

DAIL Adult Services Division (ASD) **Choices for Care and TBI Provider Enrollment Process (July 2018)**

All Choices for Care and TBI providers must have approval from the Department of Disabilities, Aging and Independent Living (DAIL) before they can be enrolled as a Medicaid provider. Program enrollment is managed through the Adult Services Division (ASD). Each provider type has a different eligibility process as described below.

The DAIL/ASD pre-application process requires that prospective providers complete an application and attest that they have read, understand and will comply with:

- (CFC) The Universal Provider Standards found in the Choices for Care High/Highest Program Manual online: <http://asd.vermont.gov/resources/program-manuals>
- (CFC) The applicable service section of the Choices for Care High/Highest Program Manual. (link above)
- (TBI) The TBI program standards found online: <http://asd.vermont.gov/resources/program-manuals>
- The Medicaid rates for service specific revenue codes found in the rate table online. <http://asd.vermont.gov/resources/rates>
- The Medicaid provider enrollment instructions found on the Vermont Medicaid Provider Portal. <http://www.vtmedicaid.com/#/provEnrollInstructions>
- The Medicaid general provider agreement found on the VT Medicaid Provider Portal. <http://www.vtmedicaid.com/#/provEnrollDataMaint>
- The Vermont Department of Vermont Health Access Program Integrity information regarding Medicaid fraud, waste and abuse. <http://dvha.vermont.gov/for-providers/program-integrity>

I. Adult Day Provider Enrollment

Prospective Adult Day providers seeking Vermont Medicaid Day Health Rehab or Choices for Care reimbursement must:

- demonstrate that they are filling an unmet need for adult day services in a given geographic region of Vermont, and
- that the planned services will not have an adverse impact on existing Vermont adult day providers, and
- demonstrate they can comply with the [Standards for Adult Day Services in Vermont](#),
- receive and maintain continued DAIL certification.

Prospective providers must complete the DAIL Adult Day Provider application form with accompanying information as instructed. (Final form pending as of 7/11/18.) DAIL will notify prospective providers within 30 days of receipt of the complete application packet. If approved and certified by DAIL, the provider will be instructed to submit a copy of their new Adult Day Certification with a Vermont Medicaid provider enrollment application to DXC. Note: Adult Day Certification does not entitle a provider to reimbursement under the Moderate Needs Program as funding is limited.

Contact for new Adult Day provider enrollments: Stuart Senghas, stuart.senghas@vermont.gov.

II. Adult Family Care Authorized Agencies

The following provider types with shared living experience, are eligible to apply as a Choices for Care, Adult Family Care (AFC) Authorized Agency:

- Developmental Disability Services, Designated Agency (DA)
- Developmental Disability Services, Special Services Agency (SSA)
- Traumatic Brain Injury Provider

Prospective providers must complete the DAIL Choices for Care, Adult Family Care Authorized Agency application form with accompanying information as instructed. (Final form pending as of 7/11/18.) DAIL will notify prospective providers within 30 days of receipt of the complete application packet. If approved by DAIL, the provider will be instructed submit a Vermont Medicaid, Choices for Care provider enrollment application to DXC.

Contact for new Adult Family Care Authorized Agencies: Teresa Nelson,
Teresa.nelson@vermont.gov.

III. Enhanced Residential Care

The following licensed provider types are eligible to apply as a Choices for Care, Enhanced Residential Care (ERC) provider:

- Level III Residential Care Home
- Assisted Living Residence

Prospective ERC providers must complete the DAIL Choices for Care, Enhanced Residential Care application form with accompanying information as instructed. The provider application, process, and training information can be found on the ASD website here. DAIL will notify prospective providers within 30 days of receipt of the complete application packet. If approved by DAIL, the provider will be instructed to submit a Vermont Medicaid, Choices for Care provider enrollment application to DXC.

Contact for new Enhanced Residential Care providers: Paula Brown,
paula.brown@vermont.gov.

IV. Home Health Agency (CFC Personal Care, Respite/Companion, Homemaker)

NOTE: [Act 117 \(2016\)](#) imposed a moratorium on new Designated Home Health Agencies in the state of Vermont. Unless extended, the moratorium ends January 1, 2020.

All prospective Vermont Medicaid home health agencies must complete a Certificate of Need (CON) process with the Green Mountain Care Board prior to operating within the state of Vermont as a Medicare/Medicaid entity. If the CON application is approved, the prospective provider must also be designated by the DAIL Division of Licensing and Protection. After the provider is designated, they will receive approval to enroll as a Vermont Medicaid provider. DAIL will be notified when the enrollment is complete. Refer all nursing facility inquiries to:

<I:\ASD\ Long Term Services & Supports Unit\Program Provider Enrollment\ProviderEnrollment\Enrollment Process>

- Green Mountain Care Board website: <http://gmcbboard.vermont.gov/con>
- Division of Licensing and Protection Regulations website: <http://dlp.vermont.gov/survey-cert/facility-regs>

Contact for home health licensing question: Suzanne Leavitt, suzanne.leavitt@vermont.gov.

V. Nursing Facilities – In State

All Vermont Medicaid (Choices for Care) nursing facilities must complete a Certificate of Need (CON) process with the Green Mountain Care Board prior to operating within the state. DAIL/ASD staff will be asked to weigh in on the CON application. If the CON application is approved, the facility must also be licensed by the DAIL Division of Licensing and Protection. After the facility is licensed, they will receive approval to enroll as a Vermont Medicaid provider and establish a Medicaid rate with the Vermont Division of Rate Setting. DAIL will be notified when the enrollment is complete. Refer all nursing facility inquiries to:

- Green Mountain Care Board website: <http://gmcbboard.vermont.gov/con>
- Division of Licensing and Protection Regulations website: <http://dlp.vermont.gov/survey-cert/facility-regs>

VI. Nursing Facilities – Out of State

Occasionally, Vermont identifies an unmet need for regular Choices for Care nursing facility services or specialized facility services, that can be met with a facility in another state. Prospective providers must complete the DAIL application form with accompanying information as instructed. DAIL will notify prospective providers within 30 days of receipt of the complete application packet. If approved by DAIL, the provider will be instructed to develop a rate with the Vermont Division of Rate Setting, then submit a copy of their approval letter with a Vermont Medicaid provider enrollment application to DXC. It is important to note that with regards to admissions, “boarder” facilities will be treated as though they are a Vermont in-state nursing facility. “Specialized” facilities are used on a case-by-case basis and may only serve individuals with prior-approval from DAIL.

Contact for new out-of-state nursing facility: Deb Coutu, deb.coutu@vermont.gov.

VII. Personal Emergency Response System (PERS)

Prospective Choices for Care home-based PERS providers must demonstrate an unmet need in the region they plan to provide services and complete the DAIL PERS provider application with accompanying information as instructed. DAIL will notify prospective providers within 30 days of receipt of the complete application packet. If approved by DAIL, the provider will be instructed to submit a copy of their approval letter with a Vermont Medicaid, Choices for Care provider enrollment application to DXC.

Contact for new PERS providers: Angela McMann, angela.mcmann@vermont.gov.

VIII. Traumatic Brain Injury (TBI) Providers

Prospective TBI providers must complete the DAIL TBI Provide application form with accompanying information as instructed. DAIL will notify prospective providers within 30 days of receipt of the complete application packet. If approved by DAIL, the provider will be instructed to submit a copy of their approval letter with a new Vermont Medicaid provider enrollment application to DXC.

Contact for new TBI providers: Sara Lane, sara.lane@vermont.gov.

IX. Other

1. **Choices for Care Assistive Devices and Home Modification services** is billed through the chosen home-based AAA or HHA case management agency who acts as a intermediary for those funds.
2. **Choices for Care Home-Based Case Management services** is currently limited to the local Area Agencies on Aging (AAA) and Designated Home Health Agencies (HHA). They must be certified and comply with the [Case Management Standards and Certification Procedures for Older American's Act and Choices for Care](#).
3. **Choices for Care Home-Based Flexible Choices Consultant services** is currently limited to Transition II.
4. **All payroll services for Self-Directed services** is currently managed through a procured contract with one state-wide Fiscal Employer Agent.

X. Enrollment Steps

1. Prospective provider follows instructions on the application form and emails application to: AHS.DAILASDProviderEnrollment@vermont.gov
2. ASD receives the application and forwards to the applicable ASD program staff.
3. The program staff reviews the application for completeness and follows-up with additional information as needed.
4. Program staff/manager:
 - a. Confirms there is an identified unmet need for the provider's services (such as a specific case or regional need).
 - b. Confirms the provider type meets the CFC service standard.
 - c. Confirms that the provider is in good standing with applicable provider certification, designation, or licensure for the provider type. For example, for Level III Residential Care Home, is the provider in good standing with the DLP regulations.
 - d. Obtains agreement to enroll with other relevant program staff and unit director.
 - e. May request the following information prior to approval:
 - i. Data that supports an unmet need in Vermont.

- ii. A detailed description of the services, including any specialized care offered and the specific model used to provide that specialized care.
- iii. The proposed Medicaid rate (if not already established)
- iv. Two letters of support from Vermont stakeholders
- v. Two letters of support from existing users of the service.
- vi. If out-of-state nursing facility, request:
 - 1. Assurance that the state Ombudsman services would be made readily available to Vermont residents who request them.
 - 2. An assurance that transportation would be available for Vermonters to continue working with their preferred Vermont provider network, at no extra cost. A copy of applicable certifications/license for operation
 - 3. The most recent survey results.
 - 4. Two additional letters of support from stakeholders in the applicable state
- 5. The program staff brings the complete application and recommendation to the standing ASD Policy/Planning meeting for review. Out of State nursing facility requests are reviewed at the commissioner's "Nursing Home Dollars & Days" meeting.
- 6. For Adult Day, ASD certifies the center.
- 7. For ERC providers, program staff works with DLP to review the ERC provider enrollment application, resident agreement and attachments prior to approval.
- 8. Program staff draft a notice of decision with instructions.
- 9. If approved, the program staff/manager continues to educate the provider on their responsibilities and instructs provider to contact DXC to enroll as a Choices for Care provider.
- 10. Program staff/manager sends DXC an "[Agency Request to Enroll Provider](#)" notification form. The same form can be sent to PPAU staff as notification to enroll the new provider in SAMS
 - a. DXC New enrollments: Jessica Saltus 802 857-2908 jessica.saltus@hp.com
 - b. DXC Re-certifications: Christine Robideau 802-857-2935 Email christine.l.robideau@hp.com
 - c. PPAU SAMS provider entry: Rio Demers, rio.demers@vermont.gov.
- 11. Program staff then send an announcement to staff and stakeholders.
- 12. Provider must complete an annual re-certification with DXC.
- 13. Provider must comply with all requirements set form in the program standards and other application rules to continue as an approved CFC provider.