



Disabled and Elderly Health Programs Group

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October 25, 2019

Mr. Cory Gustafson  
Department of Vermont Health Access  
280 State Drive  
Waterbury, VT 05671

Dear Mr. Gustafson:

I am writing to inform you that CMS is granting approval of Vermont's electronic visit verification (EVV) good faith effort exemption request. CMS has determined that your state's request is in accordance with section 1903(1)(4)(B) of the Social Security Act, as added by section 12006(a) of the 21<sup>st</sup> Century Cures Act (Cures Act). Specifically, your state has made a good faith effort to comply with EVV requirements by conducting environmental scanning, selecting an EVV model, modifying an existing Medicaid Management Information Systems (MMIS) contract to include EVV, selecting an EVV vendor, and updating existing EVV systems in the state. The state has also conducted several stakeholder engagement activities, including meeting with external stakeholders, disseminating letters and flyers to self-directed services employers and employees, and creating a website with a dedicated EVV mailbox. The state is currently developing a comprehensive training and outreach strategy to support the needs of stakeholders.

In addition, your state has encountered unavoidable delays when implementing its EVV system, including the need for additional funds to provide adequate training and technical support to providers and system interoperability issues with current timesheet and claims processing systems. This has lengthened the design planning phase and caused delays in other areas, including disseminating technical specifications to providers and engaging stakeholders on system design, training, and data exchange.

Because your state has sufficiently demonstrated it has made a good faith effort to comply with EVV requirements and has encountered unavoidable delays, CMS will not apply federal medical assistance percentage (FMAP) reductions in calendar year 2020. Please be advised that the Cures Act provision on good faith effort exemptions does not provide CMS with authority to delay the FMAP reductions for more than one year. Therefore, if the state is not fully compliant by January 1, 2021, FMAP reductions will be applied beginning in the first quarter of 2021 and every quarter thereafter until the state achieves compliance. If you have any questions, please email [EVV@cms.hhs.gov](mailto:EVV@cms.hhs.gov) or contact your CMS Regional Office.

Sincerely,

Ralph F. Lollar, Director  
Division of Long Term Services and Supports