

Table of Contents

State/Territory Name: Vermont

State Plan Amendment (SPA) #: 25-0009

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

March 30, 2026

Jill Mazza Olson, Medicaid Director
Vermont Agency of Human Services
Building E, Third Floor, 280 State Drive
Waterbury, VT 05671-1000

Re: Vermont State Plan Amendment (SPA) - 25-0009

Dear Director Olson:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0009. This amendment updates Vermont's Community Mental Health Center services in accordance with Special Terms and Condition 4.4(c) of the Global Commitment to Health 1115 waiver wherein rehabilitation mental health services are being transferred from the waiver to the State Plan.

We conducted our review of your submittal according to statutory requirements in 42 CFR §440.130. This letter informs you that Vermont's Medicaid SPA TN 25-0009 was approved on March 30, 2026, with an effective date of July 1, 2025.

Enclosed are copies of Form CMS 179 and the approved SPA pages to be incorporated into the Vermont State Plan.

If you have any questions, please contact Gilson DaSilva at (617) 565-1227 or via email at Gilson.DaSilva@cms.hhs.gov.

Sincerely,



Nicole McKnight
On Behalf of Courtney Miller, MCOG Director

Enclosures

cc: Dylan Frazer, Deputy Director of Medicaid Policy
Anthony Carrese, Medicaid Policy Unit

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 5 — 0 0 0 9

2. STATE

VT

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT



XIX



XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

7/1/2025

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR §440.130

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 0
b. FFY 2026 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Att. 3.1-A pages 6a(2), 6b, 6c, 6d, 6e, 6e(1), 6e(2), 6e(3) and 6e(4)

8. PAGENUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable)

Att. 3.1-A pages 6a(2), 6b, 6c, 6d, 6e

9. SUBJECT OF AMENDMENT

Community Mental Health Center services update in accordance with Global Commitment to Health 1115 waiver STC 4.4(c)

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL



OTHER, AS SPECIFIED: Approval from Agency of Admin.

DATE AGENCY OFFICIAL

Ashley Berliner

15.

DYLAN FRAZER
DEPARTMENT OF VERMONT HEALTH ACCESS
280 STATE DRIVE
WATERBURY, VT 05671-1010

13. TITLE
MEDICAID DIRECTOR, AGENCY OF HUMAN SERVICES

14. DATE SUBMITTED
8/22/2025

DYLAN.FRAZER@VERMONT.GOV

FOR CMS USE ONLY

16. DATE RECEIVED
08/22/2025

17. DATE APPROVED
03/30/2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
07/01/2025

19.

20. TYPED NAME OF APPROVING OFFICIAL

Nicole McKnight

21. TITLE OF APPROVING OFFICIAL

On Behalf of Courtney Miller, MCOG Director

22. REMARKS

03/16/2026 - VT agreed to P&I change to show pages 6e(1), 6e(2), 6e(3) and 6e(4) in Box 7 in addition to 6a(2), 6b, 6c, 6d, 6e.

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

2. Substance Use Disorder Services (Continued)

Clinical Social Worker	Licensed pursuant to OPR regulations	Assessment; Early Intervention; Treatment
Marriage & Family Therapist	Licensed pursuant to VT Board of Allied Mental Health regulations	Assessment; Early Intervention; Treatment
Nurse	Registered Nurse Licensed pursuant to VT Board of Nursing regulations	Assessment; Early Intervention; Treatment
Physicians	Allopathic physicians are licensed pursuant to VT Board of Medical Practice regulations; Osteopathic physicians are licensed pursuant to VT Board of Osteopathic Physicians and Surgeons regulations	Assessment; Early Intervention; Treatment
Psychologists	Licensed pursuant to VT Board of Psychological Examiners regulations	Assessment; Early Intervention; Treatment
Residential	Licensed pursuant to the VT Department of Disabilities, Aging & Independent Living, Division of Licensing & Protection regulations	Assessment; Treatment
Withdrawal Management Programs	Certified by the Vermont Department of Health	Assessment; Treatment; Early Intervention

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

3. Community Mental Health Center Services

In accordance with 42 CFR 440.130(d), covered services are medical or remedial services recommended by a physician or other licensed practitioner of the healing arts, within the scope of his practice under State law, for maximum reduction of physical or mental disability and restoration of a beneficiary to his best possible functional level. Covered services are provided in accordance with evidence-based best practices. These services treat individuals with mental health diagnoses and integrated mental health and substance use diagnoses. All services are delivered in accordance with the treatment plan except for emergency and crisis services.

Covered Services include:

a. Emergency and Crisis Services

(1) Emergency Services

Emergency Services are episodic intensive supports available 24-hours-a-day, 7-days-a-week and are intended to resolve or stabilize the immediate crisis. Emergency Services include assessment of the individual and the circumstances leading to the crisis, crisis counseling, assessing for hospitalization or emergency placement, assessment of need for mental health and other services, referral and follow-up. This service is available to all ages.

(2) Short-Term Residential Crisis Beds

Provision of short-term services designed to stabilize individuals in an acute mental health crisis and to move to community-based support as soon as possible with planned discharge and placement. Services are provided to individuals, their families, or their immediate support system that may be time-limited, but necessary to maintain stability or avert destabilization. Services must be provided to, or directed exclusively toward, the treatment of the Medicaid eligible individual. This service is available to all ages.

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND
REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED
ELSEWHERE IN THE PLAN. (Continued)

b. Assessment Services

(1) Clinical Assessment

An evidence-based evaluation designed to determine the extent and severity of mental health diagnoses, comprehensive rehabilitative treatment needs, eligibility for services, and level of treatment determination. A biopsychosocial, multi-dimensional assessment is administered by qualified mental health providers trained in the applicable tools and instruments, with sign-off by a licensed health care professional if necessary. Clinical assessments may be administered in schools, hospitals, clinics, correctional facilities, and other community settings. This service is available to all ages.

(2) Screening Tool

A State of Vermont identified screening tool will be used to determine areas of function for all ages as a mechanism to measure progress over time in treatment. Screening will be required at least annually for adults and at least every 6 months for children and youth. Staff must be trained to utilize the screening tool and certified if applicable. This service is available to all ages.

c. Outpatient Services

(1) Psychotherapy

Includes individual, couples, family, and group therapy and aims to resolve symptoms, improve function, facilitate emotional and psychological rehabilitation of a mental health diagnosis, psychosocial stress, relationship problems, and difficulties in coping in the social environment. This service is available to all ages.

(2) Community Supports

Rehabilitative and goal-oriented services that are available as individualized and group supports. Services include service planning and coordination, treatment planning, monitoring progress, identification of shifting needs, change in level of treatment, and communication that is integral to continuity of treatment for the individual. This service is available to all ages.

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

d. Specialized Services

(1) Medication Evaluation, Management and Consultation Services

These services include evaluating the need for psychiatric medication, prescribing and monitoring medication, and providing medical oversight, support and consultation for an individual's mental health treatment in coordination with other medical providers. This service is available to all ages.

(2) Peer Supports

These services are provided under 42 CFR 440.130(d) as a benefit of rehabilitative services. Peer supports are wellness-oriented, person-centered, and relationship-focused services that support individuals by using their unique lived experience under clinical supervision. These services include supporting individuals in advocating for themselves by assisting them in accessing community-based resources, supported employment, and health and wellness supports. Peers may not practice psychotherapy, create treatment plans, or engage in any service that requires a license. Peer support specialists are supervised by mental health professionals. Services can be provided individually or in a group setting. This service is available to all ages.

(3) Nursing Services

These services provide support to individuals with their mental health rehabilitation and reduces the need to place individuals in higher levels of treatment solely due to nursing needs. The following nursing services may be provided:

- Injection
- IV Push or infusion
- Teaching and Education (including diabetes, asthma, tobacco cessation)
- Blood draws
- Medication management
- Transition/discharge planning - Nurse to Nurse Reports
- Nursing Assessment/Observation
- Wound Care and Nursing Procedure

This service is available to all ages.

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

e. Residential Services

(1) Adult Residential Services

Rehabilitative treatment in a residential setting designed to provide individualized, recovery-oriented treatment plan services and includes intensive individualized wrap-around residential treatment, intensive recovery residential treatment, and transitional residential treatment. Component services can include residential treatment planning, rehabilitative skill building, community integration activities, psychotherapy, psychiatry, psychoeducation, medication monitoring, and discharge planning. This service is available to adults only.

(2) Therapeutic Foster Care

This service is a treatment-focused form of foster care provided in a family setting by trained and licensed caregivers for children and adolescents with serious emotional or behavioral needs. This service is designed to be short-term in nature to support the child/youth and family to develop the skills necessary to improve functioning and safety by reducing mental health symptoms and behavioral challenges so the youth can transition back into their home. This service includes skilled caregiving by consistent single or paired home providers who are trained in trauma-informed approaches, deescalation techniques, youth development, and rehabilitative treatment interventions. This service supports youth to implement skills learned in treatment services (e.g. self-regulation, distress tolerance) in the daily interactions of a supportive and normative family home setting. Services may be provided 24-hours-a-day, 7-days-a-week.

- Providers are specially trained to respond to crises and to provide special therapeutic interventions in response to an individual's needs.
- Service is limited to coverage of therapeutic services and does not include foster care services or placement activities as part of a foster care program.
- This service is available to children and youth only.

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

(3) Staffed Living

Staffed living programs are homes for no more than 8 children/youth with significant mental health/behavioral needs. This service is targeted for children and adolescents who are at risk of residential treatment, are transitioning to the community from psychiatric inpatient or intensive residential treatment, and/or adolescents with significant mental health needs who are transitioning to adulthood.

Staffed Living delivers individualized rehabilitative support in a home-like setting through staff who are trained in trauma-informed approaches, deescalation techniques, and rehabilitative treatment interventions to support the youth’s individualized plan for emotional regulation, social skill development, and engagement in normative community activities. The youth also receive an additional individualized array of services that can include assessment, service coordination, medication management, individual, group and family therapies, and supportive counseling that focuses on skill-building and integration with community resources.

- Services are provided 24-hours-a-day, 7-days-a-week for individuals with acute mental health needs who meet medical necessity criteria.
- Staffed Living must be provided in a freestanding, nonhospital-based facility.
- This service is available to children and youth only.

f. Provider Qualifications

Provider/Practitioner	License/Certification	Services Provided
Physicians	Allopathic physicians are licensed pursuant to VT Board of Medical Practice regulations, and Osteopathic physicians are licensed pursuant to VT Board of Osteopathic Physicians and Surgeons regulations	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services, Medication Evaluation, Management and Consultation Services

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

Psychiatric Nurse Practitioner	Licensed pursuant to the VT Board of Nursing Regulations, VT Office of Professional Regulation	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services, Medication Evaluation, Management and Consultation Services
Registered Nurse	Licensed pursuant to the VT Board of Nursing Regulation, VT Office of Professional Regulation	Community supports, Facility-based crisis bed stabilization services, Facility-based Adult Residential Services, Nursing Services
Licensed Practical Nurse (LPN)	Licensed pursuant to the VT Board of Nursing Regulation, VT Office of Professional Regulation	Community supports, Facility-based crisis bed stabilization services, Facility-based Adult Residential Services, Nursing Services
Psychologist	Licensed via Vermont's Office of Professional Regulation.	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services
Licensed Marriage & Family Therapist (LMFT)	Licensed pursuant to OPR regulations.	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

Licensed Clinical Mental Health Counselor (LCMHC)	Licensed pursuant to OPR regulations.	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services
Licensed Independent Clinical Social Worker (LICSW)	Licensed pursuant to OPR regulations.	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services
Licensed Alcohol & Drug Counselor (LADC)	Licensed pursuant to OPR regulations	Emergency and Crisis Services, Assessment, Outpatient Services, Adult Residential Services
Qualified Mental Health Provider (QMHP)	Certification pursuant to the Department of Mental Health	Emergency and Crisis Services, Adult Residential Services
Peer Support Specialist	Certification pursuant to the Department of Mental Health or Office of Professional Regulation Meets minimum training requirements as defined by the Department of Mental Health	Peer Supports
Case Manager, Community Support Worker, Adult Residential Staff	At least 18 years of age and high school graduate or GED, having completed employee orientation and background check.	Short-Term Residential Crisis Beds Services, Screening Tool, Community Supports, Adult Residential Services

TN No. 25-0009
Supersedes
TN No. None

Effective Date: 7/1/2025

Approval Date: 3/30/2026

ITEM 13. OTHER DIAGNOSTIC, SCREENING PREVENTIVE AND REHABILITATIVE SERVICES, I.E., OTHER THAN THOSE PROVIDED ELSEWHERE IN THE PLAN. (Continued)

Staffed Living Provider	<p>Licensed as a Residential Treatment Facility through the Department for Children and Families</p> <p>Practitioners are trained in trauma-informed approaches, deescalation techniques, and rehabilitative treatment interventions.</p>	Staffed Living
Therapeutic Foster Care Provider	<p>Licensed by the Department for Children and Families or a Child Placing Agency pursuant to the Licensing Regulations for Child Placing Agencies in Vermont.</p> <p>Practitioners are trained in trauma-informed approaches, deescalation techniques, youth development, and rehabilitative treatment interventions.</p>	Therapeutic Foster Care