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State/Territory Name: Vermont

State Plan Amendment (SPA) #: 15-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) HCFA 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services JFK Federal Building, Government Center Room 2275 Boston, Massachusetts 02203



Division of Medicaid and Children's Health Operations / Boston Regional Office

February 9, 2016

Hal Cohen, Secretary Vermont Agency of Human Services 208 Hurricane Lane, Suite 103 Williston, Vermont 05495

Dear Secretary Cohen:

We are pleased to enclose a copy of Vermont's approved State plan amendment (SPA) No. 15-0001 with an effective date of July 1, 2015, as requested by your Agency.

This SPA amended your Title XIX State plan to allow Licensed Behavior Analysts (BAs), Licensed Assistant Behavior Analysts (ABAs) and Behavior Technicians to provide services to treat autism spectrum disorder, and for BAs and ABAs to bill directly for these services.

Enclosed are the following pages to be incorporated within your State plan:

- Attachment 3.1-A, pages 3d(1) & 3d(2)
- Attachment 4.19-B, page 3a

If there are questions, please contact Tom Schenck at (617) 565-1325, or tom.schenck@cms.hhs.gov.

Sincerely,

Richard R. McGreal

Associate Regional Administrator

Enclosure

cc: Steven Costantino, Commissioner

Dylan Frazer, Health Programs Administrator, Policy Unit Ashley Berliner, Director of Healthcare Policy and Planning

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE:
STATE PLAN MATERIAL	15 - 001	VERMONT
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	3. PROGRAM IDENTIFICATION:	
*	TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE(S)	
CENTERS FOR MEDICARE & MEDICAID SERVICES	JULY 1, 2015	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (CHECK ONE):		
■ NEW STATE PLAN ■ AMENDMENT TO BE CONSIDERED AS NEW PLAN ■ AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
42 CFR §430.12(c)(1)(ii)	a. FFY <u>2015</u> \$ 737,295.00	
*x.	b. FFY 2016 \$ 2,856,8	37.00
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPE	RSEDED PLAN SECTION
ATT. 3.1-A PG 3D(1); ATT. 4.19-B PG 3A;	OR ATTACHMENT (If Applicable)	
Att. 3.1-A p. 3d(2)	ATT. 4.19-B PG 3A	
<u> </u>	711. 4. 15-51-0 57	
10. SUBJECT OF AMENDMENT: LICENSED BEHAVIOR ANALYST SERVICES		
11. GOVERNOR'S REVIEW (Check One):	OTHER, AS SPECIFIED	
GOVERNOR'S OFFICE REPORTED NO COMMENT	SIGNATURE OF SECRETARY	V OE ADMINISTRATION
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	SIGNATURE OF SECRETAR	T OF ADMINISTRATION
Approximate the second		
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO	
13. TYPED NAME: HAL COHEN	LINDSAY PARKER	
14. TITLE:	AGENCY OF HUMAN SERVICES	
SECRETARY, AGENCY OF HUMAN SERVICES	208 HURRICANE LANE	
	WILLISTON, VT 05495	
15. DATE SUBMITTED: September 3, 2015 FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED: September 3, 2015	18. DATE APPROVED:	
	2/9/2010	
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2015	20. SIGNATURE OF REGIONAL O	DEELCIAL &
19. EFFECTIVE DATE OF AFFROVED MATERIAL. July 1, 2015	20. SIGNATURE OF REGIONAL C	PICIAL
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21. TYPED NAME: Richard R. McGreal	22. TITLE Associate Regional A	Administrator
20 2-11-2-2		
23. REMARKS Pen and Ink change box 8		
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TITLE XIX Attachment 3.1-A State: VERMONT Page 3d(1)

ITEM 6. MEDICAL CARE AND ANY OTHER OF REMEDIAL CARE RECOGNIZED UNDER STATE LAW, FURNISHED BY LICENSED PRACTITIONERS WITHIN THE SCOPE OF THEIR PRACTICE AS DEFINED BY STATE LAW (continued)

D. Other Practitioners' Services

6. Licensed Applied Behavior Analyst Services

Services are furnished by a Licensed Applied Behavior Analyst within the scope of practice as defined by state law and reviewed and accepted by the State of Vermont, Office of Professional Regulation (OPR), and are services covered by Medicaid. Consistent with state law, Behavior Analysts will oversee the supervision of Licensed Assistant Behavior Analysts and Behavior Technicians (BTs), and shall bill and assume professional responsibility for the services rendered by an unlicensed provider under their supervision. All services must be medically necessary, prior authorized by the Medicaid program, and delivered in accordance with the recipient's treatment plan.

- a) Licensed Applied Behavior Analysts authorized to enroll in Vermont Medicaid must meet all of the following requirements:
 - 1. Minimum of a master's degree in behavior analysis or related field such as: education, psychology, special education, counseling or social work.
 - 2. Certification by the Behavior Analysts Certification Board (BACB) as a Board Certified Behavior Analyst (BCBA).
 - 3. Must meet all necessary requirements under Section 6401 of the Affordable Care Act of 2010.
 - 4. Must be covered by professional liability insurance.
 - 5. Have an approved background check.
 - 6. Have no active sanctions or disciplinary actions on their Vermont Behavior Analysts' licensure.
 - 7. Have no Medicare/Medicaid sanctions or federal exclusion.

Applied Behavior Analysts may also receive Vermont licensure by endorsement as defined in 3 V.S.A. § 4923.

- b) Licensed Assistant Behavior Analysts authorized to enroll in Vermont Medicaid must meet all of the following requirements:
 - 1. Must practice under and be supervised by a State of Vermont Licensed Behavior Analyst.
 - 2. Certification by the BACB as a BCaBA.
 - 3. Minimum of a bachelor's degree in behavior analysis or related field, such as education, psychology, special education, counseling or social work.
 - 4. Have an approved background check.

Assistant Behavior Analysts may also receive Vermont licensure by endorsement as defined in 3 V.S.A. § 4923.

TN No. 15-001 Supersedes TN No. None Effective Date: 07/01/2015

Approval Date: 2/9/201 6

TITLE XIX Attachment 3.1-A State: VERMONT Page 3d(2)

ITEM 6. MEDICAL CARE AND ANY OTHER OF REMEDIAL CARE RECOGNIZED UNDER STATE LAW, FURNISHED BY LICENSED PRACTITIONERS WITHIN THE SCOPE OF THEIR PRACTICE AS DEFINED BY STATE LAW (continued)

- c) BTs authorized to provide applied behavior analysis (ABA) services reimbursed by Vermont Medicaid must meet all of the following requirements:
 - 1. Must practice under and be supervised by a State of Vermont Licensed Applied Behavior Analyst.
 - 2. Have a bachelor's degree, or be actively pursuing a bachelor's degree, preferably in human services field. Relevant experience may be exchanged for a degree.
 - 3. Have an approved background check, which must include the following:
 - i. A Vermont criminal record check obtained through the Vermont Crime Information Center (VCIC). A state record check includes the sex offender registry.
 - ii. A candidate who is not a Vermont resident or has been a Vermont resident for less than five years is required to have a National criminal records check, which is obtained from the FBI through the VCIC.
 - iii. Vermont Abuse Registry checks (both Child Abuse Registry and Adult Abuse Registry).
 - 4. Documentation of receiving the required trainings listed below prior to providing services:
 - i. At least 40 hours of training in the implementation of ABA, to include a minimum of three hours of ASD specific training and a minimum of three hours of ethics and professional conduct specific training.
 - ii. Current First Aid Certification (must be renewed at least every three years).
 - iii. Universal Precautions.
 - iv. Current CPR Certification (must be renewed annually).
 - v. Confidentiality and compliance with Health Insurance Portability and Accountability Act (HIPPA).
 - vi. Abuse and Neglect reporting.
- d) Limitations to hours of treatment:
 - 1. Applied Behavior Analyst: No more than four hours per week, following assessment and development of a treatment plan.
 - 2. Assistant Behavior Analyst: No more than four hours per week, following assessment and development of a treatment plan.
 - 3. BT: No more than fifteen hours per week, following the assessment and development of a treatment plan.

These limitations can be exceeded for medical necessity.

e) Per 42 CFR 441, Subpart B, children under age 21 with autism spectrum disorders receive all medically necessary services to address their needs and are not limited to the services of a Licensed Behavior Analyst.

TN No. 15-001 Effective Date: 07/01/2015
Supersedes
TN No. None Approval Date: 2/9/2016

TITLE XIX Attachment 4.19-B State: Vermont Page 3a

METHODS AND STANDARDS OF ESTABLISHING PAYMENT RATES - OTHER MEDICAL CARE (Continued)

6. d. Other Practitioners Services

1. Behavioral Health Services

Payment is made at the lower of the actual charge or the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. The RBRVS methodology was updated for dates of service effective as specified in Section 26 of Attachment.4.19-B. All rates are published at www.dvha.vermont.gov/for-providers. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

2. Opticians' Services

Payment is made at the lower of the actual charge or the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. The RBRVS methodology was updated for dates of service effective as specified in Section 26 of Attachment 4.19-B. All rates are published at www.dvha.vermont.gov/for-providers. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

3. High-Tech Nursing Services

Payment is made at the lower of the actual charge or the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. The RBRVS methodology was updated for dates of service effective as specified in Section 26 of Attachment 4.19-B. All rates are published at www.dvha.vermont.gov/for-providers. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

4. Licensed Lay Midwife Services

Payment is made at the lower of the actual charge or the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. The RBRVS methodology was updated for dates of service effective as specified in Section 26 of Attachment 4.19-B. All rates are published at www.dvha.vermont.gov/for-providers. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

5. Naturopathic Physician Services

Payment is made at the lower of actual charge for the service or the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. The RBRVS methodology was updated for dates of service effective as specified in Section 26 of Attachment 4.19-B. All rates are published at www.dvha.vermont.gov/for-providers. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

6. Licensed Behavior Analysts and Licensed Assistant Behavior Analysts

Payment is made at the lower of the actual charge or the Medicaid rate on file. Rates were set as of 7/1/2015 and are effective for services on or after that date. All rates are published at www.dvha.vermont.gov/for-providers. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private providers.

TN# <u>15-001</u> Supersedes TN# <u>14-021</u> Effective Date:7/1/2015

Approval Date: 2/9/2016