



State of Vermont
Agency of Human Services
280 State Drive
Waterbury, VT 05671-1000
www.humanservices.vermont.gov

Hal Cohen, Secretary

[phone] 802-241-0440
[fax] 802-241-0451

Date: September 19, 2016

Re: Health Care Administrative Rules 1.100, 1.101, 4.213 & 4.214 Public Comment Response

1.100 Health Care Administrative Rules Introduction

Comment Received:

Paragraph (d) is confusing as it relates to exceptions to the rules for Specialized Services and Programs. The rule references these as specialized services contained in "programs and services authorized by federal 'waivers' of Medicaid program requirements." As Vermont's entire Medicaid program is operating under a waiver (Global Commitment), this reference is confusing and possibly misleading. Reference could be made instead to "programs and services for individuals who would have been eligible under a separate 1915(c) waiver or the state's prior 1115 waiver." In addition, reference is made to these programs and services being "reflected at Chapter 7 of these rules, entitled 'Specialized Services and Programs.'" Inasmuch as Chapter 7 of the rules has not yet been promulgated, it is impossible to comment on the validity of the "exception" purported to be established in the rule.

Response:

Vermont has authority from the Centers for Medicare and Medicaid Services under its 1115 Global Commitment to Health Demonstration Waiver to provide programs for specialized services to special health needs populations. This rule clarifies that upon adoption, rules for these specialized programs will take precedence over the more general coverage, limitation, prior authorization, and eligibility rules contained throughout the Health Care Administrative Rules.

1.101 Health Care Administrative Rules Definitions

Comment Received:

The definition of "Early, Periodic, Screening, Diagnostic, and Treatment" or "EPSDT" is inconsistent with the federal definition of EPSDT and current Medicaid Covered Services Rule 7103 and should be amended as follows: Early, Periodic, Screening, Diagnostic, and Treatment" or "EPSDT" mean the items and services defined in 1905(r) of the Social Security Act which include screening, vision services, dental services, hearing services, and such other necessary health care, diagnostic services, treatment, and other measures described in section 1905(a) to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, and to achieve proper growth and development or prevent the onset or worsening of a health condition, whether or not such items and services are covered under the state plan.

Response:

After considering the comment, the rule has been modified to include the following text to the end of the definition of EPSDT, “whether or not such items and services are covered under the State Plan.” This language is inclusive of content included in 1905(a) of the Social Security Act.

The comment also states that the EPSDT definition should be amended to include the text, “to achieve proper growth and development or prevent the onset or worsening of a health condition.” The proposed definition of EPSDT will not be amended to include language that is outside of the definition outlined in federal regulation.

4.213 Audiology Services**Comment Received:**

In section 4.213.3(a) under Conditions for Coverage in the proposed rules for Audiology Services - if “Audiology services” are still not restricted by age, it would be clearer if you could add language at the end of the sentence that says they are “provided to beneficiaries of any age”.

Response:

Services in the Health Care Administrative Rules are provided to beneficiaries of any age unless otherwise specified. The term “provided to beneficiaries of any age” will not be stated in each rule.

4.214 Eyewear and Vision Care Services**Comment Received:**

We disagree with the elimination of coverage of non-eyewear aids to vision when the beneficiary is legally blind and when providing the aid to vision will foster independence by improving at least one instrumental activity of daily living (IADL) at HCAR4.214.3(4). In instances where, a beneficiary requires non-eyewear aids to vision in order to improve IADLs such as cooking, cleaning or shopping, and failure to provide such non-eyewear aids will result in a loss of independence, coverage should be provided. Providing coverage in these instances is consistent with the Department of Disabilities, Aging and Independent Living’s core principals of personal independence, self-determination, and community participation for individuals with disabilities.

Response:

Coverage for non-eyewear aids to vision for an instrumental activity of daily living (IADL) is not intended for elimination. The rule has been modified to list instrumental activities of daily living in addition to activities of daily living for clarity.