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April 25, 2018

Senate Committee on Health and Welfare  
State of Vermont  
115 State Street  
Montpelier, VT 05633

*Sent via email to [fbrown@leg.state.vt.us](mailto:fbrown@leg.state.vt.us)*

Re: S. 203- An Act Relating to Systemic Improvements of the Mental Health System

Dear Chairman Ayer and Committee Members:

Bi-State Primary Care Association appreciates the opportunity to provide comment on S. 203- An Act Relating to Systemic Improvements of the Mental Health System.

Established in 1986, Bi-State is a nonpartisan, nonprofit 501(c)(3) charitable organization that promotes access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire. Bi-State's Vermont membership includes 12 Federally-Qualified Health Centers delivering primary care at 64 sites and serving over 172,000 Vermonters. We offer primary care, mental health, substance use disorder treatment, and other necessary services to Vermonters throughout the state.

We want to express our support for improvements to Vermont's mental health system. As providers of outpatient mental health and substance use disorder treatment services, our members have firsthand experience in the mental health needs of Vermonters. Our members work closely with all of the hospitals and designated mental health agencies to coordinate mental health care for our patients. We support increased inpatient psychiatric bed capacity, and, importantly, we support ensuring that all Vermonters receive care in the most appropriate setting for their mental health needs.

As primary care and safety net providers, our members provide outpatient treatment and preventive mental health services to their patients. However, the need continues to grow in this area, and we are eager to continue working towards ensuring all Vermonters have access to these necessary services. We are particularly interested in increasing prevention and treatment methods that enable Vermonters to avoid hospitalization and unnecessary Emergency Department usage. For example, one of our health centers offers drop-in psychiatry services, and two others are piloting new services focused on supporting children.

One key challenge that our members face is in the area of recruitment and retention. It is increasingly challenging to recruit and retain those clinicians who provide mental health and substance use disorder services. We appreciate efforts made by the Senate to increase loan repayment for these clinicians as well as recent licensure changes- these will help to mitigate this pervasive challenge. In addition to compensation challenges, these clinicians face higher burn-out and need more support to enable them to continue to provide these services. Research in the area of clinician burnout has demonstrated that these supports include:

resilience training, expanding team-based care, redesigning organizational workflows, and focused attention on the specific challenges facing these clinicians.

Our members are currently providing mental health and substance use disorder services and are eager to continue to work towards collaborative solutions for Vermonters. We are also willing to work to identify creative workforce solutions to ensure we have the providers we need to deliver these collaborative solutions.

Thank you for your consideration. Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'gm', followed by a long horizontal flourish.

Georgia J. Maheras, Esq.  
Director, Vermont Public Policy  
Bi-State Primary Care Association