mary of Changes and Reduct	ion Proposals from the FY23 Budget - General Fund Impact		
nges from FY23 Budget			
nge # Department	Description	Gov Rec Position GF	Narrative
eases/Tech. Adjustments from		70,201,068	
1 AHS GC	CHIP Qualifying Claims	518,211	
2 AHS GC	Approved carry forward from SFY22 into SFY23; tech. redistribution		Redistribution of carry forward funds from the GC appropriation to respective dept. GC appropriation
3 AHS GC	Reduction in SHCRF collections due to PHE	1,316,297	
			EBoard action "borrowed" GF from the GC appropriation to provide additional LIHEAP funds. This acti
4 AHS GC	Backfill of GF for the EBoard's 10/24 appropriation of GF for LIHEAP	5,800,000	backfills the GC appropriation to provide adequate matching funds for SFY23 BAA.
5 AHS CO	Transitional Housing Complex Case Mgt.		Cross departmental effort to appropriately match TH HHs to services for which they may be eligible
6 AHS CO	SLA charges	16,010	Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
7 DVHA	Transitional Housing Complex Case Mgt.	200,000	Cross departmental effort to appropriately match TH HHs to services for which they may be eligible
8 DVHA		64.752	Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
8 DVHA	SLA charges	64,752	Necessary estimated matching funds for DDI to build a Medicaid data lake that interfaces with VITL ar
9 DVHA	MDWAS match, offset by AHS GC Carryforward tech. adj. above	2 762 210	expands the MMIS-usable dataset.
9 DVHA	MDWAS match, onset by AHS GC carryforward tech. adj. above	2,762,219	expands the MMIS-usable dataset.
10 DVHA	Medicaid Consensus Forecast Update	17 906 606	Updated per the Consensus Forecast process. To be adopted by E-Board in January 2023.
11 DVHA	Increased GME agreement with UVMMC		Match needs are offset by UVMMC provided IGT, carried below among AHS GC reductions
12 DVHA	APM Year 2 amended rate for the Brattleboro Retreat		Includes effect of GF backfill necessitated by IMD phasedown.
13 DVHA	ACO Settlement		Funds due from DVHA to ACO for the CY 2021 reconciliation payment.
14 DVHA	Rate increases for FQHCs and Hospice		Federally mandated rate increases
15 DVHA			
16 VDH	Buy-In Increase	431,441	Final CEV22 ADC actimated Carries Lovel Agreement eacts in success of here funding
	SLA charges		Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
17 DMH	UVMMC contract increases		One-time costs associated with the fit-up on the new secure residential.
18 DMH	Travel nurse contracts		Increased traveler contract costs.
19 DMH	WCMH micro residential provider increase	18,502	
20 DMH	PNMI one-time inflation adjustment to rates		One-time inflation factor adjustment to SFY23 rates
21 DMH	S.3 VLA evaluations		One-time funds were provided for SFY22.
22 DMH	SLA charges	34,578	Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
23 DCF	Transitional Housing Complex Case Mgt.	100,000	Cross departmental effort to appropriately match TH HHs to services for which they may be eligible
24 DCF	SLA charges	208,819	Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
			Social workers are being asked to support crisis staffing during nights and on weekends as a result of
24 DCF	Contract for FSD crisis staffing	344,144	levels of need. Contracted staffing would provide necessary coverage while preventing FSD staff burr
25 DCF	TCM revenue replacement	7,013,534	TCM statistics based on Medicaid claims data overstated GC eligible staffing/indirect costs in SFYs 19-
26 DCF	BARJ GC expansion		Rate update.
27 DCF	PNMI one-time inflation adjustment to rates	858,337	One-time inflation factor adjustment to SFY23 rates
28 DCF	Reach Up caseload		Low-range LBP caseload assumption
29 DAIL	SNF high acuity contract start up costs	1,085,752	Specialized care for high-needs individuals otherwise placed in hospital settings.
30 DAIL	SLA charges	35,795	Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
31 DAIL	TBI Caseload Increase	174,022	Caseload trend.
32 DAIL	SASH	216,591	
			DS client crisis needs currently outstrip statewide capacity. This would provide two additional beds for
33 DAIL	UVS Crisis beds SoC need	673,137	statewide placements, and necessary start-up costs.
			The acuity of 5 current clients requires services that cannot otherwise be funded by base caseload
34 DAIL	DS Public Safety "outlier" cases	543,210	appropriations for Act 248.
			The Vermont Veterans' Home (VVH) settles actual eligible costs as compared to an interim rate. The
35 DAIL	VVH cost settlement for SFY21	1,749,209	current complete cost data available are for 2021.
			Aside from funding for the 1% statutory reserve and carryforward plan, the remaining need is a com
			of funding anticipated needs specific to NHs as they emerge from the pandemic and continue to requ
36 DAIL	CFC 1% reserve/carryforward, SNF Med. Dir. Grants, NH inflation factor adjustment, and EFRs	7,585 125	funding assistance (e.g., EFRs).
37 DOC	Recruitment & Retention Incentives		Funding for staff recruitment and retention incentives pursuant to a CBA side-letter.
38 DOC	FY22 carryforward spending authority reverting to GF and reappropriated for Pay Act		Pay Act funding
39 DOC	SLA charges		Final SFY23 ADS estimated Service Level Agreement costs in excess of base funding
33 000		18,201	Based on current utilization of the contract, additional funding will be needed for SFY23 prior to reiss

Agency of Human Services - FY23 BAA						
Summary of Changes and Reduction Proposals from the FY23 Budget - General Fund Impact						
Changes from	FY23 Budget					
Change #	Department	Description	Gov Rec Position GF			
Reduction Proposals			(127,226,805)			
	AHS GC	New Adult Case & Utilization	(16,571,433)	Updated per the Consensus Forecast process. To be adopted by the E-Board in January 2022.		
2	AHS GC	6.2% FMAP bump due to extension of PHE	(86,134,482)			
-	AHS GC	Increased GME for UVMMC offset by using IGT as match		UVMMC provides matching funds via an IGT.		
4	AHS GC	Use of carryforward for caseload and utilization	(7,483,400)	Carry-forward from FY22 for Medicaid Caseload & Utilization.		
		AHS CO Reductions	(119,529,383)			
5	DVHA	Carryforward from SFY22 into SFY23 for Non-waiver and State Only approps.	(1,908,497)	Carry-forward from FY22 for Medicaid Caseload & Utilization.		
		DVHA Reductions	(1,908,497)			
e	DMH	Vacancy Savings	(1,330,049)			
		DMH Reductions	(1,330,049)			
				Funding for the Balanced and Restorative Justice program is now GC Investment-eligible. This is a technical		
7	DCF	BARJ funding adjustment	(316,206)	adjustment to reflect this change.		
		DCF Reductions	(316,206)			
				Vacancy savings currently projected due to recruitment challenges that will resolve as hiring incentives take		
8	DOC	Unbudgeted vacancy savings and OT savings	(4,142,670)	effect. There are anticipated OT savings due to the temporary 12 hour-shift.		
		DOC Reductions	(4,142,670)			
One-time Appropriations						
				Capital and operating for diversification of inpatient beds for youths (SVMC siting/permit & CON costs),		
1		One-time AHS GF appropriations	6,575,000	Refugee support, CARES housing vouchers		
2	2	Funds available due to net-GF savings attributed to the PHE enhanced FMAP	50,450,683			
		AHS POSITION	(0)			