Mental Health Advocacy Day
Mental Health Advocacy Day will take place on **Wednesday, January 30, 2019 at the State House**. This is an important opportunity to educate legislators about our system of care, inclusive of developmental disabilities and substance use disorder services. With many new legislators entering the State House at the beginning of the biennium, as well as the beginning of the political process for the state budget it’s an excellent opportunity for us to gather support for “shifting the balance” of funding to invest in the community mental health and developmental disabilities system of care.

Activities begin at 8:00 a.m. and continue until 2:00 p.m. This year we are looking for strong attendance to strengthen support for our services in the state house. This effort is led by Vermont Care Partners, VAMHAR and NAMI-VT and has 47 co-sponsors including the full membership of Vermont Care Partners.

**The Agenda**
- Bagels and Coffee with Legislators (Cafeteria)
- Display by all interested Sponsoring Organizations (Card Room)
- Advocacy Training with Peter Mallary (Room 11)
- Testimony at key Legislative Committees – ALL DAY
- Welcome Address from State Leaders (Room 11)
- Legislative Awards and Team Two Awards (Room 11)
- Sharing Stories/Poems (Room 11)
- Lunch with Legislators (Cafeteria)
- Introduction to the House (House Chamber)

We urge you to come and participate in the day. The more people present, the more impact we will have. It’s a great time to meet with your local legislators – not sure how to go about this? Check out our legislative advocacy training webinar. Here is the link: [https://public.3.basecamp.com/p/QWVmZy5w6HN4twAkcfZaDXtQ](https://public.3.basecamp.com/p/QWVmZy5w6HN4twAkcfZaDXtQ)

**Governor Proposes Budget for Fiscal Year 2019**
The Governor gave his budget address on January 24th. Mental Health and Developmental Services weren’t mentioned. We won’t know the details of the human services budget until it is presented to the House Appropriations Committee on January 31st. We do know that developmental and mental health services were not cut, and developmental services caseload was fully funded. According to Secretary Gobeille there are only minor adjustments to funding that impact designated and specialized service agencies (DA/SSAs). It looks like the only significant change in SUD is the expansion of syringe
distribution. Although there is $2 million investment in child and family services to address the impact of the opiate epidemic.

Here is a link to the budget summary:
https://ljfo.vermont.gov/assets/Uploads/9387e7a566/FY-2020-Executive-Budget-Summary.pdf

**Mental Health Commissioner Senate Appropriations Committee Testimony**

Mental Health Commissioner Sarah Squirrell presented the 2019 budget adjustment proposal to Senate Appropriations Committee which led to an interesting dialog with the Senators.

The proposal calls for elimination of funding for sheriffs in the Emergency Departments (ED) because the Centers for Medicare and Medicaid Services (CMS) does not allow interventions by sheriffs if no criminal acts have occurred and Vermont hospitals have been sighted for this. Senator Kitchel is concerned that hospitals are going to have to increase staffing. She asked, “are we moving costs to another part of the system?” She does agree that unless a crime is committed, that sheriffs should not put their hands on people in the emergency departments. The Committee expressed concern that the sheriffs and hospitals didn’t know about this in advance and that they do not have adequate time to adjust to this budgetary change by the April 1st implementation date.

Commissioner Sarah Squirrell suggested that we can do a better job stabilizing people in EDs through partnerships with DAs. Adding that NCSS has embedded clinicians in their hospital emergency department and other DAs have a willingness to do this. Senator Ashe raised the point that DAs should not have to foot the bill for this. The Commissioner said that NCSS saw this as a relationship building investment, but the next step is for hospitals to determine how to take on this need. Another concern that was expressed is that the DMH psychiatrist can only do the 2nd review at the end of the day so it prolongs the stays of patients experiencing mental health crisis.

There was also a discussion about the inadequate supply of step-down facilities for people coming out of inpatient care. Senator Kitchel said she was hoping to see these resources in the FY20 budget proposal from the Governor. She is particularly concerned about people who present public safety risk or who are otherwise considered forensic. These people are tying up beds. Jane said it’s been very troubling for the committee and the hospitals don’t feel the situation is fair. Cutting sheriffs funding feels like picking the scab.

Commissioner Squirrell presented the increase in funding for school-based services explaining that the increase reflects the increase in needs of Vermont youth. Senator Kitchel expressed concern that we invest in health care, family supports and other services, yet our rates of childhood mental health conditions is high. The Commissioner discussed the stressors that children are exposed to, like opioid addiction and custody issues. She noted that Vermont does a great job in screening for mental illness. Sarah would like to invest mental health resources into childcare to reach children sooner. Senator Kitchel suggested that funding decisions should be reconsidered if we are not getting good outcomes. She questioned whether Behavioral Interventionists are overused and asked about their credentials. She is troubled by the prevalence of severe emotional disturbance in children. Senator Sears believes some of it relates to the opioid crisis. It we don’t fix that crisis, we will need more beds in the future. Senator Sears expressed strong concern about the inequities in the distribution of resources across the State. Senator Westman spoke about how his local mental health agency doesn’t have adequate resources to support young children and is getting calls from child care centers requesting support. Senator Westman is worried about kids who are kicked out of day care and can’t access services; they aren’t seen again until kindergarten.
Senator McCormick asked about DMH involvement in Department of Corrections (DOC) mental health. DMH will collaborate on DOC health care RFP and consults with the DOC on mental health issues.

**House Human Services Receives Overview of Department of Aging and Independent Living**

The House Human Services Committee received a complete overview of the Department of Aging and Independent Living, including developmental disability services. The Committee expressed concern about a reduction in grant funds for developmental services. Commissioner Hutt replied that although some grant dollars are being reduced it will not impact the level of funding going to DA/SSAs. The funds are coming from the balance of funds that are not used when new people enter the system of care during the course of the fiscal year. Some of these one-time funds are distributed to agencies for one-time expenses. The funds being reduced had not been distributed to agencies; these funds were used to manage resources at the Agency of Human Services level.

The Committee also asked about the impact of the FY19 appropriation increase to DA/SSAs that was only directed to the mental health workforce. They wondered about the impact on the developmental disability workforce and if it created pay disparities within agencies for staff doing comparable work. Julie Tessler of Vermont Care Partners agreed to survey the membership and bring information back to the committee.

When Representative Wood asked about changes in the payments for applied behavioral services, Claire McFadden said the new rates were designed to increase access to care.

**House Health Care Gets Overview from DMH Commissioner Squirrell and Deputy Commissioner Fox**

Commissioner Sarah Squirrell said the Department, which as a budget of $264 million, provides oversight, designation and collaboration with 10 Designated Agencies and 2 Specialized Service Agencies, as well as 7 Designated Hospitals. She noted that there are 25,000 people served through the DA/SSA mental health services with even more served through Community Outreach, Emergency Services, and Crisis Teams. From 1986 to 2018 there has been an 86% increase in the number of children served. The increase is due to poverty, opioid abuse and maternal factors.

DMH is also responsible for operations of Vermont Psychiatric Care Hospital (25 beds) and Middlesex Therapeutic Care Residence (7 beds) There are 255 staff at the facilities and 62 at the DMH Central Office.


Sarah shared the evaluation measures used by DMH which currently has six separate scorecards available on the website: [https://mentalhealth.vermont.gov/reports/results-basedaccountability](https://mentalhealth.vermont.gov/reports/results-basedaccountability)

Representative Ben Jickling asked about whether there are adequate standards of care for DA/SSAs.

In the overview the commissioner and deputy commission reviewed different service approaches:

1. Promotion, Prevention & Early Intervention
2. Integration and Collaboration:
3. Enhancing system flow and community capacity for
The Committee received a high-level summary of payment reform which was described as a move away from fee-for-service and toward accountability focused on performance outcomes. When asked if DA/SSAs are supportive of the payment reform effort both the Department and Vermont Care Partners spoke about the positive and trusting relationship that enabled a productive process. We noted that it is still a work in progress, but that the new model became effective on January 1st.

There were questions on residential programs and about collaboration with state and private colleges. Committee Chair Bill Lippert wants to know if private insurance covers crisis and residential care.

One of the priorities for the Department is to create a 10-year vision and collective commitment toward full integration of mental health services within a comprehensive and holistic health care system. They also want to improve inpatient and community capacity to achieve better flow of people through the system of care. The Commissioner also plans to address stigma.

Bill Lippert said workforce is a major issue in regard to both training and adequacy of reimbursements.

_Vermont Care Partners Outcomes Report for FY 2018_


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

- Legislative home page: [https://legislature.vermont.gov/](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):
  
  Your Legislator  
  State House  
  115 State Street, Drawer 33  
  Montpelier, VT 05633-5501
- Email, home address and phone: Legislators’ email addresses and home contacts may be found on the Legislature home page at [https://legislature.vermont.gov/](https://legislature.vermont.gov/)
- Governor Phil Scott (802) 828-3333 or [http://governor.vermont.gov/](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.