| Section | Agency/Dept. | Program Name | Proposal/Description | Gross Dollars | General Fund | One-Time / Base | HHC Position | Priority | Notes | |
|------------------------|-----------------------|--|---|---------------|--------------|----------------------------|---------------------------------------|----------|---|---|
| Governor's Recommend | One Time Fundir | ng | | | | | | | | |
| E.1100 (e.)(1) | AHS-CO/DVHA | Blueprint, CHT and SASH Programs | ACO Transition-Bridge Funding. Authorize GF dollars to pull down Medicaid to AHS-CO then transfer to DVHA for distrivution to Blueprint. | \$ 10,800,000 | \$ 4,448,520 | One-Time | | | (1) \$4.448.520 General Fund and \$6,351.480 Federal Funds for the Department of Vermont Health Access's Global Commitment appropriation for the Support and Services at Home (SASH), Primary Care Medical Home (PCMH) and Community Health Team (CHT) serviced under the Blueprint for Health. | |
| | DMH/DCF/DVHA | Annualize PRTF Budget | 15 in-state PRTF beds at the Brattleboro Retreat. DVHA will process the claims for these services. Last year the DVHA budget received \$3.55 million for the FY25 partial year cost of these beds. This amount brings the PRTF total annualized budget amount for SY26 to \$7.81 million. | \$ 4,261,269 | \$ 1,755,217 | One-Time | | | A Psychiatric Residential Treatment Facility (PRTF) is a facility that has a provider agreement with a State Medicaid Agency to provide a residential inpatient psychiatric service benefit to Medicaid-eligible individuals under the age of 21. | |
| Governor's Recommend | Base Funding IGMCB | GMCB Base | Staffing and contracting | \$ 750,000 | \$ 350,000 | Base | 1 | | The difference comes from Billback | |
| B.307 | DVHA | Medicare Savings Program (MSP) Expansion enacted - | Combined QMB 145% and VPharm GC impact | \$ 7,114,153 | | | | | The difference comes from Billiback | |
| B.314 | DMH | Alternatives to Emergency Depts | Mental Health Urgent Care | \$ 866,233 | \$ 866,233 | Base | | | | |
| B.314 | DMH | First Call and Embedded Clinicians in Pediatric Offices | (Howard Center and Northeast Kingdom Human Services) | \$ (538,822) | \$ (269,411) | Base | | | Cut 5 first call and 1 position embedded in primary care | |
| B314 | DMH | Howard Center | Community Outreach Program | \$ (160,000) | \$ (160,000) | Base | Keep for one more year. | | Funding cut from existing Gov Budget | |
| House Health Care Reco | mmended Fundin | | | | _ | _ | | | | |
| | DVHA | Medicare Savings Program (MSP) Expansion enacted - | QMB 145% to 150% | \$ 2,416,051 | \$ 416,766 | | generally supportive | | Aligns format of FPL cost for low income subsidy lists with those on QMB, lending administrative savings. | |
| | AHS-CO/DVHA | Blueprint, CHT and SASH Programs | Mental Health Integration-CHT continuation | \$ 3,100,000 | | One-Time | | | funds gap period between adopting AHEAD and end of Blueprint Pilot \$1.6 M ??? | |
| | AHS-CO/DVHA | Blueprint | Allpayer Impact | | | One-Time | | | \$3.78 M Onecare CPR Bridge Funds Needed 2026 \$2.1 M: ??? \$14.6 M Pop Health Mgmt Payments. currently funded by hospital payments and dues to ACO and Onecare. \$4.8 comes through DVHA. \$9.36 gap. | |
| | VDH | Bridges to Health | | \$ 675,000 | \$ 675,000 | One-Time | Support | | \$675k for this year going forward, but \$900 in the base. | |
| | OPR | Mental Health Executive Officer | Supports 1 FTE to carry out next steps to streamline mental health provider licensing. | \$ 170,000 | \$ 170,000 | One-Time | Supporrt | | Secretary of State's Office | |
| | VDH | Vermont Network - Sexual Assault Nurse Examiner (SANE) Program | \$4.1 million contingency fund for domestic and sexual violence organizations, for use if reductions in federal funding jeopardize services. | \$ 4,100,000 | \$ 4,100,000 | One-Time | Need more info to make decision | | Contingency fund for domestic and sexual violence organizations, for use if reductions in federal funding jeopardize services. | |
| | DMH | Cathedral Square | SASH for All pilot | \$ 400,000 | \$ 400,000 | One-Time | generally supportive | | This is to continue our current pilot serving almost 300 adults and children in Brattleboro. | |
| | DMH | Cathedral Square | Dental Health | \$ 40,000 | \$ 40,000 | One-Time | generally supportive | | To be able to host on site dental clinics throughout the state. | |
| | DMH | Cathedral Square | Annual Wellness Visits | \$ 10,000 | \$ 10,000 | One-Time | generally supportive | | Preforming annual Medicare wellness visits in the home. | |
| | DMH | Cathedral Square | SASH expansion | \$ 2,000,000 | \$ 2,000,000 | One-Time | generally supportive | | expansion of SASH for All - to 10 new SASH panels across the state. | |
| | DMH | Cathedral Square | Mental health clinicians | \$ 75,000 | \$ 75,000 | One-Time | generally supportive | | Mental Health Clinicians - this is to support our mental health pilot after October 2025. | |
| | VDH/DVHA | Vermont Medical Society | Maple Mountain Consortium family medicine residency program | \$ 4,060,000 | | Funds for SFY2026-2028. | | | Program creates a new primary care pipeline and will train 4 family medicine trainees per year between Gifford and Lamoille Health Partners/Copley Hospital starting in July 2026. Likely matchable by Global Commitment. | |
| | VDH | Vermont Medical Society | One time funding to transition OneCare Participating Primary Care Providers | \$ 4,678,966 | \$ 4,678,966 | One-Time | | | One fiscal year's loss of Population Health Model (PHM) Program funding for all OneCare Participating primary care practices | |
| | DVHA/VDH | Vermont Medical Society | Comprehensive Payment Reform | \$ 835,342 | \$ 835,342 | Base | | | Comprehensive Payment Reform independent primary care prospective payment program | - |
| | VDH | Vermont Medical Society | Medical Student Incentive Scholarship Program | \$ 500,000 | \$ 500,000 | One-Time | | | Continue the Medical Student Incentive Scholarship Program Provides scholarships for up to 10 third- and fourth-year UVM medical students who commit to practicing primary care outside of Chittenden County. To date 22 scholarships have been awarded. The program is scheduled to sunset July 1, 2027. Please remove the 2027 sunset and invest \$500,000 per year for this vital recruitment and retention tool. | |
| | VDH | American Heart Association | Implement cardiac emergency response plans in VT schools | \$ 150,000 | \$ 150,000 | One-Time | | | Provides a grant program for Vermont schools most in need of resources to help implement cardiac emergency response plans. | |
| | VDH/DMH | Emergency Service Providers | Invest in a Statewide ESP Peer Support/Mental Health Service for all Emergency Service Provider Sectors | \$ 160,000 | \$ 160,000 | One-Time | | | The Commission recommends funding SECURE-Vermont Peer Network for \$160,000 during SFY 2026. SECURE is currently funded through a federal grant (CDC grant through | |
| | VDH/DMH | Emergency Service Providers | Fund Mental Health Training for ESPs Across all Sectors | \$ 50,000 | \$ 50,000 | One-Time | | | The Commission recommends allocating \$50,000 to support mental health-focused training. This would allow all ESP sectors to receive the same opportunity to receive mental health training, reducing the disparity of training opportunities between different ESP sectors. | |
| - | | | Fund Emergency Services Provider Mental Health | | | | | | The Commission plans to convene a stakeholder mental health-focused meeting as a forum for emergency services providers, town officials, elected officials, and other key | |
| | VDH/DMH | Emergency Service Providers | Stakeholder Meetings | \$ 10,000 | \$ 10,000 | One-Time | | | stakeholders to discuss the ongoing needs and lack of resources available to emergency services providers and their departments. | |

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| | VDH | Vermont Network | Sexual Assault Nurse Examiner (SANE) Program | \$ 1,200,000 | \$ 1,200,000 | Base | | | Provides trauma-informed medical care and evidence collection to victims of domestic and sexual violence. It is one of many services for survivors of violence in Vermont that are 100% federally funded. This would be for their annual base budget. | |
| | DMH | Vermont Care Partners | Provider Rate Increase | \$ 13,900,000 | \$ 13,900,000 | Base | | | Gov Budget level funds DAs. A 6.2% Medicaid rate increase is needed to provide essential services to Vermonters. Each 1% increase would require \$2.25M in State GF, using the FY26 match rate of 41.2% | |
| | DVHA | VLA-Health Care Advocate | Adult dental cap \$150 to \$2000 | \$ 645,500 | | | | | assume reg. match rate | |
| | GMCB | Green Mountain Care Board | Two positions to support pursuit of AHEAD Model | \$ 337,500 | \$ 135,000 | Base | | | If AHEAD happens. 2 permanent and 2 limited services (data automation/efficiency) positions. These positions are in addition to the 3 positions recommended in the Gov's budget rec. | |
| | GMCB | Green Mountain Care Board | Two limited services positions (data and reporting coordinators) | \$ 200,000 | \$ 80,000 | One-time | | | 2 limited services (12-month) positions for data automation/efficiency. | |
| House Health Care Reimb | oursement Rate F | Recommendations | | | | | | | | |
| | DVHA | Bi-State and Community Health | To bring FQHC Medicaid rates more in line with the cost | \$ 5,000,000 | \$ 5,000,000 | Base | | | | |
| | DVHA | Centers Vermont Medical Society | of providing care to Medicaid enrolees Medicare Economic Index Inflation - Provider Fee Schedule Adjustment | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Base | | | Adjust fee schedules for the cost of providing care: The Medicaid professional (RBRVS) fee schedule should adjust to account for the Medicare Economic Index inflation measure of 3.5% and FQHC encounter rate should reflect | |
| | VDH | Bi-State FQHCs | Increase Medicaid rates | \$ 5,000,000 | | Base | | | the cost of care. | |
| | DVHA/VDH | PPNNE | Increase rates to family planning E&M and CPT codes Bring Home Health rates to 90% of Medicare (at 67% | | | | | | | |
| | DVHA | Home Health | now) | \$ 2,992,572 | \$ 1,232,940 | Base | | | | |
| HHC Other Recommenda | tions | I | | I | I | 1 | 1 | 1 | T | |
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| Language Needed | VDH/DVHA | GMCB | Make pool positions classified | | | | | | | |
| | | Health First Independent Practice | | | | | | | Were there any financial requests? | |
| | | Vermont Medical Society | Remove Sunset of Medical Student Incentive Scholarship Program | | | | | | The Medical Student Incentive Scholarship Program is scheduled to sunset in 2027> they also request removal of the sunset | |
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