MEMORANDUM

To: Designated Agency (DA) Children’s Mental Health Directors and Developmental Services Directors

From: Department of Disabilities, Aging and Independent Living (DAIL): Amy Roth and Diane Bugbee
Department of Mental Health (DMH): Laurel Omland, Cheryle Wilcox, and Dana Robson

cc: State Interagency Team, Local Interagency Team Coordinators, AHS Field Directors, DA Executive Directors, Family Services District Directors, Family Services Management Team

Re: Clarification of services for children with developmental disabilities

Date: February 25, 2020

We are sending this memo to ensure clarity about services and supports the State funds for children with developmental disabilities. Recently, state staff have been managing numerous situations in which families have been given inaccurate information and/or are struggling to understand the process to access services.

1. First and foremost, it is erroneous to advise parents and caregivers of children with developmental disabilities that a child must be in DCF (Department for Children and Families) custody to access developmental disabilities services. If you believe a child is in need of developmental disabilities services, they should be referred to the Developmental Service program at the Designated Agency.

2. We expect the Developmental Service (DS) and Mental Health providers (MH) at DAs are coordinating, collaborating, and reaching out to state partners who are happy to problem-solve with you. Remember these situations can also be elevated through the Act 264 process. During the Act 264 process and Coordinated Services Planning, DS and MH partners should be at the table together in instances where there is a child with or suspected of having developmental disability and mental health needs.

Below is a list of services and supports the state funds for children with developmental disabilities:

• **The Bridge Program**
  Care Coordination for Children with Developmental Disabilities
  The Bridge Program provides support to families in need of Care Coordination to help them access and/or coordinate medical, educational, social or other services for their children with developmental disabilities under the age of 22. Clinical eligibility, financial eligibility, and approval for this service is determined by the DAs. A child must have Vermont Medicaid to be eligible for this service.

• **Flexible Family Funding**
  Flexible Family Funding (FFF) provides funding for respite and goods for children and adults who live with their biological or adopted family or legal guardian and do not receive home and community-based services funding. These funds are used at the discretion of the family for services and supports that benefit the individual and family. Families apply for FFF
through the DA, which is responsible for determining clinical and financial eligibility. Respite providers must pass the DAIL background check.

- **Family Managed Respite**
Family Managed Respite (FMR) is funding for families to pay a respite worker to care for their child with a disability so that they can have a temporary break from caregiving. The program is for children up to age 21 who live with their biological or adopted family or legal guardian. Children with mental health or developmental disabilities who do not receive home and community-based services funding (through Developmental Disabilities Services, Children’s Mental Health or CRT) may be eligible to receive FMR as part of a plan of care with the DA. Eligibility for FMR is determined through a needs assessment. A child must also have Vermont Medicaid. If eligible, families are given an allocation of respite funds that they manage. In collaboration with ARIS Solutions (the State contracted payroll company), families are responsible for recruiting, hiring, training and supervising the respite workers. Respite providers must pass the DAIL background check.

- **Home and Community Based Services**
Children with Developmental Disabilities (a diagnosis of an Autism Spectrum Disorder or an Intellectual Disability with accompanying significant deficits in adaptive functioning) may be eligible for Home and Community Based Services (HCBS) if they are in need of intensive services and also meet a System of Care funding priority for Developmental Disabilities Services. Services may include service coordination, respite, home support, and clinical support. A child and family must go through the intake eligibility process through their DA and the child must have Vermont Medicaid.

- **Applied Behavior Analysis (ABA)**
This State Plan Medicaid benefit is managed by the Department of Vermont Health Access and is available from some Designated Agencies as well as private providers across the state. ABA services can be billed to Medicaid for children up to 21 years of age. ABA focuses on treating behavioral difficulties by changing the individual’s environment rather than focusing on variables that are unlikely to change. For more information about this State Plan service you can go to: [https://dvha.vermont.gov/for-providers/applied-behavior-analysis-aba/](https://dvha.vermont.gov/for-providers/applied-behavior-analysis-aba/)

As a joint DMH and DAIL team, we will be reaching out to regions to schedule visits between the DS and MH staff at each DA. We would like to have a conversation about collaboration and how we are providing the most integrated services possible for families seeking support from DAs regardless of the identified need. Our goal is to work together as teams at both the state and local level.

If you have questions do not hesitate to reach out to any of us.

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