Legislative Update for May 18, 2021

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 being conducted remotely.

WHAT’S HAPPENING IN THE LEGISLATURE

Vermont Care Partners and network agencies are advocating for resources to meet the increasing acuity and demand for services after the Governor’s budget didn’t address the rate increases needed for our workforce challenges.

The Vermont Care Partners legislative agenda is quite comprehensive and focuses on our need for adequate resources to meet our mission and mandates. See this link: https://vermontcarepartners.org/wp-content/uploads/2021/01/legislative-agenda-2021-working-draft-1.pdf

This Week’s Testimony

APPROPRIATIONS AND FUNDING-RELATED LEGISLATION

Conference Committee on the FY22 Appropriations Bill Negotiations Moves Quickly
After the House didn’t approve the Senate proposal for the FY22 appropriations bill, a committee of conference was formed to work through the differences consisting of Senators Kitchel, Sears, and Westman, and Representatives Hooper, Fagan, and Jessup. The Committee’s goal is to finalize the budget to present to the full legislature for approval this week and enable the session to come to a close by May 21 or 22. After the Legislature approves the bill, the Governor receives it and decides whether to approve it or veto it. This year a veto is a possibility, in which case the Legislature may try to override the veto with a 2/3rds majority in both chambers, or they may choose to make revisions and resubmit it. This would require the Legislature to call a special session. The date for the special session will be June 23 and 24, should it be necessary.
As noted previously, Vermont Care Partners is pleased that the Senate included a 3% Medicaid rate increase for designated and specialized service agency developmental and mental health services ($3.85 million DMH and $7.43 million for DAIL), as well as language that will release the $1.5 million for loan repayment and tuition assistance to staff of the agencies who provide mental health and substance use disorder services. We have informed the House that we would like them to agree with both the 3% COLA and the revised language on workforce. Both budgets include $600,000 from ARPA for Rutland Mobile Crisis Outreach. The Senate added funding for support services for emergency housing transition and rental assistance.

The House Health Care and Human Services Committees are supportive of the Senate funding level and new language for tuition assistance and loan repayment.

Steve Klein, Director, Joint Fiscal Office, explained that guidance, in the form of an interim final rule, arrived May 10th. The good news is that it overlaps with the CRF guidance. It effects funding starting March 3rd. The focus is on coming out of the pandemic and underserved populations. The housing rules are problematic because they allow housing for homeless, but funding for housing is limited to specific census tracks with poverty levels of 25% or more. In Vermont, poverty is dispersed so there are limited areas that qualify. Proposals to expand affordable housing will need to come from general fund instead of ARPA. Infrastructure projects must be tied to the pandemic, health disparities, social determinants of health, public health navigators, community violence intervention, etc. Jane Kitchel noted that mental health and SUD are clearly applicable under the public health response.

Finance and Management Commissioner Adam Greshin added that the guidance language expands CRF to mitigate future pandemics. This would allow for projects to retrofit public spaces to improve airflow. ARPA may be used for revenue replacement, CRF was not. Joint Fiscal Office then calculated the extent to which revenue replacement will be possible, as well as whether the ARPA funds appropriated it the House and Senate budget bills meet the new criteria. In the end they went back to the Committee with recommendation to switch some funds from ARPA to general fund, including funds in H.315 (Act 9) for case management and health and wellness.

Secretary of Administration Suzanne Young and Commissioner of Finance and Management Adam Greshin worked with the committee to specify the Governor’s preference for one-time investments in big transformation projects such as global climate change, broadband, water, sewer, and housing. They want to increase funding for economic recovery.

Moving pieces in the budget as of May 17th include housing investments, scholarships/internships through the state colleges, and language on the health care study.

The goal is for the Conference Committee to finish Tuesday. Then the Joint Fiscal Office will need to finalize the bill in preparation for review and approval by the full Senate and House of Representatives.

**POLICY LEGISLATION**

*Senate Education Passes S.16 on Creating a Taskforce on Exclusionary Discipline Reform*

S.16 on creating a taskforce on exclusionary discipline reform is on the Governor’s desk for signature into law after the full Senate agreed to the changes made by the House of Representatives. The Senate voted to approve the bill and then Senate Education reviewed and approved the changes made by House Education to S.16, which creates a renamed taskforce on “Equitable and Inclusive School Environments,” with little discussion. House changes can be tracked here, and include tightening the group membership to 16 people; creating an interim report due in January of 2022 with a final report in
March of 2022; adding a review of “school professional development programs and make recommendations on how educator practices, such as positive behavioral interventions and support, trauma informed practices, and restorative practices, and related training for these practices can increase educators’ awareness of students’ needs in a manner to reduce behaviors that lead to possible out-of-school disciplinary measures;” and ensuring that the best practices reviewed minimize law enforcement contacts, are trauma-informed, and “maximize relational and restorative actions that support the social, emotional, and mental health needs” of students who might be subject to exclusionary discipline practices. VCP does not have a designated seat on the taskforce. A therapeutic school, selected by the Vermont Independent Schools Association [VISA], will have a seat, and VCP is likely to attend and monitor taskforce meetings as a member of the public.

**Testimony from the Department of Children and Families (DCF) in House Human Services**

On Wednesday, May 12, the House Human Services Committee heard testimony from DCF leadership. Aryka Radke, the new Deputy Commissioner for Family Services, testified about the Family Services Division’s Proposal for Stabilization Foster Care Homes. These homes would provide short-term care (one to 30 days) through an enhanced contract, allowing for assessment so that the child could “return home to wrap services.” Foster care providers would ideally have a flexible schedule to support youth who can’t go to school and would be trained in crisis techniques. The plan is for one stabilization home in every district. In doing this, DCF is “partnering with agencies with a proven track record of caring for young people...to provide intensive support and stabilization and wrap services to these families--particularly including a well-coordinated safety plan and 24/7 on call support, as well as a model of care that is clinically focused and trauma informed.” Noting that DCF spent $26 million on 123 children and youth in residential care in FY20, DCF feels that model will be cost effective. DCF sent out information soliciting interest to 1500 foster families, and 18 families expressed interest. DCF plans to have the stabilization homes online by mid- to late-summer.

Committee Chair Pugh asked where this proposal was in the budget. Radke was not sure and replied that she will look into it. Radke shared that Becket Family Services would be providing clinical supports to the children/youth at these foster homes. Representative Pugh wondered why DCF is using one agency “rather than using some of the other agencies.” Radke responded that DCF is starting with 4-6 homes, and they may need to seek additional proposals. Representative Brumsted expressed concern about the proposed short length of stay, given that this population of kids has attachment needs and considerable transitions in their lives already. Radke responded that the reason for the shorter stay is that the intent is stabilization, so that the children/youth can go home. These homes will be reimbursed $150 per night, versus the typical foster care reimbursement of $18-23 per night. Radke noted that the number of foster homes that take stabilization placements now have reduced significantly.

Representative Wood appreciates the focus on preventing kids from going out of state and on bringing them home, but pressed Radke on the use of Becket Family Services. “What is Becket’s experience in foster care? Will they be setting up shop in Vermont more than they have now? Did you explore contracting with designated agencies, who have a long history of providing these types of support for children and youth?” Radke responded, “yes, absolutely there is room for additional partnerships.” As a new leader in the Vermont system, it was unclear whether Radke was aware of the designated agency system. Wood also referenced the experience of the Francis Foundation. Representative Wood advised DCF “to look to Vermont resources in the area, and for sure we have them.” Representative Small seconded Wood’s comments, noting that it was important to use providers with prior experience in working in crisis stabilization. Small also wondered about how this proposal would impact the existing shortage of foster families. Radke said that districts are sharing the same concern with the Central Office: “We can’t rob Peter to pay Paul.” They are just started to have a conversation about increasing the daily rate for foster care.
Representative Pugh pressed Radke again on the process for developing clinical support. Noting that Becket is a 90-day program, she asked about the RFP that DCF used. She noted that community mental health centers have crisis stabilization and answer the phone 24/7, so this seems like a duplication of effort. Radke said that she would share the RFP.

Beth Sausville then updated the committee on DCF’s Family First Prevention Services Act preparation work. She shared the process and timeline for stakeholder engagement in putting the plan together, which is due October 1. DCF is embracing the opportunity to have lots of input from stakeholders. DCF’s outdated IT infrastructure is a huge barrier. Chair Pugh confirmed with Sausville that the Children’s Bureau gave DCF approval to delay implementation and requested how much “of a hit” (financially) this was. Sausville will get back to the committee. Pugh also wondered about the role of the legislature in reviewing the prevention plan. Representative Redmond asked whether this prevention plan will address some of the workforce challenges the system is experiencing. Representative McFaun wondered how families who had interacted with DCF were being asked for input.

Judy Rex provided an update on the Woodside replacement facility, which will be operated by Becket Family Services in Newbury, Vermont. She shared that the project has been delayed due to the need for a Wetlands review prior to review of the whole application by the Developmental Review Board. This means that this facility is unlikely to be operational before next spring. She also shared that community members had voiced concerns about having a facility for justice-involved youth, and that DCF had pledged not to expand this facility, among other agreements.

Rex also shared an update on an RFP for a statewide transportation provider, who would centrally coordinate all requests for DCF transport, including specialized childcare transportation as well as family services related transportation needs. DCF received one response and plans to negotiate this contract and announce the award soon. Representative Wood shared a cautionary tale about a contractor who had to drive a youth from Bennington to Newport for a five-minute hearing (pre-pandemic). Rex stated that the judiciary is now onboard with use of virtual hearings to prevent this kind of waste. Representative Pugh closed the hearing by thanking the DCF representatives for attending, but again expressed that the committee would like to hear updates directly from DCF rather than reading about them in the media.

**House Approves JR.6 Declaring Racism a Public Health Emergency**

On Tuesday and Wednesday the full House of Representatives pass JR.6 declaring that racism is a public health emergency. It states: “this legislative body commits to coordinating work and participating in ongoing action, grounded in science and data, to eliminate race-based health disparities and eradicate systemic racism.” The Senate Government Operations Committee is taking up the bill this week.

**S.3 on Competency and Sanity Approved by Full House After Review by Appropriations Committee**

S.3, the bill on competency and sanity was approved by the full House after the Appropriations Committee amended it by adding $500,000 for ongoing funding to Vermont Legal Aid for providing counsel during commitment hearing and for DMH participation in the hearings, too. Additionally, $25,000 was added in one-time funds to support the consultation for the Forensic Working Group. Now the Senate Judiciary and Health and Welfare Committees will review the revised bill and determine whether to accept it or form a committee of conference to work through the differences.
The Senate Government Operations Committee Recommends Eugenics Resolution with Amendment

The full Senate voted on J.R.H. 2 Joint resolution sincerely apologizing and expressing sorrow and regret to all individual Vermonters and their families and descendants who were harmed as a result of State-sanctioned eugenics policies and practices. The Senate Government Operations has amended some of the whereas clauses but maintained the body of the resolution and voted out the Bill 5-0-0. The Joint Resolution concludes:

Resolved by the Senate and House of Representatives: That the General Assembly sincerely apologizes and expresses sorrow and regret to all individual Vermonters and their families and descendants who were harmed as a result of State-sanctioned eugenics policies and practices, and be it further Resolved: That the General Assembly continues to work to eradicate the lasting legacy of its prior actions by listening to and working with the affected individuals and communities, and be it further Resolved: That the General Assembly recognizes that further legislative action should be taken to address the continuing impact of State-sanctioned eugenics policies and related practices of disenfranchisement, ethnocide, and genocide.

House Health Care Continues focus on Children Waiting in Emergency Departments

Mental Health Commissioner Squirrell recognized that children in psychiatric crisis in hospital emergency rooms is a crisis. She agrees with the Committee that the response must be holistic and should be part of the work of the Mental Health Integration Council. It was noted that this has been a problem for the 12 – 17 age group even before COVID. The Commissioner added that having schools reopen will enable more identification and response to the mental health needs of children and youth. Youth stuck at the Brattleboro Retreat are often unable to be discharged due to a lack of step-down options, compounding the problem.

Commissioner Squirrell highlighted recommendations from the House Health Care Committee letter and thanked them for their input. She agrees with the need for input from families and peers be specified. She agrees with the focus on targets, data and accountability requested. She further agreed that VAHHS and DMH should work together to coordinate data. Commissioner Squirrell spoke about opportunities to improve the care environment such as a brochure they developed with the VT Family Network. It was announced that UVMMC is willing to allow up to two children waiting for psychiatric care to be able to be served on the pediatric ward. She spoke about the enhanced FMAP for crisis services as an opportunity to strengthen crisis services.

The Agency of Education and DMH have strengthened their collaboration during COVID. ADAP also needs to be included in the conversation. They are seeing an increase in youth cannabis use which could be contributing to some of the increased mental health disorders among youth.

Representative Burrows asked how DMH has worked to support the sustainability of community mental health agencies. Sarah said they have Directed $19.7 million of federal COVID funds to the agencies. She noted that the workforce is critical and DMH has a task force co-chaired by DAs. They are working with Agencies to target federal funds and to support school-based services.

Heather Bouchey, Deputy Secretary, Agency of Education, expanded on the partnership with DMH and the designated agencies. She said they have launched a SAMHSA grant to provide school clinicians and professional development for teachers to address mental health. This project will be scaled up. DMH and AOE worked on guidance on social and emotional health last summer. AOE had each LEA assess social emotional engagement. They are seeing an increase in need and referrals for mental health support. Each district has a team to address the needs identified in its regional needs assessment. Heather Bouchey said that older students are struggling the most from the lack of social interaction.
Devon Green, Vermont Hospital and Health Systems, VAHHS, thanked the Committee for the letter and will keep the momentum going forward through the Summer given the change in leadership. VAHHS will provide hospital specific data to DMH but does not want it to be public because of HIPAA concerns. She would like to bring the committee members to the emergency departments to see how they are varied. They want to balance, quality access and affordability but it is hard to achieve that in a rural environment. VAHHS also supports diversion services. They agreed to collect and report the data as requested by the Committee. Representative Lippert reiterated his request for data on children in DCF custody in emergency departments (EDs). Devon said they will collect and report on that. Hospitals are looking at ways to improve the environment in EDs for children and youth. Devon clarified that EDs are for triage, not treatment. They are looking at increasing peer support workers in hospitals and more training for ED staff, as well.

**May is Mental Health Month**
VCP worked with DMH to have the Governor sign a proclamation for “May is Mental Health Month.” Here is the proclamation: [https://governor.vermont.gov/content/mental-health-awareness-month-proclamation-21-056](https://governor.vermont.gov/content/mental-health-awareness-month-proclamation-21-056)

The Senate passed a concurrent resolution developed by Senator Kitchel with support from VCP: [https://legislature.vermont.gov/Documents/2022/Docs/ACTS/ACTR094/ACTR094%20As%20Adopted.pdf](https://legislature.vermont.gov/Documents/2022/Docs/ACTS/ACTR094/ACTR094%20As%20Adopted.pdf)

**Information on Your Senators and Representative**
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. [https://vermontcarepartners.org/wp-content/uploads/2021/02/2021-Legislative-Committees-by-DA-SSA.xlsx](https://vermontcarepartners.org/wp-content/uploads/2021/02/2021-Legislative-Committees-by-DA-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.