The COVID 19 pandemic has changed the focus of Vermont Care Partners’ advocacy efforts as our provider network has revamped our services to meet the needs Vermonters in new ways with careful precautions for health and safety of those we serve, our workforce and partners. Legislative work is still being conducted remotely.

WHAT HAPPENED THIS WEEK IN THE LEGISLATURE

Senate Institutions Committee Receives Update on Mental Health Plans
Mental Health Commissioner Sarah Squirrell gave an overview of mental health issues relative to the Senate Institutions purview of capital development. She reviewed the different levels of care from inpatient to community-based resources and discussed the growing demand for mental health services. The Committee learned that the Department of Mental Health is involved in the design work for a new 16-bed state-run secure residential facility to be placed on the grounds of former woodside residential facility.

House Human Services, House Health Care and Senate Health and Welfare Briefed on Federal Funds
On January 20th Sarah Clark, CFO, of the Agency of Human Services briefed the three committees on the use of the new federal COVID 19 Emergency Relief funds. She also confirmed that the enhanced federal match for Medicaid will continue through the end of the FY21. This “FMAP bump” of 6.2% will bring over $40 million for the second half of FY21.

Here is how the CRF may be used:
- $40 million for vaccines and testing;
- $200 million for rental assistance
- $6.3 million for substance use disorders
- $3.2 million for mental health – at least 50% specifically for facilities
- $12 million for childcare
• Smaller allocations for: Head Start, Building Stable Families, Chaffee foster care, education and training, congregate meals, SNAP and funeral benefits.

Steve Klein from the Joint Fiscal Office share these key points (direct excerpts):
1. Like the earlier CARES funding there is a lot we do not know, and the impacts are likely to continue to unfold throughout the legislative session.
2. The Federal Economic Relief Funding was coupled with the overall Federal Budget for Federal Fiscal Year 2021. We will see state impacts of both federal Pandemic Relief and base federal funding in the Budget Adjustment, the State Fiscal Year 2022 Budget, and areas that the policy committees will need to consider over the coming session.
3. The Relief Bill extended the time for using the Coronavirus Relief Fund (CRF) funds through December 31, 2021. While most of the $1.250 billion that Vermont received has been spent, there may be $10 to $30 million which could be impacted by this extension.
   a. How the CRF monies have been used in the various policy areas may be an area that committees want to take testimony on.
   b. Where there are funds within appropriations and allocations that remain unspent, those can be made available for use within those appropriations or allocations or reallocated. That will be something that should come up through Budget Adjustment or the Budget.
   c. Where monies have already been reallocated and spent, those funds are not available.
   d. There may be some cases where new relief funds can replace CRF funds, freeing up more flexible CRF dollars.
4. The total Vermont impact of the relief portion of the bill could be $1.4 to $2.5 billion; less than half of that will pass through the state, with the amounts to be appropriated or disbursed with legislative oversight being about $650 million.
   a. The non-state portion includes direct stimulus payments of $600, Paycheck Protection Program (PPP) funding, small business assistance and UI supplements among others. Even in these areas, the Legislature and its committees may consider a role in promoting resource usage.
   b. $650 million State funding includes $45-50 million which will go for vaccine funding, testing, tracing and mitigation; this may require immediate use which could limit legislative involvement. There are other areas that might require quick action to provide funds such as rental assistance.
5. The new funds are likely to have an even more complicated process of guidance, regulation, and disbursement. The Act provides overall spending conditions. Those conditions could change if and/or when there is a subsequent relief bill. Guidance will initially be developed by the outgoing Trump Administration. It is very likely that this will be modified as the new Biden Administration comes in. For this reason, we will once again be faced with a changing federal guidance world throughout the legislative session.
6. From an initial review some of the areas where more work will be required include:
   a. Rental Assistance: Vermont is projected to receive a $200 million small state minimum allocation which needs to be authorized for use by September 2021 or it will be distributed to other states. These funds come with statutory income restrictions and will be subject to changing Treasury guidance and begin to arrive in late January.

The Joint Fiscal Office will need to approve some of the expenditures. With Congress and the Administration changing there could be changes in these resources. Steve believes we will know by the end of February to early March.

Steve said this is an opportunity to use the funds as investments knowing that in future years the revenues will dry up so we should be cautious about creating future budget deficits by raising base funding. Senator Lyons asked for recommendations to achieve systemic change. Sarah said a goal of one-time federal funds is to build up housing, childcare, etc.

House Appropriations Committee Reviews Revenue Forecast
The January upgrade of revenue forecast was presented by State Economist Tom Kavet. General fund revenue forecast for FY21 is up by nearly $159.8 million and the revenue forecast for FY22 is up by $155.7 million compared to the August forecast. The FY23 forecast is only higher by $80 million.
In spite of projected general fund growth over the next few years, the Joint Fiscal Office is projecting the demand for general fund to continue at a similar growth level, however the projected uses continue to be higher than the revenues on an ongoing basis. Chair Mary Hooper asked about potential investments that could close the gap. Tom Kavet suggested investment in high-speed broadband to position the State to attract more remote workers into the staff. Additionally, because one of the findings of the economist is that the difference between the ‘haves’ and ‘have-nots’ has increased, he recommended investment in job training to help fill in the gap.

**Senate Health and Welfare Receives Overview from AHS Secretary Mike Smith**

AHS Secretary Mike Smith spoke about his commitment to the work of the Agency of Human Services. How it is there to support people who may not have enough support from friends and family like he had growing up. He gave an overview of the funding and functions of the departments. He offered to come back to speak about the reboot of the All Payer Model. The Secretary highlighted the use of CRF for staffing and ramping up to fight COVID. He believes AHS did an extremely good job of addressing the pandemic and maintaining core services and mission. He is proud of these achievements:

1. A quick shut down of an outbreak in the correctional system;
2. Eliminated homelessness; and
3. Maintenance of the childcare system.

Currently there are 2,000 people in hotels. He acknowledged that permanent solutions are needed. AHS is planning to develop community-based local programs and creating permanent housing. Senator Lyons complimented the work of AHS. She also asked about losses of providers.

**House Human Services Learns about Addiction**

Kelly Dougherty, Deputy Commissioner for Substance Abuse at VDH gave an overview and update on substance use disorder services. There has been a significant increase in overdose deaths over 2019, reversing a downward trend.

The Deputy Commissioner shared efforts that were made to address addiction during the pandemic. There was expansion of telehealth, including audio-only, which was found to be effective. ADAP worked to improve access by ending the requirement of an in-person visit to begin use of buprenorphine but it is still required for methadone. Currently, 11 hospitals are providing rapid access for medication assisted treatment (MAT) which is limited to buprenorphine. More take home medications are allowed for MAT by Hubs and Spokes and hubs now allow proxy pick up, curbside pickup and home delivery of medication.

Ena Backus, the Director for Health Reform at AHS said the Blueprint for Health is now under her responsibility. Most of the Spokes are patient-centered medical homes. The Blueprint provides Medicaid payments through the community health teams to the Spokes with one MA level clinician and one nurse for every 100 patients. The number of Medicaid patients has grown during the public health emergency. There are 270 spoke providers. The Helplink was credited with helping more people access treatment.

**The Senate Extends Timeframe for CRF Appropriations**

On Friday the Senate voted to approve continued spending of the state’s remaining CRF, including funds for the rental relief for as many as 1,500 families and expansion of broadband and the Everyone Eats Program.
ADVOCACY EVENTS and INFORMATION

MENTAL HEALTH ADVOCACY DAY

Monday, February 1, 2021 - 10:00 am-2:00 pm
“Our Mental Health in the Time of COVID”
Virtually by Zoom

We are looking forward a virtual Mental Health Advocacy Day in 2021. We hope that you will be involved. We will begin the morning with welcome addresses from state leaders and a keynote plenary session. The afternoon will be an opportunity for the community to share their mental health experiences and stories.

Keynote Speaker: Chackupurackai Mathai - “Embracing Our Lived Experience Leadership”

Description: Chacku will speak about embracing our lived experience and harnessing it to inform and empower our advocacy.

Biography: Chacku is an Indian-American, who first became involved in consumer/survivor/ex-patient advocacy and peer support when he was 16 years old. Chacku’s personal experiences with racism, xenophobia, racialized trauma, suicide attempts, and disabling mental health and substance use conditions, including psychosis as a youth and young adult, launched Chacku and his family towards a number of efforts to advocate for improved services, social conditions, and alternative supports in the community. He has since accumulated 35 years of experience in a variety of roles including youth leadership, community organizing/advocacy, direct service, training, peer support program leadership, as well as international, national, statewide, and local board governance and executive leadership roles.

REGISTER NOW - FOR THE DAY OF THE EVENT – FEBRUARY 1

ADVOCACY TRAINING:

1. NAMI Vermont Legislative Advocacy Training – Saturday, January 23, 2021 – 9 am-Noon – Click here to learn more and register...
2. Vermont Care Partners Legislative Advocacy Training – Weds., January 27, 2021 – 12-1:00 p.m. Click here to Register or Learn More...
3. Mental Health Advocacy Day Legislative Training with Peter Mallary and Ed Paquin – Weds., January 27, 2021 – 4:00-5:30 p.m. Click here to Register.

TESTIMONY: Do you want to share testimony between Feb. 2-5 with House or Senate Committees? Click here to sign up by January 18th. Please note that testimony is at the discretion of the Committee Chairs.

REGISTER TO SHARE YOUR STORY: Attendees have the opportunity to share their lived experience story, poem, or other insights at the event. Each participant will have 3-5 minutes. Click here to register to share your story. Click here for guidelines on pre-recording your video.
WHO SHOULD ATTEND: Mental health advocates, peers, family members, professionals, providers, community members and mental health stakeholders.

2021 AGENDA: Agenda
- 10:00 am ~ Welcome and Introductions (Peter Mallary, Julie Tessler, Laurie Emerson)
- 10:15-11:00 am ~ Welcome Address from State Leaders – Live and pre-recorded (to be invited)
  - Governor Phil Scott
  - Lt. Governor Molly Gray (confirmed)
  - Secretary of Human Services Mike Smith
  - Senate President Pro Tempore Becca Balint
  - Speaker of the House Jill Krowinski
  - Commissioner of Mental Health Sarah Squirrell (confirmed)
- 11:00 am-11:45 am ~ Keynote Plenary Session: Chacku Mathai
- 11:45-12:30 pm ~ Lunch Break
- 12:30-2:00 pm ~ Sharing Stories – Live and pre-recorded (register above)
- Feb. 2-5: Committee Testimony

Information on Your Senators and Representatives
Follow this link to determine your legislators and access their contact information. Legislators are listed both by DA/SSA and by the Committee they serve on. Please note there are new legislators on committees that have purview over policy and funding for the Vermont Care Partners network. [2021 Legislative Committees by DA-SSA.xlsx](mailto:2021LegislativeCommitteesbyDA-SSA.xlsx)

Action Circles Calendar
Action Circles maintains a calendar of Legislative breakfasts and events. This information can be found at: [https://www.action-circles.com/legislator-events/](https://www.action-circles.com/legislator-events/)
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
- Legislators' email addresses 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.