

## Final Proposed Filing - Coversheet

### Instructions:

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

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

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

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

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

**Ambulance Services**

/s/ Kristin L. McClure , on 8/21/24  
(signature) (date)

Printed Name and Title:

Kristin McClure, Interim Deputy Secretary, Agency of Human Services

RECEIVED BY: \_\_\_\_\_

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

1. TITLE OF RULE FILING:

**Ambulance Services**

2. PROPOSED NUMBER ASSIGNED BY THE SECRETARY OF STATE

24P025

3. ADOPTING AGENCY:

Agency of Human Services (AHS)

4. PRIMARY CONTACT PERSON:

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

Name: Ashley Berliner

Agency: Agency of Human Services

Mailing Address: 280 State Drive, Waterbury, VT 05671-1000

Telephone: 802-578-9305 Fax: 802-241-0450

E-Mail: ahs.medicaidpolicy@vermont.gov

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

<https://humanservices.vermont.gov/rules-policies/health-care-rules>

5. SECONDARY CONTACT PERSON:

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

Name: Grace Johnson

Agency: Agency of Human Services

Mailing Address: 280 State Drive, Waterbury, VT 05671-1000

Telephone: 802-760-8128 Fax: 802-241-0450

E-Mail: grace.e.johnson@vermont.gov

6. RECORDS EXEMPTION INCLUDED WITHIN RULE:

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

IF YES, CITE THE STATUTORY AUTHORITY FOR THE EXEMPTION:

Not applicable

PLEASE SUMMARIZE THE REASON FOR THE EXEMPTION:

Not applicable

7. LEGAL AUTHORITY / ENABLING LEGISLATION:

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

3 V.S.A. § 801(b)(11), 33 V.S.A. § 1901(a)(1)

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

AHS' authority to adopt rules as identified in the above section includes, by necessity, authority to amend rules to ensure continued alignment with federal and state guidance and law. The statutes authorize AHS as the adopting authority for administrative procedures and afford rulemaking authority for the administration of Vermont's medical assistance programs under Title XIX (Medicaid) of the Social Security Act.

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

**10. THE AGENCY HAS NOT INCLUDED WITH THIS FILING A LETTER EXPLAINING IN DETAIL WHAT CHANGES WERE MADE, CITING CHAPTER AND SECTION WHERE APPLICABLE.**

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

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

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

**14. CONCISE SUMMARY (150 WORDS OR LESS):**

This Health Care Administrative Rule sets forth the criteria for coverage of ambulance services under Vermont's Medicaid program. It updates the language to include coverage of treatment without transportation and add additional provider types who may provide services under an enrolled ambulance provider to the Health Care Administrative Rules.

**15. EXPLANATION OF WHY THE RULE IS NECESSARY:**

The rule is necessary to define coverage for ambulance services. This amendment aligns with federal and state guidance and law, improves clarity, and makes technical corrections. The revisions in this version of the rule

include the addition of treatment without transportation as well as the addition of provider types who may provide services under an enrolled ambulance provider.

**16. EXPLANATION OF HOW THE RULE IS NOT ARBITRARY:**

The rule is required to implement state and federal health care guidance and laws. Additionally, the rule is within the authority of the Secretary, is within the expertise of AHS, and is based on relevant factors including consideration of how the rule affects the people and entities listed below.

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

Medicaid beneficiaries, Agency of Human Services including its Departments; Hospitals, Health law, policy, and related advocacy and community-based organization and groups including the Office of the Health Care Advocate; and health care providers.

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

The rule does not increase or lessen an economic burden on any person or entity including no impact on the State's gross annualized budget. The changes and amendments conform the rules with current practice and changes to federal and state laws that have already been implemented.

**19. A HEARING WAS HELD.**

**20. HEARING INFORMATION**

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

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

Date: 8/7/2024

Time: 12:00 PM

Street Address: Virtual Hearing only- Phone or Microsoft Teams call in 802-828-7667, Phone Conference ID:83494679#; Teams link and information were posted in the Global Commitment Register online as well.

Zip Code:

URL for Virtual: [https://teams.microsoft.com/l/meetupjoin/19%3ameeting\\_ZjNmMTVmNzItYmJhZi00MDZmLTg1NWEtNzM1NGF1Mzc1OWQ3%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c0270edcc7559c6%22%2c%22Oid%22%3a%22e1e11d2c-11af-4bb4-9727-4c26e6ac5311%22%7d](https://teams.microsoft.com/l/meetupjoin/19%3ameeting_ZjNmMTVmNzItYmJhZi00MDZmLTg1NWEtNzM1NGF1Mzc1OWQ3%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c0270edcc7559c6%22%2c%22Oid%22%3a%22e1e11d2c-11af-4bb4-9727-4c26e6ac5311%22%7d)

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Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

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Date:

Time: AM

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Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

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

8/14/2024

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

Medicaid

Health Care Administrative Rule

HCAR

Transportation

Ambulance

Ambulance Services

Emergency Transportation

Treatment without Transportation



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**State of Vermont**  
**Agency of Human Services**  
Office of the Secretary  
280 State Drive  
Waterbury, VT 05671-1000  
[www.humanservices.vermont.gov](http://www.humanservices.vermont.gov)

*Jenney Samuelson, Secretary*

[phone] 802-241-0440  
[fax] 802-241-0450

**MEMORANDUM**

**To:** Sarah Copeland Hanzas, Secretary of State, Vermont Secretary of State Office  
Representative Trevor Squirrell, Chair, Legislative Committee on Administrative Rules (LCAR)

**From:** Ashley Berliner, Director of Health Care Policy and Planning, Department of Vermont Health Access

**Cc:** Charlene Dindo, Committee Assistant, LCAR  
Monica Hutt, Chief Prevention Officer and Liaison, Agency of Administration  
Jenney Samuelson, Secretary, Agency of Human Services

**Date:** August 22, 2024

**Re:** Health Care Administrative Rules

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Please find enclosed the final proposed rule filing from the Agency of Human Services for the following rules:

Amended:

- 24P025: Ambulance Services

A public hearing was held on August 7, 2024, and the public comment period ended August 14, 2024. No comments were received. No changes have been made since the filing of the proposed rules.

If you have any questions regarding these rules, please contact Grace Johnson, Health Care Policy Analyst, at 802-760-8128.

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



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

JENNEY SAMUELSON  
SECRETARY

TODD W. DALOZ  
DEPUTY SECRETARY

STATE OF VERMONT  
AGENCY OF HUMAN SERVICES

MEMORANDUM

**TO:** Sarah Copeland Hanzas, Secretary of State

**FROM:** Jenney Samuelson, Secretary, Agency of Human Services

A handwritten signature in blue ink, appearing to be "Jenney Samuelson".

**DATE:** August 6, 2024

**SUBJECT:** Signatory Authority for Purposes of Authorizing Administrative Rules

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

CC: KristinMcClure@vermont.gov



## Adopting Page

### **Instructions:**

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

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

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

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1. TITLE OF RULE FILING:

**Ambulance Services**

2. ADOPTING AGENCY:

Agency of Human Services (AHS)

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

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

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

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

SOS Log#: 21-004, Ambulance Services Rule (4.226),  
Effective April 1, 2021.



## INTERAGENCY COMMITTEE ON ADMINISTRATIVE RULES (ICAR) MINUTES

**Meeting Date/Location:** May 13, 2024, virtually via Microsoft Teams  
**Members Present:** Chair Sean Brown, Diane Sherman, Jared Adler, Jennifer Mojo, Michael Obuchowski, Natalie Weill, and Nicole Dubuque  
**Members Absent:** John Kessler  
**Minutes By:** Melissa Mazza-Paquette

- 2:04 p.m. meeting called to order, welcome and introductions.
- Review and approval of [minutes](#) from the April 4, 2024 meeting.
- No additions/deletions to agenda. Agenda approved as drafted.
- No public comments made.
- Presentation of Proposed Rules on pages 2-7 to follow.
  1. Recovery Services Organization Certification Rule, Vermont Department of Health, page 2
  2. Ambulance Services, Agency of Human Services, page 3
  3. Beneficiary Protections and Responsibilities, Agency of Human Services, page 4
  4. Marriage Ceremony For Incarcerated Individuals, Department of Corrections, page 5
  5. 2024 Materials Management Plan, Agency of Natural Resources, page 6
  6. Agency Designation, Agency of Human Services, page 7
- Next scheduled meeting is June 10, 2024 at 2:00 p.m.
- 3:08 p.m. meeting adjourned.

**Proposed Rule: Ambulance Services, Agency of Human Services**  
**Presented By: Grace Johnson**

Motion made to accept the rule by Sean Brown, seconded by Jen Mojo, and passed unanimously except for Natalie Weill who abstained, with the following recommendation:

1. Proposed Rule, 4.226.4 (c)(3): Review language for instances when the beneficiary and medic don't agree if transport is necessary. Member Weill is available for discussion as needed.

## Economic Impact Analysis

### **Instructions:**

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

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

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

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1. TITLE OF RULE FILING:

**Ambulance Services**

2. ADOPTING AGENCY:

Agency of Human Services (AHS)

3. CATEGORY OF AFFECTED PARTIES:

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

Potentially affected by the adoption of this rule:  
Medicaid beneficiaries, Agency of Human Services including its Departments; Hospitals, Health law, policy, and related advocacy and community-based organizations and groups including the Office of the Health Care Advocate; and health care providers.

There are no additional costs associated with this rule because the amendments reflect existing practice and coverage policies for Medicaid in Vermont.

4. **IMPACT ON SCHOOLS:**

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

No impact.

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

Not applicable.

6. **IMPACT ON SMALL BUSINESSES:**

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

No impact.

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

Not applicable.

8. **COMPARISON:**

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

There is no economic impact for there to be a comparison.

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

There are no additional costs associated with this rule because the amendments reflect existing practice and coverage policies for Medicaid in Vermont. There are no alternatives to the adoption of this rule; it is necessary to ensure continued alignment with federal and state guidance and law for covered services and benefits within Vermont's Medicaid program.



## Environmental Impact Analysis

### **Instructions:**

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

Examples of Environmental Impacts include but are not limited to:

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

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1. TITLE OF RULE FILING:

**Ambulance Services**

2. ADOPTING AGENCY:

Agency of Human Services (AHS)

3. GREENHOUSE GAS: *EXPLAIN HOW THE RULE IMPACTS THE EMISSION OF GREENHOUSE GASES (E.G. TRANSPORTATION OF PEOPLE OR GOODS; BUILDING INFRASTRUCTURE; LAND USE AND DEVELOPMENT, WASTE GENERATION, ETC.):*  
No impact.

4. WATER: *EXPLAIN HOW THE RULE IMPACTS WATER (E.G. DISCHARGE / ELIMINATION OF POLLUTION INTO VERMONT WATERS, THE FLOW OF WATER IN THE STATE, WATER QUALITY ETC.):*  
No impact.

5. LAND: *EXPLAIN HOW THE RULE IMPACTS LAND (E.G. IMPACTS ON FORESTRY, AGRICULTURE ETC.):*  
No impact.

6. RECREATION: *EXPLAIN HOW THE RULE IMPACTS RECREATION IN THE STATE:*  
No impact.

7. **CLIMATE:** *EXPLAIN HOW THE RULE IMPACTS THE CLIMATE IN THE STATE:*  
No impact.
8. **OTHER:** *EXPLAIN HOW THE RULE IMPACT OTHER ASPECTS OF VERMONT'S ENVIRONMENT:*  
No impact.
9. **SUFFICIENCY:** *DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*  
This rule has no impact on the environment.

## Public Input Maximization Plan

### **Instructions:**

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

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

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1. TITLE OF RULE FILING:

**Ambulance Services**

2. ADOPTING AGENCY:

Agency of Human Services (AHS)

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

AHS shared the proposed rule with Vermont Legal Aid, Vermont Medical Society, Vermont Association of Hospitals and Health Systems, Vermont Care Partners, Bi-State Primary Care Association, and the VNAs of Vermont on 2/12/2024. No comments were received. AHS shared the proposed rule with the Ambulance Association and Vermont Department of Health on 2/28/24. No comments were received.

AHS notified the Medicaid and Exchange Advisory Committee (MEAC) on 2/22/2024 including the estimated timeframe for filing and the proposed amendments to the rule. No comments were received.



## Public Input

The rule was presented to ICAR on May 13, 2024. Changes were made to the rule in response to comments from ICAR.

When a rule is filed with the Office of the Secretary of State, AHS provides notice and access to the rule through the Global Commitment Register (GCR). The GCR provides notification of policy changes and clarifications of existing Medicaid policy, including rulemaking, under Vermont's 1115 Global Commitment to Health waiver. Anyone can subscribe to the GCR.

Proposed, final proposed, and adopted rules, including all public comments and responses to rulemaking, are posted to the GCR. Subscribers receive email notifications of rule filings including hyperlinks to posted documents and an explanation of how to provide comment and be involved in the rulemaking.

This proposed rule was posted to the GCR and was open for public comment from July 3, 2024 - August 14, 2024. No comments were received.

The public hearing for this proposed rule was held on August 7, 2024. No comments were received during the hearing.

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

Agency of Human Services, and the Department of Vermont Health Access;

the Vermont Department of Health;

the Division of Emergency Preparedness, Response, and Injury Prevention;

**Public Input**

Vermont Legal Aid;

Vermont Medical Society;

Vermont Association of Hospitals and Health Systems;

Vermont Care Partners;

Bi-State Primary Care Association;

Medicaid and Exchange Advisory Committee.

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Ambulance Services

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4.226 Ambulance Services (XX/XX/2024, GCR 24-XXX)4.226.1 Definitions

The following definition shall apply for use in Rule 4.226:

(a) **“Ambulance”** means any vehicle, whether for use by air, ground, or water, that is primarily designed, used, or intended for use in transporting ill or injured persons.

**(b) “Treatment without Transportation” means when any medically necessary treatment is provided at the scene of an accident or medical event when no transportation occurs.**

4.226.2 Covered Services

(a) Transportation via ambulance is covered for the following:

- (1) Emergency services, as described in Rule 4.102, and
- (2) Non-emergency services when the conditions for coverage under this rule are met.

**(b) Treatment without transportation when conditions for coverage under this rule are met.**

4.226.3 Eligibility for Care

Vermont Medicaid covers medically necessary ambulance services for Medicaid beneficiaries for whom other methods of treatment or transportation would be medically contraindicated. No payment will be made when some less costly means of transportation other than an ambulance could have been used without endangering the individual’s health.

4.226.4 Qualified Providers

a) Ambulance providers currently enrolled with Vermont Medicaid.

**b) Treatment without transportation must be provided by one of the following providers who are working under a Medicaid enrolled ambulance provider:**

- (1) “Emergency Medical Technicians” refers to any licensed Emergency Medical Technician (EMT) that may provide services within their scope of practice as defined under state law.**
- (2) “Advanced Emergency Medical Technicians” refers to any licensed Advanced Emergency Medical Technicians (AEMT) that may provide services within their scope of practice as defined under state law.**
- (3) “Paramedics” refers to any licensed Paramedics that may provide services within their scope of practice as defined under state law.**

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## Ambulance Services

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### 4.226.5 Conditions for Coverage

In order for ambulance services provided to eligible Medicaid beneficiaries to be covered, the following conditions must be met:

- (a) Any non-emergent ambulance service must be ordered by a physician or certified as to necessity by a physician at the receiving facility. If an ambulance provider is unable to obtain a signed physician certification statement from the beneficiary's attending physician, a signed certification statement must be obtained from either the physician assistant, nurse practitioner, clinical nurse specialist, licensed social worker, case manager, or discharge planner.
- (b) Ambulance transportation must be to or from a Medicaid covered service. Ambulance transportation will not be reimbursed if the covered service in question requires prior authorization, and such authorization was not obtained from Vermont Medicaid.

(c) Treatment without transportation is covered under the following conditions:

- (1) When emergency medical services are provided in response to a call originated through 9-1-1 or a first responder dispatch, and
- (2) The beneficiary consents to evaluation and treatment, and
- (3) Evaluation or treatment are rendered to the beneficiary in accordance with the Statewide Emergency Medical Services (EMS) Protocols published by the Department of Health, and
- (4) The beneficiary does not desire transport to an emergency department for further evaluation, and
- (5) The beneficiary provides written refusal of transportation, and
- (6) The beneficiary is not transported by the responding service provider.

### 4.226.6~~7~~ Non-Covered Services

Ambulance services from hospital-to-facility for the provision of outpatient services that are not available at the originating hospital must be paid for by the originating hospital and should not be separately billed to Vermont Medicaid.

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Ambulance Services

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4.226 Ambulance Services (XX/XX/2024, GCR 24-XXX)

4.226.1 Definitions

The following definition shall apply for use in Rule 4.226:

- (a) **“Ambulance”** means any vehicle, whether for use by air, ground, or water, that is primarily designed, used, or intended for use in transporting ill or injured persons.
- (b) **“Treatment without Transportation”** means when any medically necessary treatment is provided at the scene of an accident or medical event when no transportation occurs.

4.226.2 Covered Services

- (a) Transportation via ambulance is covered for the following:
  - (1) Emergency services, as described in Rule 4.102, and
  - (2) Non-emergency services when the conditions for coverage under this rule are met.
- (b) Treatment without transportation when conditions for coverage under this rule are met.

4.226.3 Eligibility for Care

Vermont Medicaid covers medically necessary ambulance services for Medicaid beneficiaries for whom other methods of treatment or transportation would be medically contraindicated. No payment will be made when some less costly means of transportation other than an ambulance could have been used without endangering the individual’s health.

4.226.4 Qualified Providers

- a) Ambulance providers currently enrolled with Vermont Medicaid.
- b) Treatment without transportation must be provided by one of the following providers who are working under a Medicaid enrolled ambulance provider:
  - (1) **“Emergency Medical Technicians”** refers to any licensed Emergency Medical Technician (EMT) that may provide services within their scope of practice as defined under state law.
  - (2) **“Advanced Emergency Medical Technicians”** refers to any licensed Advanced Emergency Medical Technicians (AEMT) that may provide services within their scope of practice as defined under state law.
  - (3) **“Paramedics”** refers to any licensed Paramedics that may provide services within their scope of practice as defined under state law.

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Ambulance Services

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4.226.5 Conditions for Coverage

In order for ambulance services provided to eligible Medicaid beneficiaries to be covered, the following conditions must be met:

- (a) Any non-emergent ambulance service must be ordered by a physician or certified as to necessity by a physician at the receiving facility. If an ambulance provider is unable to obtain a signed physician certification statement from the beneficiary's attending physician, a signed certification statement must be obtained from either the physician assistant, nurse practitioner, clinical nurse specialist, licensed social worker, case manager, or discharge planner.
- (b) Ambulance transportation must be to or from a Medicaid covered service. Ambulance transportation will not be reimbursed if the covered service in question requires prior authorization, and such authorization was not obtained from Vermont Medicaid.
- (c) Treatment without transportation is covered under the following conditions:
  - (1) When emergency medical services are provided in response to a call originated through 9-1-1 or a first responder dispatch, and
  - (2) The beneficiary consents to evaluation and treatment, and
  - (3) Evaluation or treatment are rendered to the beneficiary in accordance with the Statewide Emergency Medical Services (EMS) Protocols published by the Department of Health, and
  - (4) The beneficiary does not desire transport to an emergency department for further evaluation, and
  - (5) The beneficiary provides written refusal of transportation, and
  - (6) The beneficiary is not transported by the responding service provider.

4.226.6 Non-Covered Services

Ambulance services from hospital-to-facility for the provision of outpatient services that are not available at the originating hospital must be paid for by the originating hospital and should not be separately billed to Vermont Medicaid.

VERMONT **GENERAL ASSEMBLY**

# The Vermont Statutes Online

The Vermont Statutes Online does not include the actions of the 2024 session of the General Assembly. We expect them to be updated by November 1st.

NOTE: The Vermont Statutes Online is an unofficial copy of the Vermont Statutes Annotated that is provided as a convenience.

## **Title 3 : Executive**

### **Chapter 025 : Administrative Procedure**

#### **Subchapter 001 : General Provisions**

(Cite as: **3 V.S.A. § 801**)

#### **§ 801. Short title and definitions**

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

(b) As used in this chapter:

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

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

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

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

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

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

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



VERMONT **GENERAL ASSEMBLY**

# The Vermont Statutes Online

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## **Title 33 : Human Services**

### **Chapter 019 : Medical Assistance**

#### **Subchapter 001 : Medicaid**

(Cite as: 33 V.S.A. § 1901)

#### **§ 1901. Administration of program**

(a)(1) The Secretary of Human Services or designee shall take appropriate action, including making of rules, required to administer a medical assistance program under Title XIX (Medicaid) and Title XXI (SCHIP) of the Social Security Act.

(2) The Secretary or designee shall seek approval from the General Assembly prior to applying for and implementing a waiver of Title XIX or Title XXI of the Social Security Act, an amendment to an existing waiver, or a new state option that would restrict eligibility or benefits pursuant to the Deficit Reduction Act of 2005. Approval by the General Assembly under this subdivision constitutes approval only for the changes that are scheduled for implementation.

(3) [Repealed.]

(4) A manufacturer of pharmaceuticals purchased by individuals receiving State pharmaceutical assistance in programs administered under this chapter shall pay to the Department of Vermont Health Access, as the Secretary's designee, a rebate on all pharmaceutical claims for which State-only funds are expended in an amount that is in proportion to the State share of the total cost of the claim, as calculated annually on an aggregate basis, and based on the full Medicaid rebate amount as provided for in Section 1927(a) through (c) of the federal Social Security Act, 42 U.S.C. § 1396r-8.

(b) [Repealed.]

(c) The Secretary may charge a monthly premium, in amounts set by the General Assembly, per family for pregnant women and children eligible for medical assistance under Sections 1902(a)(10)(A)(i)(III), (IV), (VI), and (VII) of Title XIX of the Social Security Act, whose family income exceeds 195 percent of the federal poverty level, as permitted



under section 1902(r)(2) of that act. Fees collected under this subsection shall be credited to the State Health Care Resources Fund established in section 1901d of this title and shall be available to the Agency to offset the costs of providing Medicaid services. Any co-payments, coinsurance, or other cost sharing to be charged shall also be authorized and set by the General Assembly.

(d)(1) To enable the State to manage public resources effectively while preserving and enhancing access to health care services in the State, the Department of Vermont Health Access is authorized to serve as a publicly operated managed care organization (MCO).

(2) To the extent permitted under federal law, the Department of Vermont Health Access shall be exempt from any health maintenance organization (HMO) or MCO statutes in Vermont law and shall not be considered to be an HMO or MCO for purposes of State regulatory and reporting requirements. The MCO shall comply with the federal rules governing managed care organizations in 42 C.F.R. Part 438. The Vermont rules on the primary care case management in the Medicaid program shall be amended to apply to the MCO except to the extent that the rules conflict with the federal rules.

(3) The Agency of Human Services and Department of Vermont Health Access shall report to the Health Care Oversight Committee about implementation of Global Commitment in a manner and at a frequency to be determined by the Committee. Reporting shall, at a minimum, enable the tracking of expenditures by eligibility category, the type of care received, and to the extent possible allow historical comparison with expenditures under the previous Medicaid appropriation model (by department and program) and, if appropriate, with the amounts transferred by another department to the Department of Vermont Health Access. Reporting shall include spending in comparison to any applicable budget neutrality standards.

(e) [Repealed.]

(f) The Secretary shall not impose a prescription co-payment for individuals under age 21 enrolled in Medicaid or Dr. Dynasaur.

(g) The Department of Vermont Health Access shall post prominently on its website the total per-member per-month cost for each of its Medicaid and Medicaid waiver programs and the amount of the State's share and the beneficiary's share of such cost.

(h) To the extent required to avoid federal antitrust violations, the Department of Vermont Health Access shall facilitate and supervise the participation of health care professionals and health care facilities in the planning and implementation of payment reform in the Medicaid and SCHIP programs. The Department shall ensure that the process and implementation include sufficient State supervision over these entities to comply with federal antitrust provisions and shall refer to the Attorney General for appropriate action the activities of any individual or entity that the Department determines, after notice and an opportunity to be heard, violate State or federal antitrust

laws without a countervailing benefit of improving patient care, improving access to health care, increasing efficiency, or reducing costs by modifying payment methods. (Added 1967, No. 147, § 6; amended 1997, No. 155 (Adj. Sess.), § 21; 2005, No. 159 (Adj. Sess.), § 2; 2005, No. 215 (Adj. Sess.), § 308, eff. May 31, 2006; 2007, No. 74, § 3, eff. June 6, 2007; 2009, No. 156 (Adj. Sess.), § E.309.15, eff. June 3, 2010; 2009, No. 156 (Adj. Sess.), § I.43; 2011, No. 48, § 16a, eff. Jan. 1, 2012; 2011, No. 139 (Adj. Sess.), § 51, eff. May 14, 2012; 2011, No. 162 (Adj. Sess.), § E.307.6; 2011, No. 171 (Adj. Sess.), § 41c; 2013, No. 79, § 23, eff. Jan. 1, 2014; 2013, No. 79, § 46; 2013, No. 131 (Adj. Sess.), § 39, eff. May 20, 2014; 2013, No. 142 (Adj. Sess.), § 98; 2017, No. 210 (Adj. Sess.), § 3, eff. June 1, 2018.)

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# Proposed Rules Postings

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## Search Rules

### Deadline For Public Comment

Deadline: Aug 14, 2024

The deadline for public comment has expired. Contact the agency or primary contact person listed below for assistance.

### Rule Details

Rule Number:	24P025
Title:	Ambulance Services
Type:	Standard
Status:	Final Proposed
Agency:	Agency of Human Services
Legal Authority:	3 V.S.A. § 801(b)(11), 33 V.S.A. § 1901(a)(1)
Summary:	This Health Care Administrative Rule sets forth the criteria for coverage of ambulance services under Vermont's Medicaid program. It updates the language to include coverage of treatment without transportation and add additional provider types who may provide services under an enrolled ambulance

provider to the Health Care Administrative Rules. Medicaid beneficiaries, Agency of Human Services including its Departments; Hospitals, Health law, policy, and related advocacy and community-based organizations and groups including the Office of the Health Care Advocate; and health care providers.

**Persons Affected:** The rule does not increase or lessen an economic burden on any person or entity including no impact on the State's gross annualized budget. The changes and amendments conform the rules with current practice and changes to federal and state laws that have already been implemented.

**Economic Impact:**

**Posting date:** Jul 03,2024

## Hearing Information

### Information for Hearing # 1

**Hearing date:** 08-07-2024 12:00 PM [ADD TO YOUR CALENDAR](#)

**Location:** Virtually via MS Teams

**Address:** [https://teams.microsoft.com/l/meetupjoin/193ameeting\\_ZjNmMTVmNzItYmJhZi00MDZmLTg1NWEtNzM1NGFIMzcontext7b22Tid223a2220b4933b-baad-433c-9c0270edcc7559c6222c22Oid223a22e1e11d2c-11af-4bb4-9727-4](https://teams.microsoft.com/l/meetupjoin/193ameeting_ZjNmMTVmNzItYmJhZi00MDZmLTg1NWEtNzM1NGFIMzcontext7b22Tid223a2220b4933b-baad-433c-9c0270edcc7559c6222c22Oid223a22e1e11d2c-11af-4bb4-9727-4)

**City:** Call in option: 1-802-828-7667, Phone Conference ID:83494679#

**State:** VT

**Zip:** n/a

**Hearing Notes:** Call in option: 1-802-828-7667, Phone Conference ID:83494679#; or online : [teams.microsoft.com/l/meetupjoin/193ameeting\\_ZjNmMTVmNzItYmJhZi00MDZmLTg1NWEtNzM1NGFIMzcontext7b22Tid223a2220b4933b-baad-433c-9c0270edcc7559c6222c22Oid223a22e1e11d2c-11af-4bb4-9727-4](https://teams.microsoft.com/l/meetupjoin/193ameeting_ZjNmMTVmNzItYmJhZi00MDZmLTg1NWEtNzM1NGFIMzcontext7b22Tid223a2220b4933b-baad-433c-9c0270edcc7559c6222c22Oid223a22e1e11d2c-11af-4bb4-9727-4)

## Contact Information

### Information for Primary Contact

**PRIMARY CONTACT PERSON - A PERSON WHO IS ABLE TO ANSWER QUESTIONS**

**Level:** Primary

**Name:** Ashley Berliner

**Agency:** Agency of Human Services

**Address:** 280 State Drive

**City:** Waterbury

**State:** VT

Zip: 05671-1000  
Telephone: 802-578-9305  
Fax: 802-241-0450  
Email: [ashley.berliner@vermont.gov](mailto:ashley.berliner@vermont.gov)

[SEND A COMMENT](#)

Website Address: <https://humanservices.vermont.gov/rules-policies/health-care-rules/health-c>

[VIEW WEBSITE](#)

### Information for Secondary Cont

**SECONDARY CONTACT PERSON - A SPECIFIC PERSON FROM WHOM COPI MAY ANSWER QUESTIONS ABOUT FORMS SUBMITTED FOR FILING IF DIFF**

Level: Secondary  
Name: Grace Johnson  
Agency: Agency of Human Services  
Address: 280 State Drive  
City: Waterbury  
State: VT  
Zip: 05671-1000  
Telephone: 802-760-8128  
Fax: 802-241-0450  
Email: [grace.e.johnson@vermont.gov](mailto:grace.e.johnson@vermont.gov)

[SEND A COMMENT](#)

## Keyword Information

Keywords:

Medicaid  
Health Care Administrative Rule  
HCAR  
Transportation  
Ambulance  
Ambulance Serives  
Emergency Transportation  
Treatment without Transportation

[Back](#)



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VERMONT STATE ARCHIVES & RECORDS ADMINISTRATION (VSARA)  
(802) 828-2863

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<b>TO:</b>	Seven Days Legals ( <a href="mailto:legals@sevendaysvt.com">legals@sevendaysvt.com</a> )	Tel: (802) 865-1020 x110.
	The Caledonian Record Julie Poutré ( <a href="mailto:adv@caledonian-record.com">adv@caledonian-record.com</a> )	Tel: 748-8121 FAX: 748-1613
	Times Argus / Rutland Herald Melody Hudson ( <a href="mailto:classified.ads@rutlandherald.com">classified.ads@rutlandherald.com</a> ) Elizabeth Marrier <a href="mailto:elizabeth.marrier@rutlandherald.com">elizabeth.marrier@rutlandherald.com</a> )	Tel: 802-747-6121 ext 2238 FAX: 802-776-5600
	The Valley News ( <a href="mailto:advertising@vnews.com">advertising@vnews.com</a> )	Tel: 603-298-8711 FAX: 603-298-0212
	The Addison Independent ( <a href="mailto:legals@addisonindependent.com">legals@addisonindependent.com</a> )	Tel: 388-4944 FAX: 388-3100 Attn: Display Advertising
	The Bennington Banner / Brattleboro Reformer Lylah Wright ( <a href="mailto:lwright@reformer.com">lwright@reformer.com</a> ;	Tel: 254-2311 ext. 132 FAX: 447-2028 Attn: Lylah Wright
	The Chronicle ( <a href="mailto:ads@bartonchronicle.com">ads@bartonchronicle.com</a> )	Tel: 525-3531 FAX: 880-1040
	Herald of Randolph ( <a href="mailto:ads@ourherald.com">ads@ourherald.com</a> )	Tel: 728-3232 FAX: 728-9275 Attn: Brandi Comette
	Newport Daily Express ( <a href="mailto:jlafoe@newportvermontdailyexpress.com">jlafoe@newportvermontdailyexpress.com</a> )	Tel: 334-6568 FAX: 334-6891 Attn: Jon Lafoe
	News & Citizen ( <a href="mailto:mike@stowereporter.com">mike@stowereporter.com</a> ) Irene Nuzzo ( <a href="mailto:irene@newsandcitizen.com">irene@newsandcitizen.com</a> and <a href="mailto:ads@stowereporter.com">ads@stowereporter.com</a> .com removed from distribution list per Lisa Stearns.	Tel: 888-2212 FAX: 888-2173
	St. Albans Messenger Legals ( <a href="mailto:legals@samessenger.com">legals@samessenger.com</a> ; <a href="mailto:cfoley@orourkemediagroup.com">cfoley@orourkemediagroup.com</a> )	Tel: 524-9771 ext. 117 FAX: 527-1948 Attn: Legals
	The Islander ( <a href="mailto:islander@vermontislander.com">islander@vermontislander.com</a> )	Tel: 802-372-5600 FAX: 802-372-3025
	Vermont Lawyer ( <a href="mailto:hunter.press.vermont@gmail.com">hunter.press.vermont@gmail.com</a> )	Attn: Will Hunter

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**FROM:** APA Coordinator, VSARA

**Date of Fax:** July 1, 2024

**RE:** The "Proposed State Rules " ad copy to run on

**July 11, 2024**

**PAGES INCLUDING THIS COVER MEMO:**

**3**

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

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

## PROPOSED STATE RULES

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

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

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

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General Assistance Emergency Housing Assistance Emergency Rules.

Vermont Proposed Rule: 24-E06

AGENCY: Agency of Human Services

CONCISE SUMMARY: This emergency rule contains five amendments to the General Assistance program rules: (1) language regarding notices to terminate tenancy was added to the definition of constructive eviction in rule 2622; (2) language was added to rule 2650 authorizing DCF to withhold payments to hotels/motels in violation of lodging licensing rules; (3) the catastrophic and vulnerable populations eligibility categories in rules 2652.2 and 2652.3 have been replaced with the new eligibility criteria set forth in sec. E.321 of Act 113 of 2024; (4) the rule updates the basic needs standard chart in rule 2652.4 to align with the current Reach Up basic needs dollar amounts; and (5) the methodology for calculating the 30% income contribution in rule 2652.4 was changed from using the least expensive daily motel rate to either the current daily rate at the motel in which the temporary housing applicant is staying or if the applicant is not currently housed in a motel, the average daily rate.

FOR FURTHER INFORMATION, CONTACT: Heidi Moreau, Agency of Human Services, Department for Children and Families, 280 State Drive, NOB 1 North, Waterbury, VT 05671 Tel: 802-595-9639 Email: [Heidi.moreau@vermont.gov](mailto:Heidi.moreau@vermont.gov) URL: <https://dcf.vermont.gov/esd/laws-rules/current>.

FOR COPIES: Amanda Beliveau, Agency of Human Services, Department for Children and Families, 280 State Drive, HC 1 South, Waterbury, VT 05671 Tel: 802-241-0641 Email: [amanda.beliveau@vermont.gov](mailto:amanda.beliveau@vermont.gov).

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Judicial Nominating Board Rules.

Vermont Proposed Rule: 24P024

AGENCY: Judicial Nominating Board

CONCISE SUMMARY: The rules govern standards for screening judicial candidates. These amendments: update conflict of interest standards to conform to new legislation; reduce duplicative interviews; emphasize the importance of writing for Supreme Court candidates; and minor miscellaneous edits to conform to statute and practice.

FOR FURTHER INFORMATION, CONTACT: Eleanor Spottswood, Judicial Nominating Board Tel: 802-391-0061  
E-Mail: [eleanor.spottswood@gmail.com](mailto:eleanor.spottswood@gmail.com) URL: <https://www.vermontjudiciary.org/attorneys/judicial-nominating-information>.

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**NOTE:** The two rules below have been promulgated by the Agency of Human Services who has requested the notices be combined to facilitate a savings for the agency. When contacting the agency about these rules please note the title and rule number of the proposed rule(s) you are interested in.

- Ambulance Services (4.226)  
Vermont Proposed Rule: **24P025**
- Beneficiary Protections and Responsibilities (8.101)  
Vermont Proposed Rule: **24P026**

AGENCY: Agency of Human Services

CONCISE SUMMARY: The proposed rules set forth the criteria for coverage and service delivery for Health Care Administrative Rules (HCAR). The amendment to HCAR 8.101 replaces Medicaid covered services rule 7101 as part of the sequential adoption of Health Care Administrative Rules designed to improve public accessibility and comprehension of the rules concerning the operation of Vermont's Medicaid program. It also amends Health Care Administrative Rule 4.226 to align with current practice.

FOR FURTHER INFORMATION, CONTACT: Ashley Berliner Agency of Human Services 280 State Drive  
Waterbury, VT 05671-1000 Tel: 802-578-9305 Fax: 802-241-0450 E-Mail:  
[AHS.MedicaidPolicy@Vermont.gov](mailto:AHS.MedicaidPolicy@Vermont.gov) URL: <http://humanservices.vermont.gov/on-line-rules>.

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