



**Legislative Agenda 2021  
Working Draft 1c**

**1. Respond to the surge in demand for community-based mental health, developmental and substance use disorder services due to COVID**

- Invest in developmental services to address growing mental health needs and homelessness with increased clinical care, crisis beds, transitional beds and support for shared living providers.
- Invest in mental health and substance use disorder services to address increases in acuity and demand for outpatient clinical care, case management, nursing, crisis intervention, residential and housing supports.
- Invest in the workforce to reduce nearly 500 staff vacancies and high staff turnover by achieving market rate compensation and building predictable scheduled rate increases aligned with state employees, healthcare, or education sectors.
- Develop educational opportunities for workforce, particularly those providing developmental disability services.
- Increase funding for non-categorical case management for: elders, homeless, outreach activities, people involved in criminal justice system.

**2. One-time/short-term Investments to respond to surge in demand due to COVID**

- fund motel/hotel outreach, non-categorical case management, and room and board expenses for individual prior to SSI eligibility
- Invest in training on trauma-informed care and wellness support for staff
- Investment in crisis stabilization programs with reduced census and increased costs due to COVID

- Address one-time COVID expenses not covered by federal resources – HVAC systems, equipment, and testing.

### **3. Fully fund mental health workers to serve in all 10 State Police Barracks**

- Support existing model – good data available
- Full state coverage is important
- Support mental health and SUD aspects of Justice Reinvestment II to reduce incarceration and recidivism

### **4. Continue flexibilities granted during the pandemic inclusive of telehealth and audio-only telehealth**

- Telehealth utilization is cost-effective and has high satisfaction
- Some Vermonters require audio-only due to broadband, equipment and other limitations
- Continue prospective payments and flexibilities for developmental and school-based services during the pandemic
- Increase investment in emergency community response and streamline administrative requirements for serving people who are homeless and at-risk due to pandemic to avoid draining resources from existing mandated populations.

### **5. Strengthen investment in home and community-based services in All Payer Model**

- Expanded cost-effective investments in community-based services
- Build on the successful pilots for care coordination between DAs and hospital emergency departments
- Strengthen community care coordination
- Do not include home and community-based services in the cap for 'Total Cost of Care'

### **6. Prioritize current or anticipated gaps in services for investments**

- Focus on addressing populations who are subacute and residing in hospitals to offer when less expensive less restrictive services
- Expand mental health resources for nursing home care
- Expand residential resources such as the MyPad model over more investment in general adult inpatient beds.

- Fully fund mobile crisis and effective alternative models of crisis services to match resources to expectations and invest in the most cost-effective models for both children and adults
  - Fully fund increasing demand for outpatient mental health services
  - Fully fund mental health and SUD needs of homeless Vermonters many of whom have complex challenges
- 7. Establish an ombuds position for developmental disability services**
- An independent ombudsman for people using developmental disabilities services will strengthen protections and support
- 8. Educate on Developmental Disability Services service delivery and payment reform process and proposals**
- Share information on the impact of reforms on other state systems of care
- 9. Educate on ADAP plans for payment reform and require transparency and Stakeholder involvement in payment reform process**
- Require strong stakeholder engagement (people who use services, providers, etc) and use learnings from other payment reform processes to inform ADAP payment reform
  - Ensure alignment with other state payment reform processes
- 10. Support State recognition of the harm caused by eugenics and apologize to affected Vermonters**
- The State of Vermont should publicly recognize the harm experienced by populations who suffered from the eugenics movement as one step to address marginalization of people with developmental disabilities, native Americans and others.
- 11. Educate on and support school-based mental health services as part of a comprehensive system of care for children and youth**
- Ensure that payment reform for school-based services will include adequate funding for mental health services and therapeutic schools

- Ensure that payment reform system of care concept rather than a fractured system or use of in-house resources at schools that don't leverage existing mental health resources

## **12. Expand funding for peer support programs both within DA/SSAs and at peer-run organizations.**

- Expand investment in peer-based service for both DA/SSAs and peer-run organizations because of their tremendous effectiveness

## **13. Expand Access to affordable housing**

- Develop housing vouchers for people served by the DS HCBS Waiver to create independent housing options.
- Improve the flexibility of the housing vouchers administered by the Department of Mental Health to avoid restrictive eligibility practices that leave housing vouchers underutilized.
- Support the Vermont Coalition for Affordable Housing and the Vermont Coalition to End Homelessness efforts related to mental health and substance use disorders

## **14. Minimum wage**

- Support increases in the minimum wage as long as Medicaid rates are raised to accommodate the increased costs to community providers including wage compression.

## **15. Address mental health needs of individual in the criminal justice system**

- Support S.3, the forensic mental health bill (<https://legislature.vermont.gov/bill/status/2022/S.3>).
- Support proposed Forensic Mental Health Working group to examine other states' models for forensic mental health infrastructure
- Develop community programs for people with serious mental illness and criminal justice involvement.