MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Senior Staff Associate
Date: July 26, 2022
Subject: Position Request – JFO #3109

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration. This grant is being held for the JFC meeting scheduled for July 28, 2022.

**JFO #3109** – One (1) limited-service position to the VT Agency of Human Services, Department of Vermont Health Access. The Health Care Assistant Administrator II will manage grants and contracts from the expected increase in ARPA Medicaid funds. These funds will be reinvested into Home and Community Based Medicaid programs. The position is funded through 3/31/2024.

[Received July 26, 2022]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions prior to the JFC meeting scheduled for July 28, 2022.
**STATE OF VERMONT**

**Joint Fiscal Committee Review**

**Limited Service - Grant Funded Position Request Form**

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

**Agency/Department:** AHS/DVHA  
**Date:** 4/28/22

**Name and Phone (of the person completing this request):** Ashley Berliner 802-578-9305

**Request is for:**
- [☑] Positions funded and attached to an existing grant approved by JFO # Medicaid

1. **Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):**
   - Centers for Medicare & Medicaid Services (CMS); Medicaid Home and Community Based (HCBS) opportunity from Section 9817 of the American Rescue Plan Act of 2021

2. **List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:**

<table>
<thead>
<tr>
<th>Title* of Position(s) Requested</th>
<th># of Positions</th>
<th>Division/Program</th>
<th>Grant Funding Period/Anticipated End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Assistant Administrator II</td>
<td>1</td>
<td>DVHA Policy</td>
<td>March 31, 2024</td>
</tr>
</tbody>
</table>

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. **Justification for this request as an essential grant program need:**

   This unique opportunity from CMS will bring an estimated $162M to Vermont that will need to be reinvested into Home and Community Based Medicaid programs. The funding has a quick turnaround of less than three years. AHS/DVHA anticipates administering many contracts and grants to community partners for this program and will be designing and implementing required federal HCBS compliance activities that will dramatically impact the HCBS system of care by 2026. Successfully addressing the HCBS compliance work and optimizing the federal HCBS opportunity provided by the American Rescue Act of 2021 will require a dedicated and significant HCBS policy effort.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

**Signature of Agency or Department Head:**  
Aimee Pope  
Date: 6/16/2022

**Approved/Denied by Department of Human Resources:**  
Greshin  
Date: 6/22/2022

**Approved/Denied by Finance and Management:**

**Approved/Denied by Secretary of Administration:**

**Approved/Denied by Governor (required as amended by 2019 Leg. Session):**

**Comments:**

---

**DHR - 08/12/2019**
VERMONT DEPARTMENT OF PERSONNEL
Request for Classification Review
Position Description Form A

This form is to be used by managers and supervisors to request classification of a position (filled or vacant) when the duties have changed, and by managers and supervisors to request the creation of a new job class/title (for a filled, vacant, or new position), and by employees to request classification of their position.

This form was designed in Microsoft Word to download and complete on your computer. This is a form-protected document, so information can only be entered in the shaded areas of the form.

If you prefer to fill out a hard copy of the form, contact your Personnel Officer.

To move from field to field use your mouse, the arrow keys or press Tab. Each form field has a limited number of characters. Use your mouse or the spacebar to mark and unmark a checkbox.

Where additional space is needed to respond to a question, you might need to attach a separate page, and number the responses to correspond with the numbers of the questions on the form. Please contact your Personnel Officer if you have difficulty completing the form.

The form must be complete, including required attachments and signatures or it will be returned to the department's personnel office. All sections of this form are required to be completed unless otherwise stated.

INSTRUCTIONS: Tell us about the job. The information you provide will be used to evaluate the position. It will not be used in any way to evaluate an employee’s performance or qualifications.

Answer the questions carefully. The information you give will help ensure that the position is fairly evaluated.

Here are some suggestions to consider in completing this questionnaire:

Tell the facts about what an employee in this position is actually expected to do.

Give specific examples to make it clear.

Write in a way so a person unfamiliar with the job will be able to understand it.

Describe the job as it is now; not the way it was or will become.

Before answering each question, read it carefully.

To Submit this Request for Classification Review: If this is a filled position, the employee must sign the original* and forward to the supervisor for the supervisor’s review and signature. The Personnel Officer and the Appointing Authority must also review and sign this request before it is considered complete. The effective date of review is the beginning of the first pay period following the date the complete Request for Classification Review is date stamped by the Classification Division of the Department of Personnel.

An employee may choose to sign the form, make a copy, submit original to supervisor as noted above, while concurrently sending the copy to the Classification Division, 144 State Street, Montpelier, with a cover note indicating that the employee has submitted the original to the supervisor and is submitting the copy as a Concurrent filing.

If this is a request (initiated by employees, VSEA, or management) for review of all positions in a class/title please contact the appropriate Classification Analyst or the Classification Manager to discuss the request prior to submitting.
Request for Classification Review

Position Description Form A

For Department of Personnel Use Only

Date Received (Stamp)

Notice of Action #

Action Taken:

New Job Title

Current Class Code

New Class Code

Current Pay Grade

New Pay Grade

Current Mgt Level __ B/U __ OT Cat. __ EEO Cat. __ FLSA __

New Mgt Level __ B/U __ OT Cat. __ EEO Cat. __ FLSA __

Classification Analyst __________________________ Date __________

Effective Date: __________

Date Processed: __________

Comments:

Willis Rating/Components: Knowledge & Skills: ______ Mental Demands: ______ Accountability: ______

Working Conditions: ______ Total: ______

Incumbent Information:

Employee Name: __________ Employee Number: __________

Position Number: __________ Current Job/Class Title: __________

Agency/Department/Unit: __________ Work Station: __________ Zip Code: __________

Supervisor's Name, Title, and Phone Number: __________

How should the notification to the employee be sent: ☐ employee's work location ______ or ☐ other address, please provide mailing address: __________

New Position/Vacant Position Information:

New Position Authorization: TBD

Request Job/Class Title: Health Care Assistant Administrator II

Position Type: ☑ Permanent or ☐ Limited / Funding Source: ☑ Core, ☐ Partnership, or ☐ Sponsored

Vacant Position Number: __________ Current Job/Class Title: __________

Agency/Department/Unit: __________ Work Station: __________ Zip Code: __________

Supervisor's Name, Title, and Phone Number: Ashley Berliner, Director of Medicaid Policy

Type of Request:

☒ Management: A management request to review the classification of an existing position, class, or create a new job class.

☐ Employee: An employee's request to review the classification of his/her current position.
1. Job Duties

This is the most critical part of the form. Describe the activities and duties required in your job, noting changes (new duties, duties no longer required, etc.) since the last review. Place them in order of importance, beginning with the single most important activity or responsibility required in your job. The importance of the duties and expected end results should be clear, including the tolerance that may be permitted for error. Describe each job duty or activity as follows:

- **What** it is: The nature of the activity.
- **How** you do it: The steps you go through to perform the activity. Be specific so the reader can understand the steps.
- **Why** it is done: What you are attempting to accomplish and the end result of the activity.

For example, a Tax Examiner might respond as follows:

(What) Audits tax returns and/or taxpayer records.  
(How) By developing investigation strategy; reviewing materials submitted; when appropriate interviewing people, other than the taxpayer, who have information about the taxpayer's business or residency.  
(Why) To determine actual tax liabilities.

<table>
<thead>
<tr>
<th>WHAT: Monitor and analyze broad range of State and federal laws, regulations, and sub regulatory policy documents related to Medicaid Home and Community-Based Services.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOW: Monitor and be responsive to health care-related guidance, laws, and regulations on the State and federal level, and analyze their impact on the Medicaid program. Ensure any necessary policy and compliance actions are taken as a result of federal guidance. Raise new guidance or regulations to the attention of AHS leadership, alerting them to any impact of the change on Medicaid resources and potential risks associated with new requirements. This requires broad and deep knowledge of the Medicaid program across all departments and close relationships with department commissioners' offices and departmental staff to ensure new guidance and/or regulations are acted on. Provide expert advice on how to approach implementation and/or lead workgroups to facilitate implementation. This role is more Agency-focused as opposed to DVHA-focused. The revised tracking process better coordinates AHS staff when new federal policies are issued, and it serves as an effective tool for AHS leadership to receive a snapshot of new federal changes and their potential impact to Vermont. This position will facilitate and, when performed by another Policy Unit staff member, oversee this process to ensure that it continues to deliver the critical information needed regarding federal changes that leadership needs in a timely and coordinated manner.</td>
</tr>
<tr>
<td>WHY: AHS must be apprised of all new health care requirements and their impacts in order to maintain compliance with applicable laws and regulations, and timely updates on impacts are critical for AHS leadership when interacting the legislature and other external stakeholders.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WHAT: Provide AHS legislative support and Medicaid policy expertise on HCBS Medicaid.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOW: Provide advice to AHS leadership on the impacts of legislative proposals. Complete bill reviews that analyze and evaluate policy, fiscal, and interdepartmental administrative impacts on the Medicaid program, and the State as a whole. Recommend ways to improve legislative proposals. Create legislative talking points for leadership, respond to legislative inquiries with very short turnaround times, and sit in on testimony to take notes to identify areas of impact to Medicaid Departments and highlight critical areas for leadership follow-up. Requires engagement with State legislators as well as providers, lobbyists, and other advocates. Requires ability to perform complex analyses to resolve issues that fall in ambiguous areas of Medicaid policy. This role is Agency-focused, providing content expertise to all departments on legislative impacts, as opposed to just DVHA-focused.</td>
</tr>
</tbody>
</table>
WHY: The Agency needs staff who have a broad and deep understanding of the Medicaid program and can quickly distill and evaluate legislative bill requirements in order to assess Agency-wide impacts and provide timely State responses to legislative inquiries.

WHAT: Serve as HCBS policy lead to promulgate Medicaid administrative rules under the structures of AHS Health Care Administrative Rules (HCAR).

HOW: Conduct comprehensive policy review of state laws, federal laws, regulations, and operational practices and make recommendations for rule changes. Lead the development of regulatory rule content working with subject matter experts across AHS departments. Write administrative rule language according to a standard style using concise plain language that is easily understood. Conduct engagement with interdepartmental and external stakeholders as needed. Ensure that rules thoroughly and accurately describe Medicaid program eligibility, coverage, and service requirements in compliance with State and federal law. Work closely with legal staff to ensure rules comply with State and federal regulations. Ensure rules produced are of high quality and reflect input gathered from internal and external stakeholder and subject matter experts. Respond to comments from Vermont Legal Aid, the Medicaid and Exchange Advisory Board, Medical Society, insurance carriers, and other stakeholders during rulemaking process.

WHY: Administrative rules have the force and effect of law. The rules for the Medicaid program are critical regulations for State staff, providers, beneficiaries, and advocates to understand and administer the Medicaid program.

WHAT: Manage implementation of Policy, Budget, and Reimbursement (PBR) process for policy initiatives.

HOW: Collaborate and coordinate with AHS staff on the internal vetting process for Medicaid program changes, including advising AHS staff on drafting PBR proposals for review by leadership and providing policy expertise to ensure the proposed changes comply with state and federal regulations. Ensure PBR’s comply with state and federal laws and align with other program operations and procedures. Since last review, this role has expanded from a DVHA-only focus to an Agency-wide focus.

WHY: This process is critical for ensuring that all affected units across the agency are properly engaged in program changes that affect their work. Ensuring thorough engagement of AHS units and deliberate review of proposed changes ensures that implemented initiatives are accurate, high-quality, and compliant with State and federal regulations.

WHAT: Review and respond to general policy requests.

HOW: Receive, research, and resolve requests. Conduct in depth policy analysis as needed. Review provider banners and DVHA guidance to ensure compliance with Medicaid Policy.

WHY: The Medicaid policy unit is responsible for providing technical assistance on Medicaid policy across AHS and for assuring that procedures and practices align with rules and regulations.

WHAT: Review and respond to external surveys of Medicaid Home and Community-Based Service programs as needed.
HOW: Receive, research, and respond to external surveys on Medicaid as needed. Forward requests to policy content leads or subject matter experts within AHS as appropriate.

WHY: The Medicaid policy unit is responsible for coordinating responses to external surveys on Medicaid for AHS. It is important for the state to respond to these requests for information to ensure that accurate data and information is available to the public.

2. Key Contacts

This question deals with the personal contacts and interactions that occur in this job. Provide brief typical examples indicating your primary contacts (not an exhaustive or all-inclusive list of contacts) other than those persons to whom you report or who report to you. If you work as part of a team, or if your primary contacts are with other agencies or groups outside State government describe those interactions, and what your role is. For example: you may collaborate, monitor, guide, or facilitate change.

Extensive contact with:

Deputy commissioners, division directors, and senior department staff: Monthly, or more frequent, communication with DVHA, DAIL, VDH, and DMH senior staff and deputies. Communication includes attending various meetings and calls regarding HCBS funding, legislation, federal regulations, the Centers for Medicaid and Medicaid Services, policy concerns, recommendations, advising, training, and planning.

Chief Financial Officers (CFOs): Regular communication with AHS, DMH, and DAIL CFOs regarding budget impacts of HCBS proposed and ongoing spending. Other department CFOs as needed for planning and implementation.

Directors: monthly meetings, emails, and calls with Director of Medicaid Policy, Deputy Director of Healthcare Reform, Clinical Directors, DMH Children's Director, DMH Adult Services Director, DMH Policy Director, DAIL DS director, DAIL ASD Director, DAIL Policy Director. Facilitating, planning, strategizing, developing, reviewing, advising/guiding, collaborating, managing, and decision-making around HCBS programming, compliance, and implementation.

AHS Health Care Reform Office, departmental CFOs, the AHS CFO, and AHS Secretary: Regular communication on the drafting, approval, and adoption process for Medicaid Administrative Rules.

Collaboration with external stakeholders including VT Legal Aid, Medicaid and Exchange Advisory Board, Interagency Committee on Legislative Rules, Legislative Committee on Administrative Rules is necessary for managing the HCAR rule making process.

3. Are there licensing, registration, or certification requirements; or special or unusual skills necessary to perform this job?

Include any special licenses, registrations, certifications, skills; (such as counseling, engineering, computer programming, graphic design, strategic planning, keyboarding) including skills with specific equipment, tools, technology, etc. (such as mainframe computers, power tools, trucks, road equipment, specific software packages). Be specific, if you must be able to drive a commercial vehicle, or must know Visual Basic, indicate so.

No

4. Do you supervise?
In this question “supervise” means if you direct the work of others where you are held directly responsible for assigning work; performance ratings; training; reward and discipline or effectively recommend such action; and other personnel matters. List the names, titles, and position numbers of the classified employees reporting to you:

No

5. In what way does your supervisor provide you with work assignments and review your work?
This question deals with how you are supervised. Explain how you receive work assignments, how priorities are determined, and how your work is reviewed. There are a wide variety of ways a job can be supervised, so there may not be just one answer to this question. For example, some aspects of your work may be reviewed on a regular basis and in others you may operate within general guidelines with much independence in determining how you accomplish tasks.

This position interacts with the supervisor in person or by phone on a regular basis, which affords brief, informal opportunities to receive assignments, provide status updates, and discuss various (and often shifting) priorities. In addition, structured check-in meetings are conducted every other week for in-depth review of tasks and collective brainstorming on ongoing priorities and challenges.

The position operates with a significant amount of independence. Regular opportunities for informal communication with the supervisor allows for real-time adjustments to priorities and work products to meet the ever-evolving needs of a complex and innovative program.

This supervisory system, with significant independent judgement and discretion, is built on the trust that risks or issues will be raised to the supervisor when needed.

6. Mental Effort
This section addresses the mental demands associated with this job. Describe the most mentally challenging part of your job or the most difficult typical problems you are expected to solve. Be sure to give a specific response and describe the situation(s) by example.

➢ For example, a purchasing clerk might respond: In pricing purchase orders, I frequently must find the cost of materials not listed in the pricing guides. This involves locating vendors or other sources of pricing information for a great variety of materials.

➢ Or, a systems developer might say: Understanding the ways in which a database or program will be used, and what the users must accomplish and then developing a system to meet their needs, often with limited time and resources.

The most difficult part of this job is addressing complex and varied policy requests. Often policy questions, problems, or initiatives are assigned for which there is no existing policy expertise. This involves conducting policy research from scratch, understanding the complex interaction of VT Medicaid policy documents, and reconciling that with current and future Medicaid operations. This also involves working with subject matter experts throughout the agency to piece together the components required to solve a problem or implement a new initiative. This often happens with a tight deadline with limited and competing resources. The resolution or proposal must then be succinctly and accurately presented to departmental or AHS leadership.

Being in charge of managing numerous policy/vetting processes and individual program changes can be very challenging in terms of deadlines. Missing certain deadlines can mean the loss of federal match for services. This position must be aware of dozens of competing deadlines for numerous AHS units at any one point in time and need to prioritize those that
7. Accountability

This section evaluates the job's expected results. In weighing the importance of results, consideration should be given to responsibility for the safety and well-being of people, protection of confidential information and protection of resources.

What is needed here is information not already presented about the job's scope of responsibility. What is the job's most significant influence upon the organization, or in what way does the job contribute to the organization's mission?

Provide annualized dollar figures if it makes sense to do so, explaining what the amount(s) represent.

For example:

- A social worker might respond: *To promote permanence for children through coordination and delivery of services;*
- A financial officer might state: *Overseeing preparation and ongoing management of division budget: $2M Operating/Personal Services, $1.5M Federal Grants.*

Overseeing, as part of a team, the administration of the state Medicaid program through promulgation of administrative rule, creation and management of policy, and management of a federal Medicaid waiver and Medicaid State Plan that provides health care eligibility and coverage for the 200,000+ members of Vermont's state health care programs.

Ensure that Vermont's Medicaid and Exchange policies are accurate and appropriate for receipt of federal match. This equates to defense of over a billion dollar Medicaid budget, as policy that is not permitted by CMS are not eligible for federal match.

Reasonable for the alignment of Medicaid policy with state and federal law to ensure that policy is best serving the needs of Vermonters and to provide innovative solutions to the healthcare challenges that we face.

8. Working Conditions

The intent of this question is to describe any adverse conditions that are routine and expected in your job. It is not to identify special situations such as overcrowded conditions or understaffing.

a) What significant mental stress are you exposed to? All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

<table>
<thead>
<tr>
<th>Type</th>
<th>How Much of the Time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>High workload—juggling competing priorities under short timeframes with limited resources.</td>
<td>100%</td>
</tr>
</tbody>
</table>

b) What hazards, special conditions or discomfort are you exposed to? (Clarification of terms: hazards include such things as potential accidents, illness, chronic health conditions or other harm. Typical examples might involve exposure to dangerous persons, including potentially violent customers and clients, fumes, toxic waste, contaminated materials, vehicle accident,
disease, cuts, falls, etc.; and discomfort includes exposure to such things as cold, dirt, dust, rain or snow, heat, etc.)

<table>
<thead>
<tr>
<th>Type</th>
<th>How Much of the Time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

(c) What weights do you lift; how much do they weigh and how much time per day/week do you spend lifting?

<table>
<thead>
<tr>
<th>Type</th>
<th>How Heavy?</th>
<th>How Much of the Time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

d) What working positions (sitting, standing, bending, reaching) or types of effort (hiking, walking, driving) are required?

<table>
<thead>
<tr>
<th>Type</th>
<th>How Much of the Time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sitting/standing at desk or in meetings</td>
<td>95%</td>
</tr>
<tr>
<td>walking/driving</td>
<td>5%</td>
</tr>
</tbody>
</table>

Additional Information:

Carefully review your job description responses so far. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose. Perhaps your job has some unique aspects or characteristics that weren't brought out by your answers to the previous questions. In this space, add any additional comments that you feel will add to a clear understanding of the requirements of your job.

This position collaborates regularly with units across the Agency and must provide policy and process expertise so that changes to the Medicaid program happen on time, comply with state and federal laws, reflect the needs of Vermonters, and maintain positive relationships with federal partners and external stakeholders.

Employee's Signature (required): ___________________ Date: ______________
Supervisor's Section:

Carefully review this completed job description, but do not alter or eliminate any portion of the original response. Please answer the questions listed below.

1. What do you consider the most important duties of this job and why?

   Management and coordination of complex Medicaid policy, including facilitating the implementation of such policy. Equally important are the responsibilities (and supporting activities) for 1) planning, 2) analyzing, and 3) monitoring and evaluating. Sufficient and timely planning is necessary to provide the parties responsible for policy and/or program implementation with the necessary tools to execute successfully. Additionally, ability for efficient, thorough, and reliably policy research, analysis and decision making is critical to the success of this position. Once such tools have been established, implementation requires efficient use of these tools, along with adherence to timelines and the ability to coordinate many supporting activities simultaneously. Duties in all of these areas are essential.

2. What do you consider the most important knowledge, skills, and abilities of an employee in this job (not necessarily the qualifications of the present employee) and why?

   Must have deep knowledge of Vermont's Medicaid Home and Community Based Services programs and policies, as well as a thorough understand of Medicaid policy nationally. Must have excellent communication skills—both written and verbal—and must be able to distill complex policy concepts into concrete operational steps for a variety of partners (sister departments, legislature, Federal, advocates). Must have the ability to juggle many competing priorities, to troubleshoot and triage challenges as they arise, and to be accountable to Departmental and Agency leadership to supply information about Medicaid policy on an as-needed basis. Must have exceptional organization skills and ability to self-manage time lines, and priorities.

3. Comment on the accuracy and completeness of the responses by the employee. List below any missing items and/or differences where appropriate.

   The above responses are accurate and complete.

4. Suggested Title and/or Pay Grade:

   Health Care Assistant Administrator II / PG 26

Supervisor's Signature (required): ________________________________ Date: ________________________________

Personnel Administrator's Section:

Please complete any missing information on the front page of this form before submitting it for review.

Are there other changes to this position, for example: Change of supervisor, GUC, work station?

☐ Yes ☐ No  If yes, please provide detailed information.
Attachments:

☒ Organizational charts are required and must indicate where the position reports.

☐ Draft job specification is required for proposed new job classes.

Will this change affect other positions within the organization? If so, describe how, (for example, have duties been shifted within the unit requiring review of other positions; or are there other issues relevant to the classification review process).

Suggested Title and/or Pay Grade:

Health Care Assistant Administrator II (PG 26)

Personnel Administrator’s Signature (required): __________________________ Date: ______________

Appointing Authority’s Section:

Please review this completed job description but do not alter or eliminate any of the entries. Add any clarifying information and/or additional comments (if necessary) in the space below.

Suggested Title and/or Pay Grade:

Appointing Authority or Authorized Representative Signature (required) __________________________ Date: ______________