Number         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)           Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)         Number (Norm)		Reductions - General Fund Impact		
Notice of the second second process frameworks and	ward Pressures: essure # Department	Pressure	Gov Rec Position GF	Description
Normal Pice No	venue Pressures: Secretary's Office -		10,619,163	Decreased Federal Medicaid matching funds due to revised estimates for 'Childless New Adults
Solution     Color Solution     Color Solution       Solution     Color Solution <t< td=""><td></td><td>Childless New Adult Caseload &amp; Utilization Change</td><td>5,596,986</td><td>which, increases the General fund need. CHIP qualifying claims estimated to be lower than base budgeted earnings due to decrease in C</td></t<>		Childless New Adult Caseload & Utilization Change	5,596,986	which, increases the General fund need. CHIP qualifying claims estimated to be lower than base budgeted earnings due to decrease in C
Biol     South effection for generalization (Control and generalization))      Image: Control and generalization (Control and generalization)    Image: Control and generalization (Control and generalization)      Image: Control and generalization (Control and generalization)    Image: Control and generalization)      Image: Control and generalization (Control and generalization)    Image: Control and generalization)      Image: Control and generalization)    Image: Control and generalization)	2 GC	, <b>e</b>		FMAP.
1-500Maktur Styre status1-1000Maktur Styre status1-500Maktur Styre statusMaktur Styre status1-500Maktur Styre status <t< td=""><td>4 DCF</td><td></td><td>148,000</td><td>Decrease in revenue.</td></t<>	4 DCF		148,000	Decrease in revenue.
<ul> <li>A. S. M. M. S. M.</li></ul>	5 AHS		3,743,316	Annualization of salary & fringe increases.
UPU     Disclose union     URA       2004     Reserve on a final mean mark in the second mean mean mean mean mean mean mean mean	7 AHS	AHS Salary & Fringe - New Positions	264,830	DCF - 1 - Juvenile Justice Director, 2 - Woodside Alternative Positions.
BOO     No.1     CLAMP     CLAMP     CLAMP       V PA 2     Parket     CLAMP     CLAMP     CLAMP       V PA 2     Parket     Parket     Parket       V PA	9 DCF		35,451	Class RFRs from 2018.
Image: Control of Survey Part and Contro Of Survey Part And Control Of Survey Part And Control Of Survey P		Buy-in		
1     0.000     id 2000     0.4 Aboin       2     0.000     0.0000     0.0000       3     0.000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       3     0.0000     0.0000     0.0000       4     0.0000     0.0000     0.0000       4     0.0000     0.0000     0.0000       4     0.0000     0.0000     0.0000       5     0.0000     0.0000     0.0000       4     0.0000     0.0000     0.0000       5     0.0000     0.0000     0.0000       5     0.0000     0.0000     0.0000       5     0.0000     0.0000     0.0000       5     0.0000     0.0000     0.0000       5     0.0000     0.0000	11 DVHA	Clawback	1,799,014	, , , , , ,
Image: Solution of the second seco			,	for children).
Image: Source in the second	14 DCF	GA - Emergency Housing	1,954,185	Trend based on actual experience.
B     B     B     Descriptions     Landal     Descriptions     Descriptions       B     B     OP     An Alexan Descriptions     Descriptions     Descriptions       B     Descriptions     Descriptions     Descriptions     Descriptions   <	16 DAIL	Developmental Services (DS) Caseload	3,513,627	Caseload increases as calculated per the DS System of Care plan.
BD/C         D0/1 cproduct bar 2/1 - 2/17 south         L 10.200         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)         Monte status (control of the status)           PAC         Monte status (control of the status)           PAC         Monte status (control of the status)         Monte status (control of the status)<		1 0		
P     P     Note of part of			,	
J. John     A.J. Akai and Sa     J. J. J. Akai     J. J. J. J. J. Akai     J. J. J. J. J. Akai     J. J. J. J. J. J. Akai     J. J	er Operating Pressures:		16,917,380	
Image: Process of the sector of the secto	22 AHS	ADS - Allocation & SLA	1,298,600	Adjustments related to ADS costs.
Biole     Add List Instants for Balance	24 VDH	Misc Adjustments	527,421	Includes various personal service, operating and grant adjustments.
Biology     Paper Restar Series 1 values     1.5.25     Restar Series 1 values and a series of a series 1 values	26 DMH	Level 1 Cost Increase for Brattleboro Retreat	171,537	Level 1 bed cost increase at Brattleboro Retreat.
Image: Control Database for the Section Provided Sectin Provided Section Provided Section Provided Section Provided Sec	28 DMH	Forensic Doctor Contract Increases	25,086	Negotiated increase.
Image: Proceedings of the section				12 new Level 1 beds will be on-line in Spring of 2020. This increase is on top of amount in base
1. Biol     Note: A for the Reserve in the analysis of the Reserve in the analysis of the Reserve in the A for the Reserve in the Reser	31 DMH	Room & Board Investment Phasedown	612,717	Continuation of CMS required investment phasedown.
10     CP     Respect & Schorzhorz, Aute, RAN, Control, Equivance     114274     Aute, Arth Trach Corg, and Arth Trach Arth Trach Corg, and Arth	33 DCF	Woodside - Alternative Placements	1,723,912	Alternative placements needed as a result of the Woodside closure.
Image: Proceedings of the second s				
Image: Proceeding of Proceeding and the standard file party starter attemp     250.437     Note: Proceeding of Proceeding and the standard research of Proceeding o			1,719,330	Continuation of CMS required investment phasedown.
die Oot         Metode/Aussiell rearrent (MO) (genee         1.480.00         1.480.00         Product Security (Security and the Aussielland Security and the Aussielland Security (Security (Security and the Aussielland Security (Security (Security and the Aussielland Security (Security (S	38 DCF	CDD - CIS Bundled Services for Non-Medicaid/Non Early Intervention	204,847	Discretionary population that is currently being served.
All DC         Departure location         BL200         Noting from the Second Processing Proc	40 DOC	Medically Assisted Treatment (MAT) Expense	1,485,064	Provides base funding for MAT per Act 176.
All Out         Control of Implement and shale sprages and adult to barning and adult affects for garges and adult to barning adult affects for garges and adult to barning adult adult for barning and adult affects for garges adult adult for barning adult f	42 DOC		35,397	Including Offender Management System (OMS), energy & utilities, food, water & sewer.
				Vermont will implement a voluntary home visiting program available to families who are pregr
Bit International State S				
Under Name         Biologia           Status Presented status Prese	44 DMH	Suicide Prevention	575,000	
Biolentic Programme         Reduin         Gov Res Paralle         Description           Image: Section of the	45 DCF			
Bene Statistics         (B-9-7)8           Section (V) Office - Section (V) O	duction Proposals:			
1 GC     Dis PMP Charge Including (Nilsis new all(s)     D.155.60       2 Correct Vol Nerview     18.85.60       3 Correct Vol Nerview Englands (Construction (SPC)) Parament     18.85.60       4 Origin     Under Segurating Construction (SPC)       5 OMH     Under Segurating Construction (SPC)       6 OM     Under Segurating Construction (SPC)       7 OM     More and More and All Construction (SPC)       8 OP     ODMore and All Construction (SPC)       9 OP     ODMore and All Construction (SPC)       10 OP     More and All Construction (SPC)       11 OP     More and All Construction (SPC)       12 OP     More and All Construction (SPC)       13 OP     More and All Construction (SPC)       14 OP     More and All Construction (SPC)       15 OP     More and All Constructin (SPC)       16 OP     No	duction # Department venue Savings:	Reduction		
Cic         State Health Care Resource Fund (SCRIP Prenums         110,000           Cick         Nuclear Registery Commits on Project Prenums         110,000           Cick         Nuclear Registery Commits on Project Prenums         100,000           Cick         Nuclear Registery Prenums         100,000           Cick         Nuclear Regist		Base FMAP Change (including childless new adults)	(3,195,660	Base FMAP change from 53.87% to 54.39%.
4 Vpril         Levrage Medicare Nervea ut VPG         [880.40]		State Health Care Resource Fund (SHCRF) Premiums	(163,000	Updated revenue estimates.
SDM     Learage Medican Researce at VPCI     (221.050)     (Learage Medican Researce at VPCI In the with scale dependence.       SDDC     More Comment Lis Machinis Ref.     (321.050)     (Learage Medican Researce at VPCI In the with scale dependence.       SDDC     More Comment Lis Machinis Ref.     (321.050)     (Learage Medican Researce at VPCI In the with scale dependence.       SDDC     CDD-C Comment Lis Machinis Ref.     (321.050)     (Learage Medican Researce at VPCI In the with scale dependence.       SDDC     CDD-C Comment Lis Machinis Ref.     (321.050)     (Learage Medican Researce at VPCI In the with scale dependence.       SDDC     CDD-C Comment Lis Machinis Ref.     (323.050)     (Learage Medican Researce at VPCI In the with scale dependence.       SDDC     Filt SDD At VPC Areage to It is a scale dependence.     (323.050)     (Learage Medican Researce at VPCI In the with SDD At VPC Areage to It is a scale dependence.       SDDC     Filt SDD At VPC Areage to It is a scale dependence.     (323.050)     (Learage Medican Researce At VPCI In the with SDD At VPC Areage to It is a scale dependence.       SDDC     Filt SDD At VPC Areage to It is a scale dependence.     (323.050)     (Learage Areage Ar				
P DOC         Increase US Metabalise Bota         (B12,282         Is distinued and stand Stand Distinued and Stand		Leverage Medicare Revenue at VPCH	(228,050	Leverage additional Medicare revenue at VPCH in line with actual experience.
9 DGC     CDC - GLAP Charger to V-C     [18,2,400]     Converse adjustment.       10 DGC     FAUP Charger to V-C     [13,2,400]     Converse adjustment.       10 DGC     FAUP Charger to V-C     [13,2400]     Converse adjustment.       11 DGC     FAUP Charger to V-C     [13,2400]     Converse adjustment.       11 DGC     FAUP Charger to V-C     [13,2400]     Converses from 3.24% to 3.49%,       12 DGC     FAUP Charger to V-C     [13,2400]     Converses from 3.24% to 3.49%,       13 DGC     FAUP Charger to V-C     [13,2400]     Converses from 3.24% to 3.49%,       14 DGC     FSD-540 Adopt Calenda Strain     [14,2520]     Converses from 500 minutes from the todie Black Plummau report.       15 DGC     Bach Ugo Calenda Strain     [14,2520]     Converse Markani Unitation     [14,2520]       15 DGL     Bach Ugo Calenda Strain     [15,610]     Contract dendariation trend.       16 DAUL     American Federal Distance Unitation     [14,2520]     Contract dendariation trend.       17 DAUL     American Federal Distance Unitation     [13,250]     Contract dendariation trend.       18 DAUL     Transition Education Trend during TIMU Unitation     [13,2524]     Contract dendariation trend.       19 DAUL     Transition Education Trend during TIMU Unitation     [13,250]     Contract dendariation trend.       19 DAUL     T	7 DOC	Increase US Marshalls Beds	(501,528	16 additional Marshal beds and \$10 per diem increase to \$140.
Better Network         (13,336,09)           Sector(37) STR:- 1         (51,235)         (51,235)           11         CC         (14,235)         (51,235)           12         (VA)         Mercad Control & Hindson         (51,235)           12         (VA)         Mercad Control & Hindson         (51,235)           12         (VA)         Mercad Control & Hindson         (64,270)           13         (VA)         Mercad Control & Hindson         (64,270)           14         (VA)         (VA)         (VA)         (VA)           15         (VA)         Non-Addres Services GP Pagram         (15133)         (VA)         (VA)           16         (DA)         Attended Services GP Pagram         (15133)         (VA)         (	9 DCF	CDD - GC Revenue Adjustment		
11     C     UVM Investment Phasedom - Physical Training     (618.23)       12     UVM Investment Phasedom - Physical Training     (618.23)     UDM Investment Phasedom - Physical Training       13     DOC     File S-WA (reduces 005 by up to 30 bels)     (1,356.27)     Herman Interks at COV assumes 50 bels.       14     DCF     File S-WA (reduces 005 by up to 30 bels)     (449.20)     Herman Interks at COV assumes 50 bels.       14     DCF     File S-WA (reduces 005 by up to 30 bels)     (449.20)     Herman Interks at COV assumes 50 bels.       15     DCF     File S-WA (reduces 005 by up to 30 bels)     (449.20)     Herman Interks at COV assumes 50 bels.       16     DAL     Protocol 100 bels of 100 b	ense Reductions - Caseload Savi			
13     DOC     HI CXVC (reduce 006 by up to 50 beds)     11,356,737       14     DCC     K35     Advect 54 beds     K475,207       15     DCF     Reach Up Cashood Savings     (K45,700)     Reduction in U cascolard based on projections from the Lealle Black Plumeau report.       16     DAL     Forestated Autition - Attendant Services OF Program     (183,831     Rejetced attribution.       17     DAL     Attendant Services OF Program     (183,831     Rejetced attribution.       19     DAL     Attendant Services OF Program     (184,831     Rejetced attribution.       19     DAL     Attendant Services OF Program     (184,831     Rejetced attribution.       19     DAL     Attendant Services OF Program     (184,831     Rejetced attribution.       19     DAL     American federal of State, Courty and Municipal Employees (AFSCME) Utilization     (130,822)       20     DAL     American federal of State, Courty and Municipal Employees (AFSCME) Utilization     (130,823)       21     DAL     American Service Medicande     (130,824)       22     AHS CO     Attendent Services (Hastoon     (130,824)       23     DAL     Attendent Services (Hastoon     (130,824)       24     AHS CO     Attendent Services (Hastoon     (130,824)       25     DAL     Attendent S	-		(121,000	Base FMAP change from 53.87% to 54.39%.
15     CF     Reach Up Caseboal Savings     (442,704)     Reduction in RU caseboal based on projections from the teslie Black Plumeau report.       16     DAIL     Norested Attition - Attendant Services OF Program     (143,734)     Projected attition.       17     DAIL     Norested Attition - Attendant Services OF Program     (143,743)     Projected attition.       18     DAIL     Nore (CSS Utilization     (143,744)     Continued undertilization trend.       19     DAIL     Nore (CSS Utilization     (143,744)     Continued undertilization trend.       20     DAIL     American Federal of State, Contry and Municipal Employees (AFSCRE) Utilization     (133,124)       21     DAIL     American Sector (199)     (133,124)       22     MSC O     Contract Relations     (133,124)       24     MSC O     Contract Relations     (133,124)       25     DVIA     Rebase HT Bodget     (765,501)       26     DVIA     Rebase HT Bodget     (765,201)       27     DVIA     Preferred Drug List (POL) Management for HIV     (153,122)       28     DVIA     Preferred Drug List (POL) Management for HIV     (153,122)       29     DVIA     Preferred Drug List (POL) Management for HIV     (153,122)       20     DVIA     Prefered Drug List (POL) Management for HIV     (153,122)		ngs: UVM Investment Phasedown - Physician Training	(121,000 (13,536,069 (618,235	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown.
12     Alternatives Medical - Utilization     (14,472)     Continued underutilization trend.       18     Alternatives Medical - Utilization     (18,50)     Continued underutilization trend.       19     Alternatives Medical - Utilization     (18,50)     Continued underutilization trend.       20     OAL     American federal of State, County and Municipal Employees (AFSCME) Utilization     (18,50)     Underspin tep projections.       21     OAL     Taunétic Brain Injery (18) Utilization     (18,510)     Underspin tep projections.       22     OAL     Taunétic Brain Injery (18) Utilization     (18,314,326)       20     Nethod State Reductions     (13,314,326)       21     AME     Contract Reductions and temp (18) Utilization     (13,314,326)       22     AME     Contract Reductions and temp (18) Utilization     (13,314,326)       23     OVMA     Robert Reductions and temp (18) Utilization     (13,314,326)       24     DVMA     Contract Reductions and temp (18) Utilization     (25,322) Align with actual expenditures.       24     AME     Contract Reductions and temp (18) Utilization     (25,322) Align with actual expenditures.       25     DVMA     Robert Reductions AL WAME (18) Contract Reductions and temp (18) Align (18,314).       25     DVMA     Enternative Reductions AL WAME (18) Align (18,12)     (26,12)       26	12 DVHA 13 DOC	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds)	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds.
1     Nul.     Nun-HGS Utilization     (18,89)     Continued underunitization trend.       20     Out.     American Federal of State, County and Municipal Employees (AFSCME) Utilization     (18,90)     Underspent per projections.       21     Dult.     Taunatic brain injury (B) Utilization     (18,90)     Underspent per projections.       22     AMS CO     Internal Audt Group Restructure     (23,34,296)       23     AMS CO     Contract Reductions     (23,34,296)       24     AMS CO     Contract Reductions     (23,25)       25     VMA     Rebase HT Budget     (76,801)       26     VMA     Rebase HT Budget     (76,801)       27     VMA     Align Prior Authorization of HTV     (23,42,08)       28     VMA     Align Prior Authorization of HTV     (24,843)       29     VMA     Rebase HT Budget     (76,801)       20     VMA     Rebase HT Budget     (28,82)       20     VMA     Rebase HT Budget Prior Authorization of Authorization Prior DMMC Felowship (In BAA)       20     VMA     Rebase HT Budget Prior Authorization Prior DMMC Felowship (In BAA)       21     VMA     Rebase HT Budget Prior Authorization Prior DMMC Felowship (In BAA)       20     VMA     Rebase HT Budget Prior Authorization Prior DMMC Felowship (In BAA)       21	12 DVHA 13 DOC 14 DCF 15 DCF	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report.
21     DAL     Traumatic Brain Injury (TBI) Utilization     (130,022)     Continued underutilization trend.       nere Reductions     FOrgosali:     (13,14,229)       21     AKS CO     Internal Audit Group Restructure     (27,365)       23     AKS CO     Contract Reductions of Contract Savings.     (32,342)       24     (VFA     Contract Savings     (822,68)       25     (VFA     Rebse HT Budget     (765,801)       25     (VFA     Rebse HT Budget     (30,840)       26     (VFA     Referred Drug List (PDL) Management for HW     (30,840)       27     (VFA     Perferred Drug List (PDL) Management for HW     (30,840)       28     OMH     Eliminate 1 vacant administrative position     (30,840)       29     OMH     Eliminate 1 vacant administrative position     (35,000)       30     OAL     OS Waters - Budget to Actuals in Reight aphilosinon Projectus FTE     (31,81,22)       31     OCT     Cose Woodside and Transition to Alternative Placements     (5,733,142)       32     OCF     Interase vacancy savings at the Office of Child Support (COS)     (5,731,42)       33     OCF     Interase vacancy savings at the Office of Child Support (COS)     (5,731,42)       34     OCF     Eliminate Northwestern Counseling Support Services Infeed to reduce the use of Plaid progr	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend.
21     DAL     Traumatic Brain Injury (TBI) Utilization     (130,022)     Continued underutilization trend.       nere Reductions     FOrgosali:     (13,14,229)       21     AKS CO     Internal Audit Group Restructure     (27,365)       23     AKS CO     Contract Reductions of Contract Savings.     (32,342)       24     (VFA     Contract Savings     (822,68)       25     (VFA     Rebse HT Budget     (765,801)       25     (VFA     Rebse HT Budget     (30,840)       26     (VFA     Referred Drug List (PDL) Management for HW     (30,840)       27     (VFA     Perferred Drug List (PDL) Management for HW     (30,840)       28     OMH     Eliminate 1 vacant administrative position     (30,840)       29     OMH     Eliminate 1 vacant administrative position     (35,000)       30     OAL     OS Waters - Budget to Actuals in Reight aphilosinon Projectus FTE     (31,81,22)       31     OCT     Cose Woodside and Transition to Alternative Placements     (5,733,142)       32     OCF     Interase vacancy savings at the Office of Child Support (COS)     (5,731,42)       33     OCF     Interase vacancy savings at the Office of Child Support (COS)     (5,731,42)       34     OCF     Eliminate Northwestern Counseling Support Services Infeed to reduce the use of Plaid progr	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Continued underutilization trend.
Ats CO         Internal Audit Group Restructure         (27.365)         Transfer DCF Audit position to AHS, eliminate vacant position, retainer contract for audit services           24         DVHA         Contract Reductions         (51.822)         Align with actual expenditures.         (51.822)           25         DVHA         Rebase HT Budget         (755.801)         (755.801)           25         DVHA         Rebase HT Budget         (755.801)         (755.801)           26         DVHA         Peferred Orug List (PDL) Masagement for HV         (554.412)         (756.801)           26         DVHA         Contract Reductions & UVMAC Fellowship (in BAA).         (756.801)           28         DVH         Eliminate 1 vacant administrative position         (85.902)         (701 cons have been aborded with existing staff.           29         DVH         Contract Reductions & UVMAC Fellowship (in BAA).         (85.902)         (701 cons have been aborded with existing staff.           20         DVH         Contract Reduction for audits Realgements         (15.83.122)         Realge budget to actuals in line with historic appropriation balances.           31         DCF         Cocee Woodside and Final ton to Aliget application for actual sing at the Offree of Cold Support Services (NCSS) High Fidelity Wrap         (21.667)         (84.020)         (84.020)         (84.020)         (	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169) (168,084	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Continued underutilization trend. Continued underutilization trend.
23     Airs CO     Contract Savings     (51.822)     Align with actual expenditures.       24     VPHA     Contract Savings     (725.001)       25     VPHA     Rebase HIT Budget     (755.001)       26     VPHA     Rebase HIT Budget     (755.001)       27     VPHA     Prefered Drug List (POL) Management for HV     (554.412)     Implement a PDL for HV patients.       28     DMH     Contract Reductions grant reduction to UVMM CFelowship     (85.002)       29     DMH     Eliminate 1 vacant administrative position     (85.002)       30     DCF     Cose Woodside and Transition to All Remarkive Placements     (55.81.12)       31     DCF     Intract Sector (Cose)     Previde 5 HTE       32     DCF     ESD - Elderly Simplified Application Program (ESAP) - reduce 5 HTE     (31.80.20)       33     DCF     Intracte Vacancy sings at the Office of Child Support (OCS)     (51.61.20)       34     DCF     Eliminate Northwestern Counselling Support Services (NCS) High Fidelity Wrap     (21.61.77) reduce 5 HTE     (31.80.20)       35     DCF     CDD - Reduction in CCFAP Stabilization Grants     (200.00)     program with Northwestern Counselling Support Services to Special Child Care - one-time funds       36     DCF     CDD - Reduction in CCFAP Stabilization Grants     (21.61.79.52)       37	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 21 DAIL	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Continued underutilization trend. Underspent per projections. Continued underutilization trend.
25     DVHA     Rebase HT Budget     (765,801)       26     DVHA     Align Prior Authorization     (308,435)     Contract savings and one FTE elimination thru attrition.       27     DVHA     Preferred Drug List (PDL) Management for HIV     (S54,412)     Implement a PDL for HIV patients.       28     DMH     Contract reductions & UVMMC Fellowship     (B2,210)     Various Contract reductions grant reduction to UVMMC Fellowship (in BAA).       29     DVHA     Diverse Fundget to Actuals Realignment     (L58,1212)     Realign budget to actuals in line with historic appropriation balances.       31     DCF     Close Woodside and Transition to Alternative Placements     (L5,821,124)     Realign budget to actuals in line with historic appropriation balances.       32     DCF     ED - Elderly Simplified Application Program (ESAP) - reduce 5 FTE     (31,802)     Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP.       33     DCF     Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap     (291,667)     residential programs.       34     DCF     CDD - Reduction in CCFAP Stabilization Grants     (200,00)     programs.       35     CCF     CDD - Reduction in CCFAP Stabilization Grants     (200,00)     programs.       36     CCF     Reskucture Transportation Grants     (200,00)     programs.       37     CCF     Reach U	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 21 DAIL ense Reductions - Proposals:	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.
27       DVHA       Preferred Drug List (PDL) Management for HIV       (554,412)       Implement a PDL for HIV patients.         28       DMH       Contract Reductions & UMMAC Fellowship       (80,200)       Various Contract reductions (part reductions & UVMAC Fellowship (in BAA).         29       DMH       Eliminate 1 vacant administrative position       (1,583,122)       Realing budget to actuals in line with historic appropriation balances.         30       DAL       DS Waivers - Budget to Actuals Realignment       (1,583,122)       Realing budget to actuals in line with historic appropriation balances.         31       DCF       CDS - Woodside, and Transition of Alternative Placements       (5,783,42)       Alternative relatental placements needed as result of the closure of Woodside.         32       DCF       EDF       Elderly Simplified Application Program (ESAP) - reduce 5 FTE       (318,052)       Reduce S Benefit Program Specialist positions as a result of implementing ESAP.         34       DCF       Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap       (291,67) residential programs.       (200,000)         35       DCF       CD - Reduction in CCFAP Stabilization Grants       (200,000)       provides transportation to and from childcare for vulnerable and at-risk children. DCF is working restructure contracts. There is a \$650 (Not- etime appropriation to bridge the program through (649,793)         36       DCF       CD - Reach	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 21 DAIL 22 AHS CO 23 AHS CO	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (1878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Continued underutilization trend. Underspent per projections. Continued underutilization trend. Transfer DCF Audit position to AHS, eliminate vacant position, retainer contract for audit servi Align with actual expenditures.
29       DMH       Eliminate 1 vacant administrative position       (36,900)       Functions have been absorbed with existing staff.         30       DAIL       DS Waivers - Budget to Actuals Realignment       (1,583,122)       Realign budget to actuals in line with historic appropriation balances.         31       DCF       Close Woodside and Transition to Alternative Placements       (5,783,142)       Alternative residential placements needed as a result of the closure of Woodside.         32       DCF       ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE       (318,052)       Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP.         33       DCF       Increase vacancy savings.       (291,67)       residential programs.         34       DCF       Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap       (291,67)       residential programs.         35       DCF       CDD - Reduction in CCFAP Stabilization Grants       (200,00)       provides transportation to and from childcare for vulnerable and at-risk children. DCF is worki         36       DCF       will serve as bridge       (649,793)       Provides transportation to assist RU families in getting to jobs.         37       DCF       Reach Up - Reduce Transportation Grants       (127,952)       Reduces funds for transportation to assist RU families in getting to jobs.         38       DCF	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 20 DAIL 20 DAIL 21 DAIL ense Reductions - Proposals: 22 AHS CO 23 AHS CO 24 DVHA	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Savings Rebase HIT Budget	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (765,801	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Continued underutilization trend.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Transfer DCF Audit position to AHS, eliminate vacant position, retainer contract for audit servi         Align with actual expenditures.         Maximus and Wex contract savings.
31       CF       Close Woodside and Transition to Alternative Placements       (5,78,142)       Alternative residential placements needed as a result of the closure of Woodside.         32       DCF       ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE       (318,052)       Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP.         33       DCF       Increase vacancy savings.       Pilot program with Northwestern Counselling Support Services (NCSS) High Fidelity Wrap       (291,667) residential programs.         34       DCF       Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap       (291,667) residential programs.         35       DCF       CDD - Reduction in CCFAP Stabilization Grants       (200,000)       programs.         CDD - Restructure Transportation Services to Special Child Care - one-time funds       (549,733) restructuring.       Reduces for unlerable and at-risk children. DCF is worki restructure contracts. There is a \$550K one-time appropriation to bridge the program through (649,733) restructuring.         36       DCF       OEO - Eliminate Microbusiness Development Program       (1293,339)       Provides transportation to assist RU families in getting to jobs.         37       DCF       Each Up - Reduce Transportation Grants       (187,952)       Reduces fund of transportation to assist RU families in getting to jobs.         38       DCF       OEO - Eliminate Microbusiness Development Program       (	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 20 DAIL 21 DAIL ense Reductions - Proposals: 22 AHS CO 23 AHS CO 24 DVHA 25 DVHA 26 DVHA	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (4449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (13,314,296 (51,822 (822,698 (822,698 (765,801 (308,436 (554,412	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Transfer DCF Audit position to AHS, eliminate vacant position, retainer contract for audit servi         Align with actual expenditures.         Maximus and Wex contract savings.         Contract savings and one FTE elimination thru attrition.         Implement a PDL for HIV patients.
33       DCF       Increase vacancy savings at the Office of Child Support (OCS)       (55,000)       Increase vacancy savings.         34       DCF       Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap       (291,667)       residential programs.         35       DCF       CDD - Reduction in CCFAP Stabilization Grants       (200,000)       provides transportation to and from childcare for vulnerable and at-risk children. DCF is workly restructure Transportation Services to Special Child Care - one-time funds       (649,733)       restructure contracts. There is a 5650K one-time appropriation to bridge the program through restructure.         36       DCF       QED - Reductor in GCFAP Stabilization Grants       (187,952)       Reduces funds for transportation to assist RU families in getting to jobs.         37       DCF       Reach Up - Reduce Transportation Grants       (187,952)       Reduces funds for transportation for low income Vermonters grow small businesses.         39       DCF       OEO - Eliminate Microbusiness Development Program       (293,339)       Provides technical assistance to help low-income Vermonters.         40       DOC       Eliminate Home Detention       (125,000)       Move low or low/moderate risk offenders to the Telephone Reporting Supervision program.         41       DOC       Low Risk Supervision       (211,387)       Facility has been closed for two plus years.         42       DOC       Medicai	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 21 DAIL ense Reductions - Proposals: 22 AHS CO 23 AHS CO 24 DVHA 25 DVHA 26 DVHA 27 DVHA 28 DMH	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (1130,024 (13,314,296 (27,365 (51,822 (822,698 (765,801 (308,436 (554,412 (80,210)	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Transfer DCF Audit position to AHS, eliminate vacant position, retainer contract for audit servi         Align with actual expenditures.         Maximus and Wex contract savings.         Contract savings and one FTE elimination thru attrition.         Implement a PDL for HIV patients.         Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA).
34       DCF       Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap       (291,667)       residential programs.         35       DCF       CDD - Reduction in CCFAP Stabilization Grants       (200,000)       programs.         36       DCF       CDD - Reduction in CCFAP Stabilization Grants       (200,000)       provides transportation to and from childcare for vulnerable and at-risk children. DCF is worki restructure contracts. There is a \$650K one-time appropriation to bridge the program through (649,793) restructure;         36       DCF       Reach Up - Reduce Transportation Grants       (187,952)       Reduces funds for transportation to assist RU families in getting to jobs.         37       DCF       Reach Up - Reduce Transportation Grants       (187,952)       Reduces funds for transportation to assist RU families in getting to jobs.         38       DCF       OEO - Eliminate Microbusiness Development Program       (293,339)       Provides technical assistance to help low-income Vermonters grow small businesses.         39       DCF       OEO - Eliminate Individual Development Account (IDA) Program       (125,000)       Provides a savings match and financial education for low income Vermonters.         40       DOC       Eliminate Home Detention       (226,000)       Nove low or low/moderate risk offenders to the Telephone Reporting Supervision program.         42       DOC       Grant Reduction       (226,000)       Communi	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 20 DAIL 20 DAIL 21 DAIL 22 AHS CO 23 AHS CO 23 AHS CO 24 DVHA 25 DVHA 26 DVHA 27 DVHA 28 DMH 29 DMH 30 DAIL	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Reductions Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (765,801 (308,436 (554,412 (80,210 (36,900 (1,583,122	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Instruct of CF Audit position to AHS, eliminate vacant position, retainer contract for audit servi         Align with actual expenditures.         Maximus and Wex contract savings.         Contract savings and one FTE elimination thru attrition.         Implement a PDL for HIV patients.         Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA).         Functions have been absorbed with existing staff.         Realign budget to actuals in line with historic appropriation balances.
35       DCF       CDD - Reduction in CCFAP Stabilization Grants       Grants no longer needed as CCFAP rate increases are achieving stabilization in early childhood (200,000) programs.         36       DCP       Reductive Transportation Services to Special Child Care - one-time funds       Provides transportation to and from childcare for vulnerable and at-risk children. DCF is working restructure contracts. There is a \$650K one-time appropriation to bridge the program through (649,793) restructuring.         37       DCF       Reach Up - Reduce Transportation Grants       (187,952)       Reduces funds for transportation to assist RU families in getting to jobs.         38       DCF       OEO - Eliminate Individual Development Program       (293,339)       Provides technical assistance to help low-income Vermonters grow small businesses.         39       DCF       OEO - Eliminate Individual Development Account (IDA) Program       (170,301)       Provides a savings match and financial education for low income Vermonters.         41       DOC       Low Risk Supervision       (325,000)       Move low or low/moderate risk offenders to the Telephone Reporting Supervision program.         42       DOC       Mindsci for Transitional Housing       (211,387)       Facility has been closed for two plus years.         43       DOC       Medicaid for Community Rehabilitative Care       (285,939)       Leverage Medicaid funding.         44       DOC       Medicaid for Community Rehabilitative Care	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 20 DAIL 21 DAIL ense Reductions - Proposals: 22 AHS CO 23 AHS CO 24 DVHA 25 DVHA 26 DVHA 27 DVHA 28 DMH 29 DMH 30 DAIL 31 DCF 32 DCF	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization Non-HCBS Utilization Armerican Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (444,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (765,801 (308,436 (554,412 (80,210) (36,900) (1,583,122 (5,783,142 (5,783,142)	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Contract savings and one FTE elimination thru attrition. Implement a PDL for HIV patients. Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA). Functions have been absorbed with existing staff. Realign budget to actuals in line with historic appropriation balances. Alternative residential placements needed as a result of the closure of Woodside. Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP. Increase vacancy savings.
36       DCF       Will serve as bridge       Provides transportation to and from childcare for vulnerable and at-risk children. DCF is worki restructure contracts. 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39       DCF       OEO - Eliminate Individual Development Account (IDA) Program       (170,301)       Provides a savings match and financial education for low income Vermonters.         40       DOC       Eliminate Home Detention       (125,000)       Program is underutilized.         41       DOC       Low Risk Supervision       (325,000)       Move low or low/moderate risk offenders to the Telephone Reporting Supervision program.         42       DOC       Grant Reduction       (26,000)       Community Justice Centers.         43       DOC       Windsor Mothballing Costs       (211,387)       Facility has been closed for two plus years.         44       DOC       Medicaid for Transitional Housing       (161,589)       Levarage Medicaid funding.         45       DOC       Medicaid for Community Rehabilitative Care       (285,000)       Levarage Medicaid funding.         46       DOC       Medicaid for Community Rehabilitative Care       (285,914,084)       Levarage Medicaid funding.         47       TOTAL REDUCTIONS       (35,914,084)       Levarage Medicaid funding.       Levarage Medicaid funding.	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         32       DCF         33       DCF         34       DCF         35       DCF         36       DCF	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization DY Maivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Restructure Transportation Services to Special Child Care - one-time funds will serve as bridge	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (13,314,296 (51,822 (822,698 (765,801 (308,436 (554,412 (80,210) (36,900 (1,583,122 (5,783,142 (318,052 (55,000) (291,667 (200,000) (649,793	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Maximus and Wex contract savings.         Maximus and Wex contract savings.         Contract savings and one FTE elimination thru attrition.         Implement a PDL for HIV patients.         Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA).         Functions have been absorbed with historic appropriation balances.         Alternative residential placements needed as a result of the closure of Woodside.         Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP.         Increase vacancy savings.         Pilot program with Northwestern Counselling Support Services intended to reduce the use of residential programs. <t< td=""></t<>
41       DOC       Low Risk Supervision       (325,000)       Move low or low/moderate risk offenders to the Telephone Reporting Supervision program.         42       DOC       Grant Reduction       (26,000)       Community Justice Centers.         43       DOC       Windsor Mothballing Costs       (211,387)       Facility has been closed for two plus years.         44       DOC       Medicaid for Transitional Housing       (161,589)       Leverage Medicaid funding.         45       DOC       Medicaid for Community Rehabilitative Care       (285,000)       Leverage Medicaid funding.         46       DOC       Medicaid for Transitional Housing       (385,914,084)       Leverage Medicaid funding.         47       TOTAL REDUCTIONS       (35,914,084)       Leverage Medicaid funding.	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         33       DCF         34       DCF         35       DCF         36       DCF         37       DCF	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Reduction in CCFAP Stabilization Grants	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,574 (187,8169 (168,084 (188,150 (130,024 (13,314,296 (133,14,296 (27,365 (51,822 (822,698 (765,801 (308,436 (554,412 (80,210) (36,900 (1,583,122 (5,783,142) (318,052 (57,83,142) (318,052) (291,667 (200,000 (649,793) (187,952)	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Wainus and Wex contract savings.         Contract savings and one FTE elimination thru attrition.         Implement a PDL for HIV patients.         Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA).         Functions have been absorbed with existing staff.         Realign budget to actuals in line with historic appropriation balances.         Alternative residential placements needed as a result of implementing ESAP.         Increase vacancy savings.         Pilot program with Northwestern Counselling Support Services intended to reduce the use of residential programs.
42       DOC       Grant Reduction       (26,000)       Community Justice Centers.         43       DOC       Windsor Mothballing Costs       (211,387)       Facility has been closed for two plus years.         44       DOC       Medicaid for Transitional Housing       (161,589)       Leverage Medicaid funding.         45       DOC       Medicaid for Community Rehabilitative Care       (283,09)       Leverage Medicaid funding.         45       DOC       Medicaid for Community Rehabilitative Care       (285,914,084)       Leverage Medicaid funding.	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         32       DCF         33       DCF         34       DCF         35       DCF         36       DCF         37       DCF         38       DCF         39       DCF	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Traumatic Brain Injury (TBI) Utilization Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Reductoin in CCFAP Stabilization Grants CDD - Reduct Transportation Services to Special Child Care - one-time funds will serve as bridge Reach Up - Reduce Transportation Grants OEO - Eliminate Microbusiness Development Program	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (4449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (822,698 (822,698 (765,801 (308,436 (554,412 (80,210 (36,900) (1,583,122 (5,783,142 (318,052 (5,783,142 (318,052) (291,667 (200,000) (649,793 (187,952 (293,339) (170,301	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Contract savings and the XP, eliminate vacant position, retainer contract for audit servi Align with actual expenditures. Maximus and Wex contract savings. Contract savings and ne FTE elimination thru attrition. Implement a PDL for HIV patients. Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA). Functions have been absorbed with existing staff. Realign budget to actuals in line with historic appropriation balances. Alternative residential placements needed as a result of the closure of Woodside. Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP. Increase vacancy savings. Pilot programs. Grants no longer needed as CCFAP rate increases are achieving stabilization in early childhood programs. Provides
43     DOC     Windsor Mothballing Costs     (211,387)     Facility has been closed for two plus years.       44     DOC     Medicaid for Transitional Housing     (161,589)     Leverage Medicaid funding.       45     DOC     Medicaid for Community Rehabilitative Care     (285,309)     Leverage Medicaid funding.       7     TOTAL REDUCTIONS     (35,914,084)     1	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         19       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         32       DCF         33       DCF         34       DCF         35       DCF         36       DCF         37       DCF         38       DCF         39       DCF	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Reduction in CCFAP Stabilization Grants CDD - Reduct Transportation Services to Special Child Care - one-time funds will serve as bridge Reach Up - Reduce Transportation Grants OEO - Eliminate Microbusiness Development Program OEO - Eliminate Microbusiness Development Program	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (4449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (822,698 (822,698 (765,801 (308,436 (554,412 (80,210 (36,900) (1,583,122 (5,783,142 (318,052 (5,783,142 (318,052) (291,667 (200,000) (649,793 (187,952 (293,339) (170,301	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Maximus and Wex contract savings.         Maximus and Wex contract savings.         Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA).         Functions have been absorbed with existing staff.         Realign budget to actuals in line with historic appropriation balances.         Alternative residential placements needed as a result of the closure of Woodside.         Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP.         Increase vacancy savings.       Pilot programs.         Grants no longer needed as CCFAP rate increases
45 DOC     Medicaid for Community Rehabilitative Care     (285,309)     Leverage Medicaid funding.       Image: Community Rehabilitative Care     Image: Care Community Rehabilitative Care     Image: Care Care Care Care Care Care Care Care	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         32       DCF         33       DCF         34       DCF         35       DCF         36       DCF         37       DCF         38       DCF         39       DCF         34       DCC	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) F5D - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Reduction in CCFAP Stabilization Grants CDD - Reduct Transportation Services to Special Child Care - one-time funds will serve as bridge Reach Up - Reduce Transportation Grants OEO - Eliminate Individual Development Program Eliminate Home Detention Low Risk Supervision	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704 (181,933 (144,574 (187,8169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (765,801 (308,436 (554,412 (80,210) (36,900 (1,583,122 (5,783,142 (318,052 (5,783,142) (35,000) (291,667 (200,000) (649,793 (187,952 (293,339) (170,301 (125,000) (325,000)	Base FMAP change from 53.87% to 54.39%.         Continuation of CMS required MCO investment phasedown.         Updated per the Consensus Forecast process. Adopted by E-Board in January 2020.         Fill the vacant beds at CCWC - assumes 50 beds.         Decreasing caseload and cost per case.         Reduction in RU caseload based on projections from the Leslie Black Plumeau report.         Projected attrition.         Continued underutilization trend.         Underspent per projections.         Continued underutilization trend.         Underspent per projections.         Contraut savings and one FTE elimination thru attrition.         Implement a PDL for HIV patients.         Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA).         Functions have been absorbed with existing staff.         Realign budget to actuals in line with historic appropriation balances.         Alternative residential placements needed as a result of the closure of Woodside.         Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP.         Increase vacancy savings.         Pilot program with Northwestern Counselling Support Services intended to reduce the use of residential programs.
	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         32       DCF         33       DCF         34       DCF         35       DCF         36       DCF         37       DCF         38       DCF         39       DCF         39       DCF         40       DOC         41       DOC         42       DOC         43       DOC	Internal Audit Group Restructure Contract Reductions Contract Reductions Reburg Survival Surv	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (4449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (82,698 (765,801 (308,436 (554,412 (80,210) (36,900 (1,583,122 (5,783,142 (318,052 (5,783,142 (318,052) (291,667 (200,000 (649,793 (187,952 (293,339 (170,301 (125,000 (26,000 (26,000) (26,000) (26,000) (211,387	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Contract solvings and one FTE elimination thru attrition, retainer contract for audit servi Align with actual expenditures. Maximus and Wex contract savings. Contract savings and one FTE elimination thru attrition. Implement a PDL for HIV patients. Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA). Functions have been absorbed with existing staff. Realign budget to actuals in line with historic appropriation balances. Alternative residential placements needed as a result of the closure of Woodside. Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP. Increase vacancy savings. Filot programs. Filot programs. Filot programs. Filot programs. Grants no longer needed as CCFAP rate increases are achieving stabilization in early childhood programs. Frovides transportation to and from childcare for vulnerable and at-risk children. DCF is worki restructure contracts. There is a \$650K one-time appropriation to bridge the program through restructuring. Reduces funds for transpor
AHS POSITION 15,139,235	12       DVHA         13       DOC         14       DCF         15       DCF         16       DAIL         17       DAIL         18       DAIL         20       DAIL         21       DAIL         22       AHS CO         23       AHS CO         24       DVHA         25       DVHA         26       DVHA         27       DVHA         28       DMH         29       DMH         30       DAIL         31       DCF         32       DCF         33       DCF         34       DCF         35       DCF         36       DCF         37       DCF         38       DCF         39       DCF         40       DOC         41       DOC         42       DOC         43       DOC         44       DOC	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization Fill CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Reduction in CCFAP Stabilization Grants CDD - Reduct Transportation Services to Special Child Care - one-time funds will serve as bridge Reach Up - Reduce Transportation Grants OEO - Eliminate Microbusiness Development Program OEO - Eliminate Individual Development Account (IDA) Program Eliminate Individual Development Account (IDA) Program Eliminate Home Detention Low Risk Supervision Grant Reduction	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (4449,704 (181,933 (144,674 (878,169 (168,084 (188,150 (130,024 (13,314,296 (27,365 (51,822 (822,698 (822,698 (822,698 (765,801 (308,436 (554,412 (80,210 (36,900) (1,583,122 (5,783,142 (318,052 (55,000) (291,667 (200,000) (649,793 (187,952 (293,339) (170,301 (125,000) (26,000) (26,000) (211,387	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Continued underutilization trend. Continued underutilization trend. Continued underutilization trend. Underspent per projections. Continued underutilization trend. Underspent per projections. Continued underutilization trend. Contract savings and one FTE elimination thru attrition. Implement a PDL for HIV patients. Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA). Functions have been absorbed with existing staff. Realign budget to actuals in line with historic appropriation balances. Alternative residential placements needed as a result of the closure of Woodside. Reduce 5 Benefit Program Specialist positions as a result of implementing ESAP. Increase vacancy savings. Pilot program with Northwestern Counselling Support Services intended to reduce the use of residential programs. Provides transportation to and from childcare for vulnerable and at-risk children. DCF is worki restructuring. Reduces funds for transportation to assist RU families in getting to jobs. Provides technical assistance to help low-income Vermonters grow small businesses. Provides a savings match and financial education for low income Vermonters. Program is underutilized. Move low or low/moderate risk offenders to the Telephone Reporting Supervision program. Community Justice Centers. Fracility has been closed for two plus years. Leverage Medicaid funding.
	12 DVHA 13 DOC 14 DCF 15 DCF 16 DAIL 17 DAIL 18 DAIL 19 DAIL 20 DAIL 20 DAIL 21 DAIL 22 AHS CO 23 AHS CO 24 DVHA 25 DVHA 26 DVHA 29 DMH 30 DAIL 31 DCF 33 DCF 33 DCF 34 DCF 35 DCF 36 DCF 37 DCF 39 DCF 40 DOC 41 DOC 43 DOC 44 DOC	ngs: UVM Investment Phasedown - Physician Training Medicaid Caseload & Utilization FIII CCWC (reduces OOS by up to 50 beds) FSD - Sub Adopt Caseload Reach Up Caseload Savings Forecasted Attrition - Attendant Services GF Program Attendant Services Medicaid - Utilization Nursing Home Medicaid Bed Utilization Non-HCBS Utilization American Federal of State, County and Municipal Employees (AFSCME) Utilization Traumatic Brain Injury (TBI) Utilization Internal Audit Group Restructure Contract Reductions Contract Savings Rebase HIT Budget Align Prior Authorization Preferred Drug List (PDL) Management for HIV Contract Reductions & UVMMC Fellowship Eliminate 1 vacant administrative position DS Waivers - Budget to Actuals Realignment Close Woodside and Transition to Alternative Placements ESD - Elderly Simplified Application Program (ESAP) - reduce 5 FTE Increase vacancy savings at the Office of Child Support (OCS) Eliminate Northwestern Counselling Support Services (NCSS) High Fidelity Wrap CDD - Reduction in CCFAP Stabilization Grants CDD - Reduction in CCFAP Stabilization Grants OEO - Eliminate Individual Development Account (IDA) Program Eliminate Individual Development Account (IDA) Program Eliminate Home Detention Low Risk Supervision GCO - Eliminate Individual Development Account (IDA) Program Eliminate Home Detention Low Risk Supervision	(121,000 (13,536,069 (618,235 (8,943,914 (1,356,975 (476,207 (449,704) (181,933 (144,574 (878,169) (168,084 (188,150) (130,024 (13,314,296 (27,365 (51,822 (822,698) (765,801 (308,436) (554,412 (80,210) (36,900) (1,583,122 (5,783,142) (318,052) (57,83,142) (318,052) (291,667 (291,667 (200,000) (649,793) (187,952) (293,339) (170,301) (125,000) (26,000) (211,387 (161,589) (285,309) (285,309)	Base FMAP change from 53.87% to 54.39%. Continuation of CMS required MCO investment phasedown. Updated per the Consensus Forecast process. Adopted by E-Board in January 2020. Fill the vacant beds at CCWC - assumes 50 beds. Decreasing caseload and cost per case. Reduction in RU caseload based on projections from the Leslie Black Plumeau report. Projected attrition. Continued underutilization trend. Contract savings and one FTE elimination thru attrition. Implement a PDL for HIV patients. Various Contract reductions; grant reduction to UVMMC Fellowship (in BAA). Functions have been absorbed with existing staff. Realign budget to actuals in line with historic appropriation balances. Alternative residential placements needed as a result of implementing ESAP. Increase vacancy savings. Pilot program with Northwestern Counselling Support Services intended to reduce the use of presidential programs. Provides transportation to and from childcare for vulnerable and at-risk children. DCF is worki restructuring. Reduces for transportation to assist RU families in getting to jobs. Provides tansportation to assist RU families in getting to jobs. Provides a savings match and financial education for low income Vermonters. Provides a savings match and financial education for low income Vermonters. Provides a seaving smatch and financial education for low income Vermonters. Provides a savings match and financial education for low income Vermonters. Provides a seavings match and financial education for low income Vermonters. Prov