



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Daniel Dickerson, Fiscal Analyst *DWD*
Date: September 8, 2017
Subject: Limited-Service Position Request #2888

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the administration.

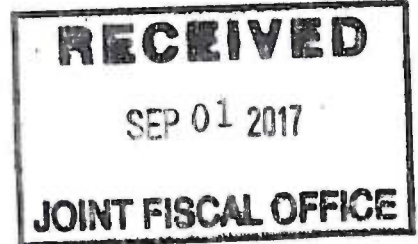
JFO #2888 – One (1) limited-service position within the Attorney General’s office. The position would both be titled Medicaid Fiscal and Regulatory Analyst and would be tasked with working with team members within the Medicaid Fraud and Residential Abuse Unit (MFRAU) to develop and carry out investigations into potential Medicaid fraud. The AG’s office is seeking this additional position to maintain timely investigations in light of the recent Medicaid expansion under the Affordable Care Act and passage of the Vermont False Claims Act. The position would be funded through an ongoing federal grant at a split of 75% federal dollars and 25% state dollars. The state dollars would be provided from penalties recovered by the MFRAU and deposited in a special fund. The AG’s office does not anticipate that any additional state dollars would be needed for the position.

[JFO received 9/1/17]

Please review the enclosed materials and notify the Joint Fiscal Office (Daniel Dickerson at (802) 828-2472; ddickerson@leg.state.vt.us) if you have questions or would like an item held for legislative review. Unless we hear from you to the contrary by September 22, 2017 we will assume that you agree to consider as final the Governor’s acceptance of these requests.

JFO 2888

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: Office of the Attorney General Date: 6/27/17

Name and Phone (of the person completing this request): Jason Turner 802-828-5332

Request is for:

- Positions funded and attached to a new grant.
- Positions funded and attached to an existing grant approved by JFO # 2230

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

United States Department of Health & Human Services, Office of Inspector General, State Medicaid Fraud Control Unit, Annually (Federal Fiscal Year) renewing grant based on budget submitted to OIG in advance of each fiscal year, Grant is funded in quarterly payments which are drawn down.

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:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Medicaid Fiscal & Regulatory Analyst indefinitely if grant is renewed.	1	AGO/MFRAU	10/1/17-9/30/18/ Expected to continue

*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:

The OIG State Medicaid Fraud Control Unit Grant requires the Unit Director to certify each year that the number of staff employed by the Unit are sufficient to meet the federally mandated mission and objectives. Due to the effects of Medicaid expansion under the Affordable Care Act, and the passage of the Vermont False Claims Act, the Unit needs an additional analyst position to appropriately review potential cases of fraud in compliance with the Grant.

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] Signature of Agency or Department Head Date: 7/07/17

Molly Paul Approved/Denied by Department of Human Resources Date: 8/7/17

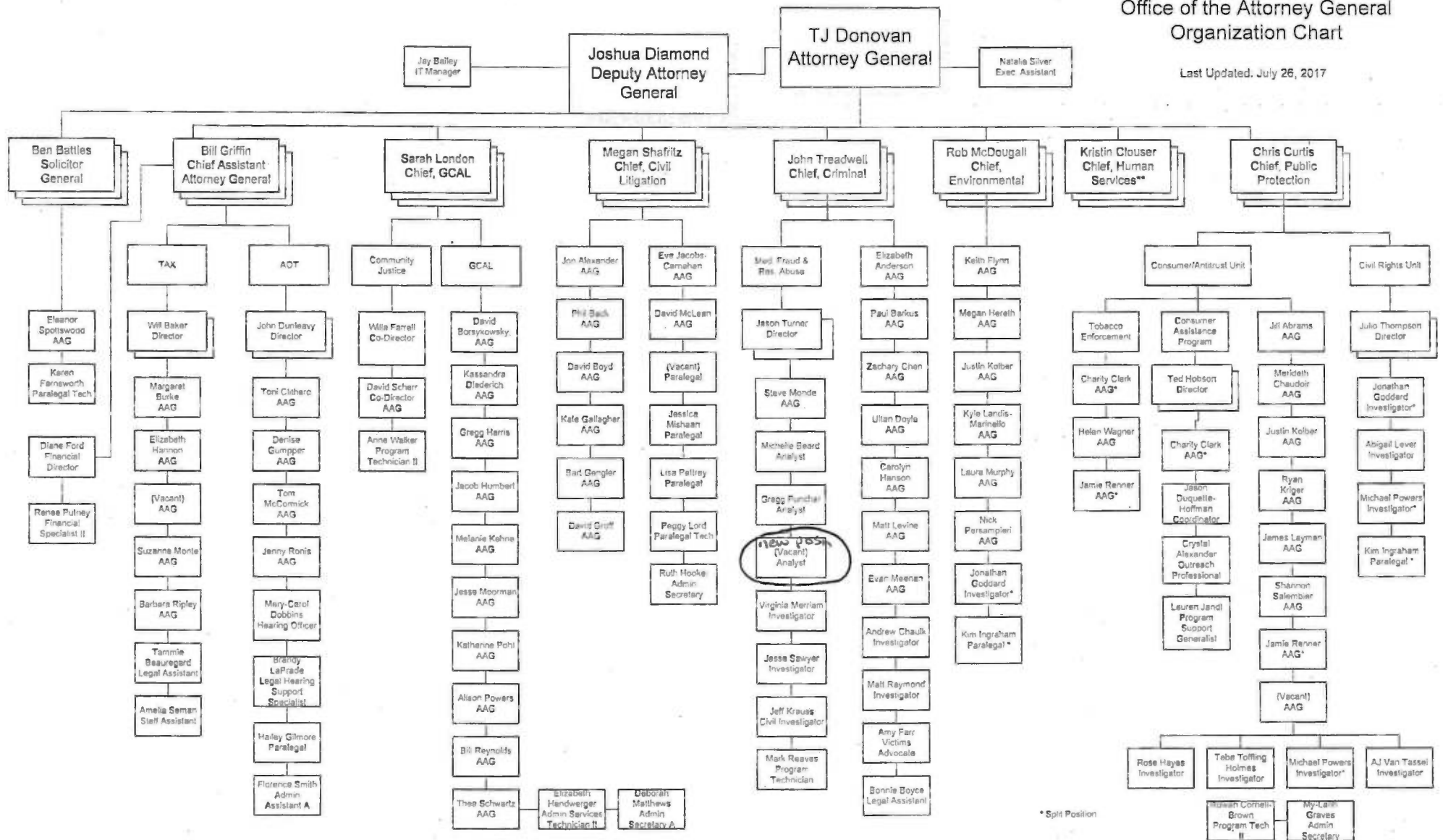
[Signature] Approved/Denied by Finance and Management Date: 28 Aug 17

[Signature] Approved/Denied by Secretary of Administration Date: 8/30/17

Comments:

Office of the Attorney General Organization Chart

Last Updated: July 26, 2017



* Split Position

Request for Classification Review Position Description Form A

For Department of Personnel Use Only

Notice of Action # _____	Date Received (Stamp) _____
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 _____
Comments: _____	Effective Date: _____
	Date Processed: _____
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: Request Job/Class Title:
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:

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.*

Under supervision by the Director and/or the Assistant Attorney General assigned to a particular case, the Medicaid Fraud & Residential Abuse Unit's (MFRAU) Medicaid Regulatory and Fiscal Analysts are responsible for working with other team members to develop and carry out investigative plans for assigned cases. The Analyst's specific case activities may include using Medicaid MMIS, Business Objects, DSS Profiler, and other analytical tools to examine claims data in order to determine the extent and pattern of alleged fraud, reviewing and summarizing relevant documents and records (e.g., timesheets), preparing analytical charts and exhibits, helping to prepare for and, when safe and appropriate, conduct witness interviews, and testifying at depositions and/or court hearings. Analysts must be able to reduce large volumes of data to a format that is understandable by team members, witnesses, judges, or jury members, who do not have the same specialized training as the Analyst. The Analyst will have to use Microsoft Excel extensively in compiling, analyzing, and presenting data. Analysts will also be required to review and understand numerous rules and regulations related to specific parts of the Medicaid Program and apply those rules and regulations to the data that they gather. Analyst may also be required to understand medical coding, and various aspects of medical billing. In addition, Analysts will gather large data requests for multi-state litigations and provide that information to NAMFCU Global Case teams. All of these tasks are focused on determining whether Medicaid providers have committed fraud, submitted false claims, received an overpayment, or abused or neglected vulnerable adults. The work product created by the Analyst, and their opinions, will be used to help determine if criminal charges should be filed, civil enforcement actions undertaken, and to assist in the preparation and presentation of such cases.

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*.

MFRAU Investigators- The Medicaid Regulatory and Fiscal Analyst will work with criminal or civil investigators from MFRAU in each of investigations that they handle. These interactions are specific to each case, but are primarily related to planning and explaining analyses of claims data, medical documents, billing documents, or other data necessary for

an investigation. The Analyst may also provide subject matter expertise to the investigator in determining an investigation plan for a particular case.

DVHA PI Staff- The Medicaid Regulatory and Fiscal Analyst will be a primary point of contact between MFRAU and DVHA PI Auditors who refer investigations to MFRAU. The Analyst will work with the DVHA-PI staff to understand the claims analysis and investigation done by DVHA-PI and to coordinate additional collaboration between the teams.

Assistant Attorney Generals- The Medicaid Regulatory and Fiscal Analyst will assist the AAG in preparing parts of a criminal prosecution or civil enforcement case for filing in Court, or prosecution of the case. The Analyst will also assist the AAG in effectively using data gathered in the case to make proper decisions on how to proceed with a case or presenting a case.

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.

The Medicaid Regulatory and Fiscal Analyst must be familiar with the use of Microsoft Excel, Medicaid Management Information System (MMIS), Business Objects, and other database software. The Analyst must also have a familiarity with healthcare billing and terminology. The position also requires considerable knowledge of federal and state Medicaid law, rules, and regulations.

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:

This position does not supervise any other employees.

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.

The Medicaid Regulatory and Fiscal Analyst is assigned specific cases for investigation by the MFRAU Director. Once a case is assigned the Analyst is expected to work collaboratively with the supervising attorney and investigator assigned to the case to determine the investigative plan. While the MFRAU Director will determine which cases are to be prioritized, the Analyst is responsible for setting the priority for individual tasks that are required to complete an analysis and support the investigation team.

The supervising attorney or investigator will review the analyses with the Analyst and

determine if additional steps are necessary before deciding whether to pursue an enforcement action. The supervising attorney will also review all subpoenas and civil investigative demands before they are issued.

The MFRAU director will review the Analyst's work performance on a regular basis and complete an annual evaluation

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 significant mental demands associated with this job are determining how to design an analysis to expose a complex fraudulent scheme in an area of often confusing and difficult regulation, and staying up-to-date and informed on those regulations. As part of an analysis the Analyst will have to be able to interpret data to develop new strategies and explain their results to an investigative team. As part of that team, the Analyst will have to weigh the evidence and make recommendations to the supervising attorney whether to pursue enforcement in cases that are rarely clear cut. Numerous difficult decision are encountered in these tasks as described below:

The Analyst must consider the capabilities of the Medicaid MMIS system and decide within those capabilities how to construct queries and analyses that will efficiently and effectively demonstrate or disprove a fraud allegation. This will include understanding the data that is available, what each data point means, the rules and regulations governing the claims, and how to compare the data to rules and normalized standards. The analysis can be vital in the determination of whether a case proceeds further towards witness interviews or other investigator steps. Following the analysis, the Analyst will have to assist in the investigative team in determining which documents are evidence are likely to have the most importance to the investigation, and how to best review and process those documents and evidence. Each of these decisions requires the Analyst to make value judgments, draw on previous experience and training, and be able to explain complex concepts and data in a manner that is understandable to investigators and attorneys who may not have the specialized training that the Analyst possesses. In order to make any of these decisions the Analyst must first understand the scope and nature of the rules and regulations that are impacted by an assigned case. Reaching this understanding often requires extensive research, potential discussions with subject matter experts at DVHA, and reliance on training and experience to interpret the rules and regulations.

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.*

The Medicaid Regulatory and Fiscal Analyst must ensure that the analyses they complete are done thoroughly and correctly or there is a real risk that enforcement actions will not be successful in recovering the funds wrongfully taken from the Medicaid program. Analysts routinely work on cases involving the expenditure of millions of dollars in state and federal funds. In any given year, an Analyst's work could be responsible for the recovery of up to \$5 million. In abuse and neglect cases there are real risks that failure to conduct a proper investigation can result in ongoing risks to other vulnerable adults if the provider's conduct is not corrected.

The Analyst will be in possession and responsible for reviewing large amounts of confidential documents and information. As a Health Oversight Agency, MFRAU obtains large quantities of HIPAA protected information in its investigations. In some cases MFRAU has information related to DCF or APS investigations that is confidential pursuant to State statutes. The Analyst is expected to make proper use of this information without making improper, unnecessary, or inadvertent disclosure of the confidential information.

The Analyst also will have significant duties with regard to the investigation of sealed cases under the Vermont False Claims Act. In such cases the existence of the case, and the identity of the whistleblower are made confidential by federal or state court order. The Analyst must be able to maintain this confidentiality while pursuing an investigation that can meaningfully inform the AAGs and AUSAs assigned to the case as to the proper handling of the case.

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.

Type	How Much of the Time?
The Medicaid Regulatory and Fiscal Analyst must complete work that has significant fiscal impacts for the State (up to millions of dollars in a single case) and can impact the life and liberty of individuals being investigated. The gravity of these issues which are decided with substantial input from the Analyst creates significant emotional and mental pressure.	The Analyst will be engaged in such investigatory efforts for approximately 80% of work time.

The Medicaid Regulatory and Fiscal Analyst may be asked to work in the field on certain investigations. MFRAU covers the entire State of Vermont and the Analyst must travel to locations where witnesses or perpetrators are located for these investigations. In order to locate witnesses or perpetrators in settings where obtaining statements is more likely to occur, travel may be necessary outside of normal business hours	The Analyst may be asked to participate in field work up to 10% of work time.

- 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.)

Type	How Much of the Time?
Potential Accidents- Working in the field increases the risk of accidental injury. The Medicaid Regulatory and Fiscal Analyst may be in a motor vehicle for investigatory purposes for up to 5,000 miles per year. This time on the roads and highways increases their exposure to injuries from motor vehicle accidents.	The Analyst may be asked to participate in field work up to 10% of work time

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

Type	How Heavy?	How Much of the Time?
Evidence Boxes	40#	Monthly

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

Type	How Much of the Time?
Sitting/Standing	Daily
Driving	2-3 days/month

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.

MFRAU currently has two Medicaid Regulatory and Fiscal Analysts. To the extent that this
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RFR differs in any material manner from the classification for those employees, such difference is unintended.

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?

This was a supervisor completed RFR. See above.

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?

This was a supervisor completed RFR. See above.

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

N/A. This was a supervisor completed RFR.

4. Suggested Title and/or Pay Grade:

Title: Medicaid Regulatory and Fiscal Analyst Pay Grade: 24

Supervisor's Signature (required):



Date:

7/26/17

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:

[Empty box for suggested title and/or pay grade]

Personnel Administrator's Signature (required): Jane Modica Date: 8/2/17

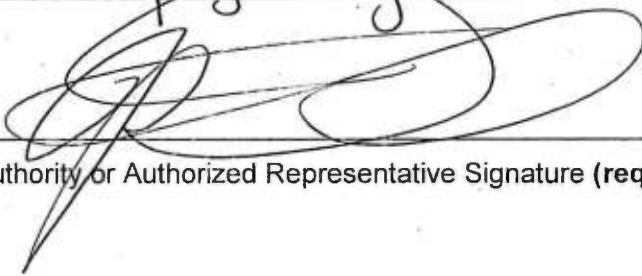
Appointing Authority's Section:

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.

[Empty box for appointing authority's comments]

Suggested Title and/or Pay Grade:

Deputy Attorney General



Appointing Authority or Authorized Representative Signature (required)

7-27-17
Date

Turner, Jason

From: Crowley, Alexis L (OIG/OMP) <Alexis.Crowley@oig.hhs.gov>
Sent: Tuesday, August 01, 2017 1:40 PM
To: Punchar, Gregg
Cc: Turner, Jason
Subject: FY18 MFCU application review


Hi Gregg,

I am completed the administrative review of the FY18 MFCU application and do not have any questions or concerns. I did want to provide an FYI that the insurance and HR liaison costs in the OTHER category, if allocated to the MFCU, need to have their allocation methodology documented and available if asked for.

Please anticipate a notice of award around Oct 1.

Thank you,

Alexis Crowley
Grants Management Officer
HHS/OIG
202-302-6900

Grant/Document: 1701VT5050	 <p>U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES OFFICE OF INSPECTOR GENERAL</p> <p>Notice of Grant Award Award Authority: Section 1902(a)(61), 1903(a)(6), 1903(b)(3) and 1903(q) of the Social Security Act</p>
Subaccount: MFCU17	
Period of Performance: 10/1/2016 through 9/30/2017	
CFDA: 93.775	
Program Title: State Medicare Fraud Control Unit	
Financial Information	Grantee Information
CAN: D9917DJ	State of Vermont
Appropriation: 75X0512	Vermont Attorney General
Object Class: 41501	Criminal Division- Medicaid Fraud Control Unit
EIN: 036000264B2	109 State Street Pavilion Building, Montpelier, VT, 05609
DUNS: 809550338	Director: Jason Turner
Program Income: Deduction	

Award Information

Total Approved Budget.... \$1,168,700 75% Federal Share \$876,524 25% Non-Federal Share.... \$292,176 Indirect rate... 12.60% Federal Award Description Medicaid Fraud Control Units (MFCU) investigate and prosecute Medicaid fraud as well as patient abuse and neglect in health care facilities.	Federal funding will be obligated in quarterly amounts on the following schedule: <table border="0"> <tr> <td>1st Quarter, on October 1, 2016</td> <td align="right">\$219,131</td> </tr> <tr> <td>2nd Quarter, on January 1, 2017</td> <td align="right">\$219,131</td> </tr> <tr> <td>3rd Quarter, on April 1, 2017</td> <td align="right">\$219,131</td> </tr> <tr> <td>4th Quarter, on July 1, 2017</td> <td align="right">\$219,131</td> </tr> </table> Matching requirement at end of grant period is 25% of Total Net Expenditures.	1st Quarter, on October 1, 2016	\$219,131	2nd Quarter, on January 1, 2017	\$219,131	3rd Quarter, on April 1, 2017	\$219,131	4th Quarter, on July 1, 2017	\$219,131
1st Quarter, on October 1, 2016	\$219,131								
2nd Quarter, on January 1, 2017	\$219,131								
3rd Quarter, on April 1, 2017	\$219,131								
4th Quarter, on July 1, 2017	\$219,131								

Is this award R&D? No

Remarks:

General Terms and Conditions for this award are hereby included by reference and can be found [here](#).

Subaccount

A Public Assistance (P) Account in the Division of Payment Management's (DPM) Payment Management System (PMS) has been created to provide separate accounting of federal funds per each document number. The subaccount code for this grant award is MFCU17.

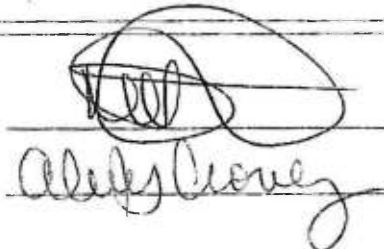
Financial Reporting

The SF-425 due dates for the grant period of this award are as follows:

- The first quarter report covers the period beginning 10/1/2016 and ending 12/31/2016 and is due by 1/30/2017.
- The second quarter report covers the period beginning 10/1/2016 and ending 3/31/2017 and is due by 4/30/2017.
- The third quarter report covers the period beginning 10/1/2016 and ending 6/30/2017 and is due by 7/30/2017.
- The fourth quarter report covers the period beginning 10/1/2016 and ending 9/30/2017 and is due by 10/30/2017.
- The final report is due by 12/29/2017.

Authorizing Officials and Contacts

Veronica Trevino, Budget Officer



Date OCT - 1 2016

Alexis Crowley, Grants Management Officer
Alexis.Crowley@oig.hhs.gov, 202-708-9710

Date OCT - 1 2016

Frantzy Clement, Program Analyst
Frantzy.Clement@oig.hhs.gov, 202-708-9893

Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of:

* a. Applicant

* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date: 10/01/2017

* b. End Date: 09/30/2018

18. Estimated Funding (\$):

* a. Federal 942390

* b. Applicant

* c. State 314130

* d. Local

* e. Other

* f. Program Income

* g. TOTAL 1256520

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

a. This application was made available to the State under the Executive Order 12372 Process for review on

b. Program is subject to E.O. 12372 but has not been selected by the State for review.

c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**

Yes

No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 21B, Section 1001)

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

Mr.

* First Name:

Joshua

Middle Name:

* Last Name:

Diamond

Suffix:

* Title:

Deputy Attorney General

* Telephone Number:

802-828-3689

Fax Number:

* Email:

joshua.diamond@vermont.gov

* Signature of Authorized Representative:



Date Signed:

6/30/17

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. State MFCU	93.775	\$	\$	\$ 942,390.00	\$ 314,130.00	\$ 1,256,520.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 942,390.00	\$ 314,130.00	\$ 1,256,520.00
SECTION B - BUDGET CATEGORIES						
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY					Total (5)
	(1)	(2)	(3)	(4)	(5)	
a. Personnel	\$	\$	\$ 488,130.00	\$ 162,710.00	\$ 650,840.00	
b. Fringe Benefits			235,061.00	78,354.00	313,415.00	
c. Travel			13,695.00	4,565.00	18,260.00	
d. Equipment			0.00	0.00	0.00	
e. Supplies			6,488.00	2,162.00	8,650.00	
f. Contractual			3,938.00	1,312.00	5,250.00	
g. Construction			0.00	0.00	0.00	
h. Other			89,625.00	29,875.00	119,500.00	
i. Total Direct Charges (sum of 6a-6h)		0.00	0.00	836,937.00	278,978.00	1,115,915.00
j. Indirect Charges			105,454.00	35,151.00	140,605.00	
k. TOTALS (sum of 6i and 6j)	\$	\$ 0.00	\$ 0.00	\$ 942,391.00	\$ 314,129.00	\$ 1,256,520.00
7. Program Income		\$	\$	\$	\$	\$ 0.00

Authorized for Local Reproduction

MFCU- VERMONT
FY 2018
October 1, 2017- September 30, 2018

A. Personnel

Vacancies must have an estimated hire date and amount requested should be prorated to when you believe the vacancy will be filled this year.

Total Personnel	\$650,840
Total Federal	\$488,130
Total Non-Federal	\$162,709

<u>Position Title</u>	<u>Name</u>	<u>Salary</u>	<u>Hire Date</u>	<u>F/T or P/T</u>
Director	Jason Turner	\$82,550	Oct-14	F/T
Attorney	Steven Monde	\$74,673	Jan-11	F/T
Criminal Investigator	Virginia Merriam	\$74,949	Jul-03	F/T
Criminal Investigator	Jesse Sawyer	\$63,536	Dec-16	F/T
Civil Investigator	Jefferson Krauss	\$74,090	Nov-12	F/T
Analyst	Gregg Punchar	\$72,847	Mar-11	F/T
Analyst	Michelle Beard	\$64,885	Nov-13	F/T
Program Technician	Mark Reaves	\$56,456	Dec-08	F/T
Attorney	Vacant	\$33,603	TBD - Mar '18	F/T
Analyst	Vacant	\$53,251	TBD - Oct '17	F/T
Total Positions	10	\$650,840		

SPECIFICATIONS

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MEDICAID REGULATORY AND FISCAL ANALYST

Job Code: 620200

Pay Plan: Classified

Pay Grade: 24

Occupational Category: Administrative Services, HR & Fiscal Operations

Effective Date: 07/16/2013

Class Definition:

Complex investigative, analytical and consultative work at a professional level for the Office of the Attorney General involving matters of provider fraud, waste, and abuse of the Vermont Medicaid Program and matters of abuse and exploitation of Medicaid consumers in residential facilities. Duties are in the area of conducting and directing examinations of data and financial analysis, identifying utilization patterns and procedural deficiencies, performing peer comparisons, and the continued assessment of rules and regulations to ensure program integrity. Investigations often lead to criminal, civil, and/or administrative action. Extensive knowledge and examination of federal and state statutes and regulations regarding health care services and delivery systems is essential as is the extensive knowledge and interpretation of medical claims billing and processing policies and practices. Duties are performed under the direction of the Medicaid Fraud and Residential Abuse Director of the Criminal Division of the Office the Attorney General, and involve frequent interaction with medical service providers, state agency directors and program managers, and state and federal law enforcement and oversight officials.

Examples of Work:

Works as part of a team responsible to protect the fiscal integrity of the Vermont Medicaid Program and to ensure the safety and proper care of vulnerable adults and consumers of the Medicaid program. Examines and provides analysis of referrals from multiple agencies and other sources where service delivery or utilization patterns are questionable and where issues of abuse, neglect or exploitation of vulnerable consumers have been alleged. Investigates potential fraud cases and communicates findings, applicable law and policies, and recommendations to Unit Director, Attorneys, and Investigators. Analyzes claims and medical expenditures for the Medicaid program. Facilitates investigation remedies through criminal, civil, and/or administrative action. Conducts program evaluations to identify program errors and assist in the development and implementation of procedures to avoid future fraud, waste, and abuse. Collaborates with the Office of Vermont Health Access, other operational units, and other law enforcement agencies to carry out investigations. Applies proper use and security of personal health and program administration information. Provides data and analyses for budget preparation and forecasting. Performs related duties as required.

Environmental Factors: Duties are performed primarily in a standard office setting. Infrequent travel may be required, for which private means of transportation must be available. Work outside of normal office hours may be required.

Minimum Qualifications

Knowledge, Skills and Abilities:

Considerable understanding of investigative techniques and procedures.

Ability to interview parties and the public tactfully and effectively.

Ability to evaluate facts, cases, and investigative procedures and make recommendations for appropriate disposition based on findings of investigations.

Considerable knowledge of legal procedures and terminology.

Considerable knowledge of state and federal Medicaid regulations.

Ability to interpret complex statutes and regulations and apply them to specific cases.

Thorough knowledge of financial analysis techniques and trends, particularly as they relate to medical expenditures, statistical reporting, and budget management.

Considerable knowledge of computer applications used for data analysis, including but not limited to the ability to develop database queries and spreadsheets and manipulate and synthesize resulting data into developed trend analyses that can be understood by attorneys, investigators, jurors, and legislators alike.

Ability to organize and maintain voluminous amount of data and evaluate data for meaningful and significant information.

Ability to manage a myriad of priorities and responsibilities, to think clearly and analytically and to employ meticulous attention to detail.

Considerable knowledge of the principles and practices of health program and health insurance operations.

Considerable knowledge of the principles and practices of medical claims billing and claims processing operations.

Ability to communicate complex details and findings in clear and concise written reports and graphic representations.

Ability to establish and maintain effective working relationships.

Education and Experience:

Education: Master's degree or higher in business, finance, health, human services or public administration, law enforcement or a closely related field.

Experience: One year as at a professional level in conducting investigations or in performing financial or statistical data analysis or in a health/health insurance/human services program or organization.

OR

Education: Bachelor's degree in business, finance, health, human services or public administration, law enforcement or a closely related field.

Experience: Three years at a professional level in conducting investigations or in performing financial or statistical data analysis or in a health/health insurance/human services program or organization.

OR

Education: Associate's degree in business, finance, health, human services or public administration, law enforcement or a closely related field

Experience Five years at a professional level in conducting investigations or in performing financial or statistical data analysis or in a health/health insurance/human services program or organization.

OR:

Education: High School diploma or equivalent

Experience Seven years at a professional level in conducting investigations or in performing financial or statistical data analysis or in a health/health insurance/human services program or organization.

OR

Education: Juris Doctorate (JD).

Special Requirements: n/a