New		Old	New		Old
Number	Title	Number	Number	Title	Number
2000	All Programs	2000	2140	Participant Responsibilities	2197
2601.1	Methods of Investigation	2032	2141	Consequences of Noncompliance	2197.1
2601.2	Interviews	2032.2	2142	Noncompliance and Good Cause	2197.2
2601.3	Verification	2032.3	2143	Conciliation	2197.3
2601.4	Collateral Sources	2032.4		Referral and Transition to Other	
2650.1	Vendor Payments	2060	2150	Programs	2198
2650.2	Administrative Expenses	2061	2160	Notice and appeal	2199
2011	Eligibility	2101	2200	Reach Up	2200
2012	Payment	2102	2201	Eligibility and Payment Process	2201
2013	Case Records	2103	2202	Eligibility and Payment Definition	2202
2014	Authorized Representative	2104	2203	Case Records	2203
2015	Fraud	2106.1	2204	Authorized Representative	2204
2015.1	Suspected Fraud	2106.2	2205	Fraud	2205.1
2015.2	Methods of Investigation	2106.3	2205.1	Suspected Fraud	2205.2
2015.3	Referral to Law Enforcement	2106.4	2205.2	Methods of Investigation	2205.3
2015.4	Records and Reports	2106.5	2205.3	Referral to Law Enforcement	2205.4
2020	Application Procedures	2111	2205.4	Records and Reports	2205.5
	Americans With Disabilities Act		2210	Application	2208
2030	(ADA)	2170	2231.1	Civil Unions Act (Act 91)	2208.1
2200	Solely State-Funded Programs and	2100	2210.2	Choice of Program	2209
2390 2391	Separate State Programs Solely State-Funded Programs	2180 2181	2210.3	Deadline for Application Processing	
2391.1	Parental Nurturing Component	2181.1	2211	Methods of Investigation	2211
2391.1	Minor Parents' Safety Net	2101.1	2211.1	Statement of Need	2211.1
2391.2	Component	2181.2	2211.2	Interviews	2211.1
2391.3	Special Needs Component	2181.3	2211.3	Verification	2211.3
	SSI and SSDI Applicant		2211.4	Collateral Sources	2211.4
2391.4	Component	2181.4	2206	Quality Control Review	2215
2392	Exemption from 60-Month Limit	2182	2254	Prospective Budgeting Prospective Eligibility and	2216.1
	Assignment to the Solely State-	0.1.00	2254.1	Budgeting	2216.2
2393	Funded Programs	2183	2212	Continuing Eligibility	2218
2393.1	Assignment Rules	2183.1	2213	Review of Eligibility	2218.1
2394	Separate State Funds Programs	2184	2215	Assistance Pending Fair Hearing	2218.2
2395	Child Support Distribution	2185	2214		2220
2100 2101	Reach First Definitions	2190 2191	2213.1	Reviews	2220.1
2110		2191	2214.3	Deceased Participant	2222
2110	Eligibility Financial Eligibility	2192	2214.1	Change of Address	2223
2112	Personal Interview	2193	2214.2	Family Separation	2224
2113	Orientation	2194.1		Decisions, Notification and	
2110	Financial and Self-Sufficiency	2104.1	2216	Authorization	2225
2114	Screening	2194.2	2207	Domestic Violence	2225.1
2115	Ineligible Families	2194.3	2216.1	Application Decisions	2226
2116	Families Inappropriate for Referral	2194.4	2216.2	Money Payment	2226.1
2117	Families with Mandatory Applicants	2194.5	2216.3	Review Decisions	2227
	Families with No Mandatory		2217	Notice of Decision	2228
2118	Applicants	2194.6	2217.1	Exemptions from Minimum Advance Notice	2228.1
2120	Payments	2195	2217.1	Money Grant Notice	2228.2
2121	Payment Calculation	2195.1	2220	Money Grants	2230
2122	Payment Disbursement	2195.2	2221	Alternate Payee	2231
2130	Services Component	2196	2222	Method of Payment	2232
2131	Assessment	2196.1	2235.2	Cooperation With Child Support	2232
2132	Case Management	2196.2	2223	Deceased Payee	2233
2133	Family Development Plans	2196.3	2224	Underpayments	2234.1
2134	Support Services	2196.4	2225	Overpayments	2234.2
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New		Old	New		Old
Number	Title	Number	Number	Title	Number
2226	Protective Payments	2235	2281	Combined Resources Limitation	2261
2226.1	Money Mismanagement	2235.1	2281.1	Transfer or Assignment Prohibited	2261.1
2226.2	Payee Selection Criteria	2235.2	2281.2	Property Sales	2261.2
2226.4	Payee Relationship	2235.3	2282	Real Property	2262
2226.5	Controlled Vendor Payments (CVP)	2235.4	2283	Personal Property	2263
2226.6	Redetermination	2235.5	2283.1	Liquid Assets	2263.1
2226.7	Appeal	2235.6	2283.2	Trust funds - Trust Accounts	2263.2
2222.3	Administrative Expenses	2236	2283.3	Burial Plots - Funeral Agreements	2263.3
2222.2	Maintenance Assistance	2237	2283.4	Pension Funds	2263.4
2222.1	Vendor Payments	2238	2283.5	Vehicles	2263.5
2250	Need Determination	2239	2283.6	Income-Producing Property	2263.6
2251	Method for Determination of Need	2240	2281.3	Excess Resources	2263.7
2253	Eligibility Computation	2240.1	2284	Excluded Resources	2264
2255	Amount of Payment	2241	2290	Potential Income and Resources	2270
2256	Income Deficits Prohibited	2241.1	2291	Pension and Benefit Programs	2271
2240	Formation of the Assistance Group	2242	2292	Insurance and Liability Claims	2272
2230	Eligible Child	2242.1	2293	Support from Relatives	2273
2231	Eligible Parent	2242.2	2293.1	Notice to Law Enforcement	2273.1
2232	Needy Essential Person	2242.4	2293.2	Contact with Relatives	2273.2
2241	Caretaker	2242.5	2293.3	Location of Relatives	2273.3
2236	Citizenship	2242.7	2293.4	Referral to Office of Child Support	2273.4
2262	Living Arrangement	2243	2293.5	Cooperation with Courts	2273.5
2260	Needs	2244	2233	Residence	2302
2261	Need Standards	2245	2230.1	Relative	2302.11
2261.1	Basic Need Standards	2245.2	2230.2	Qualified Caretaker	2302.12
2261.2	Members in Long-term Care	2245.21	2230.3	Home	2302.13
2261.3	Children in Schools or Institutions	2245.22		Residence — Committed	
2261.4	Special Needs	2245.23	2233.1	Child	2302.2
2252	Ratable Reduction	2245.24	2234	Social Security Numbers	2303
2263	Housing Allowance	2245.3	2237	Special Cases of Ineligibility	2304
2263.1	Subsidized Housing	2245.31	2237.1	Strike Participants	2304.1
2263.2	Budgeting Subsidized Housing	2245.33	2237.2	Residence in Two States	2304.2
2264	Temporary Absence - Illness	2245.4	2227.2	Fugitive Felons and Probation and	2204.2
2265	Temporarily Uninhabitable Home	2245.41	2237.3	Parole Violators	2304.3 2330
2263.3	Shared Households	2245.5	2235 2235.1	Support Obligations and Payments Assignment of Support Rights	2330
2263.4	Room and Board Standards	2246	2235.1	Good Cause for Refusal	2332.1
2263.5	Institution	2247	2235.3	Request for Waiver	2332.1
2263.6	Foster Home	2248	2235.4	Review of Good Cause Waivers	2332.2
2270	Income	2250	2233.3	Distribution of Child Support	2332.3
2270.1	Lump Sum Income	2250.1	2272.1	Family Bonus Payment	2333.1
2270.2	Income-in-Kind	2250.2	2272.1	Parent Share Payment	2333.1
2314	Payment for Support Services	2251.4	2272.2	Arrearage Collected	2333.3
2271	Unearned Income	2252	2272.4	Advance Support Payments	2333.4
0074.4	Social Security - Railroad	0050.4	2212.4	Termination Due to Support	2000.4
2271.1	Retirement	2252.1	2210.1	Payment	2334
2271.2	Veterans Benefits	2252.2		Collections for Non-Reach Up	
2271.3	Contributions	2252.3	2293.6	Families	2335
2274	Earned Income	2253	2300	Reach Up Services	2340
2274.1	Computation Method	2253.1	2301	Definitions	2341
2317.1	Payment of Incentives	2253.1	2302	Case Management	2350
2274.3	Business Expense	2253.2	2302.1	Caseload Size	2350.1
2275	Earned Income Deductions	2253.3	2302.2	Notification	2350.2
2276 2280	Excluded Income	2255.1 2260	2302.3	Assessment	2350.3
220U	Resources	2200	2302.4	Case Management Responsibilities	2350.4

Number	New		Old	New		Old
Support Services, Assessment, and the FDP 2351.1 2373 2372 2373.1 2373 2		Title			Title	
Support Services, Assessment, and the FDP 2551.1 2373 2372 2372 2373 237	2310	Support Services	2351	2371.2	Overt Refusal	2370.12
2312 Support Services Providers 2351.2 Canod Cause for Refusing, Quitting, Priyers of Support Services 2351.3 2373.3 Description of Purchase of Support 2370.31 Citieria for Purchase of Support 2375.2 2374.2 Conciliation 2370.32 2370.32 2371.2 2371.2 2371.2 2372.2 2373.3 Absence of Appropriate Child Care 2370.33 2373.3 2373.3 2373.3 2373.3 2373.3 2374.2 Conciliation 2371.2 2371.2 2374.2 Conciliation 2371.2 2371.2 2374.2 Conciliation 2371.2 2374.2 Conciliation 2371.2 2371.2 2374.2 Conciliation 2371.2 2371.2 2374.2 Conciliation 2371.2				2372	Determination of Good Cause	2370.2
2373 Types of Support Services 2361.3 2373.1 or Being Fired From a Job 2370.31	2311	the FDP	2351.1	2373	Good Cause Criteria	2370.3
Criteria for Purchase of Support 2370.32	2312	Support Services Providers	2351.2		Good Cause for Refusing, Quitting	,
2315 Services 2351.5 2373.2 with FDP 2370.32 2370.32 2370.32 2370.32 2371.6 Child Care Assistance 2352.1 2374.2 Conciliation 2371 2371.2 2372.2 2374.1 Conciliation Process 2371.2	2313		2351.3	2373.1		2370.31
2316 Child Care Assistance 2352 2373.3 Absence of Appropriate Child Care 2370.33 2316.1 Basic Eligibility Criteria 2352.1 2374.1 Conciliation Process 2371.1 2316.2 Allowable Child Care Expenses 2352.2 2374.1 Conciliation Process 2371.2 2317.1 Conciliation Process 2371.2						
2316.1 Basic Eligibility Criteria 2352.1 2374.1 Conciliation Process 2371.1 2316.2 Allowable Child Care Expenses 2352.2 2374.1 Conciliation Process 2371.1 2316.3 Payment Rate 2352.3 2374.2 Conciliation Process 2371.3 2317 Incentive Payments 2350 2374.4 Usocessful Resolution 2371.3 2320 Participation Requirements 2360.1 2375.2 Sanctions for Noncompliance 2372.1 2321 Participation Phases 2360.2 2375.1 Independent Review and Notice 2372.1 2330 Payment Goal 2361.1 2375.2 Sanctions for Noncompliance 2372.1 2331 Employment of the FDP 2361.2 2375.5 Vendor Payment of Housing Costs 2372.2 2333 FDP Reviews and Modifications 2361.2 2375.5 Vendor Payment of Housing Costs 2372.2 2335 Abult Participants 2362.2 2377.5 Vendor Payment of Housing Costs 2373.2 2336 Minor Parents 2362.2 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
2316.2 Allowable Child Care Expenses 2352.2 2374.1 Conciliation Process 2371.1						
2316.3 Payment Rate 235.2 2374.2 Conciliation Resolution Period 2371.2 2321 Incentive Payments 2350 2374.3 Successful Resolution 2371.4 2321 Participation Requirements 2360.1 2375 Sanctions for Noncompilance 2372.1 2322 Participation Phases 2360.2 2375.1 Independent Review and Notice 2372.1 2330 Family Development Plans 2361.1 2375.2 Sanctions for Noncompilance 2372.2 2331 Employment Goal 2361.1 2375.3 Housing Protection Limitation 2372.2 2333 FDP Reviews and Modifications 2361.2 2375.5 Meeting with Case Manager 2372.4 2334 FDP Requirements 2362.2 2377.5 Curing Sanctions and Santy Cure and 2373.11 2335 Adult Participants 2362.2 2377.1 Notice of Ability to Cure 2373.11 2336 Minor Parents 2362.2 2377.1 Notice of Ability to Cure 2373.11 2340 Work Requirement 2363.1		9 ,				
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2331 Employment Goal 2361.1 2375.3 Housing Protection Limitation 2372.21 2332 Development of the FDP 2361.2 2375.4 Vendor Payment of Housing Costs 2372.3 2334 FDP Requirements 2362 Sanctions & Mediansh; Cure and Sanctions & Andash; Cure and Sanctions		•			•	
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2337 Out-of-School Youth 2362.3 2377.1 Notice of Ability to Cure 2373.11 2340 Work Requirements 2363 2377.2 Process to Cure Sanctions 2373.12 2341 Work Requirement Surgant 2363.1 2378 Forgiveness of Past Sanctions 2373.2 2342 Implementation of Phase-In Plan 2363.2 2380 Notice and Appeal 2380.1 2350 Work Requirement Hours 2363.3 2380.1 Notice and Appeal 2380.2 2350.10 Education Related to Employment Satisfactory Attendance at 2364.1 2380.2 Appeal 2380.2 2350.11 Secondary School 2364.1 2400 Postsecondary Education (PSE) 2400 2350.12 Participant. 2364.12 2411 Initial Eligibility 2402.2 2350.12 Participant. 2364.12 2411 Continuing Eligibility 2402.1 2350.12 Participant. 2364.12 2411 Continuing Eligibility 2402.1 2350.12 Participant. 2364.13 2420					=	
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2985 Resources Crisis Fuel 2954 5643 Dispensing 3202	
2986 Verification, Crisis Fuel 2955 5650 Cost Sharing Requirements 3203	
2987 Crisis Fuel Benefits 2956 5660 Application 3204	
2988 Appeal Rights Crisis Fuel 2957 5661 Application Decision 3204	
2989 Recoupment Crisis Fuel 2958 5662 Eligibility Period and Enrollment 3204	
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5210 Eligibility 3001 5664 Right to Appeal 3204	
5211 Resident 3001.1 5500 VHAP Pharmacy 3300	
5212 Member of Covered Group 3001.2 5510 Eligibility 3307	
5212.1 Pregnant Woman 3001.21 5511 Age 330'	
5212.2 Child Under the Age of 18 3001.22 5512 Disability 3307	
5220 Financial Need 3001.3 5513 Uninsured 330°	
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5222 Income Level 3001.32 5515 Residence 3307	
5230 Uninsured 3001.4 5516 Living Arrangement 3307	
5240 Services 3002 5520 Financial Need 330 ²	
5250 Application 3004.1 5521 Countable Income 3307	
5251 Application Decision 3004.2 5522 Excluded Income 3307	1.72
5252 Period of Eligibility 3004.3 5523 Determining Countable Income 3307	1.73
5253 Identification Document 3004.4 5524 Income Test 3307	1.74
5254 Application for Other Benefits 3004.5 5530 Application 3302	
5255 Right to Appeal 3004.6 5531 Application Decision 3302	
5800 HIV/AIDS 3100 5532 Eligibility Period and Enrollment 3302	
5810 Eligibility 3101 5533 Identification Document 3302	
5811 Residence 3101.1 5534 Application for Other Benefits 3302	
5540 Right to Appeal 3302	

New		Old	New		Old
Number	Title	Number	Number	Title	Number
5501	Beneficiary Fraud	3302.7	5444	Price for Ingredients	3505.4
5550	Cost Sharing	3303.1	5445	Compounded Prescriptions	3505.4
5551	Payments for Prescribed Drugs	3303.1	5446	Participating Pharmacy	3505.6
5552	Price for Ingredients	3303.3	5447	Prescribed Drugs	3505.7
5553	Compounded Prescriptions	3303.4	5450	Coverage	3506
5554	Participating Pharmacy	3303.5	5300	Vermont Health Access Plan	4000
5555	Prescribed Drugs	3304	5310	Eligibility	4001
5560	Benefit Coverage	3305	5311	Age	4001.1
5700	Healthy Vermonters	3400	5312	Uninsured	4001.1
5710	Eligibility	3401	5313	Citizenship and Identity	4001.3
5711	Insurance Coverage	3401.1	5314	Residence	4001.4
5712	Citizenship and Identity	3401.2	5315	Living Arrangement	4001.5
5713	Residence	3401.3	5316	Student Status	4001.6
5714	Living Arrangement	3401.4	5317	Other Eligibility Requirements	4001.7
5720	Financial Need	3401.5	5320	Financial Need	4001.8
5721	Income	3401.51	5321	Income	4001.81
5722	Excluded Income	3401.52	5322	Excluded Income	4001.82
5723	Countable Income	3401.53	5323	Countable Income	4001.83
5724	Income Test	3401.54	5324	Income Test	4001.84
5730	Eligibility Process	3402	5330	Cost-Sharing Requirements	4001.9
5731	Application	3402.1	5331	Premium	4001.91
5732	Application Decision	3402.2	5332	Copayment	4001.92
5733	Eligibility Period	3402.3	5340	Application	4002.1
5734	Termination	3402.4	5341	Application Decision	4002.2
5735	Reporting Changes	3402.5	5342	Eligibility Period and Enrollment	4002.3
5736	Identification Document	3402.6	5342.1	VHAP-Limited Coverage	4002.31
5737	Application for Other Benefits	3402.7	5342.2	VHAP Managed Health Care	4002.32
5738	Right to Appeal	3402.8	5343	Identification Document	4002.4
5701	Beneficiary Fraud	3402.9	5344	Application for Medicaid	4002.5
5740	Benefit	3403.1	5345	Right to Appeal	4002.6
5741	Enrollment Fee	3403.2	5301	Beneficiary Fraud	4002.7
5742	Coinsurance Requirement	3403.3	5350	Benefit Delivery	4003
5743	Coverage	3403.4	5351	Benefits	4003.1
5744	Participating Pharmacy	3403.5		Beneficiaries Eligible for VHAP and	
5400	VPharm	3500	5351.1	Medicare	4003.11
5401	Definitions	3501	5352	VHAP Managed Health Care Plan	4003.2
5410	Eligibility	3502	5352.1	Enrollment	4003.21
5411	Age	3502.1	5352.2	Appeals of Managed Health Care Decisions	4003.22
5412	Disability	3502.2	5360	Medicaid Program	4003.22
5413	Residence	3502.3	5900	Premium Assistance	4100
5414	Income	3502.4	5901	Definitions	4101
5415	PDP Enrollment	3502.5	5910	Eligibility	4102
5416	Limited Income Subsidy	3502.6	5911	VHAP-ESIA	4102.1
5417	Citizenship and Identity	3502.7	5911.1	VHAP-ESIA Enrollment	4102.2
5420	Application	3503	5912	Catamount-ESIA	4102.3
5421	Application Decision	3503.1	5913	CHAP	4102.4
5430	Eligibility Period and Enrollment	3504.1	5914	Prior Loss of Insurance	4102.5
5431	Identification Document	3504.2	5915	Medicare	4102.6
5432	Notice and Appeal	3504.3	5916	Income Determinations	4102.7
5402	Beneficiary Fraud	3504.4	5917	ESI Available to Ineligible Member	4102.8
5440	Payment System	3505	5920	Eligibility Process	4103
5441	Cost-Sharing	3505.1	5921	Application	4103.1
5442	Medicare Advocacy Program	3505.2	5925.1	New Access to ESI	4103.11
5443	Payments for Prescribed Drugs	3505.3			

New		Old	New		Old
Number	Title	Number	Number	Title	Number
5925.2	Plan Disenrollment	4103.12	1 (0/11/0 01	Other Approved Living	1 (01110 01
0020.2	ESI No Longer Approved or Cost-		2336.2	Arrangements	2362.2.2
5925.3	Effective	4103.13		Noncompliance with Approved	
5930	Notice and Appeal Rights	4103.14	2336.3	Living Arrangement	2362.2.3
5926	Seamless Coverage	4103.15	2341.1	When Determined Eligible	2363.1.1
5922	Cooperation Requirements	4103.2	2341.2	During the First 12 Months	2363.1.2
5923	Screening; Initial Eligibility	4103.3	2341.3	12th Month of Financial Assistance	2363.1.3
5924	Plan Information Request Letter	4103.4	2341.4	Pre-Work-Ready Phase Extended	2363.1.4
5924.1	Enrollment Determination	4103.5		Financial Assistance Before July	
5924.2	Approval of ESI Plans	4103.6	2341.5	2001	2363.1.5
5924.3	Determining Cost-Effectiveness	4103.7	2343.1	Parents in Two-Parent Families	2363.3.1
5924.4	No Cost-Effective or Available ESI	4103.8	2343.2	Single Parents and Caretakers	2363.3.2
5924.5	Cost-Effective ESI Available	4103.9	2343.3	Participants Under 20 Years Old	2363.3.3
5940	Premium-Assistance Amounts	4104	00.40.4	Requirement to Accept or Retain a	
5950	VHAP-ESIA Benefits	4105	2343.4	Job	2363.3.4
0000	Premium Balances and Assistance		2343.5	Exceptions to Requirement to	2363.3.5
5951	Amounts	4105.1	2343.5	Accept a Job Notice of Decision	2403.10
5952	VHAP Wraparound Coverage	4105.2			2501
5960	Catamount-ESIA Benefits	4106	3000	Refugee Cash Assistance (RCA)	
	Premium Balances and Assistance		3010	Eligibility	2502
5961	Amounts	4106.1	3020	Relationship to SSI/AABD	2502.1
	Chronic-Care Wraparound		3030	Employment Requirements	2503
5962	Coverage	4106.2	3031	Sanctions	2503.1
5000	Premium Balances and Assistance	4407.4	3040	Unaccompanied Minors	2504
5963	Amounts	4107.1	3050	Fair Hearings	2505
5970	Premium Balance Collection Methods	4108	2653	Moving Expense	2613.5 2700-
5971	Premium Payments	4109	2700	Aid to the Aged, Blind or Disabled (AABD)	2700- 2799
5971	Payment Adjustments	41109	2854	Moving Expense	2813.5
5972.1	Underpayments	4110.1	2900	Fuel Program	2900
5972.1	Overpayments	4110.1	2900	Income, Crisis Fuel	2953
7700	Pharmacy Administration	7700	5925	Eligibility Period and Enrollment	4103.10
7700	Pharmaceutical Manufacturer Fee	7700 7701	4100	Medicaid Program	M100
7701	Unmarried Parent with a Child-in-	7701		Purpose - Medicaid Program	M101
2242	Common		4101	Vermont Health Access Plan	M101.1
		2100-	41102		M101.1
2010	Eligibility and Payment	2109	4111	Eligibility and Enrollment Process Premiums	M102.1
2226.3	Conflict of Interest Limitation	2235.2.1	7101		M103
	Earned Income Computation		7101.1	Medicaid Benefit Delivery Fee-For-Service	M103.1
2274.2	Sequences	2253.1.1	7101.1	Managed Health Care Plan	M103.1
2274.4	Providing Child Care	2253.2.1	7101.2	Primary Care Case Management	W103.2
2275.1	Employment Expenses	2253.3.1	7101.3	(PCCM)	M103.3
2275.2	Dependent Care Expenses	2253.3.2	4112	Authorized Representative	M104
2275.3	Earned Income Disregard	2253.3.3	4113	Case Records	M105
2275.4	Disallowance of Disregard	2253.3.4	7102	Prior Authorization	M106
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2314.2	Payment by DCF	2351.4.2	7102.2	Prior Authorization Determination	M106.3
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2322.4	Employment Phase	2360.2.4	7104	Requesting Coverage Exceptions	M108
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2335.2	Primary Caretaker Parents	2362.1.2	4123	Date of Application	M114
2336.1	Approved Living Arrangement	2362.2.1	.123	_ 1	

New		Old	New		Old
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7124	VHAP Determination When	WITIS	4171.1	Notice of Verification Requirement	M170.21
4103	Medicaid Closes	M116	7171.1	Citizenship and Identity	101170.21
4130	Application Decisions	M121	4171.2	Documentation	M170.22
4131	Decision Time Limits	M122	4172	Qualified Alien	M170.3
4132	Application Forms	M123	4172.1	Battered Alien	M170.31
4133	Interview	M124	4172.2	Immigration Status Documentation	M170.32
4134	Social Security Numbers	M125	4173	Five-Year Bar for Qualified Aliens	M170.4
4135	Verification	M126	4173.1	Documentation of Entry Date	M170.41
4136	Collateral Sources	M127	4174	Non-Qualified Aliens	M170.5
4137	Potential Unearned Income	M128	4174.1	Illegal Aliens	M170.51
4138	Other Potential Income	M129	4174.2	Undocumented Aliens	M170.52
4138.1	Assignment of Rights to Payments	M129.1		Ineligible Aliens and Non-	
4138.2	Cooperation in Obtaining Payments	M129.2	4175	Immigrants	M170.6
4138.3	Good Cause for Noncooperation	M129.21	44-0	Confirmation of Immigration via	
	Enrollment in a Health Insurance		4176	SAVE	M170.7
4138.4	Plan	M129.3	4177	Emergency Medical Services	M170.8
4140	Eligibility Review	M131	7110	Global Commitment Appeals and Grievances	M180
4141	Review Frequency	M132	7110.1	Definitions	M180.1
4142	Review Decisions	M133	7110.1	Beneficiary Appeals	M181
4104	Quality Control Review	M134	7110.2	Fair Hearing	M182
4105	Beneficiary Fraud	M135	7110.3	School-Based Health Services	M183
4150	Notice of Decision and Appeal	M141	7110.4	Filing Grievances	M184
4151	Right to Appeal	M142	7110.5	Medicaid: Aged, Blind, and	W 104
4152	Disability Determination Appeal	M142.1	4200	Disabled	M200
4153	Continued Benefits Pending Appeal	M143	4201	Definitions	M200.1
4454	Managed Care Organization	N 4444		Categorically Needy Coverage	
4154	Appeal and Fair Hearing	M144	4202	Groups	M200.2
4160	Payment System	M150	4202.1	SSI/AABD Recipients	M200.21
4161	Cost Sharing	M150.1	4202.2	SSI-Eligible Coverage Groups	M200.22
4162	Obligation of the Department	M150.2	4202.3	Long-Term Care Coverage Groups	M200.23
4163	Eligibility Expenses	M151		Coverage Groups For New	
7105	Medical Service Payments	M152	4202.4	• •	M200.24
7105.1	General Exclusions	M152.1	4000 5	Coverage Groups For Pickle	14000 05
4164	Beneficiary Identification	M153	4202.5	Recipients	M200.25
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7106	Violations of Provider Responsibility	M155	4204	Medicare Cost-Sharing Coverage Groups	M200.4
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7106.2	Grounds for Sanctioning Providers	M155.2	4204.1	(QMB)	M200.41
7106.3	Sanctions	M155.3		Qualified Disabled and Working	
7106.4	Imposition and Extent of Sanctions	M155.4	4204.2	Individuals (QDWI)	M200.42
7106.5	Provider Information Program	M155.5		Specified Low-Income Medicare	
7106.6	Right of Appeal	M155.6	4204.3	Beneficiaries (SLMB)	M200.43
7106.7	Withholding Payments	M155.7	4204.4	Qualified Individuals (QI-1)	M200.44
7105.3	No Reassignment of Claims	M156	4210	Nonfinancial Eligibility Tests	M210
7107	Utilization Control	M157	4211	Relationship to SSI	M211
7107.1	Beneficiary Abuse	M157.1	4212	Definition of Age	M211.1
7107.2	Provider Abuse	M157.2	4213	Definition of Disability	M211.2
7108	Third Party Liability	M158	4213.1	Substantial Gainful Activity	M211.21
7108.1	Health Insurance Premiums	M158.1	4214	Definition of Blindness	M211.3
7108.2	Adjustment or Recovery	M159 M159.1	4215	Determining Disability or Blindness	
7108.3	Estate Recovery Health Care Trust Fund	M160	4216	Citizenship and Identity	M212
7109 4170		M170.1	4216.1	Emergency Medical Services	M212.1
4170	Citizenship	IVI I / U. I	4217	Residence	M213

New		Old	New		Old
Number	Title	Number	Number	Title	Number
4217.1	Temporary Absence	M213.1	4243	Burial Funds	M232.3
4217.1	Placement in Vermont Institutions	M213.1	4243	Other Income-Producing	101232.3
4217.3	Incapable of Stating Intent	M213.3	4244	Resources	M232.4
4217.0	Residence as Payment	WIZ 10.0	4245	Resources Managed by Third Party	M232.5
4217.4	Requirement	M213.4	4245.1	Definition of Trust	M232.51
4217.5	Specific Prohibitions	M213.5	4245.2	Excluded Trusts	M232.52
4218	Living Arrangements	M214	4245.3	Trusts Excluded Due to Hardship	M232.53
4218.1	Public Institution	M214.1		Early Withdrawal and Surrender	
4218.2	Private Facility	M214.2	4246	Penalties	M232.6
4218.3	Correctional Facility	M214.3	4247	Jointly Held Accounts	M232.7
4220	Financial Eligibility	M220	4247.1	Fiduciary for a Joint Fiduciary Account	M232.71
4220.1	Definitions	M220.1	4247.1	Other Excluded Resources	M232.7 I
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4221	Responsibility Group	M221	4248.1	Personal Property Vehicles	M232.82
4221.1	Financial Responsibility Groups for Single Adults	M221.1	4248.3	Independent Living Contracts	M232.83
7221.1	Financial Responsibility Groups for	101221.1	4248.4	Cash	M232.84
4221.2	Children	M221.2	4248.5	Retirement Funds	M232.85
	Financial Responsibility Groups for		4248.6	Tax Refunds	M232.86
4221.3	Sponsored Noncitizens	M221.3	4248.7	Student Benefits	M232.87
4221.4	Qualifying Quarters of Coverage	M221.31	4248.8	Savings from Excluded Income	M232.88
4222	Formation of the Medicaid Group	M222	4248.9	Federal Exclusions	M232.89
4222.1	Medicaid Groups for Single Adults	M222.1	4249	Exclusions for Limited Periods	M232.9
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4222.3	Exceptions for Adults with Spouses	M222.21	4249.1	SSI/AABD	M232.91
4222.4	Medicaid Groups for Children	M222.3		Funds for Replacing Excluded	
4223	Deeming	M223	4249.2	Resources	M232.92
4223.1	Temporary Absences	M223.1	4249.3	Earned Income Tax Credit	M232.93
4230	Resources	M230	40.40.4	Medical or Social Services	M000 04
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4232	Nonliquid Resources	M231.1	4249.5 4249.6	Victim's Compensation Payments Relocation Payments	M232.95 M232.96
4232.1	Real Property	M231.11	4249.0	Expenses from Last Illness and	101232.90
4233	Liquid Resources	M231.2	4249.7	•	M232.97
4233.1	Accounts in Financial Institutions	M231.21	4249.8	Stocks, Bonds, and Funds	M232.98
4233.2	Stocks, Bonds, and Funds	M231.23		Home-Based Long-Term Care	
4233.3	Annuities	M231.24	4249.9	Disregard	M232.99
4233.4	Mortgages and Promissory Notes	M231.25	4250	Value of Resources	M233
4234 4234.1	Resources Managed by Third Party Power of Attorney	M231.3 M231.32	4251	Jointly Owned Resources	M233.1
4234.1	Guardian	M231.32	4251.1	Tenancy in Common	M233.11
4234.2	Representative Payee	M231.34	4251.2	Joint Tenancy	M233.12
4234.3	Excluded Resources	M232	4251.3	Tenancy by the Entirety	M233.13
4241	Real Property	M232.1	4252	Value of Certain Resources	M233.2
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4241.2	Sale of Excluded Home	M232.11	4252.2	Life Estates	M233.22
4241.3	Real Property for Sale	M232.13	4252.3	Jointly Owned Real Property	M233.23
4241.4	Home Equity Conversion Plans	M232.14	4252.4	U.S. Savings Bonds	M233.24
4241.5	Jointly Owned Real Property	M232.15	4252.5	Income-Producing Notes and Contracts	M233.25
4241.6	Life Estates	M232.16	4252.5		M233.26
4241.7	Income-Producing Real Property	M232.17	4252.6	Substantial Home Equity Countable Resources	M234
4241.8	Goods For Home Consumption	M232.18	4260	Individuals Other than Children	M234.1
4242	Insurance	M232.2	4201	Individuals Other trial Children Individuals with Spouses and Not in	
4242.1	Life Insurance	M232.21	4262	Long-Term Care	M234.2
	Long Term Care Insurance		4263	Blind or Disabled Children	M234.3
4242.2	Partnership	M232.22	4264	Individuals with Spouses and in	M234.4
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New		Old	New		Old
Number	Title	Number	Number	Title	Number
1 (0,1110 01	Long-Term Care	1 (0/11/0 01	4332.1	Public Institution	M313.1
	Individuals with a Community		4332.2	Private Facility	M313.2
4264.1	Spouse	M234.41	4332.3	Correctional Facility	M313.3
4264.2	Allocation to a Community Spouse	M234.42	4340	ANFC-related Eligibility Factors	M320
4270	Income Requirements	M240	4341	Age	M321
4271	Types of Income	M241	4342	Pregnancy	M322
4272	Earned Income	M241.1	4342	Parents and Caretaker Relatives	M323
4272.1	Self-Employment Income	M241.11	4350	Financial Eligibility	M330
4273	Unearned Income	M241.2	4330	Financial Responsibility of	101330
4280	Income Exclusions	M242	4351	Relatives	M331
4280.1	Earned Income Exclusions	M242.1	4351.1	Spousal Responsibility	M331.2
4280.2	Unearned Income Exclusions	M242.2	4351.2	Parental Responsibility	M331.3
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1201	Financial Responsibility Group of	1112 10	4361	Medicaid Group Formation	M332.1
4281.1	One	M243.1	4001	Exceptions to the Medicaid Group	1002.1
	Financial Responsibility Group of		4361.1	Formation Rules	M332.11
4281.2	Two	M243.2		Exclusions from Income and	
4281.3	Parent and Child Living Together	M243.3	4362	Resources	M336
	Children Seeking Community		4363	Sponsored Aliens	M337
4281.4	Medicaid	M243.4	4363.1	Qualifying Quarters of Work	M337.1
4004 =	Individuals Seeking Long-Term		4370	Resources	M340
4281.5	Care	M243.5		Jointly Owned and Jointly Held	
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4281.6	Facilities	M243.51	4372	Resource Disregard	M340.2
4281.7	Waiver or Hospice Services	M243.52	4373	Liquid Assets	M341
4282	Income Deductions	M245	4373.1	Life Insurance	M341.1
4283	Earned Income Deductions	M245.1	4373.2	Trusts	M341.2
4283.1	Business Expenses	M245.11	4373.3	Trusts Established Prior to 1994	M341.21
4283.2	Work Expenses of Blind Individuals Work Expenses of Disabled	M245.12	4373.4	Trusts Established After 1993	M341.22
4283.3	Individuals	M245.13		Burial Plots and Funeral	
4284	Unearned Income Deductions	M245.13	4373.5	Agreements	M341.3
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4301	Eligibility	M301	4374.1	Real Property	M342.1
4301.1	Income Maximum	M301.1	4374.2	Vehicles	M342.2
4301.1	Deprivation Not Required	M301.1	4374.3	Income-Producing Property	M342.3
4301.2	Categorically Needy Coverage	101301.2	4375	Lump Sum Receipts	M344
4310	Groups	M302	4380	Income	M350
4311	Eligible Family Members	M302.1	4381	Unearned Income	M351
	Family Members Eligible Based on		4382	Earned Income	M352
4312	Exceptions	M302.2	4382.1	Income Computation	M352.1
4312.1	Eligible Except for Earnings	M302.21	4382.2	Business Expenses	M352.2
4312.2	Eligible Except for Child Support	M302.22	4382.3	Employment Expenses	M352.3
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4312.3	Status	M302.23		Long Term Care and Community	
4312.4	Recipients in August 1972	M302.24	4390	Spouses	M360
	Eligible Except for Child Care		4400	Spenddown, Patient Share, and	M400
4312.5	Payments	M302.25	4400	Resource Transfer	M400
4312.6	Children Under 18 (Dr. Dynasaur)	M302.26	4410	Living Arrangements	M401
4312.7	Pregnant Women (Dr. Dynasaur)	M302.27	4411	Community Living Arrangement	M401.1
4312.8	Other Eligible Family Members	M302.28	4412	Long-Term Care Living Arrangement	M401.2
4320	Medically Needy Coverage Groups	M303	4412	Accounting Periods	M401.2
4330	Citizenship and Identity	M311	4420 4421	Six-Month Spend-down Period	M402.1
4330.1	Emergency Medical Services	M311.1	4421	One-Month Patient-Share Period	M402.1
4331	Residence	M312	4422	Spenddown of Excess Resources	141402.2
4332	Living Arrangements	M313	4430	and Income	M410
			. 100		

New		Old	New		Old
Number	Title	Number	Number	Title	Number
4431		M411	4473.3		
4431	Spending Down Excess Resources Retroactive Coverage	M411.1	4473.3	Other Transfers to Family Members Transfers of Annuities	M440.34
4432	Spending Down Excess Income	M412	4473.4	Jointly Held Income or Resources	M440.35
4434	Allowable Uses of Excess Income	M412.1	4473.3	Income-Producing Notes and	101440.33
4440	Medical Expense Spenddown	M420	4473.6	Contracts	M440.36
4441	Eligibility Date	M420.1		Penalty Period for Disallowed	
4442	Deduction Sequence	M420.2	4474	Transfers	M440.4
4443	Time Frames for Deductions	M420.3	4474.1	Penalty Date	M440.41
4443.1	Predictable Expenses	M420.31	4474.2	Penalty Period	M440.42
4443.2	Prior Medical Expenses	M420.32		Penalty when Both Spouses	
4450	Allowable Medical Expenses	M421	4474.3	Request Long-Term Care Coverage	M440.43
4451	Health Insurance Expenses	M421.1	4474.4	Undue Hardship	M440.44
4452	Expenses Not Covered by Medicaid	M421.2	7201	Payment for Hospital Services	M500
	Over-the-Counter Drugs and		7201.1	Reimbursement Standards	M501
4452.1	Supplies	M421.21	7201.2	Disproportionate Share	M505
4452.2	Transportation	M421.22	7202	Inpatient Services	M510
4452.3	Personal Care Services	M421.23	7202.1	Excluded Services	M511
4452.4	Assistive Community Care Services	M421.24	7202.2	Dental Procedures	M512
4453	Covered Medical Services	M422	7202.3	Psychiatric Care	M513
4454	Third-Party Coverage	M423	7202.4	Care of Newborn Child	M514
4460	Patient Share Payment for Long- Term Care	M430	7203	Outpatient Services	M520
4461	Long-Term Care Residence Period	M431		Physicians and Other Licensed	
4401	Percentage of Month in Long-Term	101-131	7301	Practitioners	M600
4461.1	Care	M431.1	7301.1	Physician Services	M610
	Determining Maximum Patient		7301.2	Psychiatric Services	M611
4461.2	Share	M431.2	7005	Covered Organ and Tissue	Modo
4462	Deductions from Patient Share	M432	7305	Transplants	M613
4400.4	Personal Needs Allowance and	N4400 4	7310	Surgery Sterilizations and Related	M615
4462.1	Community Maintenance Allowance	M432.1	7309	Procedures	M616
4462.2	Home Upkeep Deduction	M432.2	7306	Fertility Services	M616.1
4462.3 4462.4	Allocation to Family Members Allocation to Community Spouse	M432.3 M432.31	7302	Abortion	M617
4462.5	Allocation to Other Family Members	M432.32	7303	Acupuncture	M618
4463	Transfer Between Nursing Facilities	M433	7307	Massage Therapy	M618.1
4400	Hospital Admission From Nursing	WITOO		Medical and Surgical Services of a	
4463.1	Facility	M433.1	7311	Dentist	M619
	Transfer from Waiver Services to		7311.1	Eligibility for Care	M619.2
4463.2	Nursing Facility	M433.2	7311.2	Covered Services	M619.3
4400.0	Discharge from Nursing Facility to		7311.3	Conditions for Coverage	M619.4
4463.3	Waiver Services	M433.3	7311.4	Prior Authorization Requirements	M619.5
4463.4	Discharge from Long-Term Care	M433.4	7311.5	Qualified Providers	M619.7
4463.5	Termination of Eligibility for Long- Term Care	M433.5	7311.6	Reimbursement	M619.8
4463.6	Patient Share in the Month of Death	M433.6	7312	Dental Services for Beneficiaries Under Age 21	M620
4400.0	Income or Resource Transfer and	W-00.0	7312.1	Eligibility for Care	M620.2
4470	Long-Term Care Coverage	M440	7312.1	Covered Services	M620.3
4471	Definition of Transfer	M440.1	7312.3	Conditions for Coverage	M620.4
4472	Transfers for Fair Market Value	M440.2	7312.4	Prior Authorization Requirements	M620.5
4472.1	Receipt of Fair Market Value	M440.21	7312.5	Non-Covered Services	M620.6
	Transfers for Less than Fair Market		7312.6	Qualified Providers	M620.7
4473	Value	M440.3	7312.7	Reimbursement	M620.8
4473.1	Transfers of Trusts for Less than Fair Market Value	M440.31		Dental Services for Beneficiaries	
4413.1	Transfers of Homes to Family	1V144U.3 I	7313	Age 21 and older	M621
4473.2	Members	M440.32	7313.1	Eligibility for Care	M621.2
		-	7313.2	Covered Services	M621.3

New		Old	New		Old
Number	Title	Number	Number	Title	Number
7313.3	Conditions for Coverage	M621.4	7407.1	Reimbursement	M751
7313.4	Prior Authorization Requirements	M621.5	7408	Transportation	M755
7313.4	Non-Covered Services	M621.6	7409	Planned Parenthood of Vermont	M760
7313.6	Qualified Providers	M621.7	7403	Early and Periodic Screening,	1017 00
7313.7	Reimbursement/Copayments	M621.8	7410	Diagnosis and Treatment (EPDST)	M770
7313.7	Orthodontic Treatment	M622	7410.1	Informing	M771
7314.1	Eligibility for Care	M622.2	7410.2	Screening and Outreach	M772
7314.1	Covered Services	M622.3	7410.3	Corrective Treatment	M773
7314.2	Conditions for Coverage	M622.4	7410.4	Rates of Payment	M774
7314.3	Prior Authorization Requirements	M622.5	7411	Private Non-Medical Institutions	M781
7314.4	Qualified Providers	M622.7	7411.1	Residential Child Care Facilities	M781.1
7314.5	Reimbursement	M622.8	7411.2	Prior Authorization	M781.11
7314.6		M630	7411.3	Reimbursement	M781.12
7306	Podiatry Services	M640	7411.4	Assistive Community Care Facilities	
	Chiropractic Services		7411.5	Reimbursement	M781.21
7315	Audiology Services/Hearing Aids	M650	7 111.0	Pharmaceuticals, Medical Supplies	
7315.1	Eligibility for Care	M650.2		and Equipment; General	
7315.2	Covered Services	M650.3	7501	Information	M800
7315.3	Conditions for Coverage	M650.4		Beneficiaries Eligible for Medicaid	
7315.4	Prior Authorization Requirements	M650.5	7501.1	and Medicare	M801
7315.5	Non-Covered Services	M650.6	7502	Prescribed Drugs	M810
7315.6	Qualified Providers	M650.7	7502.1	Smoking Cessation Products	M811
7315.7	Reimbursement	M650.8	7502.2	Non-Drug Items	M811.1
7316	Eyeglasses and Vision Care Services	M670		Amphetamines and Appetite	
7316.1		M670.2	7502.3	Depressants	M811.2
7316.1	Eligibility for Care Covered Services	M670.2	7502.4	Vitamins and Minerals	M811.3
7316.2	Conditions for Coverage	M670.4	7502.5	Other Preparations	M811.4
7316.3	Prior Authorization Requirements	M670.4	7502.6	Family Planning Items	M812
7316.4	Non-Covered Services	M670.6	7501.2	Payment Conditions	M813
7316.5	Qualified Providers	M670.7	7501.3	Payments for Prescribed Drugs	M813.1
7316.7	Reimbursement	M670.7	7501.4	Price for Ingredients	M813.2
7310.7	Home Health Agency Services	M710.1	7501.5	Compounded Prescriptions	M813.3
7401.1	Eligibility for Care	M710.1	7504.0	Beneficiaries in Long-Term Care	M040 4
7401.1	Covered Services	M710.2	7501.6	Haused Drugs From Long Torm	M813.4
7401.2	Conditions for Coverage	M710.3	7501.7	Unused Drugs From Long-Term Care Facilities	M813.5
7401.3	Prior Authorization Requirements	M710.4 M710.5	7503	Whole Blood	M820
7401.4	Non-Covered Services	M710.5	7503 7504	Medical Supplies	M830
7401.5	Qualified Providers	M710.7	7504.1	Eligibility for Care	M830.2
7401.0	Reimbursement	M710.7	7504.1	Covered Services	M830.3
7401.7	Hospice Services	M715	7504.3	Conditions for Coverage	M830.4
7402	Clinic Services	M720	7504.4	Prior Authorization Requirements	M830.5
7403	Mental Health Clinics	M721	7504.5	Non-Covered Services/Supplies	M830.6
7403.1	Indian Health Service Facilities	M722	7504.6	Qualified Providers	M830.7
7403.2	Rural Health Clinics	M723	7504.7	Reimbursement	M830.8
7403.3 7405		M730	7505	Durable Medical Equipment (DME)	
7405 7406	Laboratory and Radiology Services	M740.1	7505.1	Eligibility for Care	M840.2
7406.1	Personal Care Services	M740.1	7505.1	Covered Services	M840.3
7406.1	Eligibility for Care		7505.2	Conditions for Coverage	M840.4
7406.2 7406.3	Covered Services Qualified Providers	M740.3 M740.4	7505.3 7505.4	Prior Authorization Requirements	M840.5
7406.3 7406.4	Non-Covered Services	M740.4 M740.5	7505.4 7505.5	Non-Covered Services	M840.6
7406.4 7406.5	Guidelines for Coverage	M740.5 M740.6	7505.6	Qualified Providers	M840.7
7406.5 7406.6	_	M740.6 M740.7	7505.0 7505.7	Reimbursement	M840.8
7406.6	Prior Authorization Requirements Reimbursement	M740.7 M740.8	1000.1	Wheelchairs, Mobility Devices and	IVIOTO.O
7406.7 7407	Ambulance Services	M750	7506	Seating Systems	M841.1
1401	Ambulance Services	IVI / OU		J ,	

New		Old	New		Old
Number	Title	Number	Number	Title	Number
7506.1	Eligibility for Care	M841.2	7603.3	Personal Comfort Items	M920.3
7506.2	Covered Services	M841.3		Services in a Non-Medicare Facility	
7506.3	Conditions for Coverage	M841.4	7603.4	(ICF's)	M920.4
7506.4	Prior Authorization Requirements	M841.5		Services Provided By a Medicare	
7506.5	Non-Covered Services	M841.6	7603.5	Participating Facility (SNF)	M920.5
7506.6	Qualified Providers	M841.7	7604	Duration of Coverage	M930
7506.7	Reimbursement	M841.8	7604.1	Nursing Home Leave of Absence	M930.1
	Augmentative Communication		7604.2	Absence Due to Hospitalization	M930.2
7507	Devices/Systems	M842.1	7604.3	Leave of Absence In ICF/MR's	M930.3
7507.1	Eligibility for Care	M842.2	7605	Patient Classifications	M940
7507.2	Covered Services	M842.3	7605.1	Authorization for Care	M940.1
7507.3	Conditions for Coverage	M842.4	7605.2	Level of Care - SNFs, ICFs	M940.2
7507.4	Prior Authorization Requirements	M842.5	7005.0	Level of Care - ICF/MRs -	M040.2
7507.5	Non-Covered Services	M842.6	7605.3	Psychiatric Facilities	M940.3
7507.6	Qualified Providers	M842.7	7605.4	Level of Care - Mental Hospitals	M940.4
7507.7	Reimbursement	M842.8	7605.5	Pre-Admission Review	M940.5
7508	Prosthetics Devices	M843.1	7605.6	Post-Admission Review Determining Need for Continued	M940.6
7508.1	Eligibility for Care	M843.2	7605.7	Stay	M940.7
7508.2	Covered Services	M843.3	7000.7	Request for Reconsideration and	1013-10.7
7508.3	Conditions for Coverage	M843.4		Appeal of Level of Care or	
7508.4	Prior Authorization Requirements	M843.5	7606	Termination	M950.1
7508.5	Non-Covered Services	M843.6		Appeal Process; Review of	
7508.6	Qualified Providers	M843.7	7606.1	Reconsideration	M950.2
7508.7	Reimbursement	M843.8		Appeal Process; Mental Health	
7601	Long-Term Care Institutions	M900	7606.2	Facilities	M950.3
7601.1	Definitions	M901	7606.3	Appeal Process; Medicaid Financia	M950.4
7601.2	Medical Review Systems	M902	7606.3	Eligibility Appeal Process Provider	101950.4
	Per Diem Rates and Payment		7607	Agreement	M960.1
7602	Conditions	M910	7007	Notice of Voluntary Medicaid	111000.1
7602.1	Billings for Long Term Care	M910.1	7607.1	Closure	M960.2
7602.2	Supplementation Prohibition	M910.2		Medicaid Closure or Prohibition by	
7603	Daily Care Services	M920	7607.2	the State of Vermont	M960.3
	Drugs in a Long-Term Care			Level I and Level II Care in	
7603.1	Facilities	M920.1	7608	Vermont General Hospitals	M970
7603.2	Drugs in the Vermont State Hospital	M920.2			