

**MEMORANDUM OF UNDERSTANDING
BETWEEN THE DEPARTMENT OF VERMONT HEALTH ACCESS AND THE
AGENCY OF ADMINISTRATION**

The Department of Vermont Health Access (DVHA) and the Agency of Administration (AoA) will collaborate to support the work of the Office of Health Care Ombudsman with the Level 1b Establishment Grant # HBEIE130147, and Level 1c Establishment Grant # HBEIE130168 (Exchange Grants) awarded to DVHA for use through June 30, 2015. Through this agreement, DVHA will be responsible for the administration and reporting related to the federal award, while AoA will manage and track Health Care Ombudsman work performed and outcomes resulting from the work.

Purpose

DVHA agrees to transfer up to **\$876,603.00** to the AoA for functions relating to AoA's role in the management of the Health Care Ombudsman Office.

Services to be Performed

It is expected that AoA will ensure the Health Care Ombudsman Office provides the State with the following services, but not limited to:

1. Provide information to individuals regarding their obligations and responsibilities under the Patient Protection and Affordable Care Act (Public Law 111-148);
2. Provide information to individuals regarding federal advance premium tax credits and cost sharing reductions available under the Patient Protection and Affordable Care Act (Public Law 111-148) and the state premium and cost sharing assistance available under 2013 Acts and Resolves No. 50;
3. Assist health insurance consumers with health insurance plan selection by providing referrals to Vermont Health Connect's consumer services program. This includes Navigators, In-Person Assistors, and consumer call center. The Health Care Ombudsman Office will receive referrals from Vermont Health Connect's consumer services program when health insurance consumers have questions or issues beyond the scope of Vermont Health Connect's consumer services program;
4. Assist health insurance consumers with qualified health plans who have questions, complaints, grievances, or appeals regarding his or her qualified health plan, coverage, or a determination under that qualified health plan or coverage;
5. Assist health insurance consumers with grievances, appeals, and other issues involving Vermont Health Connect or qualified health plans;
6. Identify, investigate and resolve complaints on behalf of individual health insurance consumers enrolled in or attempting to enroll in health insurance through Vermont Health Connect and assist those consumers with the filing and pursuit of complaints and appeals;
7. Provide information to the public, Vermont Health Connect, the State, and State affiliates regarding problems and concerns of health insurance consumers and make recommendations for resolving those problems and concerns;
8. Analyze and monitor the development and implementation of federal, state and local laws, regulations and policies relating to health insurance offered through Vermont Health Connect and recommend changes as necessary;

9. Facilitate public comment on laws, regulations, and policies related to Vermont Health Connect, including policies and actions of health insurers;
10. Develop and maintain an on-going process for assessing and monitoring health insurance consumer interests in relation to Vermont Health Connect;
11. Pursue administrative, judicial, and other remedies on behalf of any individual health insurance consumer, or group of consumers, enrolled or attempting to enroll into health insurance through Vermont Health Connect;
12. Review draft notices produced by Vermont Health Connect and recommend changes as necessary;
13. Perform outreach activities to Vermonters about Vermont Health Connect, the options for individuals to access coverage, the availability of financial help and decision-making tools, the appeals processes of the State, and the role of the Health Care Ombudsman and how to access the Health Care Ombudsman;
14. Make information obtained through its Health Care Ombudsman functions available to Vermont Health Connect consistent with the State's established confidentiality policies and rules. The Health Care Ombudsman Office and Vermont Health Connect shall develop a mutually agreeable arrangement for sharing information between Vermont Health Connect's consumer services function, including Navigators and call center, and the Health Care Ombudsman in order to facilitate the processing and resolution of complaints and to avoid duplication of services. The Health Care Ombudsman Office shall use a release form to be sent to consumers who use the Health Care Ombudsman that specifies the information that will be shared with Vermont Health Connect and State with the consumer's permission. The Health Care Ombudsman Office shall report to Vermont Health Connect any systemic issues it identifies, and describe the information used to make the determination.

Reporting

1. AoA shall ensure the Health Care Ombudsman Office submits quarterly statistical reports to the State indicating the following:
 2. The number of complaints opened, pending and closed;
 3. A breakdown by complaint type, including: whether the complaint was related to Vermont Health Connect or plans offered on Vermont Health Connect, whether each complaint was verified, the manner of disposition, a categorization of the complainants' demographic information regarding the complaints, and the number of days necessary to resolve each complaint.
4. The quarterly report will also include a qualitative and quantitative description of the Health Care Ombudsman Office's outreach activities regarding Vermont Health Connect. Quarterly reports shall be due three (3) weeks following the end of the quarter. The State reserves the right to revise these reporting requirements and require submission of such additional information, or regrouping of the data into such different categories as the State deems necessary to administer this Grant, and to identify and address significant problems with Vermont Health Connect and other problems in Vermont's health insurance/Medicaid market. The State will work with the Health Care Ombudsman Office to assure such reporting requirements are not unduly burdensome.

Term of Agreement

This MOU will be in effect upon signature by the Commissioner of DVHA and will end on June 30, 2015. This MOU shall be amended as necessary.

Contacts

DVHA	
Name: Emily Trantum	Title: Contract and Grant Administrator
Phone: (802) 879-5946	E-mail: emily.trantum@Vermont.gov
Name: Robert Skowronski	Title: Deputy Commissioner
Phone: (802) 363-2080	E-mail: Robert.Skowronski@Vermont.gov
AOA	
Name: Jason Pinard	Title: Financial Director
Phone: (802) 828-3547	E-mail: jason.pinard@Vermont.gov
Name: Devon Green	Title: Health Care Policy Analyst
Phone: (802) 279-9698	E-mail: devon.green@Vermont.gov

Payment Terms

1. AoA agrees to submit one invoice and journal entry for SFY15 in the amount of \$552,000, and one invoice and journal entry for FY14 for \$157,398 no later 6/25/15. DVHA will research previous payment made to AoA to confirm that the FY14 remains due.
2. AoA agrees to provide back up to this invoice that includes the following:
 - The legislative reference for services that are being paid by this MOU;
 - The allocation of the cost of these services across all funding agencies;
 - Approval of the invoice confirming that the vendor provided the services requested and all reporting required by the State and that invoice accurately reflects the services provided.
3. DVHA will initiate an interdepartmental transfer to reimburse AoA. Notification of the transfer will be sent via email to Jason Pinard in the AoA business office @ jason.pinard@Vermont.gov
4. AoA shall use the appropriate program codes as identified in the Budget Detail found below in reporting their actual VISION expenses for contracts and staff in order to properly report all AoA reimbursable expenses for this project.

The following table identifies the funding sources for services performed under this MOU

DVHA - AoA MOU funding for Vermont Legal Aid Agreement

Service Dates	Fund	Funding by time period			Total 18 months
		1/1/14-6/30/14	SFY'14	SFY'15	
GC	20405	172,039.59	172,039.59	361,560.00	533,599.59
SFY'15 VHC	21500	-	-	-	-
Level 1b (HBEIE130147)	22005	152,563.41	152,563.41		152,563.41
Level 1c (HBEIE130168)				190,440.00	190,440.00
Total		324,603.00	324,603.00	552,000.00	876,603.00
Coding					
22005-41770		152,563.41	152,563.41	190,440.00	343,003.41
20405-41770		172,039.59	172,039.59	361,560.00	533,599.59
		324,603.00	324,603.00	552,000.00	876,603.00

FY	Source	Amount	CFDA Title	CFDA	Award Name	Award #	Award Year	Granting Agency	R&D
FY14	GC	\$172,039.59							
FY15	GC	\$361,560.00							
FY14	Federal	\$152,563.41	Cooperative Agreements to Support Establishment of State-Operated Health Insurance Exchanges	93.525	Cooperative Agreements to Support Establishment of State-Operated Health Insurance Exchanges	HBEIE130147	2013	HHS, CCIIO	No
FY15	Federal	\$190,440.00	Cooperative Agreements to Support Establishment of State-Operated Health Insurance Exchanges	93.525	Cooperative Agreements to Support Establishment of State-Operated Health Insurance Exchanges	HBEIE130168	2013	HHS, CCIIO	No

The provisions of this Memorandum of Understanding are hereby entered into and agreed to by virtue of the authorized signatures below:

<p>_____</p> <p>Steven Costantino, Commissioner Department of Vermont Health Access</p> <p>_____</p> <p>Date</p>	<p>_____</p> <p>Michael Clasen, Deputy Secretary Agency of Administration</p> <p>_____</p> <p>Date</p>
--	--