medicaid 75% | Case Count between CHIP and Medicaid 50% | | |
| Issuing Eligibility Notices to Customers | Case Count between CHIP, VHC, and Medicaid 75% | Case Count between CHIP and Medicaid 50% | | |
| On-going Case Reviews or Renewals | Case Count between CHIP, VHC, and Medicaid 75% | Case Count between CHIP and Medicaid 50% | | |
| Processing Cases for Eligibility Determinations | Case Count between CHIP, VHC, and Medicaid 75% | Case Count between CHIP and Medicaid 50% | | |
| Customer Service and E-mail/Portal Response Processing related to Eligibility Determination Issues | Case Count between CHIP, VHC, and Medicaid 75% | Case Count between CHIP and Medicaid 50% | | |
| Customer Service Response Processing related to General Processing Issues (not related to Eligibility Determinations) | Case Count between CHIP, VHC, and Medicaid 50% | Case Count between CHIP and Medicaid 50% | | |
| Documenting, Initiating, Answering Case-related Questions for, or Testifying about Appeals (for the Appeals Unit to Process) | Case Count between CHIP, VHC, and Medicaid 50% | Case Count between CHIP and Medicaid 50% | | |
| On-going Case Maintenance related to Plan Choice, including Linking Referring Customers to Carriers | Case Count between CHIP, VHC, and Medicaid 50% | | | |
| Policy Development and Research related to Eligibility Determination Standards and Methodologies | Case Count between CHIP, VHC, and Medicaid 50% | Case Count between CHIP and Medicaid 50% | | |
| Phone-based Assistance to Fill Out Applications | Case Count between CHIP, VHC, and Medicaid 50% | Case Count between CHIP and Medicaid 50% | | |
| Referring Customers to Navigators | Case Count between CHIP, VHC, and Medicaid 50% | | | |
| General Outreach and Marketing Activities, related to Open Enrollment | Case Count between CHIP, VHC, and Medicaid 50% | | | |
| Premium Tax Credit Form (1095-A) Processing | Case Count between CHIP, VHC, and Medicaid 50% | | | |
| Referrals to Medicaid and/or Medical/Behavioral Health Services | Case Count between CHIP, VHC, and Medicaid 50% | Case Count between CHIP and Medicaid 50% | | |
| Referrals to Non-Medicaid/Non-Medical, Community Services | State Funds | State Funds | | |
| Delivery of or Participation in HAEEU Specific Training and Staff Development | | | Case Count between CHIP and Medicaid 50% | |
| All Staff or Supervision Meetings | | | Reallocated | |
| General Administrative Activities | | | Reallocated | |
| Paid Time Off (Annual/Sick/School/Administrative Leave/Comp) | | | | Reallocated |
| Lunch/Break | | | | Reallocated |
| Not Scheduled to Work/Flex | | | | Remove |
| Unpaid Time Off | | | | Remove |
| Non-HAEEU Activity or Other Emergency Situation | | | | Direct to State Funds |

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HAEEU Random Moment Time Study Procedure
Random Moment Time Study Procedure Manual
Health Access Eligibility Unit Workers

Introduction

The purpose of this random moment time study (RMTS) is to measure the level of effort spent on various eligibility activities performed by the Health Access Eligibility and Enrollment Unit (HAEEU) workers in the State of Vermont. These staff, who are all state employees, perform Medicaid eligibility determination activities on behalf of residents in the state and clients served by DVHA and other Departments within the Agency of Human Services (AHS) umbrella. Organizationally, HAEEU staff work within the Medicaid Policy, Fiscal & Support Services Division of DVHA.

The time study is administered using EasyRMTS™, which is a tool that has been developed by Public Consulting Group, Inc. (PCG). EasyRMTS™ is an automated, web-based RMTS application that gives users a comprehensive tool for administering a time study for federal claiming, cost allocation, or other similar activities. Fully customizable for an individual agency or school district's specific requirements, EasyRMTS™ gives an administrative user the capability to assign random moments, monitor staff participation, update respondents' information, create and produce reports for federal claiming and other purposes, and view and analyze tabulated responses from participating staff. Participants of an EasyRMTS™ administered time study only need to have access to the Internet and an e-mail address in order to receive and complete their assigned random moments.

The application serves its state and local government or school district users by allowing for a timely and effective system to record staff activities performed, especially with respect to key federal programs that are supported by their staff. The automated RMTS application was developed to comply with all federal rules and regulations related to cost allocation practices and claiming for reimbursement of federal dollars. The software supports accurate reporting of reimbursable administrative activities, which are generally required by federal approving agencies to be measured through a time study. EasyRMTS™ puts the least administrative burden on staff as possible while allowing users to measure their time and claim for federal revenue. The system allows participants to indicate directly, via a series of survey questions in the software, the activities and programs they are supporting.

The purpose of this manual is to provide step by step explanation of how to complete the Vermont DVHA HAEEU RMTS. It has been created to assist DVHA in managing and administering the RMTS. It serves as a procedural guide and instructional tool for sustaining the RMTS for its ongoing support of the cost allocation plan (CAP) process.

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Operation

There is a single RMTS (with 2300 moments per quarter) operated for HAEEU workers. PCG provides the EasyRMTS™ system (via a web-hosted service), generates each quarterly sample, provides assistance to DVHA with monitoring participant responses, and provides customer service. The sample is generated using data from the payroll system on a quarterly basis. Participants are responsible for selecting activity and program codes when they respond to the RMTS. Initial training is provided by PCG, while annual refresher and ongoing new worker training is conducted by DVHA. The following table displays the responsibilities of PCG and DVHA when it comes to RMTS administration.

| Task | DVHA | PCG |
|--|------|-----|
| Host EasyRMTS™ on Server | | X |
| Provide DVHA with System and Administrator Support/Address Technical Issues with System | | X |
| Gather Participant Rosters | X | |
| Support Users on System Use through Dedicated E-mail Address | X | X |
| Support Users on System Use through Dedicated Hotline <i>(Note: the hotline will be staffed from 9:00 a.m. to 5:00 p.m. EST, excluding weekends and holidays; a voice-mail box will always be available in the event that a live worker is unable to answer immediately).</i> | X | X |
| Calendar and Work Schedule Maintenance | X | |
| Generate Monthly Response Reports | X | |
| Review Subsample Results for Quality Control | X | |
| Ongoing CAP Amendments for Changes to RMTS Activities | X | |
| Adding Activities to the Decision-Tree in EasyRMTS™ | X | X |
| Quality Control <i>(refer to the Quality Control section of this appendix)</i> | X | X |
| Quarterly Moment Generation | X | |
| Quarterly Trainings for New Hires/Participants | X | |
| Annual Refresher Trainings | X | |

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Sampling Population

The sampling population includes eligibility workers within DVHA. These participants work to assess the need and determine eligibility for Medicaid. Specifically, workers included in the RMTS are Health Access Eligibility and Enrollment Unit (HAEEU) workers.

HAEEU staff ensure that each person or family that applies for health care programs, including health insurance exchange programs, through the Vermont Health Connect (VHC), the state's health insurance exchange (HIX) eligibility system. HAEEU workers determine eligibility for Medicaid and work regularly in VHC. Customers are ultimately determined eligible for Medicaid, CHIP, or other insurance coverage through a qualified health plan. HAEEU staff review the application and decides which forms and verifications are needed. The specialists then evaluate the information contained in all documents and uses standard policies and procedures to determine eligibility. HAEEU staff provide all families with information about the expectations and goals of the Medicaid program. These positions also process changes as necessary on active cases.

Supervisors are not included in the RMTS.

On a quarterly basis, DVHA updates the information for all staff members participating in the RMTS to account for new staff, terminated staff, and staff on long-term leave and updates the actual sample on a quarterly basis (for each new quarterly sample). Throughout the quarter and before the subsequent quarterly sample is drawn, RMTS administrators at DVHA collect additions, deletions, and schedule changes and update the software system accordingly (note that these changes have no effect on the current sample). Changes are accepted by DVHA until the sample is drawn for the next quarter. If a person leaves mid-way through the quarter, their supervisor notifies the RMTS administrators, and the leave information is noted so as to not initiate additional follow up. RMTS administrators change that individuals e-mail to a "dummy" e-mail address to stop e-mails from going out, but there is no type of replacement in the system. These moments are counted as non-responses.

It is important to note the DVHA participants who have participated in the RMTS in the past, but whom are no longer in the sample selection (e.g., retired, left position), are not deleted from the EasyRMTS™ database but are deactivated so that prior quarter data is available for audit trail purposes.

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Sampling Unit

An RMTS asks a participant what they are doing at a specific moment in time (e.g., 11:48 a.m.). The RMTS sampling unit is defined as a single minute, or sixty second length of time, randomly selected within the workday of each participant. The moments for the participants occur between 8:00 a.m. to 4:30 p.m., and the moments are drawn from the core hours for each working day in a quarter, exclusive of official state holidays. Participants receive the e-mail within a few minutes after their assigned random moment time. There is no pre-notification of when a participant will have a moment assigned to them.

Responses and Response Time

Participants have 72 hours to respond to all moments. If the participant does not respond to their moment within the first 24 and 48 hours, reminder e-mails are sent to both the participant and their supervisor, requesting that they answer their moment. The moment expires after 72 hours. Reminder e-mails do not include the participant's username and password to ensure that only the participant has access to their unique login credentials and that no one other than the participant responds to their moments.

DVHA RMTS administrators are cc'd on all reminder e-mails and follow-up with non-responders as needed. If a specific individual is identified as a non-responded, the RMTS administrators notify the specific supervisor so that person may be further trained on the importance of completing the RMTS. If a systemic issue is identified, communication is sent to all participants. PCG and DVHA may also send out occasional e-mails over the holidays or other times when participation may be less to ensure that individuals are responding to the RMTS whenever possible.

Sampling Period

The sampling period is a calendar quarter.

Confidence and Precision Level

This level is kept at 95% confidence level with +/- 2% precision for all activities. This level is consistent with federal regulations for statistical validity. Cost Allocation Services (CAS, formerly the Division of Cost Allocation or DCA) determines that statistically validity is met when the minimum number of moments received (responded to) as determined in the formula below.

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Sample Size

DVHA generates 2,300 moments per quarter for the RMTS. This number is to ensure that 2,000 valid observations are obtained and is in compliance with the federally-required formula below. Specifically, the Public Assistance Cost Allocation Plan Review Guide states that:

The sample size needed may be determined from the formula included in the State Guide. The State Guide specifies that a minimum 2,000 valid observations per sample period be obtained. A “valid observation” is defined as any observation other than a “non-strike”. A “non-strike” occurs whenever a selected employee could not be contacted at the selected moment, i.e., the employee no longer works in the office, the employee is on a flex-schedule and not at work at the time of the observation, etc.

The formula used to determine the baseline number of moments is as follows:

$$N = \frac{P(1-P)}{(SE/T)^2}$$

Where

- N = Sample Size
- P = Anticipated Rate of Occurrence of the Activities Being Observed
- SE = Desired Sample Precision
- T = Confidence Level Factor (1.96 for 95%)

With the updated system, DVHA will update the maximum rate of occurrence and adjust the sample size as needed but also ensure the floor of moments responded to (2,000), as required by CAS.

Sample Calculation

Solving for N (with a maximum rate of occurrence of **30%**):

$$N = \frac{.30(1-.30)}{(.02/1.96)^2} = 2,038$$

As mentioned above, this formula will be recalculated and updated on an annual basis. If the formula indicates a number less than 2,000 at any point, DVHA will generate enough moments to still maintain 2,000 valid samples.

Please note that because the HAEEU RMTS is a new process, the above formula is truly a sample calculation. Once the first quarter has been completed, the sample calculation will be updated with the actual maximum rate of occurrence.

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Standard Observation Form and Definitions

A standard observation form has been developed that includes numerous questions, up to 24 distinct activity codes that encompass the universe of activities that the population being surveyed performs.

1. The sample is generated (e.g., moments are assigned to participants) just prior to the beginning of the quarter.
2. E-mails are sent to the participant, indicating that they have been selected to report their activity for the moment shown (e.g., 10:12 a.m. on 1/5/14).
3. The e-mail contains a username and password and link to the website to respond to the moment.
4. The participant selects the link to the website. At the website, they logon and have access to the questions and activity/program codes.
5. The participant answers the questions and selects the appropriate activity and program (client specific activities require a patient identification number and/or name).
6. There is no advance notification of moments.

Participants are sent 24 and 48-hour reminder e-mails (if the participant has not yet responded) and have 72 hours to complete each moment for it to be considered valid. Participants are not able to respond to moments once they have expired. Expired/non-response moments are not included in the RMTS activity percentage calculations.

A participant is asked numerous questions in the time study. The root question is “Were you working on a Case or on behalf of a current or potential customer at the time of your moment?” (Y/N). Below, is the sequence of questions depending on how they answer the root (first) question.

For answering “Yes” to case-related activity.

1. Which eligibility system were you working in at the time of your moment?
 - a. Vermont Health Connect (VHC)
 - b. Access
2. Please select the activity you were performing at the time of your moment.
3. Please provide the client’s contact ID from VHS or UID from ACCESS.

For answering “No” to case-related activity.

1. Please select the activity you were performing at the time of your moment. Below are the

case specific activity codes:

Case Specific Activity Codes

1. Collection, Review, and Reconciliation of Application and Data
2. Processing Change of Circumstances and/or Updating a Case
3. Issuing Eligibility Notices to Customers
4. On-going Case Reviews or Renewals
5. Processing Cases for Eligibility Determinations
6. Customer Service and E-mail/Portal Response Processing related to Eligibility Determination Issues
7. Customer Service Response Processing related to General Processing Issues (not related to Eligibility Determinations)
8. Documenting, Initiating, Answering Case-related Questions for, or Testifying about Appeals (for the Appeals Unit to Process)
9. On-going Case Maintenance related to Plan Choice, including Referring Customers to Carriers

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10. Policy Development and Research related to Eligibility Determination Standards and Methodologies
11. Phone-based Assistance to Fill Out Applications
12. Referring Customers to Navigators
13. General Outreach and Marketing Activities, related to Open Enrollment
14. Premium Tax Credit Form (1095-A) Processing
15. Referrals to Medicaid and/or Medical/Behavioral Health Services
16. Referrals to Non-Medicaid/Non-Medical, Community Services

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Below are the non-case specific activity codes:

Non-Case Specific Activity Codes

1. Delivery of or Participation in HAEEU -Specific Training and Staff Development
2. All Staff or Supervision Meetings
3. General Administrative Activities

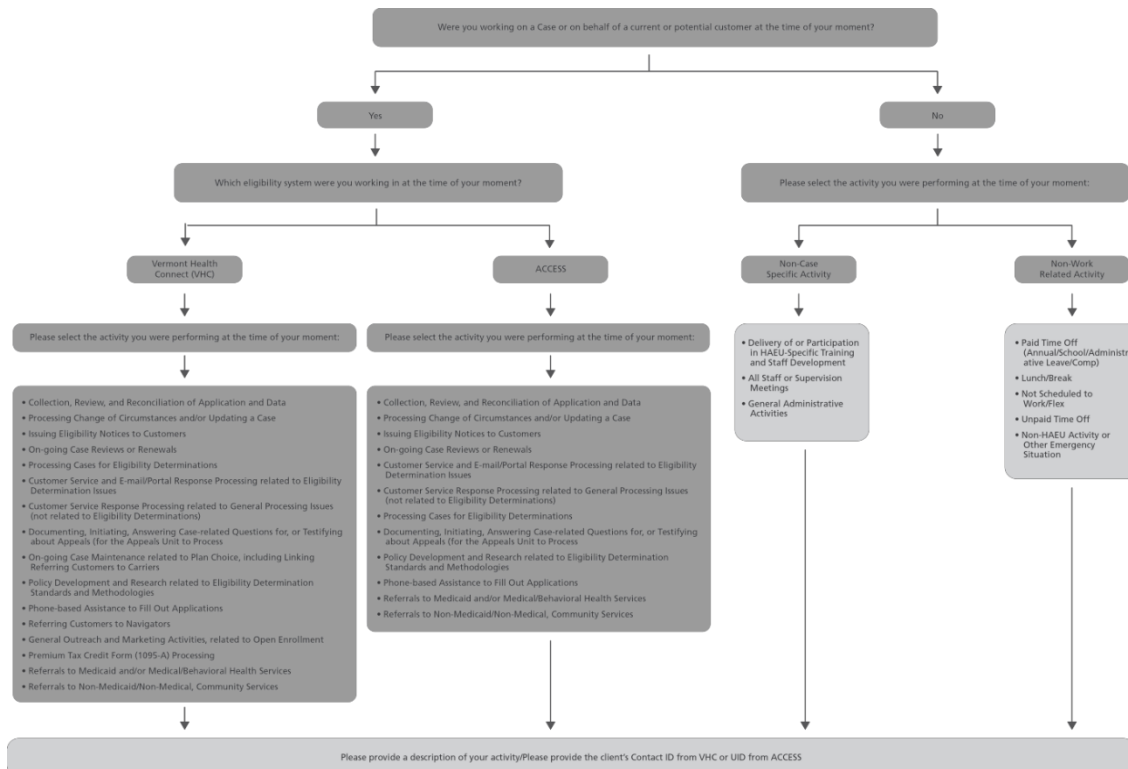
Below are the non-work related activity codes:

Non-Work Related Activity Codes

7. Paid Time Off (Annual/Sick/School/Administrative Leave/Comp)
8. Lunch/Break
9. Not Scheduled to Work/Flex
10. Unpaid Time Off
11. Non-HAEEU Activity or Other Emergency Situation

Please note that the activity codes are not numbered in the system. Some activity codes are also only shown for case-related work, while others only appear for non-case-related or non-work-related activities.

Please refer to the allocation matrix for the valid combinations of eligibility system/activity codes available to participants through the decision tree nature of the EasyRMTS™ software. Additionally, the following graphic represents the questions participants are walked through in order to select an activity/program combination; this graphic is provided to participants as part of the training presentation.



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Date Stamp

The moment date/time is provided to the participant in the e-mail notification and is viewed by the participant when they log in to EasyRMTS™ to complete their moment. Each response is date stamped when the participant responds to the moment.

Help Desk

A Help Desk is operated where participants can call (via an 800 number) and speak to PCG if they have questions. This number is contained in all e-mails and on the RMTS system when participants log in to the system. If someone is unavailable, they can leave a message. All messages related to questions asked about activities are logged. Participants can also respond to the e-mail that they receive and receive an ~~e-mail~~ e-mail response.

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Training

Employees must participate in a web-based training before completing their first random moment. Training sessions occur for all participants on an annual basis. Quarterly sessions are also held for workers who would like to attend or are required to attend additional trainings (participants who regularly fail to respond) as necessary. Periodic newsletters or memos are also sent to participants.

Analysis of Results

On a monthly basis, the results of the RMTS are compared to previous months to determine if there are any significant variances in the responses. If a significant variance is discovered, a review is conducted in order to determine the reason for the variance. If the reason for the variance is due to bias or improper technique, it will be determined whether to make a change to the RMTS form. Additional training may also be conducted. The state will also, as necessary, send communication and memorandum to participants to clarify any common issues.

On a monthly basis, reports are forwarded to the HAEEU RMTS coordinators so that they can follow up with non-responsive participants. Individual supervisors are involved as necessary. The system generates 24 and 48-hour follow-up e-mails. Additional follow-ups will be employed as necessary.

Evaluation and Modification of the System

The RMTS system, observation form, and distribution procedures are continuously evaluated to identify necessary modifications in order to improve their efficiency and effectiveness. If modifications are determined necessary, they are made promptly.

Subsample Process

For the entire HAEEU time study, 10% of all moments are randomly selected as part of the subsample process. Participants who are selected for the subsample are required to answer one additional question when responding to their moments, requiring them to write in their own words the activity they were performing. The RMTS administrators generate a report detailing those moments that have been selected as part of the subsample on the 18th day of the month (for moments that occurred in the first two weeks of the month) and 3rd day of every month (for moments that occurred in the second two weeks of the month). RMTS administrators will then review the reports, comparing the activity selection to the participant's own description of their task to ensure that they match appropriately. If the activity selection does not match, RMTS administrators will contact the participants. If validation is not confirmed on any moments within the 10% subsample for whatever reason, these moments will be reallocated direct to state general fund. The RMTS statistic will be updated accordingly.

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Documentation

All aspects of the RMTS process are documented. This documentation includes but is not limited to the following:

1. Assigned moments e-mailed;
2. Data related to tabulations;
 - a. Analysis of sample results; and
3. Final computation of results that are used in the cost allocation plan. Procedural documentation is also kept on the procedures used.

Quality Control

Quality control is performed on the RMTS on an ongoing basis. Some codes require the participant to enter the case number they are working on during their random moment to ensure those cases are active for the department. For codes that require the participant to provide a description, those descriptions are reviewed by DVHA to ensure the participants are using them appropriately. This information, along with other common participant errors recognized by DVHA, is used to determine training needs.

The decision-tree setup of EasyRMTS™ ensures that participants cannot select incompatible combinations (please refer to the allocation matrix). If new activities are added or removed from the time study, EasyRMTS™ is reviewed and updated accordingly to ensure edits have been made correctly. Edits to the system are effective the first day of the quarter, in line with an accompanying CAP amendment. All amendments related to the RMTS process are prospective.

The following items, at a minimum, are reviewed throughout the quarter and prior to sample generation for the subsequent quarter:

1. Identification of upcoming Vermont state or observed federal holidays (excluded from the sample).
2. Data related to participant contact information, including full name and e-mail address.
3. Participant roster updates to reactivate an employee who may have been on extended leave or to deactivate someone who will be on extended leave or no longer working in the HAEEU position at DVHA.
4. Workers who select the wrong activity (based on their own description of their work) are **e-mail e-mailed** directly to explain what the appropriate selection was so that the mistake does not continue to occur (either from reviewing the subsample moments or
5. general observations regarding common mistakes made by participants).

Any employee on extended leave (exceeding six weeks during a single quarter) will be deactivated from the system until further notice. All other instances of leave will be determined on a case-by-case basis by RMTS administrators.

Quarterly Calculation of Results

DVHA calculates the quarterly results based on the total number of moment received, minus the number of not scheduled to work (NSTW), and no response moments. Therefore, if 3,000 moments are generated and 500 of those moments received are a combination of unpaid time off or NSTW the denominator for the calculation is 2,500. All responses in the system, inclusive of NSTW, count as “responses” in determining the overall response rate.

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Contingency Plan

In the event of a technical failure or emergency situation, when staff are not able to receive or respond to moments for longer than 5 days, DVHA will take the following steps to ensure that a valid sample can still be obtained and that the time study's statistical validity is not compromised:

1. Upon resumption of the RMTS, DVHA will determine how many moments were affected. DVHA will then generate a concurrent sample, starting on the day the RMTS is resumed or shortly thereafter, containing the same number of moments that were affected by the outage through the end of the sample period. For example, if 200 moments were affected due to a technical failure DVHA will generate a second sample of 200 moments, to run concurrently with the original sample through the end of the sample period.
2. If the situation occurs closer to the end of the quarter and a concurrent sample is not possible or if the issue will be prolonged, the prior quarter RMTS results will be used for the affected quarter.

Any situation where either option is considered will be communicated with CAS and the appropriate cognizant agencies and documented in the RMTS backup and the backup for all claims prepared using this data.

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APPENDICES

1. Accounting System Chart of Accounts.

The State of Vermont Financial and accounting system VISION is used to meet the state's accounting and financial reporting responsibilities. VISION is an acronym for Vermont Integrated System for Information and Organizational Needs. VISION is a PeopleSoft product.

VISION-Financials is a Web based Oracle/PeopleSoft enterprise financial management system utilizing the following modules: Travel & Expense, General Ledger, Accounts Payable, Purchasing, Accounts Receivable, Billing, Asset Management, Inventory, and Sub recipient Grant Tracking (VT custom module). The system is managed by the Department of Finance & Management in conjunction with the Department of Information & Innovation.

The Chart of Accounts for VISION include the following fields:

| Chartfield Name | Length | Description |
|-----------------|------------------|---|
| Business Unit | 5 numeric | Identifies the Governmental Agency/Department established Statutorily or Administratively. |
| Account | 6 numeric | Classifies the nature of the operation transactions. Holds the detail coding values for assets, liabilities, equity, revenues, and expenses/expenditure transactions. |
| Fund | 5 numeric | Maintains the fiscal and accounting entities in which financial resources and the use of those resources are grouped according to Statute, regulation, or current accounting standards. |
| Dept ID | 10 numeric | Identifies Governmental Agency/Department operation unit subdivisions. |
| Program | 5 numeric | Maintains a description and a set of objectives toward which activities and resources are directed. AHS uses this field for CAP cost pools. |
| Class | 5 alpha/numeric | Used to track activities relating to programs across program lines based on departmental, administrative, or legislative needs. |
| Project | 15 alpha/numeric | Captures and controls project or grant information which funding sources are applied. |
| Affiliate | 5 numeric | Reference Business unit for intrastate transactions |

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2. Summary Table of Unique Allocation Methods

| Method Name | Method Description | Department |
|---|---|---|
| Admin Fund | Direct to Admin Fund | State of Vermont Agency of Human Services Secretary's Office |
| AHS | Direct to AHS | State of Vermont Agency of Human Services Secretary's Office |
| AHS Staff | Positions Across AHS | State of Vermont Agency of Human Services Secretary's Office |
| AHS Staff Less Non-Institutional Staff | Number of Non-Institutional Positions Across AHS | State of Vermont Agency of Human Services Secretary's Office |
| AHS/CO Redirected Costs | Re-allocation | State of Vermont Agency of Human Services Secretary's Office |
| Audit TS | Results of Audit Time Study | State of Vermont Agency of Human Services Secretary's Office |
| CAQH ACA | Direct to CAQH ACA (90%) | State of Vermont Agency of Human Services Secretary's Office |
| Caseload | Results of Legal Aid Contract | State of Vermont Agency of Human Services Secretary's Office |
| CHIP | Direct to CHIP | State of Vermont Agency of Human Services Secretary's Office |
| CMS - E&E/VIEWS DDI | Direct to CMS-E&E/VIEWS DDI (90%) | State of Vermont Agency of Human Services Secretary's Office |
| CMS E&E/VIEWS & Exchange Level 2 | QU—CMS E&E/Views (65.5%) & Exchange Level 2 (34.5%) | State of Vermont Agency of Human Services Secretary's Office |
| CMS-HIT IAPD | Direct to CMS-HIT IAPD (90%) | State of Vermont Agency of Human Services Secretary's Office |
| CMS-MMIS/MES | Direct to CMS-MMIS/MES - DDI (90%) | State of Vermont Agency of Human Services Secretary's Office |
| CMS-MMIS/MES DDI - CMS E&E/VIEWS DDI – CMS HIT IAP | QU - CMS-MMIS/MES DDI (48.24%); CMS E&E Views DDI (38.24%); CMS-HIT IAPD (13.42%) | State of Vermont Agency of Human Services Secretary's Office |
| CNCS Competitive | Direct to CNCS Competitive | State of Vermont Agency of Human Services Secretary's Office |
| CNCS Formula | Direct to CNCS Formula | State of Vermont Agency of Human Services Secretary's Office |
| CNCS Operations | Direct to CNCS Operations | State of Vermont Agency of Human Services Secretary's Office |
| CNCS Withholding | Direct to CNCS Withholding | State of Vermont Agency of Human Services Secretary's Office |
| DAIL | Direct to DAIL | State of Vermont Agency of Human Services Secretary's Office |
| DCF | Direct to DCF | State of Vermont Agency of Human Services Secretary's Office |
| DD Council | Direct to DD Council | State of Vermont Agency of Human Services Secretary's Office |
| DMH | Direct to DMH | State of Vermont Agency of Human Services Secretary's Office |

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| | | |
|---|---|---|
| DOC | Direct to DOC | State of Vermont Agency of Human Services Secretary's Office |
| DVHA | Direct to DVHA | State of Vermont Agency of Human Services Secretary's Office |
| Exchange Level 1C | Direct to Exchange Level 1C (100%) | State of Vermont Agency of Human Services Secretary's Office |
| Exchange Level 2 | Direct to Exchange Level 2 (100%) | State of Vermont Agency of Human Services Secretary's Office |
| Exchange Level 2 & GC Admin | QU - Exchange Level 2 (34.5%); GC-Admin (65.5%) | State of Vermont Agency of Human Services Secretary's Office |
| Federal Funds Management TS | Results of Federal Funds Management Unit Time Study | State of Vermont Agency of Human Services Secretary's Office |
| Final | NOT APPLICABLE | State of Vermont Agency of Human Services Secretary's Office |
| Financial Statement and Internal Controls | State Auditor's Office Single Audit Invoice | State of Vermont Agency of Human Services Secretary's Office |
| Fiscal Analysis & Development S&W | Total Salaries and Benefits for all Fiscal Division Staff Reporting to Unit Chief | State of Vermont Agency of Human Services Secretary's Office |
| Fiscal Division S&W | Total Salaries and Benefits for all Fiscal Division Staff | State of Vermont Agency of Human Services Secretary's Office |
| GC Admin | Direct to Global Commitment - Admin | State of Vermont Agency of Human Services Secretary's Office |
| GC Payments | Direct to Global Commitment - Program | State of Vermont Agency of Human Services Secretary's Office |
| Hearings | Results of HSB Case Count | State of Vermont Agency of Human Services Secretary's Office |
| HR Investigation | Results of HR Investigation Case Count | State of Vermont Agency of Human Services Secretary's Office |
| HSB | Direct to Human Services Board | State of Vermont Agency of Human Services Secretary's Office |
| ICD-10 IAPD (90%) | Direct to ICD-10 IAPD (90%) | State of Vermont Agency of Human Services Secretary's Office |
| IDT | Direct to IDT | State of Vermont Agency of Human Services Secretary's Office |
| IT Salaries and Benefits | Total Salaries of IT Staff | State of Vermont Agency of Human Services Secretary's Office |
| Keurig | Direct to Keurig | State of Vermont Agency of Human Services Secretary's Office |
| MCO - 211 Contract | Direct to MCO - 211 Contract | State of Vermont Agency of Human Services Secretary's Office |
| MCO - VSC VIT | Direct to MCO - VSC VIT | State of Vermont Agency of Human Services Secretary's Office |
| Medicaid Enrollment | Results of Actual Medicaid Enrollment Counts | State of Vermont Agency of Human Services Secretary's Office |
| Race to the Top ELC Grant | Direct to Race to the Top Grant | State of Vermont Agency of Human Services Secretary's Office |
| Rate Setting | Direct to Rate Setting | State of Vermont Agency of Human Services Secretary's Office |

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| | | |
|---|---|---|
| Refugee CMA | Direct to Refugee CMA Grant | State of Vermont Agency of Human Services Secretary's Office |
| Refugee Discretionary Targeted Assistance | Direct to Refugee Discretionary Targeted Assistance Grant | State of Vermont Agency of Human Services Secretary's Office |
| Refugee Elders | Direct to Refugee Elders Grant | State of Vermont Agency of Human Services Secretary's Office |
| Refugee Formula Targeted Assistance | Direct to Refugee Formula Targeted Assistance Grant | State of Vermont Agency of Human Services Secretary's Office |
| Refugee School | Direct to Refugee School Impact Grant | State of Vermont Agency of Human Services Secretary's Office |
| Refugee Social Services | Direct to Refugee Social Services Grant | State of Vermont Agency of Human Services Secretary's Office |
| Secretary's Office Salaries and Benefits | Total Salaries and Benefits for all Secretary's Office Employees | State of Vermont Agency of Human Services Secretary's Office |
| Secretary's Office Staff | Number of Secretary's Office Staff | State of Vermont Agency of Human Services Secretary's Office |
| SIM Grant | Direct to SIM Grant | State of Vermont Agency of Human Services Secretary's Office |
| SNAP | Direct to SNAP Nutritional Education | State of Vermont Agency of Human Services Secretary's Office |
| State General Funds | Direct to State General Funds | State of Vermont Agency of Human Services Secretary's Office |
| T-MSIS | Direct to T-MSIS (90%) | State of Vermont Agency of Human Services Secretary's Office |
| Tobacco Fund | Direct to Tobacco Fund | State of Vermont Agency of Human Services Secretary's Office |
| VDH | Direct to VDH | State of Vermont Agency of Human Services Secretary's Office |
| VHC Sustainability | VHC Sustainability | State of Vermont Agency of Human Services Secretary's Office |
| VISTA | Direct to VISTA | State of Vermont Agency of Human Services Secretary's Office |
| Waterbury Change Management | Direct to Waterbury Change Management | State of Vermont Agency of Human Services Secretary's Office |
| 12/31/15 Method | 12/31/15 Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside) | State of Vermont Department of Children and Families |
| 3/31/16 Method | 3/31/16 Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside) | State of Vermont Department of Children and Families |
| 3SQ1/AABD | PU - SNAP Line 1/AABD | State of Vermont Department of Children and Families |
| 3SQ1/Fuel | PU - SNAP Line 1/Fuel | State of Vermont Department of Children and Families |
| 3SQ1/Fuel /AABD | PU - SNAP Line 1/Fuel/AABD | State of Vermont Department of Children and Families |
| 3SQ1/Fuel /GA | PU - SNAP Line 1/Fuel/GA | State of Vermont Department of Children and Families |

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| | | |
|---------------------------|--|--|
| 3SQ1/Fuel /GA/AABD | PU - SNAP Line 1/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| 3SQ1/GA | PU - SNAP Line 1/GA | State of Vermont Department of Children and Families |
| 3SQ17/AABD | PU - SNAP Line 17/AABD | State of Vermont Department of Children and Families |
| 3SQ17/Fuel | PU - SNAP Line 17/Fuel | State of Vermont Department of Children and Families |
| 3SQ17/Fuel /AABD | PU - SNAP Line 17/Fuel/AABD | State of Vermont Department of Children and Families |
| 3SQ17/Fuel /GA | PU - SNAP Line 17/Fuel/GA | State of Vermont Department of Children and Families |
| 3SQ17/Fuel /GA/AABD | PU - SNAP Line 17/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| 3SQ17/GA | PU - SNAP Line 17/GA | State of Vermont Department of Children and Families |
| 3SQ5/AABD | PU - SNAP Line 5/AABD | State of Vermont Department of Children and Families |
| 3SQ5/Fuel | PU - SNAP Line 5/Fuel | State of Vermont Department of Children and Families |
| 3SQ5/Fuel /AABD | PU - SNAP Line 5/Fuel/AABD | State of Vermont Department of Children and Families |
| 3SQ5/Fuel /GA | PU - SNAP Line 5/Fuel/GA | State of Vermont Department of Children and Families |
| 3SQ5/Fuel /GA/AABD | PU - SNAP Line 5/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| 3SQ5/GA | PU - SNAP Line 5/GA | State of Vermont Department of Children and Families |
| 3SQ8/AABD | PU - SNAP Line 8/AABD | State of Vermont Department of Children and Families |
| 3SQ8/ Fuel | PU - SNAP Line 8/Fuel | State of Vermont Department of Children and Families |
| 3SQ8/Fuel /AABD | PU - SNAP Line 8/Fuel/AABD | State of Vermont Department of Children and Families |
| 3SQ8/Fuel /GA | PU - SNAP Line 8/Fuel/GA | State of Vermont Department of Children and Families |
| 3SQ8/Fuel /GA/AABD | PU - SNAP Line 8/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| 3SQ8/GA | PU - SNAP Line 8/GA | State of Vermont Department of Children and Families |
| AABD | Direct to AABD | State of Vermont Department of Children and Families |
| AABD/GA | PU - AABD/GA | State of Vermont Department of Children and Families |
| ABAWD | Direct to ABAWD Reinvestment SNAP E&T No Match | State of Vermont Department of Children and Families |
| AWBAD Reinvestment | Direct to ABAWD Reinvestment | State of Vermont Department of Children and Families |

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| | | |
|-------------------------------------|---|---|
| Adopt | Direct to Adoption Incentive | State of Vermont Department of Children and Families |
| Adoption Asst | Direct to IV-E Adoption Assistance | State of Vermont Department of Children and Families |
| ADPC Hours | Total Hours - Employee Hours Across ADPC | State of Vermont Department of Children and Families |
| ADPC Salary | Total Salaries - Employee Salaries Across ADPC | State of Vermont Department of Children and Families |
| BBF DS | PU - Building Bright Futures Direct Services | State of Vermont Department of Children and Families |
| Blended IV-E Pent Rate | Blended IV-E Pent Rate | State of Vermont Department of Children and Families |
| Burlington Qtr Emp. Count | Quarterly employee count across Burlington district office Staff | State of Vermont Department of Children and Families |
| CAPTA | Direct to CAPTA (Child Abuse and Neglect) | State of Vermont Department of Children and Families |
| Carlson | SNAP Prog Coord | State of Vermont Department of Children and Families |
| Case Count Across RU (ET) | Case Count Across RU (ET) | State of Vermont Department of Children and Families |
| Cases Reviewed | Actual Cases Reviewed by Quarter for CHIP and Global Commitment | State of Vermont Department of Children and Families |
| CBFR | Direct to CBCAP | State of Vermont Department of Children and Families |
| CCCHIPXIX50 | Case Count between CHIP and Medicaid 50% | State of Vermont Department of Children and Families |
| CCCHIPXIX50VHC | Case Count between CHIP, VHC, and Medicaid 50% | State of Vermont Department of Children and Families |
| CCCHIPXIX75VHC | Case Count between CHIP, VHC, and Medicaid 75% | State of Vermont Department of Children and Families |
| CCDF 1 | Direct to Child Care Development Fund (CCDF) - Discretionary | State of Vermont Department of Children and Families |
| CCDF 2 | Direct to Child Care Development Fund (CCDF) - Mandatory and Matching | State of Vermont Department of Children and Families |
| CDD Hours | Total Hours - Employee Hours Across Child Development | State of Vermont Department of Children and Families |
| CDD Salary | Total Salaries - Employee Salaries Across Child Development | State of Vermont Department of Children and Families |
| Child Care VDOL | Direct to VDOL Grant | State of Vermont Department of Children and Families |
| Child Subsidy Case Count | Child Subsidy Case Count | State of Vermont Department of Children and Families |
| Child Subsidy Duplicated Case Count | Child Subsidy Duplicated Case Count | State of Vermont Department of Children and Families |
| Children's Justice Grant | Direct to Children's Justice Grant | State of Vermont Department of Children and Families |
| CPU | CPUs for Applicable Programs | State of Vermont Department of Children and Families |

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| | | |
|------------------------------------|---|--|
| CSBG | Direct to CSBG | State of Vermont Department of Children and Families |
| CTF | Direct to Children's Trust Fund | State of Vermont Department of Children and Families |
| CW and YJ (Field Staff) Hours | Total Hours - Employee Hours Across Family Services (including Field Staff) | State of Vermont Department of Children and Families |
| CW and YJ (Field Staff) Hours | Total Salaries - Employee Salaries Across Family Services (including Field Staff) | State of Vermont Department of Children and Families |
| D to Interdepartmental Projects | Direct to Interdepartmental Projects | State of Vermont Department of Children and Families |
| D to MCO-AABD Admin | Direct to AABD Administration (MCO) | State of Vermont Department of Children and Families |
| D to MCO-AABD CCL Lev 3 | Direct to MCO - Aid to the Aged, Blind and Disabled CCL Level III | State of Vermont Department of Children and Families |
| D to MCO-AABD Res Lev 3 | Direct to MCO - Aid to the Aged, Blind and Disabled Res Care Level III | State of Vermont Department of Children and Families |
| D to MCO-AABD Res Lev 4 | Direct to MCO - Aid to the Aged, Blind and Disabled Res Care Level IV | State of Vermont Department of Children and Families |
| D to MCO-Challenges for Change DCF | Direct to MCO - Challenges for Change: DCF | State of Vermont Department of Children and Families |
| D to MCO-CISEI | Direct to MCO - Children's Integrated Services Early Intervention | State of Vermont Department of Children and Families |
| D to MCO-EPP | Direct to MCO - Essential Person Program | State of Vermont Department of Children and Families |
| D to MCO-FITP | Direct to MCO - Family Infant Toddler Program | State of Vermont Department of Children and Families |
| D to MCO-Lamoille Valley | Direct to MCO - Lamoille Valley Community Justice Project | State of Vermont Department of Children and Families |
| D to MCO-Lund Home | Direct to MCO - Lund Home | State of Vermont Department of Children and Families |
| D to MCO-Medical Svcs | Direct to MCO - Medical Services | State of Vermont Department of Children and Families |
| D to MCO-PCAV Nurturing Parent | Direct to MCO - Prevent Child Abuse Vermont: Nurturing Parent | State of Vermont Department of Children and Families |
| D to MCO-PCAV Shaken Baby | Direct to MCO - Prevent Child Abuse Vermont: Shaken Baby | State of Vermont Department of Children and Families |
| D to MCO-Resi Care for Youth | Direct to MCO - Residential Care for Youth/Substitute Care | State of Vermont Department of Children and Families |
| D to MCO-Strengthening Family | Direct to MCO - Strengthening Families | State of Vermont Department of Children and Families |
| D to MCO-Therapeutic CC | Direct to MCO - Therapeutic Child Care | State of Vermont Department of Children and Families |
| D to SNAP Fraud | Direct to SNAP Administration - Line 5 Fraud | State of Vermont Department of Children and Families |

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| | | |
|--|---|--|
| Direct to ADRC Med | Direct to ADRC Med | State of Vermont Department of Children and Families |
| Direct to Approved Health Enterprise IAPD 41618 | QU - Approved Health Enterprise IAPD 41618 | State of Vermont Department of Children and Families |
| Direct to Approved Health Enterprise IAPD 41642 | QU - Approved Health Enterprise IAPD 41642 | State of Vermont Department of Children and Families |
| Direct to Approved IAPD 41763 | QU - Approved Health Enterprise IAPD 41763 | State of Vermont Department of Children and Families |
| Direct to BICS | Direct to BICS Grant | State of Vermont Department of Children and Families |
| Direct to CHIP – Admin | Direct to CHIP – Admin | State of Vermont Department of Children and Families |
| Direct to CHIP - Program | Direct to CHIP - Program | State of Vermont Department of Children and Families |
| Direct to EBT Farmers MKT | Direct to EBT Farmers MKT | State of Vermont Department of Children and Families |
| Direct to Exchange level 2 100% | Direct to Exchange level 2 100% | State of Vermont Department of Children and Families |
| Direct to Global Commitment - Program | Direct to Global Commitment - Program | State of Vermont Department of Children and Families |
| Direct To IAPD 41607 VHC/MAGI E&E Staff | QU - Direct to Approved Health Enterprise IAPD 41607 | State of Vermont Department of Children and Families |
| Direct To IAPD 41701 Exchange Level 2 IT Staff & O | QU - Direct to Approved Health Enterprise 41701 Exchange Level 2 100% | State of Vermont Department of Children and Families |
| Direct to ICD-10 IAPD 37708 | QU - ICD-10 IAPD 37708 | State of Vermont Department of Children and Families |
| Direct T0 ICD-10 IAPD 37716 | QU - ICD-10 IAPD 37716 | State of Vermont Department of Children and Families |
| Direct to ICD-10 IAPD 37717 | QU - ICD-10 IAPD 37717 | State of Vermont Department of Children and Families |
| Direct to ICD-10 IAPD 41639 | QU - ICD-10 IAPD 41639 | State of Vermont Department of Children and Families |
| Direct to ICD-10 IAPD 41640 | QU - ICD-10 IAPD 41640 | State of Vermont Department of Children and Families |
| Direct to JFI Pilot Project | Direct to JFI Pilot Project | State of Vermont Department of Children and Families |
| Direct to MCO - GA Medical Expenses | Direct to MCO - GA Medical Expenses | State of Vermont Department of Children and Families |
| Direct to Pregnancy Assistance | Direct to Pregnancy Assistance | State of Vermont Department of Children and Families |
| Direct to Race to the Top ELC Grant | Direct to Race to the Top ELC Grant | State of Vermont Department of Children and Families |
| Direct to Sexual Assault Prevention | Direct to Sexual Assault Education & Prevention | State of Vermont Department of Children and Families |
| Direct to SNAP ET admin Duals | Direct to SNAP ET admin Duals | State of Vermont Department of Children and Families |
| Direct to SNAP Fair Hearings | Direct to SNAP Fair Hearings | State of Vermont Department of Children and Families |

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| | | |
|---|---|--|
| DIRECT to SNAP Federal State Exchange | Direct to SNAP Federal State Exchange | State of Vermont Department of Children and Families |
| Direct to VHC State | Direct to VHC State | State of Vermont Department of Children and Families |
| DOE WX | PU - Percentage of DOE WX compared to Total Exp | State of Vermont Department of Children and Families |
| Domestic Violence Grants | Direct to Domestic Violence Grants | State of Vermont Department of Children and Families |
| ECCS | Direct to ECCS | State of Vermont Department of Children and Families |
| Economic Services DUP Case Count | Economic Services Duplicated Case Count | State of Vermont Department of Children and Families |
| Emergency Solutions Program | Direct to Emergency Solutions Program (Federal) | State of Vermont Department of Children and Families |
| ES (Field Staff) Hours | Total Hours - Employee Hours Across Economic Services (including Field Staff) | State of Vermont Department of Children and Families |
| ES (Field Staff) Salary | Total Salaries - Employee Salaries Across Economic Services (including Field Staff) | State of Vermont Department of Children and Families |
| ES Hours | Total Hours - Employee Hours related to Economic Services Programs | State of Vermont Department of Children and Families |
| ESD RU CC EX Child, FED DEF, and Sanctioned | ESD RU CC EX FED DEF, and Sanctioned | State of Vermont Department of Children and Families |
| | | |
| Exchange Level 1C | Direct to Exchange Level 1C | State of Vermont Department of Children and Families |
| Family Infant Toddler | Direct to Early Intervention | State of Vermont Department of Children and Families |
| Family Preserv. IV-B, II | Direct to Family Preservation IV-B, Part 2 | State of Vermont Department of Children and Families |
| Family Services Time Study | Results of Family Services Time Study | State of Vermont Department of Children and Families |
| Farm to Family | Direct to Farm to Family Administration | State of Vermont Department of Children and Families |
| FF Non-WIC | Direct to Farm to Family Non-WIC | State of Vermont Department of Children and Families |
| FF Senior | Direct to Farm to Family Senior Coupons | State of Vermont Department of Children and Families |
| FF WIC | Direct to Farm to Family WIC | State of Vermont Department of Children and Families |
| Field Office Hours | Total Hours - Employee Hours of all staff at Field Offices | State of Vermont Department of Children and Families |
| Field Office Salary | Total Salaries - Employee Salaries of all staff at Field Offices | State of Vermont Department of Children and Families |
| Field Staff (CW and YJ) Hours | Total Hours - Across Field Staff (within Family Services) | State of Vermont Department of Children and Families |

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| | | |
|--------------------------------|--|--|
| Field Staff (CW and YJ) Salary | Total Salaries - Employee Salaries Across Field Staff (within Family Services) | State of Vermont Department of Children and Families |
| Field Staff (ES) Hours | Total Hours - Across Field Staff (within Economic Services) | State of Vermont Department of Children and Families |
| Field Staff (ES) Salary | Total Salaries - Employee Salaries Across Field Staff (within Economic Services) | State of Vermont Department of Children and Families |
| Final | NOT APPLICABLE | State of Vermont Department of Children and Families |
| Food Stamp Employment Training | Direct to SNAP Employment and Training | State of Vermont Department of Children and Families |
| Food Stamp Nutrition Education | Direct to SNAP Nutrition Education | State of Vermont Department of Children and Families |
| Food Stamps | Direct to SNAP Administration | State of Vermont Department of Children and Families |
| Food Stamps Outreach | Direct to SNAP Outreach | State of Vermont Department of Children and Families |
| Former PATH Time Study | Results of the Economic Assistance Time Study | State of Vermont Department of Children and Families |
| Fraud Investigations | Quarterly Percentage of Fraud Investigations | State of Vermont Department of Children and Families |
| FS Cashout | Direct to SNAP Cashout | State of Vermont Department of Children and Families |
| FS STATE EXCHANGE | Direct to SNAP State Exchange (State) | State of Vermont Department of Children and Families |
| FSC | Direct to SNAP - Certified | State of Vermont Department of Children and Families |
| FSI | Direct to SNAP - Issue | State of Vermont Department of Children and Families |
| Fuel/AABD/GA | PU - Fuel/AABD/GA | State of Vermont Department of Children and Families |
| Fuel/GA | PU - Fuel/GA | State of Vermont Department of Children and Families |
| GC Cups | Direct to GC ECFMH | State of Vermont Department of Children and Families |
| GC Woodside | Total GC elig Population compared to total population | State of Vermont Department of Children and Families |
| General Fund | Direct to State Funded | State of Vermont Department of Children and Families |
| Global Commitment - Admin | Direct to Global Commitment Admin | State of Vermont Department of Children and Families |
| GMP Weatherization OEO | Direct To GMP Weatherization OEO | State of Vermont Department of Children and Families |
| HAEU | Results of HAEU Random Moment Time Study | State of Vermont Department of Children and Families |
| HAEU50 | Results of HAEU Random Moment Time Study - Not Enhanced | State of Vermont Department of Children and Families |

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| Heating Hours | Total Hours - Across Heating | State of Vermont Department of Children and Families |
| Heating Salary | Total Salaries - Employee Salaries Across Heating | State of Vermont Department of Children and Families |
| Home Heating Program | Direct to Home Heating Program/LIHEAP | State of Vermont Department of Children and Families |
| Homeless Rural Youth | Direct to Homeless Rural Youth | State of Vermont Department of Children and Families |
| Hours | Total Hours - Across DCF | State of Vermont Department of Children and Families |
| Hours (Less DDS) | Total Hours - Across DCF less DDS | State of Vermont Department of Children and Families |
| Hours by Quarter (TANF, FS, Medicaid) | Hours per quarter for TANF, SNAP, and Global Commitment | State of Vermont Department of Children and Families |
| Hours IT | Total Hours - Across IT | State of Vermont Department of Children and Families |
| Hours OCS | Total Hours - Across Office of Child Support (OCS) | State of Vermont Department of Children and Families |
| Hours OEO | Total Hours - Across Office of Economic Opportunity (OEO) | State of Vermont Department of Children and Families |
| Hours SSMIS | Total Hours - Across Family Services Operational Staff using the Systems | State of Vermont Department of Children and Families |
| Hours WOODSIDE | Total Hours - Across Woodside | State of Vermont Department of Children and Families |
| HS Collab. Grant | Direct to Head Start Collaborative Grant | State of Vermont Department of Children and Families |
| I N&D | Direct to Title I Neglected & Delinquent | State of Vermont Department of Children and Families |
| IDA | Direct to IDA | State of Vermont Department of Children and Families |
| Independent Living IV-E | Direct to Title IV-E Independent Living | State of Vermont Department of Children and Families |
| IV-B CW Serv. | Direct to Title IV-B Family Services | State of Vermont Department of Children and Families |
| IV-D A&V | Direct to Title IV-D Access and Visitation | State of Vermont Department of Children and Families |
| IV-E CD | Direct to Title IV-E Child Development | State of Vermont Department of Children and Families |
| IV-E Elig Training | Title IV-E Eligibility Rate (IV-E Training) | State of Vermont Department of Children and Families |
| IV-E Eligibility | Direct to Title IV-E Foster Care Eligibility | State of Vermont Department of Children and Families |
| IV-E Foster Care Maint Pay | Direct to Title IV-E Foster Care Maintenance Payments | State of Vermont Department of Children and Families |
| IV-E P&M | Direct to Title IV-E Foster Care Case Planning & Management | State of Vermont Department of Children and Families |
| IV-E PQA | Direct to IV-E Prior Quarter Adjustments | State of Vermont Department of Children and Families |

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| IV-E Training | Direct to Title IV-E Foster Care Training (50%) | State of Vermont Department of Children and Families |
| IV-E Training 75 | Direct to Title IV-E Foster Care Training (75%) | State of Vermont Department of Children and Families |
| IV-E/EVT | Direct to Title IV-E/EVT | State of Vermont Department of Children and Families |
| JAIBG | Direct to Juvenile Accountability Incentive Block Grant | State of Vermont Department of Children and Families |
| JJDP | Direct to JJDP | State of Vermont Department of Children and Families |
| Job Start Program | Direct to Job Start Program | State of Vermont Department of Children and Families |
| Legal | Results of Legal Time Study | State of Vermont Department of Children and Families |
| None | No Allocation Method - To Be Adjusted | State of Vermont Department of Children and Families |
| OCS Method A | IV-D Cases vs. Non IV-D Cases | State of Vermont Department of Children and Families |
| OCS Method B | IV-D Customer Contacts vs. Non IV-D Customer Contacts | State of Vermont Department of Children and Families |
| OVHA/SCHIP 2 | Percentage of SCHIP Eligibles as compared to the total Global Commitment Eligibles for the quarter. SCHIP current FFP. | State of Vermont Department of Children and Families |
| OVHA/SCHIP Eligibles | Percentage of Global Commitment and SCHIP Eligibles | State of Vermont Department of Children and Families |
| Percentage of EA/GA Dollars | Percentage of EA and GA Dollars Spent (Allocated to TANF and State General Fund) | State of Vermont Department of Children and Families |
| Permanent Guardianship | Direct to Permanent Guardianship | State of Vermont Department of Children and Families |
| Residential Licensing & Special Investigations Uni | Total Salaries - Employee Salaries Across Residential Licensing & Special Investigations Unit | State of Vermont Department of Children and Families |
| RU/3SQ1 | PU - RU/SNAP Line 1 | State of Vermont Department of Children and Families |
| RU/3SQ1/FUEL | PU - RU/SNAP Line 1/Fuel | State of Vermont Department of Children and Families |
| RU/3SQ1/FUEL/GA | PU - RU/SNAP Line 1/Fuel/GA | State of Vermont Department of Children and Families |
| RU/3SQ1/FUEL/GA/AABD | PU - RU/SNAP Line 1/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| RU/3SQ17 | PU - RU/SNAP Line 17 | State of Vermont Department of Children and Families |
| RU/3SQ17/Fuel | PU - RU/SNAP Line 17/Fuel | State of Vermont Department of Children and Families |
| RU/3SQ17/Fuel/GA | PU - RU/SNAP Line 17/Fuel/GA | State of Vermont Department of Children and Families |

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| RU/3SQ17/Fuel/GA/AABD | PU - RU/SNAP Line 17/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| RU/3SQ5 | PU - RU/SNAP Line 5 | State of Vermont Department of Children and Families |
| RU/3SQ5/Fuel | PU - RU/SNAP Line 5/Fuel | State of Vermont Department of Children and Families |
| RU/3SQ/Fuel/GA | PU - RU/SNAP Line 5/Fuel/GA | State of Vermont Department of Children and Families |
| RU/3SQ5/Fuel/GA/AABD | PU - RU/SNAP Line 5/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| RU/3SQ8 | PU - RU/SNAP Line 8 | State of Vermont Department of Children and Families |
| RU/3SQ8/Fuel | PU - RU/SNAP Line 8/Fuel | State of Vermont Department of Children and Families |
| RU/3SQ8/Fuel/GA | PU - RU/SNAP/Fuel Line 8/GA | State of Vermont Department of Children and Families |
| RU/3SQ8/Fuel/GA/AABD | PU - RU/SNAP Line 8/Fuel/GA/AABD | State of Vermont Department of Children and Families |
| RU/Fuel | PU - RU/Fuel | State of Vermont Department of Children and Families |
| RU/GA | PU - RU/GA | State of Vermont Department of Children and Families |
| RUCaseCount | Reach Up Case Count (Reach Up, First, Ahead) | State of Vermont Department of Children and Families |
| Salary | Total Salaries - Employee Salaries Across DCF | State of Vermont Department of Children and Families |
| Salary (Less OCS) | Total Salaries - Employee Salaries Across DCF less OCS | State of Vermont Department of Children and Families |
| Salary Fraud and Quality Unit | Total Salaries - Employee Salaries Across Fraud Unit and Quality Assurance | State of Vermont Department of Children and Families |
| Salary IT | Total Salaries - Employee Salaries across IT | State of Vermont Department of Children and Families |
| Salary OCS | Total Salaries - Employee Salaries Across Office of Child Support (OCS) | State of Vermont Department of Children and Families |
| Salary OEO | Total Salaries - Employee Salaries Across Office of Economic Opportunity (OEO) | State of Vermont Department of Children and Families |
| Salary Quality Assurance | Total Salaries - Employee Salaries Across Quality Assurance | State of Vermont Department of Children and Families |
| Salary RU CM DIST Staff | Total Salaries - Employee Salaries Across RU Case Manager District Staff | State of Vermont Department of Children and Families |
| Salary SSMIS | Total Salaries - Employee Salaries Across Family Services Operational Staff using the Systems | State of Vermont Department of Children and Families |
| Salary WOODSIDE | Total Salaries - Employee Salaries Across Woodside | State of Vermont Department of Children and Families |

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| Salary (LESS DDS) | Total Salaries - Employee Salaries Across DCF less DDS | State of Vermont Department of Children and Families |
| SNAP New Investment | Direct to SNAP New Investment | State of Vermont Department of Children and Families |
| SNAP PQA | Direct to SNAP Prior Quarter Adjustments | State of Vermont Department of Children and Families |
| Social Security | Direct to Social Security | State of Vermont Department of Children and Families |
| SSBG | Direct to SSBG | State of Vermont Department of Children and Families |
| St. Albans Qtr Emp. Count | Quarterly employee count across St. Albans district staff | State of Vermont Department of Children and Families |
| TANF | Direct to TANF | State of Vermont Department of Children and Families |
| TANF FSI | TANF, SNAP Issue & WIC | State of Vermont Department of Children and Families |
| TCM | Direct to TCM | State of Vermont Department of Children and Families |
| TCM Medicaid | Global Commitment Eligibility Rate for Targeted Case Management | State of Vermont Department of Children and Families |
| Title IV-D | Direct to Title IV-D | State of Vermont Department of Children and Families |
| Title IV-E & Medicaid Eligibility Rate | Title IV-E & Global Commitment Eligibility Rate (remainder to TANF, Woodside) | State of Vermont Department of Children and Families |
| Title IV-E Adop & Guard | Title IV-E Adoption Assistance and Guardianship Assistance | State of Vermont Department of Children and Families |
| Title IV-E Adoption Assistance Rate | Title IV-E Adoption Assistance Rate | State of Vermont Department of Children and Families |
| Title IV-E Eligibility Rate | Title IV-E Eligibility Rate | State of Vermont Department of Children and Families |
| Total E&T Salaries Across RU CM DIST | Direct to Total E&T Salaries across RU CM Dist | State of Vermont Department of Children and Families |
| Total RU CM Salaries Across RU CM | Direct to Total RU CM Salaries across RU CM | State of Vermont Department of Children and Families |
| Utility | PU - Contractual Agreement for VT Gas and GM Power | State of Vermont Department of Children and Families |
| Utility Eligibility | Direct to Utility Eligibility | State of Vermont Department of Children and Families |
| VIEWS-DDI | Direct to VIEWS-DDI | State of Vermont Department of Children and Families |
| VLITE | Direct to Vlite | State of Vermont Department of Children and Families |
| VT Gas Program | Direct to VT Gas | State of Vermont Department of Children and Families |
| VT Spay Neuter Incentive Program | Direct to VSNIIP | State of Vermont Department of Children and Families |
| Weather Fed | Direct to Weatherization (federally funded) | State of Vermont Department of Children and Families |

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| Weatherization | Direct to Weatherization (State Funded) | State of Vermont Department of Children and Families |
| WIC | Direct to WIC - General Administration | State of Vermont Department of Children and Families |
| Woodside | Direct to Woodside | State of Vermont Department of Children and Families |
| AAAA Delete QE0616 | To Delete in QE 0616b | State of Vermont Department of Health |
| DIRECT TO ABLES | Direct to ABLES | State of Vermont Department of Health |
| DIRECT TO ABS | Direct to Abstinence Education | State of Vermont Department of Health |
| Direct to Accreditation for State Food Testing Lab | Direct to Accreditation for State Food Testing Laboratories | State of Vermont Department of Health |
| Direct to Adolescent Grant | Direct to Adolescent Treatment System Enhancement Grant | State of Vermont Department of Health |
| Direct to Adult Viral Hepatitis | Direct to Adult Viral Hepatitis | State of Vermont Department of Health |
| Direct to Advanced Directives Registry | Direct to Advanced Directives Registry | State of Vermont Department of Health |
| Direct to AIDS Services Support | Direct to AIDS Services Support | State of Vermont Department of Health |
| Direct to AIDS Surveillance | Direct to AIDS Surveillance | State of Vermont Department of Health |
| Direct to Asbestos Cert. | Direct to Asbestos Certification, Notification & Technical | State of Vermont Department of Health |
| Direct to Asbestos in Schools | Direct to Asbestos in Schools | State of Vermont Department of Health |
| Direct to Asthma | Direct to Asthma | State of Vermont Department of Health |
| Direct to Autism | Direct to Autism | State of Vermont Department of Health |
| Direct to Behavioral RF Surv | Direct to Behavioral Risk Factor Surveillance | State of Vermont Department of Health |
| Direct to Bioterrorism Prep. | Direct to Bioterrorism | State of Vermont Department of Health |
| Direct to BRACE | Direct to BRACE (Building Resilience Against Climate Change Effects in VT) | State of Vermont Department of Health |
| Direct to BRACE Climate Change | Direct to BRACE Climate Change | State of Vermont Department of Health |
| Direct to Breast & Cerv Cancer Screening | Direct to Cancer Screening | State of Vermont Department of Health |
| Direct to Cancer Registry | Direct to Cancer Registry | State of Vermont Department of Health |
| Direct to Chemical Disclosure Program | Direct to Chemical Disclosure Program | State of Vermont Department of Health |

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| Direct to Childhood Passenger Safety Mou with DPS | Direct to Childhood Passenger Safety Mou with DPS | State of Vermont Department of Health |
| Direct to CHIP program | Direct to CHIP Program | State of Vermont Department of Health |
| Direct to Chronic Disease Self-Management Program | Direct to Chronic Disease Self-Management Program - ARRA | State of Vermont Department of Health |
| Direct to CISS | Direct to CISS | State of Vermont Department of Health |
| Direct to CME-Coverdell MOU | Direct to CME-Coverdell MOU | State of Vermont Department of Health |
| Direct to CMS-E&E (90/10) | Direct to CMS-E&E (90/10) | State of Vermont Department of Health |
| Direct to CMS-HIT | Direct to CMS-HIT grant | State of Vermont Department of Health |
| Direct to CMS-MMIS | Direct to CMS-MMIS | State of Vermont Department of Health |
| Direct to Community Transformation | Direct to Community Transformation | State of Vermont Department of Health |
| Direct to Comp Cancer Control | Direct to Comprehensive Cancer Control | State of Vermont Department of Health |
| Direct to Conference | Direct to Conference Costs | State of Vermont Department of Health |
| Direct to CSHN-SS | Direct to CSHN-Special Services | State of Vermont Department of Health |
| Direct to CSTE Avian Flu | Direct to CSTE - Avian Flu Trainings | State of Vermont Department of Health |
| Direct to Culture of Health | Direct to Building a Culture of Health | State of Vermont Department of Health |
| Direct to Dental-Other | Direct to Dental Services - All Other Programs | State of Vermont Department of Health |
| Direct to Department of Corrections Quality Oversight QUALITY OVERSIGHT | Direct to Department of Corrections Quality Oversight | State of Vermont Department of Health |
| Direct to Domestic and Sexual Violence Prevention | Direct to Domestic and Sexual Violence Prevention | State of Vermont Department of Health |
| Direct to Early Childhood Comp Systems | Direct to Early Childhood Comp Systems | State of Vermont Department of Health |
| Direct to Early Hearing Detection | Direct to Early Hearing Detection & Intervention Grant | State of Vermont Department of Health |
| Direct to ELC Ebola Supplement | Direct to ELC Ebola Supplement | State of Vermont Department of Health |
| Direct to Electronic Death Registry System | Direct to Electronic Death Registry System | State of Vermont Department of Health |
| Direct to EMS Data Mgmt | Direct to EMS Data Mgmt | State of Vermont Department of Health |
| Direct to EMS for Children | Direct to EMS for Children | State of Vermont Department of Health |

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| Direct to EMS Program Services | Direct to EMS Program Services | State of Vermont Department of Health |
| Direct to Env. Toxicology | Direct to Environmental Toxicology | State of Vermont Department of Health |
| Direct to Environmental Public Health Tracking | Direct to Environmental Public Health Tracking | State of Vermont Department of Health |
| Direct to EPA Lead | Direct to EPA Lead Certification Program | State of Vermont Department of Health |
| Direct to Epi Lab Capacity non-PPHF | Direct to Epi Lab Capacity non-PPHF | State of Vermont Department of Health |
| Direct to Epi Lab Capacity PPHF | Direct to Epi Lab Capacity PPHF | State of Vermont Department of Health |
| Direct to Epidemiology | Direct to Epidemiology | State of Vermont Department of Health |
| Direct to Evidence-Based Fall Prevention Program | Direct to Evidence-Based Fall Prevention Program | State of Vermont Department of Health |
| Direct to Exchange Level 2 Non-IT Staff | Direct to Exchange Level 2 | State of Vermont Department of Health |
| Direct to Family Planning Program | Direct to Family Planning Program | State of Vermont Department of Health |
| Direct to FINI SNAP Incentive | Direct to FINI SNAP Incentive | State of Vermont Department of Health |
| Direct to Fish Testing | Direct to Fish Testing | State of Vermont Department of Health |
| Direct to Fluoridation | Direct to Fluoridation | State of Vermont Department of Health |
| Direct to Food & Lodging - Surv. | Direct to Food & Lodging | State of Vermont Department of Health |
| Direct to Food Protection Task Force | Direct to Food Protection Task Force | State of Vermont Department of Health |
| Direct to General Fund | Direct to General Fund | State of Vermont Department of Health |
| Direct to Global Commitment Admin | Direct to Global Commitment Admin | State of Vermont Department of Health |
| Direct to Global Commitment Program | Direct to Global Commitment Program | State of Vermont Department of Health |
| Direct to HE ADAP-DDRP Fees | Direct to HE ADAP-DDRP Fees | State of Vermont Department of Health |
| Direct to Health Contract | Direct to Health Contract Services | State of Vermont Department of Health |
| Direct to Health Promotion | Direct to Health Promotion | State of Vermont Department of Health |
| Direct to Hep. B | Direct to Hepatitis B- State Employees | State of Vermont Department of Health |
| Direct to HIV Care | Direct to HIV Care | State of Vermont Department of Health |
| Direct to HIV/Prevention Grant | Direct to HIV/Prevention Grant | State of Vermont Department of Health |

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| Direct to Hospital Data Council | Direct to Hospital Data Council | State of Vermont Department of Health |
| Direct to Hospital Licensing | Direct to Hospital Licensing | State of Vermont Department of Health |
| Direct to Hospital Preparedness | Direct to Hospital Preparedness | State of Vermont Department of Health |
| Direct to Hospital Preparedness Program Ebola | Direct to Hospital Preparedness Program Ebola | State of Vermont Department of Health |
| Direct to ICD-10-IAPD | Direct to CMS ICD-10-IAPD | State of Vermont Department of Health |
| Direct to Immunization | Direct to Immunization | State of Vermont Department of Health |
| Direct to Immunization VTRCKS | Direct to Immunization VTRCKS | State of Vermont Department of Health |
| Direct to Indoor Air | Direct to Indoor Air Risk Assessment | State of Vermont Department of Health |
| Direct to Indoor Radon | Direct to Indoor Radon Surveillance | State of Vermont Department of Health |
| Direct to Injury | Direct to Injury Prevention Services | State of Vermont Department of Health |
| Direct to Integrated Community Systems for CSHCN | Direct to Integrated Community Systems for CSHCN | State of Vermont Department of Health |
| Direct to JAIBG | Direct to JAIBG | State of Vermont Department of Health |
| Direct to Komen Breast Services | Direct to Komen Breast Services | State of Vermont Department of Health |
| Direct to Lab-Radio-Yankee | Direct to Laboratory—Radiological Vermont-Yankee | State of Vermont Department of Health |
| Direct to Ladies First | Direct to Ladies First | State of Vermont Department of Health |
| Direct to LAUNCH | Direct to LAUNCH (Linking Actions for Unmet Needs in Children's Health) | State of Vermont Department of Health |
| Direct to Lead Investigation | Direct to Lead Investigation | State of Vermont Department of Health |
| Direct to Lead Poisoning Prevention | Direct to Lead Poisoning Prevention | State of Vermont Department of Health |
| Direct to Lead Safe Housing | Direct to Lead Safe Housing | State of Vermont Department of Health |
| Direct to Mammo Ins | Direct to Mammography X-ray Unit Inspections | State of Vermont Department of Health |
| Direct to Manufactured Food Regulatory Program | Direct to Manufactured Food Regulatory Program | State of Vermont Department of Health |
| Direct to MCH | Direct to CHP—Maternal and Child Health | State of Vermont Department of Health |
| Direct to MCH Grant | Direct to MCH Block Grant | State of Vermont Department of Health |

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| Direct to MCH Home Visiting | Direct to MCH Home Visiting | State of Vermont Department of Health |
| Direct to MCH PCP | Direct to MCH - Primary Care Planning | State of Vermont Department of Health |
| Direct to MCO - (CHAMPPS) | Direct to MCO - (CHAMPPS) | State of Vermont Department of Health |
| Direct to MCO - AHEC | Direct to MCO - Area Health Education Centers (AHEC) | State of Vermont Department of Health |
| Direct to MCO - Blueprint | Direct to MCO - Blueprint | State of Vermont Department of Health |
| Direct to MCO - Enhanced Immunization | Direct to MCO - Enhanced Immunization | State of Vermont Department of Health |
| Direct to MCO - Family Planning | Direct to MCO - Family Planning | State of Vermont Department of Health |
| Direct to MCO - FQHC Lookalike | Direct to MCO - FQHC Lookalike | State of Vermont Department of Health |
| Direct to MCO - Healthy Homes and Lead | Direct to MCO - Healthy Homes and Lead Poisoning Prevention | State of Vermont Department of Health |
| Direct to MCO - Medicaid Vaccines | Direct to MCO - Medicaid Vaccines | State of Vermont Department of Health |
| Direct to MCO - Physician Loan Repayment | Direct to MCO - Physician/Dentist Loan Repayment Program | State of Vermont Department of Health |
| Direct to MCO - Public Inebriate Services, C for C | Direct to MCO - Public Inebriate Services, C for C | State of Vermont Department of Health |
| Direct to MCO - Recovery Centers | Direct to MCO - Recovery Centers | State of Vermont Department of Health |
| Direct to MCO - Renal Disease | Direct to MCO - Renal Disease | State of Vermont Department of Health |
| Direct to MCO - Tobacco cessation | Direct to MCO - Tobacco Cessation | State of Vermont Department of Health |
| Direct to MCO - WIC Coverage | Direct to MCO - WIC Coverage | State of Vermont Department of Health |
| Direct to Medical Examiner | Direct to Medical Examiner | State of Vermont Department of Health |
| Direct to Medical Practice Board | Direct to Medical Practice Board | State of Vermont Department of Health |
| Direct to Medication Assisted Treatment | Direct to Medication Assisted Treatment | State of Vermont Department of Health |
| Direct to Minority Health | Direct to Minority Health | State of Vermont Department of Health |
| Direct to NASHP | Direct to NASHP | State of Vermont Department of Health |
| Direct to National Retail Food Regulatory Program | Direct to National Retail Food Regulatory Program Standards (NRFPS) | State of Vermont Department of Health |
| Direct to NE Bladder Cancer Registry | Direct to NE Bladder Cancer Registry | State of Vermont Department of Health |
| Direct to Newborn Screening | Direct to Newborn Screening | State of Vermont Department of Health |

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| Direct to NON-MCO - SABG Treatment and SA GF Admin | Direct to NON-MCO - SABG Treatment and SA GF ADMIN | State of Vermont Department of Health |
| Direct to OJJDP | Direct to OJJDP | State of Vermont Department of Health |
| Direct to Opioid Antagonist Pilot | Direct to Opioid Antagonist Pilot | State of Vermont Department of Health |
| Direct to Oral Disease Prevention Program | Direct to Oral Disease Prevention Program | State of Vermont Department of Health |
| Direct to Oral Health Workforce | Direct to Oral Health Workforce | State of Vermont Department of Health |
| Direct to Organ Donation | Direct to Organ Donation | State of Vermont Department of Health |
| Direct to Other Hosp Req | Direct to Other Hospital Data Requests | State of Vermont Department of Health |
| Direct to Other Program Initiatives | Direct to Other Program Initiatives | State of Vermont Department of Health |
| Direct to Part C | Direct to Part C | State of Vermont Department of Health |
| Direct to Partnership for Success (SPF-PFS) | Direct to Partnership for Success (SPF-PFS) | State of Vermont Department of Health |
| Direct to Partnerships for Success III | Direct to Partnerships for Success III | State of Vermont Department of Health |
| Direct to PFOA Response Bennington County | Direct to PFOA Response Bennington County | State of Vermont Department of Health |
| Direct to PHEP Ebola Supplement | Direct to PHEP Ebola Supplement | State of Vermont Department of Health |
| Direct to PHHS Block Grant | Direct to PHHS Block Grant | State of Vermont Department of Health |
| Direct to Population | Direct to Population | State of Vermont Department of Health |
| Direct to Preg RA Monitoring | Direct to Pregnancy Risk Assessment Monitoring | State of Vermont Department of Health |
| Direct to PREP-Personal Responsibility Education | Direct to PREP-Personal Responsibility Education | State of Vermont Department of Health |
| Direct to Prescr Drug overdose prev | Direct to Prescription Drug Overdose Prevention | State of Vermont Department of Health |
| Direct to Prescription Drug Education (Evidence Based Education and Advertising Special Fund. | Direct to Prescription Drug Education (Evidence Based Education and Advertising Special Fund. | State of Vermont Department of Health |
| Direct to Prescription Drug Monitoring | Direct to Prescription Drug Monitoring | State of Vermont Department of Health |
| Direct to Prescription Drug Monitoring - Enhanced | Direct to Prescription Drug Monitoring - Enhanced | State of Vermont Department of Health |
| Direct to Primary Care | Direct to Primary Care | State of Vermont Department of Health |
| Direct to Private Water Supplies | Direct to Private Water Supplies | State of Vermont Department of Health |

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| Direct to Prov-Non Block | Direct to Payment to Providers for Residential Treatment-Non Block | State of Vermont Department of Health |
| Direct to Public Health Actions (1305) | Direct to Public Health Actions (1305) | State of Vermont Department of Health |
| Direct to Public Health Training Center | Direct to Public Health Training Center | State of Vermont Department of Health |
| Direct to Rabies Control | Direct to Rabies Control | State of Vermont Department of Health |
| Direct to Rabies Voucher | Direct to Rabies Voucher Redemption | State of Vermont Department of Health |
| Direct to Race to the Top | Direct to Race to the Top | State of Vermont Department of Health |
| Direct to Radiation Ins | Direct to Radiation Inspections | State of Vermont Department of Health |
| Direct to Rape Prevention | Direct to Rape Prevention & Education Program | State of Vermont Department of Health |
| Direct to Refugee Health | Direct to Refugee Health | State of Vermont Department of Health |
| Direct to Refugee Preventive Health | Direct to Refugee Preventive Health | State of Vermont Department of Health |
| Direct to Rosen | Direct to Jamie Rosen Fund | State of Vermont Department of Health |
| Direct to Rural Health Office | Direct to Rural Health Office | State of Vermont Department of Health |
| Direct to Rural Hosp. Flexibility | Direct to Rural Hospital Flexibility Grant | State of Vermont Department of Health |
| Direct to SABG | Direct to Substance Abuse Block Grant | State of Vermont Department of Health |
| Direct to SAP | Direct to Student Assistance Programs | State of Vermont Department of Health |
| Direct to SBIRT | Direct to SBIRT | State of Vermont Department of Health |
| Direct to School Health Program | Direct to School Health Program | State of Vermont Department of Health |
| Direct to School-Based Surveillance | Direct to School-Based Surveillance | State of Vermont Department of Health |
| Direct to SIM Grant | Direct to SIM Grant | State of Vermont Department of Health |
| Direct to Siren MOU with DPS | Direct to Siren MOU with DPS | State of Vermont Department of Health |
| Direct to Small Hosp | Direct to Small Hospital Improvement | State of Vermont Department of Health |
| Direct to SMS Monitoring | Direct to SMS Monitoring | State of Vermont Department of Health |
| Direct to SPF - SPE | Direct to SPF - SPE | State of Vermont Department of Health |
| Direct to SSBG | Direct to Social Services Block Grant | State of Vermont Department of Health |

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| Direct to State Data | Direct to State Data Infrastructure | State of Vermont Department of Health |
| Direct to State Epidemiological Outcomes Workgroup | Direct to State Epidemiological Outcomes Workgroup (SEOW) Program | State of Vermont Department of Health |
| Direct to State Loan Repayment Program | Direct to State Loan Repayment Program | State of Vermont Department of Health |
| Direct to Statewide Quality Assurance System | Direct to Statewide Quality Assurance System | State of Vermont Department of Health |
| Direct to STDs | Direct to Sexually Transmitted Diseases | State of Vermont Department of Health |
| Direct to Support for Public Drinking Water Progra | Direct to Support for Public Drinking Water Programs (SPDWP) | State of Vermont Department of Health |
| Direct to Tobacco Control | Direct to Tobacco Control | State of Vermont Department of Health |
| Direct to Tobacco Control - Other | Direct to Tobacco Control - Other | State of Vermont Department of Health |
| Direct to Tobacco Control Supplement CDC | Direct to Tobacco Control Supplement CDC | State of Vermont Department of Health |
| Direct to Tobacco Settlement | Direct to Tobacco Settlement | State of Vermont Department of Health |
| Direct to Transitional Housing | Direct to Transitional Housing Grant | State of Vermont Department of Health |
| Direct to Transitional Housing-Charitable Choice | Direct to Transitional Housing-Charitable Choice (state funds) | State of Vermont Department of Health |
| Direct to Tritium Leak 2010 | Direct to Tritium Leak 2010 | State of Vermont Department of Health |
| Direct to Tuberculosis | Direct to Tuberculosis Control | State of Vermont Department of Health |
| Direct to Universal Newborn | Direct to Universal Newborn Hearing Grant | State of Vermont Department of Health |
| Direct to Vaccines | Direct to Vaccines | State of Vermont Department of Health |
| Direct to VDH/UVM Grant | Direct to VDH/UVM Grant | State of Vermont Department of Health |
| Direct to VHC Open Enrollment - Non IT Staff | Direct to VHC Open Enrollment - Non IT Staff | State of Vermont Department of Health |
| Direct to Vital Statistics | Direct to Vital Statistics | State of Vermont Department of Health |
| Direct to VT Vaccine Purchasing Program | Direct to VT Vaccine Purchasing Program | State of Vermont Department of Health |
| Direct to Water Supply | Direct to Water Supply Program Support | State of Vermont Department of Health |
| Direct to WIC EBT Planning | Direct to WIC EBT Planning | State of Vermont Department of Health |
| Direct to WIC Infrastructure | Direct to WIC Infrastructure | State of Vermont Department of Health |
| Direct to WIC2Five | Direct to WIC2Five | State of Vermont Department of Health |

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| Direct to Wisewoman | Direct to Wisewoman | State of Vermont Department of Health |
| Final | Not Applicable | State of Vermont Department of Health |
| Leave time | Leave Time Program Codes only | State of Vermont Department of Health |
| PU MCO Blueprint | PU - MCO - Blueprint & Global Commitment Admin per M'caid eligible % of population | State of Vermont Department of Health |
| PU MCO EMS | PU - MCO - EMS per M'caid,Unins,Underins % of state pop | State of Vermont Department of Health |
| PU MCO Epidemiology | PU - MCO - Epidemiology per M'caid,Unins,Underins % of state pop | State of Vermont Department of Health |
| PU MCO Fluoride | PU - MCO - Fluoride per M'caid,Unins,Underins % of state pop | State of Vermont Department of Health |
| PU MCO Health Laboratory | PU - MCO - Health Laboratory per M'caid,Unins,Underins % of state pop | State of Vermont Department of Health |
| PU MCO Health Research and Stats | PU - MCO - Health Research and Statistics per M'caid,Unins,Underins % of state pop | State of Vermont Department of Health |
| PU MCO Patient Safety | PU - MCO - Patient Safety - Adverse Events, 50% to State Funds | State of Vermont Department of Health |
| PU MCO POISON CONTROL | PU - MCO - Poison Control based on state M'caid eligibility rate and GC admin 27% | State of Vermont Department of Health |
| PU MCO Substance Abuse | PU - MCO – Substance Abuse per M'caid,Unins,Underins % of state pop | State of Vermont Department of Health |
| PU MCO TB | PU - MCO - TB based on M'caid share of total TB patients | State of Vermont Department of Health |
| QU - ADAP M'caid Eligible | QU - ADAP M'caid Eligible - GC Admin and SABG | State of Vermont Department of Health |
| QU – DDRP Revenue | QU - HE ADAP DDRP Fees per available revenue, then per ADAP M'caid Eligible to GC Admin and SABG | State of Vermont Department of Health |
| QU - MCO – Substance Abuse and SABG Funds | QU - MCO - Substance Abuse per M'caid,Unins,Underins % of state pop and Substance Abuse Block Grant per available SABG funds | State of Vermont Department of Health |
| QU – MCO – Vaccine | QU – MCO – Vaccine Purchasing Program Allocated based on Med Elig. Rate for Adults | State of Vermont Department of Health |

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| QU - MCO - WIC Coverage and WIC Admin | QU - MCO - WIC coverage and WIC Admin per available WIC Admin funds | State of Vermont Department of Health |
| QU - MCO WIC coverage and WIC BF Peer Counselor | QU - MCO - WIC coverage and WIC Breast Feeding Peer Counselor Project per available WIC BF funds | State of Vermont Department of Health |
| QU - QE0316 ADAP M'CAID Eligible | QU - QE0316 ADAP M'CAID Eligible - GC admin and SABG | State of Vermont Department of Health |
| QU - QE1215 ADAP M'CAID Eligible | QU - QE1215 ADAP M'CAID Eligible - GC admin and SABG | State of Vermont Department of Health |
| QU - SAP to SABG and GC Admin | QU - SAP to SABG and GC Admin per school invoices | State of Vermont Department of Health |
| QU - WIC Clinic GC/WIC | QU - WIC CLINIC GC Admin and WIC Admin per M'caid Eligibility Rate for WIC Clients. | State of Vermont Department of Health |
| Total Salaries Across ADAP | Total Salaries Across ADAP | State of Vermont Department of Health |
| Total Salaries Across Emergency Preparedness | Total Salaries Across Emergency Preparedness | State of Vermont Department of Health |
| Total Salaries Across Environmental Health | Total Salaries Across Environmental Health | State of Vermont Department of Health |
| Total Salaries Across Health Surveillance | Total Salaries Across Health Surveillance | State of Vermont Department of Health |
| Total Salaries Across HPDP | Total Salaries Across Health Promotion & Disease Prevention | State of Vermont Department of Health |
| Total Salaries Across MCH | Total Salaries Across Maternal Child Health (MCH) | State of Vermont Department of Health |
| Total Salaries across MPD | Total Salaries across Medical Practice Board | State of Vermont Department of Health |
| Total Salaries Across VDH | Total Salaries Across VDH | State of Vermont Department of Health |
| VRERP | Direct to VRERP | State of Vermont Department of Health |
| WIC Admin | Direct to WIC Admin | State of Vermont Department of Health |
| WIC Food | Direct to WIC Supplemental Food | State of Vermont Department of Health |
| Adult Programs | Total Cost of All Adult Programs | State of Vermont Department of Mental Health |
| Allocated Meals to MTCR and VPCH | Allocated to Direct Secure Res Recovery Operating (MTCR) and Adult General (VPCH) cost centers based on meal count | State of Vermont Department of Mental Health |
| Allocated to MTCR and VPCH | Allocated to dDirect Secure Res Recovery Operating (MTCR) and Adult General (VPCH) cost centers based on FTE count | State of Vermont Department of Mental Health |

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| Child Programs | Total Cost of All Children's Programs, Including Community Health | State of Vermont Department of Mental Health |
| Data Infrastructure Staff Costs | Allocated to Data Infrastructure and all DMH programs (Total Costs) | State of Vermont Department of Mental Health |
| Department Salaries | Total Salaries Across DMH Staff | State of Vermont Department of Mental Health |
| Direct to Acute Care-Non-Springfield (GCI) | Direct to Acute Care-Non-Springfield (GCI) | State of Vermont Department of Mental Health |
| Direct to AHC Psych Inpatient GC Medicaid | Direct to AHC Psych Inpatient GC Medicaid | State of Vermont Department of Mental Health |
| Direct to AHC Psych Inpatient GCI | Direct to AHC Psych Inpatient GCI | State of Vermont Department of Mental Health |
| Direct to Berlin Administration | Direct to Berlin Administration | State of Vermont Department of Mental Health |
| Direct to BR Psych Inpatient | Direct to BR Psych Inpatient | State of Vermont Department of Mental Health |
| Direct to BR Psych Inpatient Medicaid | Direct to BR Psych Inpatient Medicaid | State of Vermont Department of Mental Health |
| Direct to Brattleboro Retreat - PNMI clients | Direct to Brattleboro Retreat - PNMI clients | State of Vermont Department of Mental Health |
| Direct to Case Rate Payments | Direct to Case Rate Payments | State of Vermont Department of Mental Health |
| Direct to Children's Community | Direct to Children's Community | State of Vermont Department of Mental Health |
| Direct to CHIP | Direct to Payments to EDS for CHIP | State of Vermont Department of Mental Health |
| Direct to CMS-MMIS | Direct to CMS-MMIS | State of Vermont Department of Mental Health |
| Direct to Consumer Support | Direct to Consumer Support | State of Vermont Department of Mental Health |
| Direct to CRT | Direct to CRT Doc/Hospital Payments | State of Vermont Department of Mental Health |
| Direct to CRT Community | Direct to CRT Community | State of Vermont Department of Mental Health |
| Direct to CRT Consumer Support Prgms-MCO (Invest) | Direct to CRT Consumer Support Programs-MCO (Investment) | State of Vermont Department of Mental Health |
| Direct to CRT Doc/Hospital | Direct to CRT Doc/Hospital | State of Vermont Department of Mental Health |
| Direct to CRT Doc/Hospital (GCI) | Direct to CRT Doc/Hospital (GCI) | State of Vermont Department of Mental Health |
| Direct to CRT Emergency MH for Adults-MCO (Investment) | Direct to CRT Emergency MH for Adults-MCO (Investment) | State of Vermont Department of Mental Health |
| Direct to CRT Global Commitment (program) | Direct to CRT Global Commitment (program) | State of Vermont Department of Mental Health |

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| Direct to CRT Housing Subsidies-MCO (Investment) | Direct to CRT Housing Subsidies-MCO (Investment) | State of Vermont Department of Mental Health |
| Direct to CRT Peer Supports-MCO (Investment) | Direct to CRT Peer Supports-MCO (Investment) | State of Vermont Department of Mental Health |
| Direct to CRT Recovery Housing-MCO (Investment) | Direct to CRT Recovery Housing-MCO (Investment) | State of Vermont Department of Mental Health |
| Direct to CRT Secure Residential Recovery-MCO (Investment) | Direct to CRT Secure Residential Recovery-MCO (Investment) | State of Vermont Department of Mental Health |
| Direct to Data Infrastructure | Direct to Data Infrastructure | State of Vermont Department of Mental Health |
| Direct to Emergency Adult MH | Direct to Adults Emergency MH | State of Vermont Department of Mental Health |
| Direct to Emergency Adult MH - CRT | Direct to Adults Emergency MH - CRT | State of Vermont Department of Mental Health |
| Direct to Emergency Child MH | Direct to Children's Emergency MH | State of Vermont Department of Mental Health |
| Direct to Employment Development Initiative | Direct to Employment Development Initiative | State of Vermont Department of Mental Health |
| Direct to Facility Lease GMPCC (GCI) | Direct to Facility Lease GMPCC (GCI) | State of Vermont Department of Mental Health |
| Direct to FAHC Psych Inpatient | Direct to FAHC Psych Inpatient | State of Vermont Department of Mental Health |
| Direct to FAHC Psych Inpatient Medicaid | Direct to FAHC Psych Inpatient Medicaid | State of Vermont Department of Mental Health |
| Direct to GC for Acute Psych Care | Direct to GC for Acute Psych Care | State of Vermont Department of Mental Health |
| Direct to General Fund | Direct to General Fund | State of Vermont Department of Mental Health |
| Direct to Global Commitment Admin | Direct to Global Commitment Admin | State of Vermont Department of Mental Health |
| Direct to Global Commitment Professional Medical | Direct to Global Commitment Professional Medical | State of Vermont Department of Mental Health |
| Direct to Global Commitment Program | Direct to Global Commitment Program | State of Vermont Department of Mental Health |
| Direct to GMPCC GCI | Direct to GMPCC GCI | State of Vermont Department of Mental Health |
| Direct to Health Enterprise IAPD | Direct to Health Enterprise IAPD | State of Vermont Department of Mental Health |
| Direct to Homeless Block Grant | Direct to Homeless Block Grant | State of Vermont Department of Mental Health |
| Direct to Housing Subsidies | Direct to Housing Subsidies | State of Vermont Department of Mental Health |
| Direct to ICD-10 IAPD | Direct to Approved ICD-10 IAPD | State of Vermont Department of Mental Health |
| Direct to MH Block Grant | Direct to MH Block Grant | State of Vermont Department of Mental Health |

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| Direct to MH Elder Care | Direct to MH Elder Care | State of Vermont Department of Mental Health |
| Direct to MH Transformation Grant | Direct to MH Transformation Grant | State of Vermont Department of Mental Health |
| Direct to Olmstead Grant | Direct to Olmstead Grant | State of Vermont Department of Mental Health |
| Direct to Other | Direct to Other | State of Vermont Department of Mental Health |
| Direct to Outpatient Services for Adults (GCI) | Direct to Outpatient Services for Adults (GCI) | State of Vermont Department of Mental Health |
| Direct to Peer Supports | Direct to Peer Supports | State of Vermont Department of Mental Health |
| Direct to Recovery Housing - MCO Investment | Direct to Recovery Housing - MCO Investment | State of Vermont Department of Mental Health |
| Direct to Refugee Program | Direct to Refugee Program | State of Vermont Department of Mental Health |
| Direct to Relocation Expenses | Direct to FEMA Proj-Relocation Expenses | State of Vermont Department of Mental Health |
| Direct to Respite for SED Youth | Direct to Respite for SED Youth | State of Vermont Department of Mental Health |
| Direct to RRMC Psych Inpatient | Direct to RRMC Psych Inpatient | State of Vermont Department of Mental Health |
| Direct to RRMC Psych Inpatient Medicaid | Direct to RRMC Psych Inpatient Medicaid | State of Vermont Department of Mental Health |
| Direct to SAMHSA | Direct to SAMHSA | State of Vermont Department of Mental Health |
| Direct to Secure Residential | Direct to Secure Residential | State of Vermont Department of Mental Health |
| Direct to Secure Residential Lease (GCI) | Direct to Secure Residential Lease (GCI) | State of Vermont Department of Mental Health |
| Direct to Secure Residential Rec Fac Devel | Direct to Secure Residential Rec Fac Devel | State of Vermont Department of Mental Health |
| Direct to SFI | Direct to SFI | State of Vermont Department of Mental Health |
| Direct to SOA Infrastructure | Direct to SOA Infrastructure | State of Vermont Department of Mental Health |
| Direct to SOA Infrastructure Components - Staff | Direct to SOA Infrastructure Components - Staff | State of Vermont Department of Mental Health |
| Direct to Special Services | Direct to Special Services` | State of Vermont Department of Mental Health |
| Direct to Special Services (GCI) | Direct to Special Services (GCI) | State of Vermont Department of Mental Health |
| Direct to SRR | Direct to Secure Residential Recovery | State of Vermont Department of Mental Health |
| Direct to SSBG | Direct to Social Services Block Grant | State of Vermont Department of Mental Health |
| Direct to Staff Secure Transport | Direct to Staff Secure Transport | State of Vermont Department of Mental Health |

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| Direct to the SIM Grant (federal) | Direct to the SIM Grant (federal) | State of Vermont Department of Mental Health |
| Direct to TTI | Direct to TTI | State of Vermont Department of Mental Health |
| Direct to VPCH Final (GCI) | Direct to VPCH Final (GCI) | State of Vermont Department of Mental Health |
| Direct to VPCH GCI | Direct to VPCH GCI | State of Vermont Department of Mental Health |
| Direct to VSH | Direct to VSH | State of Vermont Department of Mental Health |
| FINAL | NOT APPLICABLE | State of Vermont Department of Mental Health |
| FTE - Acute Pat Care | Acute Pat Care - Based on FTE | State of Vermont Department of Mental Health |
| FTE - Housing/UR/Emp | Full Time Equivalent Count across Housing, Utilization Review, and Employment Supports | State of Vermont Department of Mental Health |
| FTE - TA and Secure | Full Time Equivalent Count across Technical Assistance and Secure Residential | State of Vermont Department of Mental Health |
| GC Statewide Rate | Statewide Medicaid Eligibility Rate | State of Vermont Department of Mental Health |
| IDT | IDT | State of Vermont Department of Mental Health |
| INPATIENT PROGRAMS | Total Cost of All Inpatient Programs | State of Vermont Department of Mental Health |
| MH Distribution - Community | Mental Health Distribution Including Community Care | State of Vermont Department of Mental Health |
| MH Distribution – Community (GC/CHIP Admin) | Mental Health Distribution Including Community Care (GC/CHIP Admin) | State of Vermont Department of Mental Health |
| MH Distribution - Entire System of Care | Mental Health Distribution for Entire System of Care | State of Vermont Department of Mental Health |
| MH Distribution - Entire System of Care (GC/CHIP Admin) | Mental Health Distribution for Entire System of Care (GC/CHIP Admin) | State of Vermont Department of Mental Health |
| MH DISTRIBUTION - INPATIENT | Total Cost of Mental Health Distribution for Inpatient Care Programs | State of Vermont Department of Mental Health |
| MH DISTRIBUTION – INPATIENT (GC Admin) | Total Cost of Mental Health Distribution for Inpatient Care Programs (GC Admin) | State of Vermont Department of Mental Health |
| Negotiated PMO allocation of HSE sources | Negotiated PMO allocation of HSE sources | State of Vermont Department of Mental Health |
| ACA CAQH Grant | Direct to ACA CAQH Grant | State of Vermont Department of Vermont Health Access |
| Adult Medicaid Quality | Direct to AMQ Grant | State of Vermont Department of Vermont Health Access |

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| AHS Enrollment | QU - Quarterly Enrollment for Global Commitment, CHIP, and all other benefiting programs | State of Vermont Department of Vermont Health Access |
| CCHIPXIX50 | Case Count between CHIP and Medicaid 50% | State of Vermont Department of Vermont Health Access |
| CCHIPXIX50VHC | Case Count between CHIP, VHC and Medicaid 50% | State of Vermont Department of Vermont Health Access |
| CCHIPXIX75VHC | Case Count between CHIP, VHC and Medicaid 75% | State of Vermont Department of Vermont Health Access |
| CHIPRA | Direct to Maine CHIPRA Grant | State of Vermont Department of Vermont Health Access |
| Clawback | Direct to Clawback State Funds | State of Vermont Department of Vermont Health Access |
| CMS HIT 81.35 HITFUND 18.65 | PU - CMS HIT 83% 81.35% HIT Fund 17% 18.65% | State of Vermont Department of Vermont Health Access |
| CMS HIT EHRIP 100% | Direct to CMS HIT EHRIP 100% | State of Vermont Department of Vermont Health Access |
| CMSHIT 42.59/HIT FUND 57.41 | PU - CMSHIT 42.59%, HIT Fund 57.41% | State of Vermont Department of Vermont Health Access |
| CMS-MMIS | Direct to CMS-MMIS | State of Vermont Department of Vermont Health Access |
| D to ACA Drug Rebates | Direct to ACA Drug Rebates | State of Vermont Department of Vermont Health Access |
| D TO CFC GC TRADITIONAL | Direct to CFC GC traditional | State of Vermont Department of Vermont Health Access |
| D to CMS E&E VIEWS DDI 50 | Direct to CMS-E&E/VIEWS DDI (50%) | State of Vermont Department of Vermont Health Access |
| D to CMS E&E VIEWS DDI 75 | Direct to CMS-E&E/VIEWS DDI (75%) | State of Vermont Department of Vermont Health Access |
| D to CMS MMIS MES DDI 75 | Direct to CMS-MMIS/MES - DDI (75%) | State of Vermont Department of Vermont Health Access |
| D to CMS-MMIS 6028 90/10 | Direct to CMS-MMIS 6028 90/10 | State of Vermont Department of Vermont Health Access |
| D to DSH | Direct to DSH | State of Vermont Department of Vermont Health Access |
| D to Elig System and Staff 75 | Direct to Eligibility Systems and Staffing (75%) | State of Vermont Department of Vermont Health Access |
| D TO GC ADMIN | Direct to GC Admin | State of Vermont Department of Vermont Health Access |
| D to GC Program | Direct to GC Program | State of Vermont Department of Vermont Health Access |
| D to IDT | Direct to IDT | State of Vermont Department of Vermont Health Access |
| D to MCO - Buy-In | Direct to MCO - Buy-In | State of Vermont Department of Vermont Health Access |
| D to MCO - Civil Union | Direct to MCO - Civil Union | State of Vermont Department of Vermont Health Access |
| D to MCO - Family Supports | Direct to MCO - Family Supports | State of Vermont Department of Vermont Health Access |

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| D to MCO - HIV Drug Coverage | Direct to MCO - HIV Drug Coverage | State of Vermont Department of Vermont Health Access |
| D to MCO - Inst for Mental Disease | Direct to MCO - Institution for Mental Disease Services | State of Vermont Department of Vermont Health Access |
| D to MCO - Patient Safety Net | Direct to MCO - Patient Safety Net Services | State of Vermont Department of Vermont Health Access |
| D to Medicaid Buy-In | Direct to Medicaid Buy-In | State of Vermont Department of Vermont Health Access |
| D to MFP | Direct to MFP | State of Vermont Department of Vermont Health Access |
| D TO SCHIP Program | Direct to CHIP Program | State of Vermont Department of Vermont Health Access |
| D to SIM | Direct to SIM Grant | State of Vermont Department of Vermont Health Access |
| D to State | Direct to State Only | State of Vermont Department of Vermont Health Access |
| D to State Admin Funds | Direct to State Admin Funds | State of Vermont Department of Vermont Health Access |
| D to T-MSIS | Direct to T-MSIS Grant | State of Vermont Department of Vermont Health Access |
| D to VHC IDT | Direct to VHC IDT | State of Vermont Department of Vermont Health Access |
| E&E 50 53% / EXLV2 | PU—CMS E&E/Views 50/50 53% Exchange Level 2 47% | State of Vermont Department of Vermont Health Access |
| E&E 75 65.5/ EXLV 2 | PU—CMS 75 65.5%, Exch Level 2 34.5% | State of Vermont Department of Vermont Health Access |
| E&E 90 53/EXLV1 | PU—CMS E&E 90/10 53%, Exch Level 1 47% | State of Vermont Department of Vermont Health Access |
| E&E 90/10 | Direct to CMS-E&E (90/10) | State of Vermont Department of Vermont Health Access |
| E&E90 53 /EXLV2 47 | PU—CMS E&E 90/10 53%, Exch Level 2 47% | State of Vermont Department of Vermont Health Access |
| E&E90 65.5/EXLV1 | PU—CMS E&E 90/10 65.5%, Exch Level 1 34.5% | State of Vermont Department of Vermont Health Access |
| E&E90 65.5/EXLV2 | PU - CMS E&E 90/10 65.5%, Exch Level 2 34.5% | State of Vermont Department of Vermont Health Access |
| ENROLLMENT BROKER SERVICES | QU - Quarterly combined AHS and VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP | State of Vermont Department of Vermont Health Access |
| EXCH LEV 1B 47/ GC 53 | PU—Exchange Level 1B 47%, GC 53% | State of Vermont Department of Vermont Health Access |
| Exch Lvl2 34.5 GC 65.5 | PU—Exch Lvl2 34.5 GC 65.5 | State of Vermont Department of Vermont Health Access |
| Exchange Level 1B | Direct to Exchange Level 1B | State of Vermont Department of Vermont Health Access |
| Exchange Level 1C | Direct to Exchange Level 1C | State of Vermont Department of Vermont Health Access |

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| Exchange Level 2 | Direct to Exchange Level 2 | State of Vermont Department of Vermont Health Access |
| Final | N/A | State of Vermont Department of Vermont Health Access |
| HAEU | Result of HAEU Random Moment Time Study | State of Vermont Department of Vermont Health Access |
| HAEU50 | Result of HAEU Random Moment Time Study – Not Enhanced | State of Vermont Department of Vermont Health Access |
| GC 65.5 EX LV 1 34.5 | PU – GC Waiver 65.5%, Ex Lv 1b 34.5% | State of Vermont Department of Vermont Health Access |
| HP Paid Claims | QU - Quarterly number of paid claims for Global Commitment, CHIP, and All Other benefiting Programs | State of Vermont Department of Vermont Health Access |
| HP UNITS (COB) | QU - Quarterly Enrollment for Global Commitment, and All Other benefiting Programs | State of Vermont Department of Vermont Health Access |
| IAPD - DII | QU - Quarterly VHC enrollment for MAGI and DSHP (90/10) and QHP Level 1C | State of Vermont Department of Vermont Health Access |
| ICD-10 IAPD | Direct to ICD-10 IAPD | State of Vermont Department of Vermont Health Access |
| MCO Blueprint | PU - MCO Blueprint State Pop % | State of Vermont Department of Vermont Health Access |
| MCO VITL | PU - MCO VITL State Pop % | State of Vermont Department of Vermont Health Access |
| MMIS 17.5, E&E90 39.7 CMS HIT 6.1 EXLV2 36.7 | PU – MMIS 17.5%, E&E90 39.7%, CMS HIT 6.1%, Ex Lv 2 36.7 | State of Vermont Department of Vermont Health Access |
| MMIS 17.5, E&E90 39.7, CMS-HIT 6.1, EXLV1 36.7 | PU - MMIS 17.5%, E&E90 39.7%, CMS-HIT 6.1%, ExLv1 36.7 | State of Vermont Department of Vermont Health Access |
| MMIS 26.5/E&E90 26.5/ EXLV1C 47 | PU – MMIS 26.5%, E&E90 26.5%, Exch Level 1C 47% | State of Vermont Department of Vermont Health Access |
| MMIS 31.44, E&E90 26.6, CMS-HIT 8.92, EXLV233.04 | PU - MMIS 48.24%, E&E90 38.34%, CMS-HIT 13.42% | State of Vermont Department of Vermont Health Access |
| MMIS 33.34/E&E90 33.33/ CMS HIT 33.33 | PU – MMIS 33.34%, E&E90 33.33%, CMS HIT 33.33 | State of Vermont Department of Vermont Health Access |
| MMIS/E&E90 26.5/ LVL2 47 | PU – MMIS 26.5%, E&E90 26.5%, Exch Level 2 47% | State of Vermont Department of Vermont Health Access |
| MMIS75 EE75 EXCH LEV 2 | PU – MMIS 75 26.5% EE 75 26.5% Exch Lev 2 47% | State of Vermont Department of Vermont Health Access |
| OAPD | QU – Quarterly VHC enrollment for GC, DSHP (75% FMAP), CHIP and QHP | State of Vermont Department of Vermont Health Access |
| PHARM Claims | QU - Quarterly number of Pharmacy Claims paid for Global Commitment, CHIP, and All Other benefiting Programs | State of Vermont Department of Vermont Health Access |

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| Quarterly Medicaid Only Enrollment | QU - GC and CHIP enrollment (Medicaid Only) | State of Vermont Department of Vermont Health Access |
| Refugee Administration | Direct to RMA Admin | State of Vermont Department of Vermont Health Access |
| Refugee Program | Direct to Refugee Program | State of Vermont Department of Vermont Health Access |
| SMHP HIT IAPD | Direct to CMS HIT IAPD | State of Vermont Department of Vermont Health Access |
| Staff Hours | Total Hours across all program codes | State of Vermont Department of Vermont Health Access |
| Staff Hours BO | Total Hours across all program codes less BO | State of Vermont Department of Vermont Health Access |
| Staff Hours Commish | Total Hours across all program codes less commissioner's office | State of Vermont Department of Vermont Health Access |
| VHC Operations | QU - Quarterly VHC Enrollment for Global Commitment, CHIP, Designated State Health Programs (DSHP) and QHP | State of Vermont Department of Vermont Health Access |
| 110 Blind | Direct to Section 110 (Blind) | State of Vermont Disabilities, Aging, and Independent Living |
| 110 VR | Direct to Section 110 (Voc Rehab) | State of Vermont Disabilities, Aging, and Independent Living |
| AAA GF Transportation | AAA GF Transportation | State of Vermont Disabilities, Aging, and Independent Living |
| ASD Salary | Total Salaries Method M - Percentage of Salary Dollars Directly Charged (ASD) (43030) | State of Vermont Disabilities, Aging, and Independent Living |
| CMSO ADRC Program Grant | Direct to CMSO ADRC Program Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Comm Action - SSI | Direct to Community Action - SSI | State of Vermont Disabilities, Aging, and Independent Living |
| D TO AT - DPS Equipment Distribution | Direct to AT - DPS Equipment Distribution | State of Vermont Disabilities, Aging, and Independent Living |
| D TO EAP - Jobs For Independence | Direct to EAP - Jobs for Independence | State of Vermont Disabilities, Aging, and Independent Living |
| D to GC-Medicaid Adm-NATCP Admin | GC - Medicaid Admin - NATCP Admin & Registry | State of Vermont Disabilities, Aging, and Independent Living |
| D to GC-Medicaid Adm-PASRR | GC - Medicaid Admin - PASRR - Preadmission Screening and Record Review | State of Vermont Disabilities, Aging, and Independent Living |
| D TO IDT - SIMS | Direct to IDT - SIMS | State of Vermont Disabilities, Aging, and Independent Living |
| D TO MCO FF_RF | Direct to MCO - Family Flexible/Respite Funding | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-DS | MCO - DS Special Payments for Medical Services | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-Elder | MCO - Elder Coping with MMA | State of Vermont Disabilities, Aging, and Independent Living |

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| D to MCO-Homesharing | MCO - HomeSharing | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-Mobility | MCO - Mobility Training/Other Svcs.-Elderly Visually Impaired | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-Quality Review | MCO - Quality Review of Home Health Agencies | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-SASH | MCO - Support and Services at Home (SASH) | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-Self-Neglect | MCO - Self-Neglect Initiative | State of Vermont Disabilities, Aging, and Independent Living |
| D to MCO-SFI | MCO - Seriously Functionally Impaired: DAIL | State of Vermont Disabilities, Aging, and Independent Living |
| Direct DRI | Direct to DRI Partnership New Paradigm | State of Vermont Disabilities, Aging, and Independent Living |
| Direct SE VI-B | Direct to Supported Employment Title VI-B | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA AP | Direct to Admin on Aging Abuse Prevention VII | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA IIIB | Direct to Admin on Aging Support Services III-B | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA IIIC | Direct to Admin on Aging Congregate Meals III-C-1 | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA IIIC & Mcaid | Method P - Direct to AAA IIIC & Medicaid Admin | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA IIIC2 | Direct to Admin on Aging Delivered Meal III-C-2 | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA Ombudsman | Direct to Admin on Aging Ombudsman Activity VII | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AAA PH | Direct to Admin on Aging Preventative Health IIID | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Add'l Mcaid 1115 | Direct to Add'l Medicaid Admin 50% for LTC 1115 | State of Vermont Disabilities, Aging, and Independent Living |
| direct to Add'l Med 1115 | Direct to Add'l Medicaid Admin LTC 1115 75% | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to ADRC OC - AOA Enhanced | Direct to ADRC Options Counseling AOA Enhanced | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to ADRC Options Counseling | Direct to ADRC Options Counseling | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Asst Tech | Direct to Assistive Tech Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to AT-IDEA | Direct to AT-IDEA-DOE Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Bioterrorism | Direct to Bioterrorism Preparedness Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to CDC Grant | Direct to CDC Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Civil Monetary Fund | Direct Allocation to Civil Monetary Funds | State of Vermont Disabilities, Aging, and Independent Living |

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| Direct to CLIA P | Direct to CLIA - Personal | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to CLIA T | Direct to CLIA Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to CMS VIEWS | CMS E&E / VIEWS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to CMS-CSRE DDAS | Direct to CMS-CSRE System Change DDAS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to CMS-MMIS | CMS-MMIS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Commodities | Direct to Commodities Suppl. Food | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Corrections SSA Billing | Direct to Corrections SSA Billing | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to DDAS Guardianship | Direct to ASD Guardianship | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to DHHS Real Choices Change - DDAS | Direct to DHHS Real Choices - DDAS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to DOL Eval | DOL Evaluations | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to DUALS Project | Direct to DUALS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Eld & Dis. Trans. | Direct to Elderly & Disabled Transportation | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Emergency Preparedness | Direct to Emergency Preparedness | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Employ. For elders | Direct to Senior Community Service Employ. Program | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Employee Assistance | Direct to Employee Assistance | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Energy | Direct to Energy Outreach Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to F&NS | Direct to Food & Nutrition Services | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to General Fund | Direct to State General Fund | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to General Fund - DDAS | Direct to State General Fund - DDAS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to General Fund - Voc Rehab | Direct to State General Fund - Voc Reha | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Home Health Hotline | Direct to Medicare (XVIII) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to ICD-10 IAPD | ICD-10 IAPD | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to IL Blind | Direct to Independent Living Grant (Blind) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to IL VR | Direct to Independent Living Grant (VR) | State of Vermont Disabilities, Aging, and Independent Living |

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| Direct to Innovation | Direct to Innovation & Expansion (Blind & Visually Impaired) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to J&J | Direct to Johnson & Johnson Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to L&P Medicaid Admin | Direct to Medicaid Administration 75% (L&P) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Mcaid Admin 75% Travel | Direct to Medicaid Administration 75%- Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Mcaid Admin Baseline Travel | Direct to Medicaid Administration Baseline- Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid | Direct to Medicaid Program | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid & GF (LP) | Direct to Medicaid & General Fund (L&P) (37700) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid Adm 50% - DDAS | Direct to Medicaid Adm 50% - DDAS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid Adm 75% | Direct to Medicaid Adm 75% | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid Admin | Direct to Medicaid Administration - Baseline | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid Admin 50% | Direct to Medicaid Admin 50% - Comm Office | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicaid Program DDAS | Direct to Medicaid Program DDAS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicare | Direct to Medicare (XVIII Funds) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicare - T | Direct to Medicare (XVIII Funds) - Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicare & GF | Direct to Medicare and GF (43150) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicare Non SNF & SNF | Direct to Medicare Non-SNF & SNF (43320) | State of Vermont Disabilities, Aging, and Independent Living |
| direct to Medicare Supplemental for Equipment | Direct to Medicare Supplemental for Equipment | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Medicare Tr & GF | Direct to Medicare & GF - Travel (43150) | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MFP GRANT | Direct to Money Follows the Person | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MIPPA 2007 LIS/MSP | Direct to MIPPA 2007 LIS/MSP Outreach | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MIPPA 2008 LIS/MSP | Direct to MIPPA 2008 LIS/MSP Outreach | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MIPPA MEA - AAA | Direct to MIPPA Medicare Enrollment Assistance - AAA | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MIPPA MEA - ADRC | Direct to MIPPA Medicare Enrollment Assistance - ADRC | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MIPPAA AAAS | Direct to MIPPAA AAAs | State of Vermont Disabilities, Aging, and Independent Living |

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| DIRECT TO MIPPAA ADRC | Direct to MIPPAA ADRC | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO MIPPAA LIS-MSP | Direct to MIPPAA LIS-MSP | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Mobile Low Vision | Direct to Mobile Low Vision | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Nat Fam Care Supp | Direct to Admin on Aging National Family Care Supplemental III-E | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to NATCEP | Direct to NATCEP (43260) | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Nat'l Gov'r Ass'n | Direct to National Governor's Association | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to NSIP | Direct to NSIP Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Nurse Aid Testing | Direct to Nurse Aid Testing | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Nursing Home Diversion Grant | Direct to Nursing Home Diversion Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to OASIS | Direct to OASIS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to OASIS Space | Direct to OASIS - Space | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to OASIS T | Direct to OASIS-Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Older AM | Total Cost to Older Americans Act | State of Vermont Disabilities, Aging, and Independent Living |
| Direct To Otto Johnson | Direct to Otto Johnson Fund | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Refugee | Direct to Refugee Assistance Program | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Rehab Training | Direct to Rehab Training Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Rehab Training Voc | Direct to Rehab Training Voc Rehab | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to RSA System Change | Direct to RSA System Change Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to RU - Non VR | Direct to Reach Up Non-VR | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to RU - Pilot | Direct to Reach Up Pilot | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO S&C | PU - Allocation to S&C XVIII , State & XIX - Equip | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO S&C SNF & NON-SNF | PU - Allocation to S&C XVIII Non-SNF & LTC XVIII SNF | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO S&C XVIII TRAVEL | PU - Allocation to S&C XVIII Non SNF Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to SCHIP | Direct to SCHIP | State of Vermont Disabilities, Aging, and Independent Living |

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| Direct to SCSEP - Supp | Direct to SCSEP - Supplemental | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Senior Center Grant | Direct to Senior Center Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Seniors Farmer Market | Direct to Seniors Farmers Market | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO SIMS GRANT | Direct to SIMS Grant | State of Vermont Disabilities, Aging, and Independent Living |
| DIRECT TO SOA INFRASTRUCTURE | QU - Allocation to SOA Infrastructure Component | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to SSBG - DDAS | Direct to SSBG - DDAS | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to State Health Ins. Plan | Direct to State Health Insurance Program | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to State Improvement Grant | Direct to State Improvement Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Title VI-C | Direct to Supported Employment - Title VI-C | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to UMASS Progressive Employment | UMASS Progressive Employment | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to VDV AT Grant | Direct to VDV AT Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to Vend | Direct to Vending & Other | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to VR Quality Training Grant | Direct to VR Quality Training Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to VR UMASS Bond | Direct to VR UMASS Bond | State of Vermont Disabilities, Aging, and Independent Living |
| Direct to WIPAG | Direct to Work Incentives Planning & Assistance Grant | State of Vermont Disabilities, Aging, and Independent Living |
| Direct WtW | Direct to Welfare-to-Work | State of Vermont Disabilities, Aging, and Independent Living |
| DS Salary | Total Salaries - Method M - Percentage of Salary Dollars Directly Charged (DS) (43030) | State of Vermont Disabilities, Aging, and Independent Living |
| Engineering | Total Salaries - Method H - Costs for Bulidings/Programs Requiring Inspections (Total Salary) | State of Vermont Disabilities, Aging, and Independent Living |
| Final | Not Applicable | State of Vermont Disabilities, Aging, and Independent Living |
| Global Commitment - CNOM | Direct to Global Commitment - CNOM | State of Vermont Disabilities, Aging, and Independent Living |
| ICF/MR | PU - Allocation Between XIX, and State for ICF/MRs | State of Vermont Disabilities, Aging, and Independent Living |
| ICF/MR TRAVEL | PU - Allocation Between XIX, and State for ICF/MRs - Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Indirect - DBVI | Total Cost Allocation of Indirects for DBVI | State of Vermont Disabilities, Aging, and Independent Living |

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| Indirect - DS | Total Cost Allocation of Indirects for DS | State of Vermont Disabilities, Aging, and Independent Living |
| Indirect A1 | Method A1-Salary Cost Allocation of Indirect Costs to Divisions | State of Vermont Disabilities, Aging, and Independent Living |
| Indirect-ASD | Total Cost Allocation of Indirects for ASD | State of Vermont Disabilities, Aging, and Independent Living |
| Indirect-DVR | Total Cost Allocation of Indirects for DVR | State of Vermont Disabilities, Aging, and Independent Living |
| Indirect-L&P | Total Cost Allocation of Indirects for L&P | State of Vermont Disabilities, Aging, and Independent Living |
| Medicaid and State Gen | PU - Allocation Between Medicaid and State General Fund for LTC 19 | State of Vermont Disabilities, Aging, and Independent Living |
| Medicaid and State Gen - Travel | PU - Allocation Between Medicaid and State General Fund for LTC 19 - Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Medicaid and State | PU - Allocation between Medicare Non-SNF, S&C State and GF Vermont for Subcontracts | State of Vermont Disabilities, Aging, and Independent Living |
| NATAC Admin | PU - Allocation Between XVIII and XIX Based on Certified and Participating Facilities (for NATAC Admin) | State of Vermont Disabilities, Aging, and Independent Living |
| Number of ACCS Beds | Method Q - Number of ACCS Beds Paid by Title XIX Billed by 15th/Total ACCS Beds on 15th | State of Vermont Disabilities, Aging, and Independent Living |
| Number of ACCS Beds Travel | Method Q - Number of ACCS Beds Paid by Title XIX Billed by 15th/Total ACCS Beds on 15th-Travel | State of Vermont Disabilities, Aging, and Independent Living |
| PASRR | Direct to PASRR | State of Vermont Disabilities, Aging, and Independent Living |
| Persons ASD | Method O - Persons Served in Quarter by ASD | State of Vermont Disabilities, Aging, and Independent Living |
| Persons Voc | Method D - Persons Served in Quarter by Voc Rehab | State of Vermont Disabilities, Aging, and Independent Living |
| Ratio ASD | Total Cost - Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (ASD) | State of Vermont Disabilities, Aging, and Independent Living |
| Ratio BLIND | Total Cost - Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (Blind and Visually Impaired) | State of Vermont Disabilities, Aging, and Independent Living |
| Ratio DS | Total Cost - Method A2 - Ratio of total direct program funds expended in quarter (DS) | State of Vermont Disabilities, Aging, and Independent Living |
| Ratio L&P | Total Cost - Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (Licensing and Protection) | State of Vermont Disabilities, Aging, and Independent Living |

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| Ratio VR | Method R - Ratio of Total Direct Program Funds Expended in Quarter by Regional Staff (Voc Rehab) | State of Vermont Disabilities, Aging, and Independent Living |
| Ratio VR 2 | Total Cost - Method A2 - Ratio of Total Direct Program Funds Expended in Quarter (Voc Rehab) | State of Vermont Disabilities, Aging, and Independent Living |
| S&C Allocation fo MDS Supplies | PU - Allocation between LTC XVIII SNF, XIX SNF, State GF for MDS Supplies | State of Vermont Disabilities, Aging, and Independent Living |
| S&C allocation for MDS Consultants | PU - Allocation between LTC XVIII SNF, XIX SNF, State GF for MDS Consultants | State of Vermont Disabilities, Aging, and Independent Living |
| S&C Allocation for MDS Equipment | PU - Allocation between LTC XVIII SNF, XIX SNF, State GF for MDS Equipment | State of Vermont Disabilities, Aging, and Independent Living |
| S&C Allocation for MDS Personal | PU - Allocation between LTC XVIII SNF, XIX SNF, State GF for MDS Personal | State of Vermont Disabilities, Aging, and Independent Living |
| S&C Allocation for MDS Subcontracts | PU - Allocation between LTC XVIII SNF, XIX SNF, State GF for MDS Subcontracts | State of Vermont Disabilities, Aging, and Independent Living |
| S&C Allocation for MDS Travel | PU - Allocation between LTC XVIII SNF, XIX SNF, State GF for MDS Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Salary & Exp – Lic | Total Salaries - Method J - Salary & Expenses in Quarter - Licensure (Personal Services) | State of Vermont Disabilities, Aging, and Independent Living |
| Salary & Exp - Lic (T) | Total Costs - in Quarter - Licensure (Travel) | State of Vermont Disabilities, Aging, and Independent Living |
| Salary & Exp - Lic Dir | Total Salaries - Method I - Salary & Expenses in Quarter - Director of Division of Licensing and Protection (Personal Services) | State of Vermont Disabilities, Aging, and Independent Living |
| Salary & Exp - Lic Dir (T) | Total Costs in Quarter - Director of Division of Licensing and Protection (Travel) | State of Vermont Disabilities, Aging, and Independent Living |
| Salary & Exp - Lic Dir Vac | Total Salaries - Method K - Salary & Expenses in Quarter - Long Term Care Vacations, Training, and Other Time | State of Vermont Disabilities, Aging, and Independent Living |
| Survey & Cert | PU - Allocation Between XVIII, XIX, and State Based on Homes Certification Surveys and Certifications Procedures (for Nursing Homes) | State of Vermont Disabilities, Aging, and Independent Living |
| Survey & Cert (MDS) T | PU - Allocation Between XVIII, XIX, and State Based on Homes Certification Surveys and Certifications Procedures (MDS) - Travel | State of Vermont Disabilities, Aging, and Independent Living |

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| Survey & Cert T | PU - Allocation Between XVIII, XIX, and State Based on Homes Certification Surveys and Certifications Procedures (for Nursing Homes) – Travel | State of Vermont Disabilities, Aging, and Independent Living |
| Survey & Cert. (MDS) | PU - Allocation Between XVIII, XIX, and State Based on Homes Certification Surveys and Certifications Procedures (MDS) | State of Vermont Disabilities, Aging, and Independent Living |

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