



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

Global Commitment Register

June 29, 2018

GCR 18-071
PROPOSED

ARIS Rate Increase for Collective Bargaining Wage Increases

Policy Summary:

The Agency of Human Services (AHS) is proposing to increase the maximum allowable rates for Choices for Care personal care services, Choices for Care respite/companion services, State Plan Attendant Services, and Traumatic Brain Injury (TBI) program respite care claims codes. This rate increase complies with the new Collective Bargaining Agreement (CBA) for Independent Direct Support Workers and with Department of Labor requirements. Although the TBI program is not specifically identified in the CBA, AHS will align the daily respite rate with the CBA. Further detail can be found under “Additional Information” below.

Effective Date:

July 1, 2018

Authority/Legal Basis:

[Global Commitment to Health Waiver](#): Waiver authority #5 [Section 1902(a)(13), 1902(a)(30)];
Special Term and Condition #29.
[Medicaid State Plan](#)

Population Affected:

All Medicaid

Fiscal Impact:

	State Fiscal Year 2019
State	\$399,119
Federal	\$464,495
Total	\$863,614

Public Comment Period:

6/29/18 – 7/29/18

Send comments to:

AHS Medicaid Policy Unit

280 State Drive, Center Building
Waterbury, VT 05671-1000

Or submit via e-mail to AHS.MedicaidPolicy@vermont.gov.

There is no public meeting scheduled at this time. If one should be scheduled, that information can be found at: <http://dvha.vermont.gov/> either through the calendar or listed under upcoming events.

Additional Information:

Revenue and Procedure Codes included:

Codes	Unit	Rate	Effective Date
CFC Revenue Code 077	15 mins	Up to \$10.60/unit	7/1/18
CFC Revenue Code 081	15 mins	Up to \$10.60/unit	7/1/18
CFC Revenue Code 075	15 mins	Up to \$10.60/unit	7/1/18
CFC Revenue Code 080	15 mins	Up to \$10.60/unit	7/1/18
ASP Medicaid Procedure Code S5199	15 mins	Up to \$10.51/unit	7/1/18
TBI Respite DAIL Procedure Code S9125 U8	1 day	\$191.57/day	7/1/18
TBI Respite DMH Procedure Code S9125 HI	1 day	\$191.57/day	7/1/18