

Final Proposed Filing - Coversheet

Instructions:

In accordance with Title 3 Chapter 25 of the Vermont Statutes Annotated and the “Rule on Rulemaking” adopted by the Office of the Secretary of State, this filing will be considered complete upon filing and acceptance of these forms with the Office of the Secretary of State, and the Legislative Committee on Administrative Rules.

All forms shall be submitted at the Office of the Secretary of State, no later than 3:30 pm on the last scheduled day of the work week.

The data provided in text areas of these forms will be used to generate a notice of rulemaking in the portal of “Proposed Rule Postings” online, and the newspapers of record if the rule is marked for publication. Publication of notices will be charged back to the promulgating agency.

**PLEASE REMOVE ANY COVERSHEET OR FORM NOT
REQUIRED WITH THE CURRENT FILING BEFORE DELIVERY!**

Certification Statement: As the adopting Authority of this rule (see 3 V.S.A. § 801 (b) (11) for a definition), I approve the contents of this filing entitled:

Vermont Medication Assistance Program Rule

/s/ Todd W. Daloz, on 8/17/23
(signature) (date)

Printed Name and Title:

Todd W. Daloz
Deputy Secretary
Agency of Human Services

RECEIVED BY: _____

- Coversheet
- Adopting Page
- Economic Impact Analysis
- Environmental Impact Analysis
- Strategy for Maximizing Public Input
- Scientific Information Statement (if applicable)
- Incorporated by Reference Statement (if applicable)
- Clean text of the rule (Amended text without annotation)
- Annotated text (Clearly marking changes from previous rule)
- ICAR Minutes
- Copy of Comments
- Responsiveness Summary

1. TITLE OF RULE FILING:

Vermont Medication Assistance Program Rule

2. PROPOSED NUMBER ASSIGNED BY THE SECRETARY OF STATE

23P014

3. ADOPTING AGENCY:

Vermont Department of Health

4. PRIMARY CONTACT PERSON:

(A PERSON WHO IS ABLE TO ANSWER QUESTIONS ABOUT THE CONTENT OF THE RULE).

Name: Natalie Weill

Agency: Department of Health

Mailing Address: 108 Cherry St, Burlington, VT 05401

Telephone: 802-863-7280 Fax: 802-951-1275

E-Mail: ahs.vdhrules@vermont.gov

Web URL *(WHERE THE RULE WILL BE POSTED)*:

<http://www.healthvermont.gov/about-us/laws-regulations/public-comment>

5. SECONDARY CONTACT PERSON:

(A SPECIFIC PERSON FROM WHOM COPIES OF FILINGS MAY BE REQUESTED OR WHO MAY ANSWER QUESTIONS ABOUT FORMS SUBMITTED FOR FILING IF DIFFERENT FROM THE PRIMARY CONTACT PERSON).

Name: Brendan Atwood

Agency: Department of Health

Mailing Address: 108 Cherry St, Burlington, VT 05401

Telephone: 802-863-7282 Fax: 802-951-1275

E-Mail: ahs.vdhrules@vermont.gov

6. RECORDS EXEMPTION INCLUDED WITHIN RULE:

(DOES THE RULE CONTAIN ANY PROVISION DESIGNATING INFORMATION AS CONFIDENTIAL; LIMITING ITS PUBLIC RELEASE; OR OTHERWISE, EXEMPTING IT FROM INSPECTION AND COPYING?) No

IF YES, CITE THE STATUTORY AUTHORITY FOR THE EXEMPTION:

PLEASE SUMMARIZE THE REASON FOR THE EXEMPTION:

7. LEGAL AUTHORITY / ENABLING LEGISLATION:

(THE SPECIFIC STATUTORY OR LEGAL CITATION FROM SESSION LAW INDICATING WHO THE ADOPTING ENTITY IS AND THUS WHO THE SIGNATORY SHOULD BE. THIS SHOULD BE A SPECIFIC CITATION NOT A CHAPTER CITATION).

Section 119a of Act 61 (1997); 3 V.S.A. § 801 (b) (11).

8. EXPLANATION OF HOW THE RULE IS WITHIN THE AUTHORITY OF THE AGENCY:

Act 61 (1997) Sec. 119a states: "The Secretary of Human Services is directed to develop and adopt rules governing the eligibility for assistance under the HIV/AIDS Medication Assistance Program (AMAP)..."

9. THE FILING HAS NOT CHANGED SINCE THE FILING OF THE PROPOSED RULE.

10. THE AGENCY HAS INCLUDED WITH THIS FILING A LETTER EXPLAINING IN DETAIL WHAT CHANGES WERE MADE, CITING CHAPTER AND SECTION WHERE APPLICABLE.

11. SUBSTANTIAL ARGUMENTS AND CONSIDERATIONS WERE NOT RAISED FOR OR AGAINST THE ORIGINAL PROPOSAL.

12. THE AGENCY HAS NOT INCLUDED COPIES OF ALL WRITTEN SUBMISSIONS AND SYNOPSES OF ORAL COMMENTS RECEIVED.

13. THE AGENCY HAS NOT INCLUDED A LETTER EXPLAINING IN DETAIL THE REASONS FOR THE AGENCY'S DECISION TO REJECT OR ADOPT THEM.

14. CONCISE SUMMARY (150 WORDS OR LESS):

This rule establishes eligibility for the Vermont Medication Assistance Program (VMAP) that covers the cost of necessary medication for individuals living with HIV. This rulemaking proposes the following changes:

1) Updates the recertification of eligibility application process to conform with the Policy Clarification Notice 21-02 issued on October 2021 by the federal Health Resources and Services Administration (HRSA). Specifically, the rulemaking removes an extra recertification step for beneficiaries at the six month mark and proposes a yearly recertification requirement.

2) Simplifies and updates the rule for consistency with the program's management.

3) Reorganizes the rule for clarity.

15. EXPLANATION OF WHY THE RULE IS NECESSARY:

The federal HRSA program changed their recertification process guidelines in October 2021, causing the Vermont

Department of Health program to subsequently update their program's administrative process to conform with federal guidelines.

16. EXPLANATION OF HOW THE RULE IS NOT ARBITRARY:

This rulemaking brings the rule in compliance with federal HRSA guidelines.

17. LIST OF PEOPLE, ENTERPRISES AND GOVERNMENT ENTITIES AFFECTED BY THIS RULE:

Individuals recertifying their eligibility for VMAP.

18. BRIEF SUMMARY OF ECONOMIC IMPACT (150 WORDS OR LESS):

This rulemaking removes an unnecessary recertification step for VMAP beneficiaries, resulting in a small, unquantifiable economic benefit.

19. A HEARING WAS HELD.

20. HEARING INFORMATION

(THE FIRST HEARING SHALL BE NO SOONER THAN 30 DAYS FOLLOWING THE POSTING OF NOTICES ONLINE).

IF THIS FORM IS INSUFFICIENT TO LIST THE INFORMATION FOR EACH HEARING, PLEASE ATTACH A SEPARATE SHEET TO COMPLETE THE HEARING INFORMATION.

Date: 6/6/2023

Time: 02:00 PM

Street Address: 108 Cherry St. Burlington VT Conference Rm
3B

Zip Code: 05401

URL for Virtual: call in (audio only)

+1 802-828-7667, ,29963188# United States, Montpelier

Phone Conference ID: 299 631 88#

Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

21. DEADLINE FOR COMMENT (NO EARLIER THAN 7 DAYS FOLLOWING LAST HEARING):

6/13/2023

KEYWORDS (PLEASE PROVIDE AT LEAST 3 KEYWORDS OR PHRASES TO AID IN THE SEARCHABILITY OF THE RULE NOTICE ONLINE).

HIV

AIDS

Prescription Assistance

Drugs

Medication

Medication Assistance Program



To: Rep. Trevor Squirrell, Chair of the Legislative Committee on Administrative Rules
From: Natalie Weill, Public Health Policy Advisor for Vermont Department of Health
Re: Vermont Medication Assistance Program Rule
Date: August 4, 2023

Following the filing of the rule for public comment, the Health Department made the following changes to the proposed rule:

1. Section 4.4 explains the requirement for an applicant to be a Vermont resident. This Section was revised for clarity. Accordingly, the following change was made:

4.4.1 The applicant must be a resident of Vermont. ~~Factors demonstrating residency include providing one of the following documents:~~ Residency can be demonstrated by providing one of the following documents:

4.4.1.1 ~~Possession of a~~ A Vermont driver's license;

4.4.1.2 ~~Registration to vote in Vermont~~ A Vermont voting voter registration;

No other changes were made to the proposed rule.

Adopting Page

Instructions:

This form must accompany each filing made during the rulemaking process:

Note: To satisfy the requirement for an annotated text, an agency must submit the entire rule in annotated form with proposed and final proposed filings. Filing an annotated paragraph or page of a larger rule is not sufficient. Annotation must clearly show the changes to the rule.

When possible, the agency shall file the annotated text, using the appropriate page or pages from the Code of Vermont Rules as a basis for the annotated version. New rules need not be accompanied by an annotated text.

1. TITLE OF RULE FILING:

Vermont Medication Assistance Program Rule

2. ADOPTING AGENCY:

Vermont Department of Health

3. TYPE OF FILING (*PLEASE CHOOSE THE TYPE OF FILING FROM THE DROPDOWN MENU BASED ON THE DEFINITIONS PROVIDED BELOW*):

- **AMENDMENT** - Any change to an already existing rule, even if it is a complete rewrite of the rule, it is considered an amendment if the rule is replaced with other text.
- **NEW RULE** - A rule that did not previously exist even under a different name.
- **REPEAL** - The removal of a rule in its entirety, without replacing it with other text.

This filing is **AN AMENDMENT OF AN EXISTING RULE** .

4. LAST ADOPTED (*PLEASE PROVIDE THE SOS LOG#, TITLE AND EFFECTIVE DATE OF THE LAST ADOPTION FOR THE EXISTING RULE*):

The Vermont Medication Assistance program; May 22, 2017
Secretary of State Rule Log #17-019.



INTERAGENCY COMMITTEE ON ADMINISTRATIVE RULES (ICAR) MINUTES

Meeting Date/Location: April 10, 2023, virtually via Microsoft Teams

Members Present: Chair Sean Brown, Brendan Atwood, Jared Adler, Jennifer Mojo, John Kessler, Diane Sherman, Mike Obuchowski, Donna Russo-Savage and Nicole Dubuque

Minutes By: Melissa Mazza-Paquette

- 2:00 p.m. meeting called to order, welcome and introductions.
- Review and approval of [minutes](#) from the March 13, 2023 meeting.
- No additions/deletions to agenda. Agenda approved as drafted.
- No public comments made.
- Note: An emergency rule was supported by ICAR Chair Brown on 03/31/23 titled 'PUC Emergency Rule 2.500 COVID-19 Emergency Procedures' by the VT Public Utility Commission
 - This emergency rule amends various filing and procedural requirements and provides alternative procedures to reduce or eliminate in-person contact between members of the public and Commission staff or other members of the public to reduce the risk of exposure to the COVID-19 virus. This serves as a sixth extension of the emergency rule filed in April 2020. A number of measures included in this revised emergency rule have proven beneficial to those who appear before and interact with the Commission. The Commission is undertaking a process of adopting policies and promulgating permanent rules, where appropriate, so that the remaining measures in this revised emergency rule could either be phased out or incorporated into permanent rules. The revisions in this version reflect adoption of permanent Commission Rule 2. Two other Commission rules modified by this rule are in various stages of rulemaking. The provisions in this revised emergency rule will be superseded when the permanent rules take effect.
- Presentation of Proposed Rule on page 2.
 1. Vermont Medication Assistance Program Rule, Agency of Human Services, Department of Health.
- Next scheduled meeting is May 8, 2023 at 2:00 p.m.
- 2:16 p.m. meeting adjourned.

Proposed Rule: Vermont Medication Assistance Program Rule, Agency of Human Services, Department of Health

Presented By: Natalie Weill

Motion made to accept the rule by Mike Obuchowski, seconded by Diane Sherman, and passed unanimously except for Brendan Atwood who abstained, with the following recommendations:

1. Proposed Filing – Coversheet
 - a. #8: Include the acronym for ‘Medication Assistance Program’ after use for later reference.
 - b. #11: Define ‘VMAP’ before use.
2. Economic Impact Analysis
 - a. #9: At the end of the sentence, include language such as “to update the state program, and the rules reflect similar updates that were first made to the federal rules.”
3. Environmental Impact Analysis
 - a. #9: State that no analysis was necessary, therefore was not conducted.
4. Proposed Rule
 - a. 3.0 Definitions: Include the Federal Poverty Line (FPL).
 - b. 5.0 Recipient Requirement: Identify which program will provide the notification.

Economic Impact Analysis

Instructions:

In completing the economic impact analysis, an agency analyzes and evaluates the anticipated costs and benefits to be expected from adoption of the rule; estimates the costs and benefits for each category of people enterprises and government entities affected by the rule; compares alternatives to adopting the rule; and explains their analysis concluding that rulemaking is the most appropriate method of achieving the regulatory purpose. If no impacts are anticipated, please specify “No impact anticipated” in the field.

Rules affecting or regulating schools or school districts must include cost implications to local school districts and taxpayers in the impact statement, a clear statement of associated costs, and consideration of alternatives to the rule to reduce or ameliorate costs to local school districts while still achieving the objectives of the rule (see 3 V.S.A. § 832b for details).

Rules affecting small businesses (excluding impacts incidental to the purchase and payment of goods and services by the State or an agency thereof), must include ways that a business can reduce the cost or burden of compliance or an explanation of why the agency determines that such evaluation isn’t appropriate, and an evaluation of creative, innovative or flexible methods of compliance that would not significantly impair the effectiveness of the rule or increase the risk to the health, safety, or welfare of the public or those affected by the rule.

1. TITLE OF RULE FILING:

Vermont Medication Assistance Program Rule

2. ADOPTING AGENCY:

Vermont Department of Health

3. CATEGORY OF AFFECTED PARTIES:

LIST CATEGORIES OF PEOPLE, ENTERPRISES, AND GOVERNMENTAL ENTITIES POTENTIALLY AFFECTED BY THE ADOPTION OF THIS RULE AND THE ESTIMATED COSTS AND BENEFITS ANTICIPATED:

Individuals recertifying their eligibility for the VMAP benefit: There is a de minimis benefit to these individuals due to the simplification of the recertification process.

4. IMPACT ON SCHOOLS:

INDICATE ANY IMPACT THAT THE RULE WILL HAVE ON PUBLIC EDUCATION, PUBLIC SCHOOLS, LOCAL SCHOOL DISTRICTS AND/OR TAXPAYERS CLEARLY STATING ANY ASSOCIATED COSTS:

There is no anticipated impact on schools.

5. *ALTERNATIVES: CONSIDERATION OF ALTERNATIVES TO THE RULE TO REDUCE OR AMELIORATE COSTS TO LOCAL SCHOOL DISTRICTS WHILE STILL ACHIEVING THE OBJECTIVE OF THE RULE.*

This rulemaking does not have an anticipated effect on schools, therefore there are no alternatives to reduce costs to local school districts.

6. *IMPACT ON SMALL BUSINESSES:*

INDICATE ANY IMPACT THAT THE RULE WILL HAVE ON SMALL BUSINESSES (EXCLUDING IMPACTS INCIDENTAL TO THE PURCHASE AND PAYMENT OF GOODS AND SERVICES BY THE STATE OR AN AGENCY THEREOF):

There is no anticipated impact on small businesses.

7. *SMALL BUSINESS COMPLIANCE: EXPLAIN WAYS A BUSINESS CAN REDUCE THE COST/BURDEN OF COMPLIANCE OR AN EXPLANATION OF WHY THE AGENCY DETERMINES THAT SUCH EVALUATION ISN'T APPROPRIATE.*

Because there is no anticipated impact on small businesses, there is no analysis.

8. *COMPARISON:*

COMPARE THE IMPACT OF THE RULE WITH THE ECONOMIC IMPACT OF OTHER ALTERNATIVES TO THE RULE, INCLUDING NO RULE ON THE SUBJECT OR A RULE HAVING SEPARATE REQUIREMENTS FOR SMALL BUSINESS:

In the absence of this rulemaking, the current VMAP recertification process would remain, maintaining an unnecessary burden on VMAP beneficiaries.

9. *SUFFICIENCY: DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*

The Health Department has provided the relevant information available.

Environmental Impact Analysis

Instructions:

In completing the environmental impact analysis, an agency analyzes and evaluates the anticipated environmental impacts (positive or negative) to be expected from adoption of the rule; compares alternatives to adopting the rule; explains the sufficiency of the environmental impact analysis. If no impacts are anticipated, please specify “No impact anticipated” in the field.

Examples of Environmental Impacts include but are not limited to:

- Impacts on the emission of greenhouse gases
- Impacts on the discharge of pollutants to water
- Impacts on the arability of land
- Impacts on the climate
- Impacts on the flow of water
- Impacts on recreation
- Or other environmental impacts

1. TITLE OF RULE FILING:

Vermont Medication Assistance Program Rule

2. ADOPTING AGENCY:

Vermont Department of Health

3. GREENHOUSE GAS: *EXPLAIN HOW THE RULE IMPACTS THE EMISSION OF GREENHOUSE GASES (E.G. TRANSPORTATION OF PEOPLE OR GOODS; BUILDING INFRASTRUCTURE; LAND USE AND DEVELOPMENT, WASTE GENERATION, ETC.):*

There is no impact.

4. WATER: *EXPLAIN HOW THE RULE IMPACTS WATER (E.G. DISCHARGE / ELIMINATION OF POLLUTION INTO VERMONT WATERS, THE FLOW OF WATER IN THE STATE, WATER QUALITY ETC.):*

There is no impact.

5. LAND: *EXPLAIN HOW THE RULE IMPACTS LAND (E.G. IMPACTS ON FORESTRY, AGRICULTURE ETC.):*

There is no impact.

6. RECREATION: *EXPLAIN HOW THE RULE IMPACTS RECREATION IN THE STATE:*

There is no impact.

7. **CLIMATE:** *EXPLAIN HOW THE RULE IMPACTS THE CLIMATE IN THE STATE:*

There is no impact.

8. **OTHER:** *EXPLAIN HOW THE RULE IMPACT OTHER ASPECTS OF VERMONT'S ENVIRONMENT:*

There is no impact.

9. **SUFFICIENCY:** *DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*

Because there is no environmental impact, no analysis was conducted.

Public Input Maximization Plan

Instructions:

Agencies are encouraged to hold hearings as part of their strategy to maximize the involvement of the public in the development of rules. Please complete the form below by describing the agency's strategy for maximizing public input (what it did do, or will do to maximize the involvement of the public).

This form must accompany each filing made during the rulemaking process:

1. TITLE OF RULE FILING:

Vermont Medication Assistance Program Rule

2. ADOPTING AGENCY:

Vermont Department of Health

3. PLEASE DESCRIBE THE AGENCY'S STRATEGY TO MAXIMIZE PUBLIC INVOLVEMENT IN THE DEVELOPMENT OF THE PROPOSED RULE, LISTING THE STEPS THAT HAVE BEEN OR WILL BE TAKEN TO COMPLY WITH THAT STRATEGY:

A public hearing was held.

The rule will be posted on the Department of Health website:

http://healthvermont.gov/admin/public_comment.aspx.

4. BEYOND GENERAL ADVERTISEMENTS, PLEASE LIST THE PEOPLE AND ORGANIZATIONS THAT HAVE BEEN OR WILL BE INVOLVED IN THE DEVELOPMENT OF THE PROPOSED RULE:

The Department worked with the Community Advisory Group (CAG), a statewide group of stakeholders that work with the Department of Health to promote effective HIV care and prevention, in drafting the rule.

Chapter 4 - Health Surveillance and Infectious Disease

Subchapter 5 -

Vermont Medication Assistance Program (VMAP) Rule

1.0 Authority

This rule is adopted pursuant to Section 119a of Act 61 (1997).

2.0 Purpose

This rule establishes the eligibility requirements for assistance under the Vermont Medication Assistance Program (VMAP). The purpose of VMAP is to provide financial assistance to low-income individuals living with HIV V/AIDS, ~~financial assistance~~ for the purchase of prescription medications that have been determined to prolong life and/or prevent ~~serious~~ deterioration of health.

3.0 Definitions

3.1 “Adjusted Gross Income” (AGI) means total income minus specific deductions as used by the Internal Revenue Service and defined in 26 U.S.C. § 62. ~~It can be found on the AGI line of the income tax return form.~~

3.2 “Department” means the Department of Health.

3.3 “HIV” means Human Immunodeficiency Virus.

3.4 “Medication Assistance Program Application” means the form published by the Department of Health used to apply for VMAP benefits.

3-13.5 “Medication Assistance Program Recertification Form” means the form published by the Department of Health used to prove continued program eligibility to receive benefits in the next enrollment period.

3-23.6 “Recertification” means providing proof of continued eligibility for assistance under the Vermont Medication Assistance Program. ~~Factors demonstrating eligibility for recertification include, but are not limited to, enrollment in state sponsored health insurance or completion of a self-attestation form certifying that there has been no change in the applicant’s eligibility.~~

3-33.7 “Resident” means being domiciled within the State of Vermont and being able to provide proof of such domicile.

Vermont Medication Assistance Program Rule

~~Factors demonstrating residency include, but are not limited to: possession of a Vermont driver's license, registration to vote in Vermont, evidence that a person leases/owns property in Vermont, or filing of a Vermont tax return for the most recent tax year.~~

4.0 Eligibility Requirements

4.1 Application

~~4.1.1 To apply for VMAP, The applicants shall submit a completed and submit the Vermont Department of Health's Medication Assistance Program Application form to the Department of Health.~~

~~4.1.2 Initial applicants may can apply at any time.~~

~~4.1.1 Existing VMAP recipients seeking to continue to receive the VMAP benefit must recertify recertification in order to receive benefits in the next enrollment period. calendar year To recertify, applicants To continue eligibility to the next year, recipients of VMAP benefits~~

~~4.1.3 By July 31 of each year, the applicant shall must complete and submit a completed submit the Vermont Department of Health's Medication Assistance Program Recertification Form a completed application to the Department to the Department of Health by July 31.-~~

~~By January 31 of each year, the applicant must submit a completed a recertification form to the Department.~~

~~Current enrollment in a Medicaid or any state sponsored health care insurance plan satisfies the Section.~~

~~applicant shall provide the The form shall contain the following information:~~

~~Name, gender, date of birth, social security number, address and telephone number of the applicant;~~

~~Income information for the applicant;~~

Vermont Medication Assistance Program Rule

~~Information regarding any other health benefits or insurance coverage that is available to the applicant~~

~~4.1.24.1.4 An individual is not required to have health insurance coverage before application to VMAP.;~~

~~4.1.34.1.5 Both the Medication Assistance Program Application and the Medication Assistance Program Recertification Form must be signed by The signature of the applicant or the applicant's authorized representative with proof of authorization in any case where the applicant is incapable of signing the application because of physical incapability or mental incompetency; and~~

~~4.1.44.1.6 Any other information that Tthe Department of Health may require other information from the applicant for the proper administration of the program based on federal guidance.~~

4.2 Medical Condition

The applicant must have a confirmed medical diagnosis of HIV/~~AIDS~~ to participate in the program.

4.3 Financial Status

The applicant must have an AGI adjusted gross income that does not exceed 500% of the Federal Poverty Level (~~FPL~~) as established by the U.S. Department of Health and Human Services.

4.4 Residency

~~4.4.1 -T~~The applicant must be a resident of Vermont. Residency can be demonstrated by providing one of the following documents:

4.4.1.1 A Vermont driver's license;

4.4.1.2 A Vermont voter registration;

4.4.1.3 A completed Vermont Department of Health VMAP Residential Statement;

4.4.1.4 Utility bill with the applicant's name and Vermont address listed;

Vermont Medication Assistance Program Rule

4.4.1.5 Property tax bill with physical location;

4.4.1.6 Lease or landlord statement;

4.4.1.7 Homeowners/renters insurance (policy/proof of claim);

4.4.1.8 First class mail with current name and street address; or

4.4.1.9 Filing of a Vermont tax return for the most recent tax year.

5.0 Recipient Requirement

If the VMAP recipient is eligible for health insurance or other related financial assistance programs that cover all or part of the cost of medications, such as Medicaid or private insurance, the individual shall obtain such assistance immediately following notification by the Vermont Medication Assistance Program.

5.1.1.1.1—

~~Health Insurance~~

~~If the applicant is eligible for health insurance or other related financial assistance programs that cover all or part of the cost of medications, such as Medicaid, the applicant may be required to obtain such assistance before receiving VMAP benefits.~~

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Chapter 4 - Health Surveillance and Infectious Disease

Subchapter 5 -

Vermont Medication Assistance Program (VMAP) Rule

1.0 Authority

This rule is adopted pursuant to Section 119a of Act 61 (1997).

2.0 Purpose

This rule establishes the eligibility requirements for assistance under the Vermont Medication Assistance Program (VMAP). The purpose of VMAP is to provide financial assistance to low-income individuals living with HIV for the purchase of prescription medications that have been determined to prolong life and/or prevent deterioration of health.

3.0 Definitions

- 3.1 “Adjusted Gross Income” (AGI) means total income minus specific deductions as used by the Internal Revenue Service and defined in 26 U.S.C. § 62.
- 3.2 “Department” means the Department of Health.
- 3.3 “HIV” means Human Immunodeficiency Virus.
- 3.4 “Medication Assistance Program Application” means the form published by the Department of Health used to apply for VMAP benefits.
- 3.5 “Medication Assistance Program Recertification Form” means the form published by the Department of Health used to prove continued program eligibility to receive benefits in the next enrollment period.
- 3.6 “Recertification” means providing proof of continued eligibility for assistance under the Vermont Medication Assistance Program.
- 3.7 “Resident” means being domiciled within the State of Vermont and being able to provide proof of such domicile.

Vermont Medication Assistance Program Rule

4.0 Eligibility Requirements

4.1 Application

- 4.1.1 To apply for VMAP, applicants shall submit a completed Medication Assistance Program Application to the Department of Health.
- 4.1.2 Initial applicants may apply at any time.
- 4.1.3 Existing VMAP recipients seeking to continue to receive the VMAP benefit must recertify in order to receive benefits in the next enrollment period. To recertify, applicants shall submit a completed Medication Assistance Program Recertification Form to the Department of Health by July 31.
- 4.1.4 An individual is not required to have health insurance coverage before application to VMAP.
- 4.1.5 Both the Medication Assistance Program Application and the Medication Assistance Program Recertification Form must be signed by the applicant or the applicant's authorized representative.
- 4.1.6 The Department of Health may require other information from the applicant for the proper administration of the program based on federal guidance.

4.2 Medical Condition

The applicant must have a confirmed medical diagnosis of HIV to participate in the program.

4.3 Financial Status

The applicant must have an AGI that does not exceed 500% of the Federal Poverty Level as established by the U.S. Department of Health and Human Services.

4.4 Residency

- 4.4.1 The applicant must be a resident of Vermont. Residency can be demonstrated by providing one of the following documents:

Vermont Medication Assistance Program Rule

- 4.4.1.1 A Vermont driver's license;
- 4.4.1.2 A Vermont voter registration;
- 4.4.1.3 A completed Vermont Department of Health VMAP Residential Statement;
- 4.4.1.4 Utility bill with the applicant's name and Vermont address listed;
- 4.4.1.5 Property tax bill with physical location;
- 4.4.1.6 Lease or landlord statement;
- 4.4.1.7 Homeowners/renters insurance (policy/proof of claim);
- 4.4.1.8 First class mail with current name and street address; or
- 4.4.1.9 Filing of a Vermont tax return for the most recent tax year.

5.0 Recipient Requirement

If the VMAP recipient is eligible for health insurance or other related financial assistance programs that cover all or part of the cost of medications, such as Medicaid or private insurance, the individual shall obtain such assistance immediately following notification by the Vermont Medication Assistance Program.

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



OFFICE OF THE SECRETARY
TEL: (802) 241-0440
FAX: (802) 241-0450

JENNEY SAMUELSON
SECRETARY

TODD W. DALOZ
DEPUTY SECRETARY

STATE OF VERMONT
AGENCY OF HUMAN SERVICES

MEMORANDUM

TO: Sarah Copeland Hanzas, Secretary of State

FROM: Jenney Samuelson, Secretary, Agency of Human Services

A handwritten signature in blue ink, appearing to be "Jenney Samuelson", written over the "FROM:" line.

DATE: January 31, 2023

SUBJECT: Signatory Authority for Purposes of Authorizing Administrative Rules

I hereby designate Deputy Secretary of Human Services Todd W. Daloz as signatory to fulfill the duties of the Secretary of the Agency of Human Services as the adopting authority for administrative rules as required by Vermont's Administrative Procedure Act, 3. V.S.A § 801 et seq.

Cc: Todd W. Daloz

PUBLIC ACTS, 1997 SESSION

NO. 61

Total	7,370,550
Source of funds	
General fund	3,180,136
Federal funds	3,306,514
Special funds	833,900
Interdepartmental transfer	40,000
Expendable trust	10,000
Total	7,370,550

Of the above general fund appropriation \$200,000.00 shall be allocated for services to persons living with HIV/AIDS in every county provided by AIDS services organizations through the AIDS Services Program.

Sec. 119a. HIV/AIDS MEDICATION ASSISTANCE PROGRAM

The secretary of human services is directed to develop and adopt rules governing the eligibility for assistance under the HIV/AIDS Medication Assistance Program (AMAP), on or before December 31, 1997. These rules will establish eligible income levels based on "net available income." These rules shall define a Vermont residency requirement. Until rules are promulgated, no individual receiving assistance from the AMAP on the effective date of this act shall be denied assistance. In promulgating these rules substantial weight will be given to the recommendations made by the AMAP Advisory Committee of the Vermont Aids Consortium.

The secretary shall immediately notify the joint fiscal committee at any time there are insufficient funds in AMAP to assist all eligible individuals.

Sec. 120. Health - health improvement

Personal services	2,801,004
Operating expenses	534,567
Grants	3,853,442
Total	7,189,013
Source of funds	
General fund	2,060,325
Federal funds	4,619,501
Special funds	503,187
Interdepartmental transfer	6,000
Total	7,189,013

The department of health may carry forward any unspent portion of funds designated for primary care loan repayment. These funds may be used either alone or to match federal National Health Service Corps loan repayment funds, local funds, or private funds and shall be made available to primary care providers who agree to practice for a prescribed period of time in the state serving a portion of the state designated as a health professional shortage population, or other rural or underserved areas. Educational scholarships, loan repayment grants, loan deferment payments and payment of taxes due on the award, may be considered for payment.

\$15,000.00 of the above funds shall be granted to the Vermont

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VERMONT **GENERAL ASSEMBLY**

The Vermont Statutes Online

Title 3 : Executive

Chapter 025 : Administrative Procedure

Subchapter 001 : General Provisions

(Cite as: 3 V.S.A. § 801)

§ 801. Short title and definitions

(a) This chapter may be cited as the “Vermont Administrative Procedure Act.”

(b) As used in this chapter:

(1) “Agency” means a State board, commission, department, agency, or other entity or officer of State government, other than the Legislature, the courts, the Commander in Chief, and the Military Department, authorized by law to make rules or to determine contested cases.

(2) “Contested case” means a proceeding, including but not restricted to rate-making and licensing, in which the legal rights, duties, or privileges of a party are required by law to be determined by an agency after an opportunity for hearing.

(3) “License” includes the whole or part of any agency permit, certificate, approval, registration, charter, or similar form of permission required by law.

(4) “Licensing” includes the agency process respecting the grant, denial, renewal, revocation, suspension, annulment, withdrawal, or amendment of a license.

(5) “Party” means each person or agency named or admitted as a party, or properly seeking and entitled as of right to be admitted as a party.

(6) “Person” means any individual, partnership, corporation, association, governmental subdivision, or public or private organization of any character other than an agency.

(7) “Practice” means a substantive or procedural requirement of an agency, affecting one or more persons who are not employees of the agency, that is used by the agency in the discharge of its powers and duties. The term includes all such requirements, regardless of whether they are stated in writing.

(8) “Procedure” means a practice that has been adopted in writing, either at the election of the agency or as the result of a request under subsection 831(b) of this title. The term includes any practice of any agency that has been adopted in writing, whether or not labeled as a procedure, except for each of the following:

(A) a rule adopted under sections 836-844 of this title;

(B) a written document issued in a contested case that imposes substantive or procedural requirements on the parties to the case;

(C) a statement that concerns only:

(i) the internal management of an agency and does not affect private rights or procedures available to the public;

(ii) the internal management of facilities that are secured for the safety of the public and the individuals residing within them; or

(iii) guidance regarding the safety or security of the staff of an agency or its designated service providers or of individuals being provided services by the agency or such a provider;

(D) an intergovernmental or interagency memorandum, directive, or communication that does not affect private rights or procedures available to the public;

(E) an opinion of the Attorney General; or

(F) a statement that establishes criteria or guidelines to be used by the staff of an agency in performing audits, investigations, or inspections, in settling commercial disputes or negotiating commercial arrangements, or in the defense, prosecution, or settlement of cases, if disclosure of the criteria or guidelines would compromise an investigation or the health and safety of an employee or member of the public, enable law violators to avoid detection, facilitate disregard of requirements imposed by law, or give a clearly improper advantage to persons that are in an adverse position to the State.

(9) "Rule" means each agency statement of general applicability that implements, interprets, or prescribes law or policy and that has been adopted in the manner provided by sections 836-844 of this title.

(10) "Incorporation by reference" means the use of language in the text of a regulation that expressly refers to a document other than the regulation itself.

(11) "Adopting authority" means, for agencies that are attached to the Agencies of Administration, of Commerce and Community Development, of Natural Resources, of Human Services, and of Transportation, or any of their components, the secretaries of those agencies; for agencies attached to other departments or any of their components, the commissioners of those departments; and for other agencies, the chief officer of the agency. However, for the procedural rules of boards with quasi-judicial powers, for the Transportation Board, for the Vermont Veterans' Memorial Cemetery Advisory Board, and for the Fish and Wildlife Board, the chair or executive secretary of the board shall be the adopting authority. The Secretary of State shall be the adopting authority for the Office of Professional Regulation.

(12) "Small business" means a business employing no more than 20 full-time

employees.

(13)(A) “Arbitrary,” when applied to an agency rule or action, means that one or more of the following apply:

(i) There is no factual basis for the decision made by the agency.

(ii) The decision made by the agency is not rationally connected to the factual basis asserted for the decision.

(iii) The decision made by the agency would not make sense to a reasonable person.

(B) The General Assembly intends that this definition be applied in accordance with the Vermont Supreme Court’s application of “arbitrary” in , 2006 VT 65, and , 154 Vt. 596 (1990).

(14) “Guidance document” means a written record that has not been adopted in accordance with sections 836-844 of this title and that is issued by an agency to assist the public by providing an agency’s current approach to or interpretation of law or describing how and when an agency will exercise discretionary functions. The term does not include the documents described in subdivisions (8)(A) through (F) of this section.

(15) “Index” means a searchable list of entries that contains subjects and titles with page numbers, hyperlinks, or other connections that link each entry to the text or document to which it refers. (Added 1967, No. 360 (Adj. Sess.), § 1, eff. July 1, 1969; amended 1981, No. 82, § 1; 1983, No. 158 (Adj. Sess.), eff. April 13, 1984; 1985, No. 56, § 1; 1985, No. 269 (Adj. Sess.), § 4; 1987, No. 76, § 18; 1989, No. 69, § 2, eff. May 27, 1989; 1989, No. 250 (Adj. Sess.), § 88; 2001, No. 149 (Adj. Sess.), § 46, eff. June 27, 2002; 2017, No. 113 (Adj. Sess.), § 3; 2017, No. 156 (Adj. Sess.), § 2.)



Proposed Rules Postings

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Deadline For Public Comment

Deadline: Jun 13, 2023

Please submit comments to the agency or primary contact person listed below, before the deadline.

Rule Details

Rule Number:	23P014
Title:	Vermont Medication Assistance Program Rule.
Type:	Standard
Status:	Proposed
Agency:	Department of Health, Agency of Human Services
Legal Authority:	Section 119a of Act 61 (1997); 3 V.S.A. § 801 (b)(11)
Summary:	This rule establishes eligibility for the Vermont Medication Assistance Program (VMAP) that covers the cost of necessary medication for individuals living with HIV. This rulemaking proposes the following changes: 1) Updates the recertification of eligibility application process to conform with the Policy Clarification Notice 21-02 issued on October 2021 by the federal Health Resources and Services Administration (HRSA). Specifically, the rulemaking removes an extra recertification step for beneficiaries at the six month mark and proposes a yearly recertification requirement. 2) Simplifies and updates the rule for consistency with the program's management. 3) Reorganizes the rule for clarity.

Persons Affected: Individuals recertifying their eligibility for Vermont Medication Assistance Program (VMAP).

Economic Impact: This rulemaking removes an unnecessary recertification step for VMAP beneficiaries, resulting in a small, unquantifiable economic benefit.

Posting date: Apr 26,2023

Hearing Information

Information for Hearing # 1

Hearing date: 06-06-2023 2:00 PM [ADD TO YOUR CALENDAR](#)

Location: VT Dept. of Health, Conference Room 3B

Address: 108 Cherry Street

City: Burlington

State: VT

Zip: 05401

Hearing Notes: Call in option (audio only): +1 802-828-7667,,29963188#
United States, Montpelier Phone Conference ID: 299 631 88#

Contact Information

Information for Contact # 1

Level: Primary

Name: Natalie Weill

Agency: Department of Health, Agency of Human Services

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Email: ahs.vdhrules@vermont.gov
[SEND A COMMENT](#)

Website <http://www.healthvermont.gov/about-us/laws-regulations/public-comment>

Address: [VIEW WEBSITE](#)

Information for Contact # 2

Level: Secondary

Name: David Englander

Agency: Department of Health, Agency of Human Services

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Keyword Information

Keywords:

HIV

AIDS

Prescription Assistance

Drugs

Medication

Medication Assistance Program

VMAP

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	The Islander (islander@vermontislander.com)	Tel: 802-372-5600 FAX: 802-372-3025
	Vermont Lawyer (hunter.press.vermont@gmail.com)	Attn: Will Hunter

FROM: APA Coordinator, VSARA **Date of Fax:** August 23, 2023

RE: The "Proposed State Rules " ad copy to run on **May 4, 2023**

PAGES INCLUDING THIS COVER MEMO: **2**

***NOTE* 8-pt font in body. 12-pt font max. for headings - single space body. Please include dashed lines where they appear in ad copy. Otherwise minimize the use of white space. Exceptions require written approval.**

If you have questions, or if the printing schedule of your paper is disrupted by holiday etc. please contact VSARA at 802-828-3700, or E-Mail sos.statutoryfilings@vermont.gov, Thanks.

PROPOSED STATE RULES

By law, public notice of proposed rules must be given by publication in newspapers of record. The purpose of these notices is to give the public a chance to respond to the proposals. The public notices for administrative rules are now also available online at <https://secure.vermont.gov/SOS/rules/> . The law requires an agency to hold a public hearing on a proposed rule, if requested to do so in writing by 25 persons or an association having at least 25 members.

To make special arrangements for individuals with disabilities or special needs please call or write the contact person listed below as soon as possible.

To obtain further information concerning any scheduled hearing(s), obtain copies of proposed rule(s) or submit comments regarding proposed rule(s), please call or write the contact person listed below. You may also submit comments in writing to the Legislative Committee on Administrative Rules, State House, Montpelier, Vermont 05602 (802-828-2231).

Vermont Medication Assistance Program Rule.

Vermont Proposed Rule: 23P014

AGENCY: Agency of Human Services, Department of Health

CONCISE SUMMARY: This rule establishes eligibility for the Vermont Medication Assistance Program (VMAP) that covers the cost of necessary medication for individuals living with HIV. This rulemaking proposes the following changes: 1) Updates the recertification of eligibility application process to conform with the Policy Clarification Notice 21-02 issued on October 2021 by the federal Health Resources and Services Administration (HRSA). Specifically, the rulemaking removes an extra recertification step for beneficiaries at the six month mark and proposes a yearly recertification requirement. 2) Simplifies and updates the rule for consistency with the program's management. 3) Reorganizes the rule for clarity.

FOR FURTHER INFORMATION, CONTACT: Natalie Weill, Dept. of Health, 108 Cherry Street, Burlington, VT 05401 Tel: 802-863-7280 Fax: 802-951-1275 Email: ahs.vdhrules@vermont.gov URL: <http://www.healthvermont.gov/about-us/laws-regulations/public-comment>.

FOR COPIES: David Englander, Dept. of Health, 108 Cherry Street, Burlington, VT 05401 Tel: 802-863-7280 Fax: 802-951-1275 Email: ahs.vdhrules@vermont.gov.