

Act Relating to Examining Mental Health Care and Care Coordination

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The Vermont Developmental Disabilities Council strongly supports the Senate Health and Welfare's Committee bill to examine mental health care and care coordination. We appreciate that the Committee has carefully considered testimony from consumers, advocates, family members, providers, educators and state officials and concluded that analysis is necessary and steps should be taken to improve community based mental health services to Vermonters.

The Council's interest in this bill stems from the fact that 40 percent of the Vermonters with Developmental Disabilities served by designated and specialized service agencies receive mental health services. While the Council supports the bill in general, we have two major concerns:

1. Specialized service agencies should be included to provide alignment across the delivery system.
2. The assessment of the need for new institutions in the State should include an assessment of the availability and viability of home and community-based long term services and supports.

It's important that this legislation reflect Vermont's longstanding commitment to and success in providing the home and community-based services to which aging Vermonters and Vermonters living with disabilities are entitled under the law.

To support timely consideration of the bill we are recommending specific additions and edits to the draft presented on February 22, 2017.

Please note in addition to the suggestions below, the Council fully supports the suggestions put forth by Mary Moulton and Julie Tessler on behalf of Vermont Care Partners.

Specific Recommendations:

Section 1 Findings

Community Integration

Please consider adding a finding that pursuant to State and federal law, services must be provided in the most integrated and least restrictive settings possible.

In addition, please consider adding a finding that Vermont is committed to providing people who are receiving publicly financed care in an institution or who are eligible to receive such care, choice with respect to where they live and receive their care.

Section 2 Operation of Mental Health System

This is a friendly amendment to the amendment suggested by Vermont Care Partners in the February 24 testimony of Mary Moulton and Julie Tessler.

The legislative proposal by the Green Mountain Care Board shall include recommendations on how to better invest and manage health care funding between different sectors of Vermont's health care system to ensure resources are used cost effectively to reduce utilization of high cost acute care services.

Specifically, the proposal shall include legislative and regulatory options to analyze and regulate Vermont's non-profit hospitals' community health benefit and health care reform expenditures.

Section 5 INPATIENT GERIATRIC AND FORENSIC PSYCHIATRIC FACILITY

The Secretary of Human Services shall assess the extent to which an inpatient geriatric and forensic psychiatric facility is needed within the State.

The assessment shall include a plan for the design, siting and funding of home and community based services sufficient to assure Vermonters the right to receive services in the most integrated setting possible as well as the ability to choose where to live while receiving services.

If the Secretary concludes that a geriatric or forensic facility, or both, is warranted, he or she shall develop a plan for the design, siting, and funding of one or more facilities with a focus on the clinical best practices for these patient populations.

Section 9. Work Force Development: Mental Health, Developmental Disabilities and Substance use disorder service providers

(a) Vermont's Area Health Education Centers (AHEC), in consultation with the Green Mountain Care Board, Secretary of Human Services, commissioner of labor, Vermont Care Partners, ~~and~~ designated and specialized service agencies, Vermont's Developmental Disabilities Council, and Vermont's institutions of higher education, shall examine and report on best practices for training, recruiting and retaining health care providers in Vermont, particularly with regard to the fields of psychiatry, mental health, developmental disabilities and substance use disorders....

(c) The Secretary of Human Services in consultation with the Commissioners of Public Health, DVHA, DAIL, DCF, DOC, The Governor's Task Force /VHCIP Health Care Workforce Commission, and the Governor's Commission on the Employment of People With Disabilities shall explore amendments to the State Medicaid Plan to allow for increased utilization of Medicaid Funded Community Health Workers.

Section 11 Employment Models for Recovery

The Secretary of Human Services provide the best outcomes for moving individuals with a substance use disorder, psychiatric disability or developmental disability into employment.....

Section 12. Payments to the Designated Agencies and Specialized Service Agencies

The Secretary of Human Services, in collaboration with the Commissioner of Mental Health and the Commissioner of the Department of Disabilities, Aging and Independent Living shall develop a plan to integrate multiple sources of payments to the designated and specialized service agencies

(a) The Secretary of Human Services shall establish and designated and specialized service agencies shall implement a fiscal year 2019 pay scale for the benefit of the designated agency employees and contracted staff. The pay scale shall include a minimum hourly payment of \$15.00 to direct care workers. The pay scale shall reflect salaries for employees and contracted staff at designated and specialized service agencies of at least 85 percent of those salaries earned by equivalent State, health care or school-based positions with equivalent lengths of employment with the goal of achieving parity by November 1 , 2019.

Section 14. Health Insurance; Designated and Specialized Service Agency Employees

The Secretary of Human Services, in collaboration with the Commissioner of Human Resources, shall evaluate opportunities for employees of the designated and specialized service agencies to purchase health insurance through the State employees' health benefit plan for the purpose of finding efficiencies in coverage and budgeting. The evaluation shall include the estimated financial impact of each potential option on the designated and specialized service agencies, employees of the designated and specialized service agencies, and State employees.