

September/October 2025 Advisory



Inside This Issue

Changes in Vermont's Healthcare Marketplace and Medicaid

Responsible Party for Completing 804 Forms

Special Investigations Unit (SIU) Reminder: Enteral and Parenteral Nutrition and Supplementation

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Changes in Vermont's Healthcare Marketplace and Medicaid

The Federal Government has passed a new law that brings a wide range of changes to both Medicaid and the health insurance marketplace. New rules will change how people apply for and stay enrolled in health insurance.

Most of these changes do not go into effect until 2027 or later. That gives us time to review the details, await further federal guidance, and develop a thoughtful, strategic response.

To keep Vermonters aware of these changes, DVHA has posted dedicated webpages to changes in the healthcare marketplace [<https://info.healthconnect.vermont.gov/2026changes>] and Medicaid [<https://dvha.vermont.gov/medicaidchanges>]

For now, DVHA is focused on planning for Open Enrollment for 2026.

In Vermont's health insurance marketplace, known as Vermont Health Connect, enhanced premium tax credits will expire at the end of this year. These savings helped lower monthly costs for many people. We expect this will result in higher premiums for most plans in 2026. Many people will still be eligible for tax credits, but the amount of those credits will be smaller.

How you can help

We are asking providers to build awareness about the changes happening in the healthcare marketplace. For now, it is as easy as printing out and putting this poster [<https://info.healthconnect.vermont.gov/sites/vhc/files/documents/OE26-changes-flyer.pdf>] in a place where it can seem. DVHA wants to ensure that Vermonters learn more as they start to think about getting and staying covered in 2026.

Responsible Party for Completing 804 Forms

It is the responsibility of the admitting provider of service to submit the appropriate 804 form. The 804 forms are what notifies the Department of Disabilities, Aging and Independent Living (DAIL) and the Department of VT Health Access (DVHA) that the provider of services will start providing services, if there is a change in the service or a termination of services.

If the appropriate 804 form is not submitted to the correct agency promptly, this will affect the payment to the provider of services. See table below for information on how to find the forms, and where to submit each form.

Form #	DAIL	ADPC	Where can I find the form?
804 - Admission to Services Form	X	X	SAMS or: https://asd.vermont.gov/resources/forms
804A - Termination of Services	X	X	SAMS or: https://asd.vermont.gov/resources/forms
804B - Nursing Home Change of Payment		X	https://vtmedicaid.com/#/forms
804C - Short-Term Medicaid Only Rehab Form		X	https://asd.vermont.gov/resources/forms
804D - Dual Rehab Form		X	https://asd.vermont.gov/resources/forms

https://asd.vermont.gov/sites/asd/files/documents/CFC.ALL_804.Forms_.pdf

Send all completed forms when indicated:

DAIL (Disabilities, Aging and Independent Living) LTCCC Nurse:

To request a contact list, call DAIL-Adult Services Division (802) 241-0294

SAMS Users: Send SAMS Alert to LTCCC Nurse when form is completed

DVHA – Long Term Care Medicaid or

DCF – Economic Services Division by Mail or Fax to the following:

ADPC (Application and Document Processing Center):

280 State Drive Waterbury, VT 05671-1500

Fax (802) 241-0514

Special Investigations Unit (SIU) Reminder

The Special Investigations Unit (SIU) of the Department of Vermont Health Access (DVHA) safeguards against unnecessary or inappropriate use of Medicaid services, excess payments, and provides for the control of utilization of services under Vermont's health care programs. Providers are required to bill Medicaid correctly and, in an effort to assist them with proper billing of Medicaid services, we have identified the following **reminder**:

Enteral and Parenteral Nutrition and Supplementation - Audit Results

Topic: Enteral and Parenteral Nutrition and Supplementation

The Special Investigations Unit (SIU) conducts routine provider desk audits. The audits only request a small sample of records from a provider to minimize the administrative burden to produce large amounts of medical records. The SIU reviews the records to determine if they contain the necessary information to substantiate what was billed to VT Medicaid. The goal of these audits is to recoup the overpayments identified and educate providers about any identified deficiencies and improper billing practices to avoid recoupments of future claims. Below is a snapshot of a recent audit. If there are any questions, please contact the SIU at 802-241-9210.

Review Criteria:

A total of 100 claims from ten Enteral and Parenteral Nutrition providers were reviewed, comprising of 10 medical records for 10 different dates of service received from each provider. The products were billed as HCPCS procedure codes for Enteral and Parenteral Nutrition products and were randomly selected from a span of dates of service between 01/01/2021 and 12/31/2024. SIU conducted a review of medical records connected to claims billed for Nutritional Supplementation, and the results of this review are listed below.

Results:

Out of the 100 reviewed dates of service, 52 (or 52%) were determined to have billing or medical record deficiencies identified as a result of our review. A breakdown of the discrepancies is identified below:

- Records missing required clinical criteria (weight, height, or BMI) – 23%
- Missing clinical documentation – 14%
- Beneficiary age criteria not met – 7%
- Prescriptions not signed – 3%
- Beneficiary receiving liquid supplementation and the records do not demonstrate medical necessity – 2%
- Medical record documents the beneficiary is not using/need the supplies – 1%
- Beneficiary was not below 5 percentile for BMI – 1%
- Missing medical order for the nutritional product – 1%

Providers are encouraged to review the Educational Resources listed below:

- DVHA Clinical Criteria – Nutritional Supplementation and Support, October 26, 2023
<https://dvha.vermont.gov/sites/dvha/files/documents/Nutritional%20Supplement%20and%20Support%20for%20web.pdf>