



Helping people and communities live healthy, safe and satisfying lives.

Legislative Update February 20, 2018

Upcoming Advocacy Events

DISABILITY AWARENESS DAY AGENDA

February 28, 2018

- 7:45 to 9:30 Coffee and a pastry in the cafeteria -Tell a legislator all about DAD!
- 8:00 to 9:00 Register outside of Room 10.
- 9:00 to 9:45 Room 11: Welcome. Gather for opening remarks by Lt. Governor David Zuckerman and staff members of Vermont's congressional delegation.
- 10:00 to 10:30 Room 11: Workshop, "The Human Cost of Cuts." Susan Aranoff of the Vermont Developmental Disabilities Council on the impact of budget decreases on social determinants of health
- 10:30 to 11:00 Room 11: Workshop, "Bringing Down the House and the Senate, Too: How to Talk to Your Legislator." Join Green Mountain Self-Advocates and practice how to pivot and get your message across when advocating with legislators.
- 11:00 to 11:30 Room 10: Workshop, "Prescription Prices: A Patient's Perspective." The MS Society will present a workshop on prescription drug pricing and gaps they see in state law.
- 11:30 to 12:00 Room 11: Workshop, "Mental Health Policy Update." Join Ed Paquin of Disability Rights Vermont and Jack McCullough, executive director of Vermont Legal Aid's Mental Health Law Project.
- 12:00 to 1:00 Lunch. Complimentary pizza will be served in Room 10!
- 1:00 Disability Awareness Day will be announced on the House floor. take a bow.
- 2:00 Press conference in the Cedar Creek Room.
- 2:30 to 3:00 Room 10: "You CAN Get There From Here." Join Ross MacDonald of the Vermont Agency of Transportation and Peter Johnke of the Vermont Center for Independent Living to learn how personal mobility options can improve thorough expanded online trip planning.
- 3:00 to 4:00 Room 11: Come cheer on graduates of the 2018 Vermont Leadership Series!
- 4:00 to 4:30 Cafeteria: Reception. Enjoy appetizers and mingle with legislators and peers. A string and wind ensemble from the Me2/Orchestra will perform till 4:30 p.m.
- 4:30 to 6:00 Governor Phil Scott will say hello, followed by a keynote by Caroline Whiddon and a panel featuring graduates of the Vermont Leadership Series and moderator Deborah Lisi-Baker

Throughout the day, DAD attendees will be testifying on a number of important issues before various House and Senate committees.

Legislative Action

House Human Services Sends Budget Priorities for House Appropriations Committee

Here are critical excerpts from the memo to the House Appropriations Committee:

While the overall budget for the Agency of Human Services reflects an increase of approximately \$4 million, the Committee notes that the major reason is due to statutory requirements regarding salary and benefits. The Committee is concerned that a level-funded appropriation is tantamount to a budget

reduction, which ultimately leads to a reduction in services to those Vermonters that the Committee seeks to keep safe and protect. [...]

The Committee rejects the proposed cut of \$2 million GF to persons with developmental disabilities. It suggests backfilling proposed cuts to current developmental services waivers in two ways. First, that the funding for SASH be fully subsumed by the Department of Vermont Health Access' (DVHA) One Care contract. Currently, direct service expenditures are funded via One Care and the Committee believes the entire cost of the program should be funded via One Care (\$974,000.00 GC). This is not a recommendation to cut the SASH program. Second, DVHA's delivery system reform investments (\$866,434.00 GF) could be redirected to the current developmental services waivers.

Summary of Committee's Monetary Recommendations re: Governor's Proposed Budget
The Committee recommends funding the following initiatives:

- Recovery Centers (\$165,000.00)
- Personally directed attendant care (\$750,000.00)
- CIS bundled (\$ 1million)
- Developmental disabilities caseload (\$2 million)
- IDAs (\$35,000.00)

The Committee recommends eliminating the following GF expenditures as a way of offsetting the above additional expenditures:

- Prevention initiatives funded through the Governor's budget (i.e., home visiting pilot and dental sealant program) (\$500,000.00)
- DVHA delivery system reform investments (\$866,438.00)
- Prescription drug assessment from the Evidence-based Education and Advertising Fund (\$137,000.00)
- Transfer of SASH expenses to One Care (\$450,085.00)
- Reduce the DS caseload increases (\$738,640.00)

What is summarized above exceeds the Governor's Proposed AHS budget by \$1,257,837.00. While supporting each of the priority areas, some members are uncomfortable with supporting in totality the proposed additional expenditures.

House Health Care Committee Receives feedback on the Budget from Mary Moulton

Mary Moulton concentrated her testimony on how a stabilized workforce can make a difference in service delivery.

- The effect of care coordination by case managers and therapists reduces the need for higher levels of care Prior to the Stage 1 Workforce investment WCMHS had experienced a 70% turnover rate in this program – all but 30% of case managers turned over each year
- The \$14.00/hour helped to stabilize our residential programs. In our Developmental Services workforce, we were experiencing a high of 1000 hours of OT per pay period in residential programs in Oct-Dec 2016. Overtime dropped to less than 500 hours per pay period in July 2017
- We need to identify the barriers to hospital discharge and see if there are alternatives to building more beds. We are making progress in reducing emergency room utilization through care coordination
- The second stage of a salary increase that will continue to bolster population health and our health care system
- DAs/SSAs have had increasing numbers of people for several years now. Suicide rates continue to be high and promising prevention models are rolling out

- Substance abuse, particularly the opiate crisis, has exacerbated the need for services, including services for affected children and families who are experiencing trauma as a result
- We have made incredible progress towards integration with health care across the DA system
- We're a really good "buy". If we were to move our WCMHS out-patient services division under the health care umbrella it would cost nearly \$1,000,000 in salary increases. Buy – don't build!
- We are welcoming payment reform
- We are working on a Unified Electronic Medical Record
- Consideration of building additional forensic beds seems prudent while carefully reviewing the forensic referral procedure, siting, and workforce issues
- Emergency services could be averted through a solid foundation of prevention and support through: case managers, support staff, therapists, psychiatrists, nurses, residential specialists, children's interventionists, psychologists, early childcare specialists, care coordinators, vocational and housing specialists
- Finally, our contribution generates savings in the system overall, and we hope that when some of these other systems settle and stabilize, we will be the beneficiary of investments

Therefore, our organizations are requesting the stage 2 workforce increase.

Senate Health and Welfare Finalizes S.261 and S.203

Bill S.261 on mitigating trauma and toxic shock in childhood by strengthening childhood and family resilience passed the Senate Health and Welfare Committee and is in Senate Appropriations Committee for approval of funding.

Bill S.203 which creates a committee to examine the strengths and weaknesses of Vermont's orders of non-hospitalizations for the purpose of improving patient care passed Senate Health and Welfare and is in Senate Appropriations Committee for approval of funding. Vermont Care Partners will be represented on the commission.

Senate Health and Welfare Hears about Suicide Prevention

JoEllen Tarallo, Program Director of Vermont Suicide Prevention Center gave an overview of the Zero Suicide initiative. She spoke about the partnership with designated agencies. Molly Dugan from SASH said that SASH uses the network of public housing and partners with community agencies like designated agencies. People age 65 and over have higher rates of suicide so SASH has trained their staff and developed protocols to prevent suicide. They are also developing a culture of peer support. Michael Hartman of LCMHS spoke about their focus on zero suicide. He believes that their treatment program and pathway of care very effectively reduces suicide risk. He sees the practice as requiring a minimum investment in resources. Ashley Prout spoke about her brother's death by suicide. She sees the act as one of desperation. She said we must fight stigma. We can't be ashamed of depression and mental illness. Betty Barret spoke about her own suicide attempt and her son's death by suicide. She concluded that suicide is everyone's business. It requires public information, training and resources.

Con Hogan Warns Senate Institutions Committee against a Large DOC Campus Facility Plan

Con Hogan shared his experience, perspective and research on the large prisons and how it creates problems in the culture. He referenced the Vermont State Hospital as an example of the problems created by large facilities. An isolated campus of 920 people violates our values, he said. He is supportive of a separate Woodside facility, a nursing home program, a secure residential and a forensic unit. There are currently over 900 nursing home beds that are vacant in Vermont because we created community alternatives. Con believes that we can do the same for corrections by investing in

community services. He suggested using former nursing home facilities as an option for the forensic hospital. It's his opinion that we should do our homework on needed interventions before structures. He does not support housing federal inmates. Con felt that the Senate Institutions Committee was not as responsive as the House Corrections and Institutions Committee to his remarks.

Public Hearings on FY19 Budget

There were numerous public hearings held by the Appropriations Committees on the state budget for fiscal year 2019 (FY19) at various locations and at the State House. Here are some of the remarks related to the work of designated agencies.

- Susan Loynd is the Director of Human Resources for WCMHS. Susan gave information on the positive impact of the stage one work force investment on worker vacancy and turnover and made our request for stage 2 of the workforce investment
- Mary Moulton spoke about the cut in DS waiver services, and the payment reform efforts to replace the current bundled payments for these services. She highlighted that the true costs haven't been addressed for years. She also thanked the Committee for the investment in emergency services. The WCMHS Integrated health home has decreased ER use by 32% as well as reducing express care use. She also requested the second stage of workforce investment.
- Susan Yuan spoke as a mother of a grown son with autism about what the proposed 2% rescission will mean to them. There is no cushion in the budget. The only place with any give is respite at 2 days a month. 2% will reduce respite by 1/3. She said "we need more not less."
- Adam Bindrum, a CMC clinician spoke about the 11 open outpatient clinician positions at his agency which requires that 250 clients who would have received services from those clinicians have to be spread out to the remaining clinicians. He said salaries are the main factor that it is so hard to fill the clinician jobs.
- Andrew Ness – thanked the Committee for last year workforce investment and said there are lots of needs not met. As a Licensed MH counselor and LDAC, he asked for support for our workforce.
- Beth Masters spoke of her daughter who requires 24/7 care. She thanked the Committee for the support to community-based services. She expressed concern about nursing and Developmental services cuts.
- Christie Everett, CMC Director of Access and Acute Care Services thanked the Committee for the workforce investment for crisis services which truly stabilized the staff. However CMC has 11 FTE for MA level clinicians 25- 30 people should be served by each. She asked for funding for stage 2 of the workforce investment. She said a multi-year phase-in is needed to stabilize families, employment supports, and address ACES. No other community agencies offer the same level of infrastructure and array of services.
- Stephen Rauh, President of UVS and father of a 45 year old man with developmental disabilities explained that Vermont is national model for these services. He protested the 2% cut which comes one year after a 2% increase for salaries and before that years of cuts. He said people deserve dignity, respect and active lives in their communities. "Death by 1,000 cuts will unwind this fantastic system."
- Michelle Paya, Director of Way to Work at CCS thanked the Committee for the workforce investment made in FY18. She expressed concern about the \$4.3 million cut proposed for developmental services that will be on top of \$14 million in cuts over the last several years. The people she works with want to work and rise from poverty, but this cut will eliminate many hours of support and create an average reduction in salary for the people she serves of 35%. There is double digit unemployment for Vermonter with disabilities. She also requested the approval of stage 2 of workforce investment.
- Tracy Thresher, expressed his frustration that people with developmental disabilities have to defend their right to live in the community and their ability to have employment. He said, "I want to do something with my life just like anyone else on earth. I don't want to be trapped in a life of uselessness."

- Erin Rose who provides direct facilitated communication and employment support to Tracy said that it's taken years for her to learn how to support Tracy. Her work is highly skilled and she is making little more than the new staff who walk in the door. She said the proposed cut "is not shaving the fat, its trimming the bone." She works 3 jobs and still doesn't make \$30,000 a year. She concluded by saying that, "The Governor should support the people who live here."
- Karen Lafayette of VLIAC and Sue Aronoff of the DD Council spoke about DS cuts
- Julie Tessler of VCP spoke about Stage 2 workforce and DS cut asking the Committee to keep the promise made to families when the institutions closed.
- Erhard Mahnke of Vermont Affordable Housing Coalition asked for housing vouchers to be added back the DMH budget.

House Education Hears from Superintendent of Washington Northeast Supervisory Union

Mark Tucker, Superintendent of Cabot and Twinfield schools testified to House Education Committee. Mark explained that Cabot is responsible for more and more students who show a significant impact from trauma. He commented on the draft bill which recommends added trauma questions to the Youth Risk Survey. He said that youth will not be able to report on own trauma, plus it's a federal survey that Vermont can't change. Furthermore, remembering trauma can be traumatizing in and of itself.

He supports H.580 to develop trauma-informed schools. He said that it should address all adults that work in the school and who have interactions with the students and be built on the multi-tiered systems of support (MTSS) framework. His supervisory union trained every school employee. There is already a reporting system in place on MTSS. The criterion for placing student in alternative schools has worked effectively, but the bill takes it out. He believes that these placements tend to work out well for the students.

The stress of dealing with explosive kids in the classroom is impacting the teachers. Mark said that we need to invest in the kids at the earliest point possible. "It's a pay it now or pay more later in corrections", etc. He contracts with WCMHS as a way to have greater flexibility for staffing, plus they are paying only half the cost due to Medicaid drawdown. He would like to find a way to make the WCMHS staffing more flexible using the MTSS model to deal with kids at different levels of need on an as needed basis.

If you move to a census model, he said, we can buy flexible resources to meet student needs and they don't have to do complex time studies to document expenditures. Reducing administrative requirements and increasing flexibility would be helpful. Conceptually, he likes a census funding model, but it would depend on his funding. They need help and support working with students and families in their homes.

To take action or for more information, including the weekly committee schedules:

- Legislative home page: <https://legislature.vermont.gov/>
- Sergeant-at-Arms Office: (802) 828-2228 or (800) 322-5616
- State House fax (to reach any member): (802) 828-2424
- State House mailing address (to reach any member):

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- Email, home address and phone: Legislators' email addresses and home contacts may be found on the Legislature home page at <https://legislature.vermont.gov/>
- Governor Phil Scott (802) 828-3333 or <http://governor.vermont.gov/>

The purpose of the legislative update is to inform individuals who are interested in developmental, mental health and substance abuse services about legislative advocacy, policy development and activities that occur in the State Legislature. The Vermont Council is a non-profit trade association which works in partnership with Vermont Care Network to form Vermont Care Partners. Together our mission is to provide statewide leadership for an integrated, high quality system of comprehensive services and supports. Our membership consists of 16 designated developmental and mental health agencies.