



VERMONT CARE PARTNERS

Supporting Vermonters to lead healthy and satisfying lives community by community

Legislative Update February 5, 2019

Mental Health Advocacy Day

Mental Health Advocacy Day took place on Wednesday, January 30, 2019 at the State House. In spite of a snow storm we had excellent turnout and great enthusiasm by participants. We made strong progress in educating legislators and state leaders about the value of developmental and mental health services and the need to “shift the balance” of funding to focus investment in the community services. Many participants met with their legislators and information tables were visited by many. All Legislators received the Vermont Care Partners Outcomes Report, as well.

A House Resolution was presented by the Health Care Committee recognizing mental health advocacy day:

<https://legislature.vermont.gov/Documents/2020/Docs/RESOLUTN/HCR023/HCR023%20As%20Introduced.pdf>



We heard from Human Services Secretary Gobeille who read a proclamation from Governor Scott declaring January 30, 2019 Mental Health Advocacy Day. The Secretary thanked the audience for their

commitment to developmental and mental health services. Mental Health Commissioner Sarah Squirrel shared her vision for the mental health system. Additionally, House Speaker Mitzi Johnson, Senate Appropriations Chair Jane Kitchel, and Lt. Governor David Zuckerman all offered support for mental health services, plus other legislators visited our gathering. It was a time of celebration and sharing of personal stories.

Community Advocate Awards were given to four individuals who exemplify outstanding commitment and service on behalf of individuals with mental health conditions or developmental disabilities. The awardees of this year's award are: Julie Cunningham, Executive Director of Families First, Malaika Puffer, HCRS Area Manager-Peer Support, Marla Simpson member of the Board Advisory and local standing committee for Clara Martin Center and of the Vermont Adult Statewide Program Standing Committee, and Sarah Holland, Board President of Washington County Mental Health Services. The award recipients spoke about their journeys and beliefs.

Team Two, a statewide training program where law enforcement, police dispatchers and mental health crisis workers train together to strengthen collaboration when responding to mental health crises, presented the 2018 Frank Silfies awards to Lieutenant Maurice Lamothe, Vermont State Police St. Albans and Talaia Thomas, of Washington County Mental Health Services for their outstanding service.

The annual legislative leadership award was given to Senate President Pro Tempore Tim Ashe. Senator Ashe traveled around the state this summer and fall to learn about our services and the people we serve first hand. His leadership was pivotal to the funding increases received over the last two years and he is committed to furthering the State's commitment to our work.

We provided testimony in multiple committees, some of which are summarized below. To look for copies of the testimony go to the website and click on the link for the committee that interests you. Then scroll down to testimony and you can look up the testimony given on January 30th. Some people who testified did not submit written testimony. If you have a strong interest in hearing any of the verbal testimony it is possible to receive a recording by contacting the staff person for that committee – contact information is on the committee page.

House Committee on Health Care

- Julie Tessler, Executive Director, Vermont Council of Developmental and Mental Health Services/Vermont Care Partners
- Devon Green, Vice President of Government Relations, Vermont Association of Hospitals and Health Systems
- Lynda Marshall, Executive Director, J.D., Vermont Psychological Association
- Steve Howard, Executive Director, Vermont State Employees Association
- Christophe Woods, Executive Director, Vermont Psychiatric Survivors
- Vicki Warfield, Wellness Workforce Coordinator, Vermont Center for Independent Living
- Matt Wolf, Director of the Youth in Transition (YIT) Program, Vermont Federation of Families for Children's Mental Health
- Laurie Emerson, Executive Director, National Alliance on Mental Illness (NAMI) of Vermont
- Peter Mallary, Vice President of Government Relations and Community Outreach, Vermont Association for Mental Health and Addiction Recovery

House Committee on Education

- Julia Hampton, Health Program Specialist, Center for Health and Learning, Vermont Suicide Prevention Center
- School-Based Services:

- o Matt Habedank, Children’s Behavior Services Program Director, Northwestern Counseling and Support Services
- o Amy Irish, School Based Behavior Consultant Team Leader, Northwestern Counseling and Support Services
 - Therapeutic Schools:
- o Kym Asam, Regional Director of Schools and Clinical Programming, NFI Vermont
- o Drew Gradinger, Director, Kindle Farm School

House Committee on Human Services

- Jenna Brown, Community Advocate

House Committee on Corrections & Institutions

- Kimberly Blake, MD, Community Advocate
- Angela Menard, Howard Center Treatment Court
- Client of Mental Health Treatment Court

Senate Committee on Health & Welfare

- Connie Stabler, Community Advocate
- Mary Cox, Community Advocate
- Kelly DeForge, Community Advocate (look up testimony by witness name)

Senate Committee on Education

- Janice Sabett, Family Support Consultant, Vermont Family Network

Senate Committee on Institutions

- Dillon Burns, Director for Mental Health Services, Vermont Care Partners

Vermont Care Partners appreciates our partnership with NAMI-VT and VAMHAR, as well as the many sponsors, in creating this important advocacy event.

Vermont Care Partners Gives Overview to House Health Care Committee

Julie Tessler of Vermont Care Partners explained that designated and specialized service agencies are an integral part of Vermont’s community-based health care system supporting Vermonters to live healthy and satisfying lives community by community. VCP network agencies and programs support approximately 32,000 clients and touch the lives of 50,000 Vermonters through over 2 million services. The network provides 50% of its services and supports in homes, schools and communities where Vermonters work, live and play. The Social Determinants of health such as housing, employment, public safety and education are the basis of our community-based services.

It was explained that all agencies support people to access primary care and coordinate with local health providers. Sometimes this includes assisting during medical visits. Agencies have nursing staff and support wellness and we have co-location of network staff in 56 primary care offices to integrate care, with 70% of agencies doing shared care planning for people with complex needs and some agencies are providing bi-directional care with FQHCs and other health providers.

The Designated Agency system has the ability to **Shift the Balance** from costly medical care to efficient and effective community-based services, achieving a better return on investment for Vermont and improved quality of life for Vermonters with mental health conditions, developmental disabilities and substance use disorders. Investing wisely will reduce state expenditures in the long term.

Vermont Care Partners is requesting a two-pronged multi-year investment to address an under-resourced system of care beginning with a 4% increase for FY2020. Specifically we request:

- Invest in the DA/SSAs' workforce to recruit and retain qualified experienced staff
- Invest in the DA/SSAs' to develop community services that reduce emergency room and inpatient bed need

The Foundation for Shifting the Balance is already built. Ongoing savings should be invested in DA/SSAs to generate further savings. The full proposal can be found at this link:

<https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Health%20Care/Mental%20Health/W~Julie%20Tessler~Shift%20the%20Balance~1-30-2019.pdf>

Vermont Hospital Association Gives Overview to House Health Care Committee

Devon Green and Emma Thompson of the Vermont Association of Hospitals and Health Systems (VAHHS) spoke about how hospitals are stepping up and integrating mental health into their care. South Western Medical Center is incorporating mental health specialists into the emergency department (ED) and primary care practices and Brattleboro Retreat and Central Vermont Medical Center are expanding inpatient beds. Devon specified that all levels of mental health services need investment of resources.

VAHHS has found that the ED situation is continuing to worsen with a 47% increase in psychiatric stays over 24 hours annually. It was shared that just 3% of psychiatric inpatients take up 40% of hospital days. The other 97% are staying an appropriate number of days (11 days average, 6 days median). There is a different mix of people using care, so there has been a slight increase in length of stay (LOS) overall.

Devon said delays in discharge create significant problems. There are no silver-bullet solutions to the long stay patients. Half are voluntary and half are involuntary. Hospitals are looking at ways to partner with DAs and community health teams to discharge people into the community. We learned that 9 out of 10 inpatient visits are voluntary, but account for 50% of bed days.

VAHHS is concerned about the IMD exclusion coming into place in Vermont which could eliminate federal funding for 80 inpatient psychiatric beds.

The All Payer Model waiver (APM) has led to investments in the community. Devon asserted that hospitals have invested \$27 million into designated agencies, home health agencies, SASH, and community health teams.

Here is a link to the VAHHS testimony:

<https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Health%20Care/Mental%20Health/W~Devon%20Green~Mental%20Health%20and%20Vermont's%20Hospitals-%20Data,%20Partnerships,%20and%20Opportunities~1-30-2019.pdf>

House Education Committee Learns about School Based Services

Amy Irish and Matt Habedank from Northwestern Counseling & Support Services (NCSS) presented in school-based services on behalf of Success Beyond Six programs. They provided a broad overview of the spectrum of services DAs provide and the link for kids and families to a wide array of DA-specific services that can address social determinants of health. They also noted that this is a cost effective service because of Medicaid match and the prevention of need for higher levels of care. The committee, including Representative Toof who had worked for Amy as a behavior interventionist, responded very positively. Here is a link to their presentation:

<https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Education/Introductions/W~Matt%20Hadedank~Mental%20Health%20Advocacy%20Day%20-%20School-Based%20Services%20Presentation~1-30-2019.pdf>

Drew Gradinger (Kindle Farm, HCRS) and Kym Asam (NFI) continued the conversation with the House Education Committee with a presentation on DA Therapeutic Schools. It included general information around how kids arrive at our schools, what services and educational supports they receive, and positive outcomes. These are students in the state with the most intensive needs. Once they are at the therapeutic school: absenteeism goes down, they learn regulation, coping skills, and they engage in academics. Students learn a psychosocial curriculum; engage in psychiatry, individual and family therapy and substance use disorder services. When they leave or graduate these issues have been addressed. The schools provide a range of services in addition to education and clinical supports. The schools work with the families and provide: case management, medication management, after school skills work, respite, care coordination and clinical assessment. Drew also read a moving letter from a parent. Here is a link to their presentation:

<https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Education/Introductions/W~Drew%20Gradinger~Mental%20Health%20Advocacy%20Day%20-%20Therapeutic%20Schools%20Presentation~1-30-2019.pdf>

Vermont Care Partners Presents to the Senate Institutions Committee

Dillon Burns, the Director of Mental Health Services for Vermont Care Partners presented in Senate Institutions Committee. She provided a brief overview of the scope of the community mental health system and encouraged the committee to take into account the following considerations when making decisions about capital investments in the mental health system: people with forensic status and geropsych needs use up significant inpatient bed days – do investments include plans for these populations? Given workforce challenges, what will be the impact on the community mental health system of new resources/investments? She also provided testimony that Woodside is an important part of both the DCF and the DA continuum of care and that we support a public-private partnership for Woodside's next phase.

House Appropriations Hears Human Service Overview

Secretary Al Gobeille gave an overview of fiscal year 2020 Governor's budget proposal for the Agency of Human Services to the House Appropriations Committee. Department Commissioners will present more detailed information at a later date.

He said the Department of Mental Health Budget is fairly similar to last year's. There will be funds added to backfill lost HUD funds at the Howard Center, an increase for kids' residential costs and caseload, as well as added funds for adult CRT enhanced plans. The Secretary said he would love to hear from DAs on how to reduce level 1 beds and the savings it would create. He has not seen a mathematical model for community investments. He stated that investment in DA/SSAs in the past did not have an impact on inpatient utilization. The Capital bill calls for building a 16-bed secure residential to increase patient flow.

He believes that for first onset psychosis there is no option but inpatient and UVM creates demand, but there is nothing we can do about it. This is a national issue not just a VT issue. He said DAs do great work, but you can't stop mental illness from occurring, so we need more beds. Representative Hooper said we can make adjustment - UVMC analysis assumes a steady state, but that may not be necessary.

The Committee Chair Representative Toll reminded the Secretary that we don't have endless money to go around.

The DS caseload is based on a required 3-year average. But because of under-utilization the budget calls for a \$250,000 general fund reduction from the required average. The Committee Chair questioned the Secretary, asking why the forecast would be off, and why not adjust in the budget adjustment act. The Secretary thinks the forecast doesn't have a true up. He said he is very concerned about DS payment reform.

He wants people to understand DA/SSAs is where spending is growing, growing much faster than the allowed increase. Representative Toll said the DA funding increase is due to Vermont State Hospital coming offline and those people getting services in the community. Al said in-patient facilities are not and have never been reflected in these numbers. Kitty persisted in asking if DAs are covering the pressures from Waterbury and the Secretary was non-committal.

The Secretary said there is always new money in DAs, we have to be asking what it is being spent on. 'We need to analyze it more'. He went on to say that growth in success beyond six (SBS) is not spread evenly around the State. This is the only place where the DAs really see a margin, so SBS fiscally benefits DAs. He said it is disturbing that they are dependent on school districts to make their margin. Here is the link to Secretary Gobeille's PowerPoint.

<https://legislature.vermont.gov/Documents/2020/WorkGroups/Senate%20Appropriations/FY%202019%20BAA/19-0729~Agency%20of%20Human%20Services~FY%202019%20Budget%20Adjustment-AHS%20Summary%20Presentation~1-31-2019.pdf>

ACEs Presentation to House Health Care, Human Services and Senate Health and Welfare

Kathy Hency spoke about the impact of early trauma on mental health, addiction and disease. Kim Pierce, a Physician Assistant at Plainfield Health Center, has transformed her practice and shared a film for other medical practitioners.

Kim made the film about adverse childhood experiences and what physicians can do to address it. She said every chronic disease is related to ACEs. She noted that there are generational effects. She screens for ACEs in her practice and has done so for over 500 patients. Kim said that just doing the screening reduces medical care utilization for the next year. She sees people start to turn their lives around and addressing addiction, mental health and their physical health. On the other side of stress is hope and people heal.

The film showed the history of ACEs in Vermont. ACEs have a tremendous impact on health, but can cause shame and blame. Kim wants people to be empowered to address it in the rest of their lives. Kim would like to do more about resilience.

Representative Bill Lippert, Chair of House Human Services Committee said adverse community experience is also critical. Racism, gender discrimination and similar biases impact how people are treated by their communities and should be considered as adverse childhood impacts.

Secretary Gobeille testifies at House Health Care Committee

Human Services Secretary Gobeille showed flat growth in Medicaid acute care health care spending which includes hospital inpatient, outpatient, and ACO payments, but excludes psychiatry, dental, and pharmacy. He then showed a chart of designated and specialized service agency (DA/SSSA) spending

growth which shows 5.3 to 6.2% growth. It noted that most of the growth is success beyond six (SBS) for school-based services and developmental services. He said all DA/SSAs are different. He believes there is a misperception that the State doesn't put new money into DA/SSAs, but the growth in overall GF and matching fund is going up. He was silent about new caseload, new services, etc. Success Beyond Six spending is up 7.9% since 2011. He pointed out that this is the place that DAs have a margin. Other services they provide they have no margin. He said the \$72 million in SBS has an outsized impact on the fiscal health of agencies. Representative Anne Donahue made it clear that general fund expense for SBS is zero for AHS. The Secretary said that there is a cap on state Medicaid expenditures, "This growth could be a bad thing if we ever go near our cap." He is concerned about Medicaid expenditure growth.

Secretary Gobeille also showed a chart showing the distribution of the SBS funds. He said the agencies growth in SBS is inconsistent and the distribution of SBS does not relate to size the population. He is working with the Secretary of the Agency of Education and they are looking at this together. He agreed to get the Committee information on spending per capita for each agency. Here is a link to the presentation:

<https://legislature.vermont.gov/Documents/2020/WorkGroups/House%20Health%20Care/AHS%20Budget%20FY2020/W~Al%20Gobeille~Agency%20of%20Human%20Services%20FY2020%20Budget%20Picture~2-1-2019.pdf>

Vermont Care Partners Outcomes Report for FY 2018

The new Vermont Care Partners Outcomes Report for FY2018 can be accessed with this link:

<https://vermontcarepartners.org/wp-content/uploads/2019/01/2018-VCP-Outcomes-Report.pdf>

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
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- 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.