

# Vermont Department of Mental Health

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FY2020 BUDGET PRESENTATION

SARAH SQUIRRELL, COMMISSIONER

MOURNING FOX, DEPUTY COMMISSIONER

SHANNON THOMPSON, FINANCIAL DIRECTOR

# Proposed Agenda

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DEPARTMENT OVERVIEW – 20 MIN

DEPARTMENTAL BUDGET – 60 MIN

RESULTS BASED ACCOUNTABILITY (RBA) – 20 MIN

# Departmental Overview

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DEPARTMENT RESPONSIBILITIES

SYSTEM OF CARE

COMMUNITY PROGRAMS

MAP OF SYSTEM BED CAPACITY

# Overview

- ❑ Budget \$266 M
- ❑ Oversight, Designation and Collaboration with:
  - 10 Designated Agencies
  - 2 Specialized Service Agencies
  - 7 Designated Hospitals
- ❑ Operations of Vermont Psychiatric Care Hospital (25 beds)
- ❑ Operations of Middlesex Therapeutic Care Residence (7 beds)
- ❑ 320 staff, 255 at the facilities, 62 at Central Office
  - ❑ Central Office Units: Administrative Support, Financial Services, Legal Service, Research & Statistics, Clinical Care Management, Operations, Policy & Planning, Quality Management, Child, Adolescent & Family, Adult Mental Health Services
- ❑ 25,000 people served through the DA/SSA system with even more served through Community Outreach, Emergency Services, and Crisis Teams
- ❑ Other Notable Partnerships: Child and adolescent psychiatric fellowship at UVM, Vermont Federation of Families for Children's Mental Health, Center for Health and Learning, Vermont Psychiatric Survivors, National Alliance on Mental Illness VT, Pathways Vermont and many others.
- ❑ Collaboration with sister departments, hospitals, other community providers, One Care, police departments, courts and others

# Designated Providers

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## Designated Agencies

- Clara Martin Center
- Counseling Services of Addison County
- Health Care and Rehabilitation Services of Southeastern Vermont
- Howard Center
- Lamoille County Mental Health Services
- Northwest Counseling and Support Services
- Northeast Kingdom Human Services
- Rutland Mental Health Services
- United Counseling Service
- Washington County Mental Health Services

## Specialized Services Agencies

- Pathways Vermont
- Northeastern Family Institute

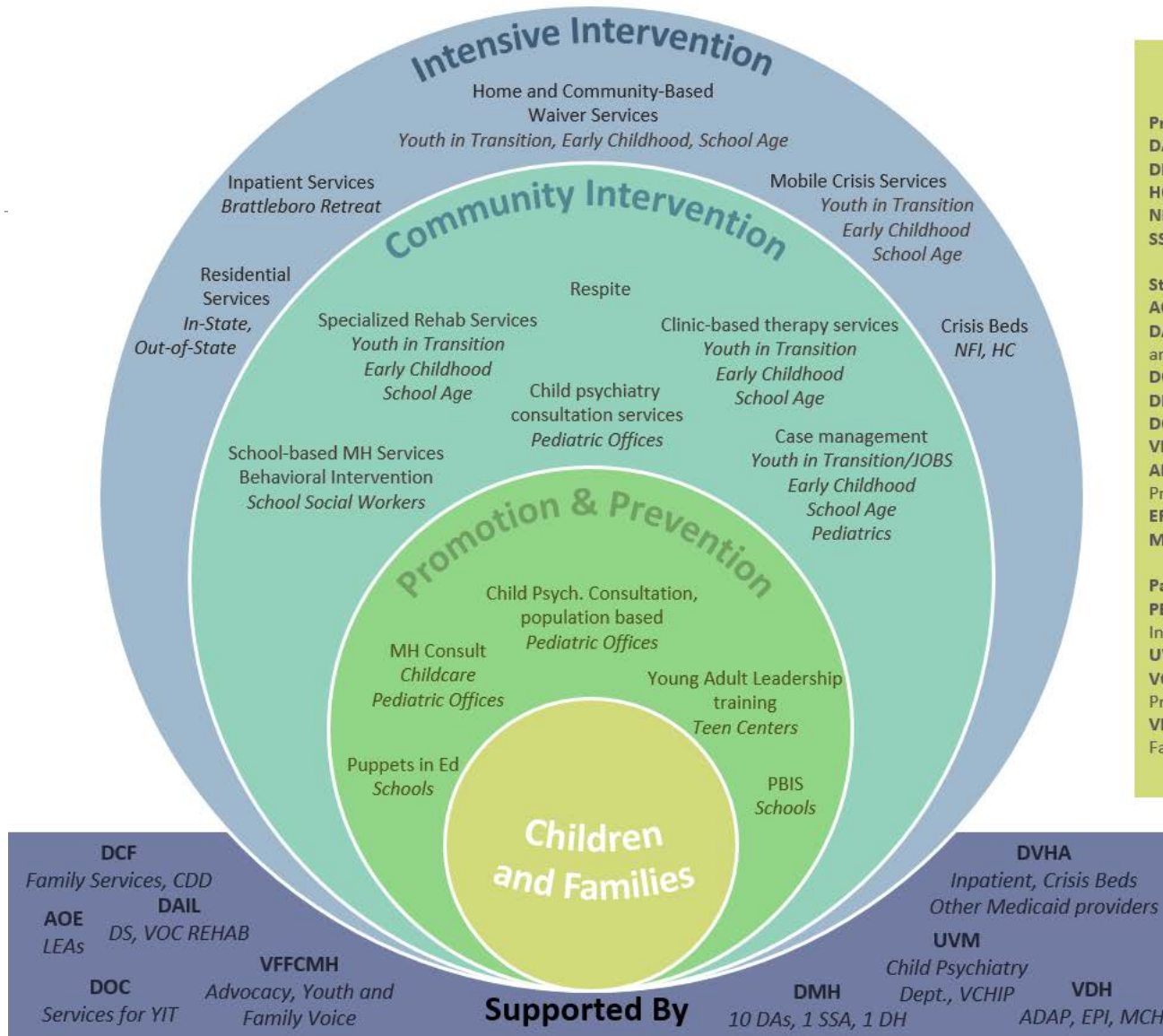
## Designated Hospitals

- Brattleboro Retreat
- Central Vermont Medical Center
- Rutland Regional Medical Center
- University of Vermont Medical Center
- Windham Center
- Vermont Psychiatric Care Hospital (State-run)
- White River Junction VA Medical Center

## State Secure Residential

- Middlesex Therapeutic Community Residence (State-run)

# Children's Mental Health System of Care



### Acronyms

**Providers**

- DA – Designated Agency
- DH – Designated Hospital
- HC – HowardCenter
- NFI – Northeastern Family Institute
- SSA – Specialized Service Agency

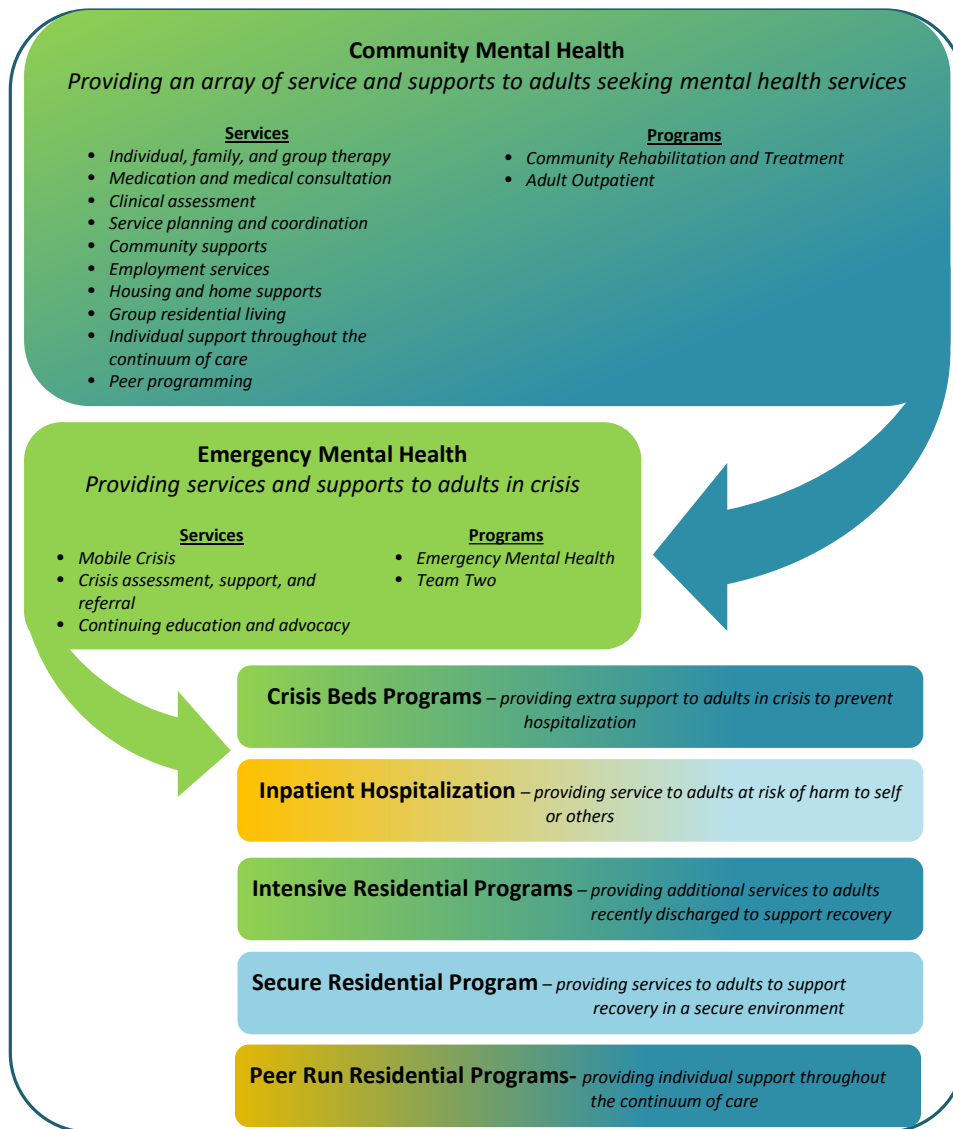
**State Government**

- AOE – Agency of Education
- DAIL – Dept. of Disabilities, Aging, and Independent Living
- DCF – Dept. for Children and Families
- DMH – Dept. of Mental Health
- DOC – Dept. of Corrections
- VDH – Dept. of Health
- ADAP – Alcohol Drug Abuse Programs at VDH
- EPI – Epidemiology at DMH/VDH
- MCH – Maternal Child Health at VDH

**Partners and Programs**

- PBIS – Positive Behavioral Intervention and Supports
- UVM – University of Vermont
- VCHIP – Vermont Child Improvement Project
- VFFCMH – Vermont Federation of Families for Children's Mental Health

# Department of Mental Health Adult Mental Health System of Care



Color Legend

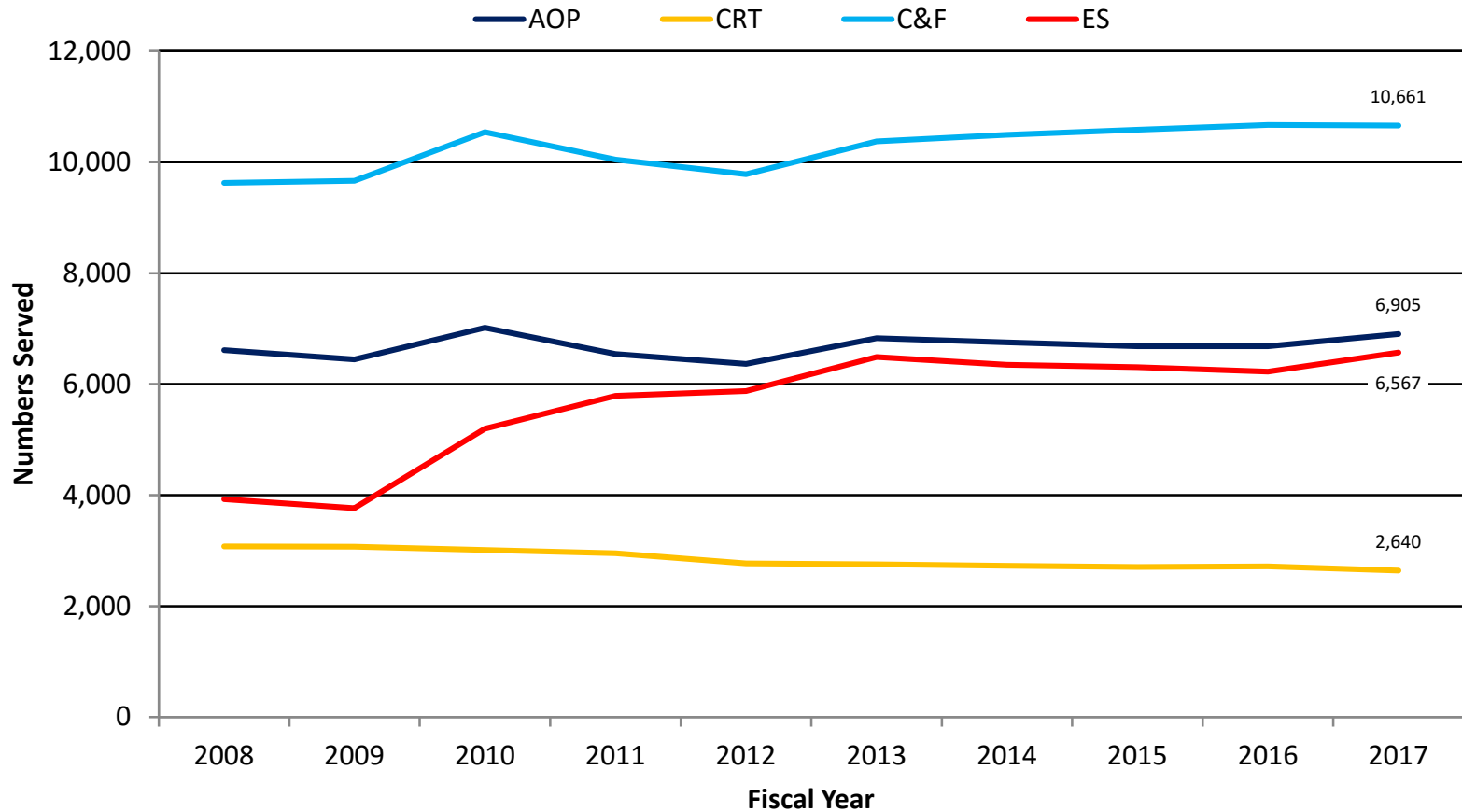
**Department of Mental Health (DMH)**

**Designated Agencies**  
 private, non-profit service providers that are responsible for ensuring needed services are available through program delivery, local planning, service coordination, and monitoring outcomes within their geographic region.

**Specialized Services Agencies**  
 private, non-profit service providers that provide a distinctive approach to service delivery and coordination or provide services that meet distinctive individual needs.

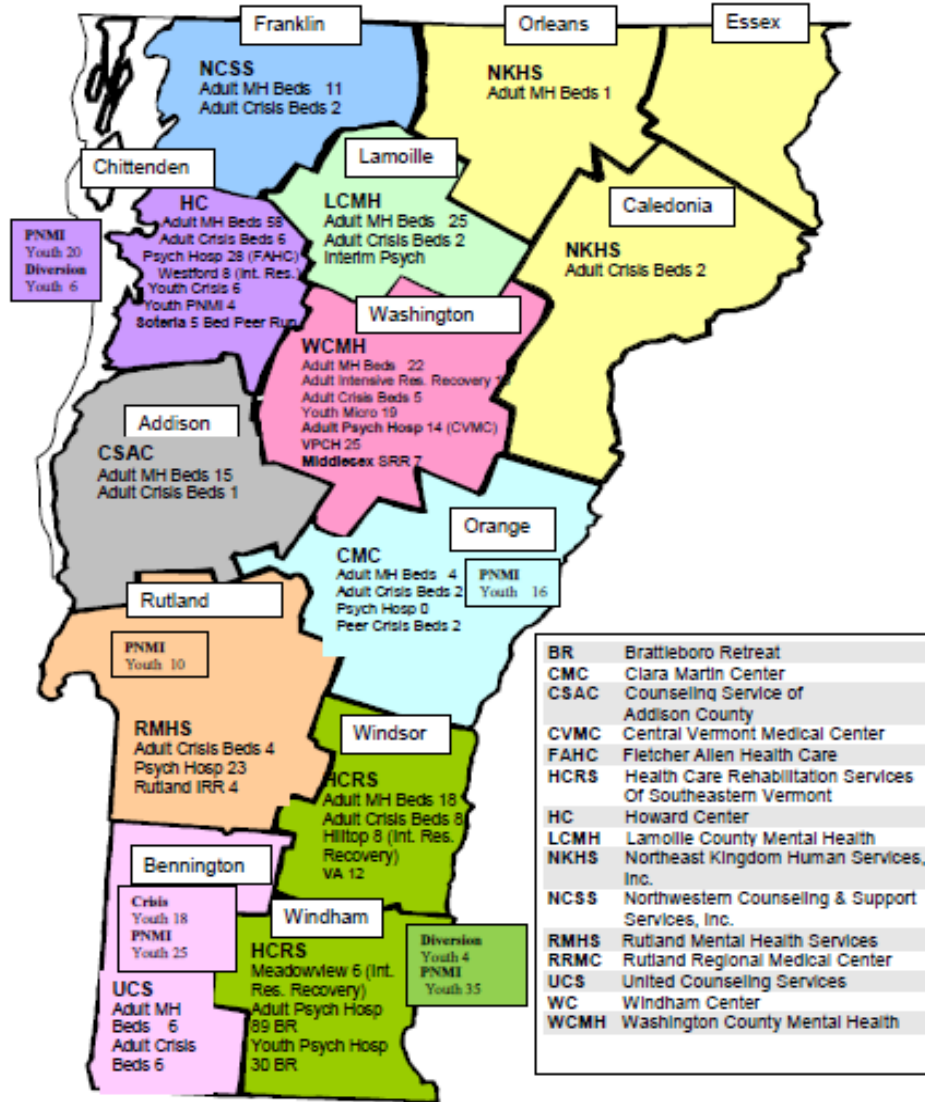
**Private Providers**  
 Psychiatrists, Psychologist, Nurse Practitioners, Social Workers Physician Assistants, Licensed Mental Health Clinicians, Community Hospitals

# People Served by Program





**DMH RESIDENTIAL AND DESIGNATED HOSPITAL BEDS  
BY COUNTY FY19**



# Departmental Budget

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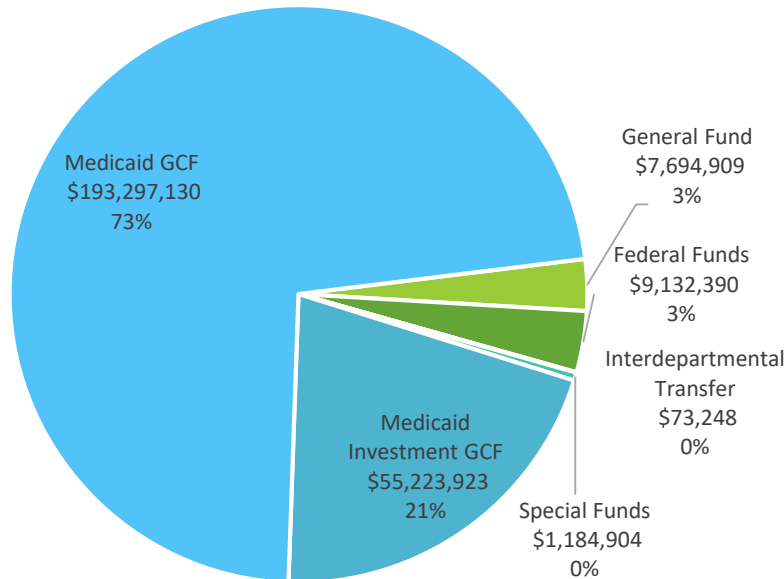
SUMMARY AND HIGHLIGHTS  
FY20 PROPOSED EXPENSES  
FY20 BUDGET REQUEST (UPS/DOWNS)

# Agency of Human Services, Department of Mental Health FY 2020 Governor's Recommend Budget

**MISSION:** to promote and improve the mental health of Vermonters.

Mental health will be a cornerstone of health in Vermont. People will live in caring communities with compassion for and a determination to respond effectively and respectfully to the mental-health needs of all citizens. Vermonters will have access to effective prevention, early intervention, and mental-health treatment and supports as needed to live, work, learn, and participate fully in their communities.

Governor's Recommend Budget  
Department of Mental FY 2020 (\$266,606,504)



## FY 2020 SUMMARY & HIGHLIGHTS

DMH Budget Ups - Gross: \$28,166,091 GF Equivalent: \$13,353,343

- Salary and Fringe
- Increase Physician Contract with UVMMC
- Additional VPCH Revenue
- VPCH Contracts – Travel Nurses
- Internal Service Fund Changes
- HUD Funding Replacement for Howard Center Branches
- Kids Residential Cost and Case Load
- Room & Board Phasedown
- Adult CRT Enhanced Plans
- ADS True-up from AHS Central Office (AHS Net Neutral)
- **Success Beyond Six (Match Paid by Schools)**
- DVHA to DMH for Payment Reform (Net Neutral)

DMH Budget Downs – Gross **(\$4,812,884)**, GF Equivalent: **(\$2,270,553)**

- Eliminate Sheriff Supervision in EDs
- DMH Contract Savings
- Operating Savings
- Grant Savings/Reductions
- Allocation of AHS-Wide Grant Reduction Plan
- NCCSS ABA Funds Move Back to DVHA (Net Neutral)
- ISB Funds Move Back to DCF (Net Neutral)

Other DMH Budget Neutral

- 12 New Level 1 Beds Beginning 2<sup>nd</sup> half of 2020

## FY 2019 & 2020 NOTABLE HIGHLIGHTS

### FY20

- \$17.9M in additional investment in **Success Beyond Six** to support School Based Mental Health Programs
- Increased funding for **children's residential** (PNMI – private non-medical institutions)
- Additional funding to support **Branches** a community residential program of the Howard Center
- Increased funding for **Adult CRT Enhanced Plans**
- Funding for **12 new level 1 beds** at the Brattleboro Retreat
- Successful implementation of **Mental Health Payment Reform** – children and adults (Jan 2019)

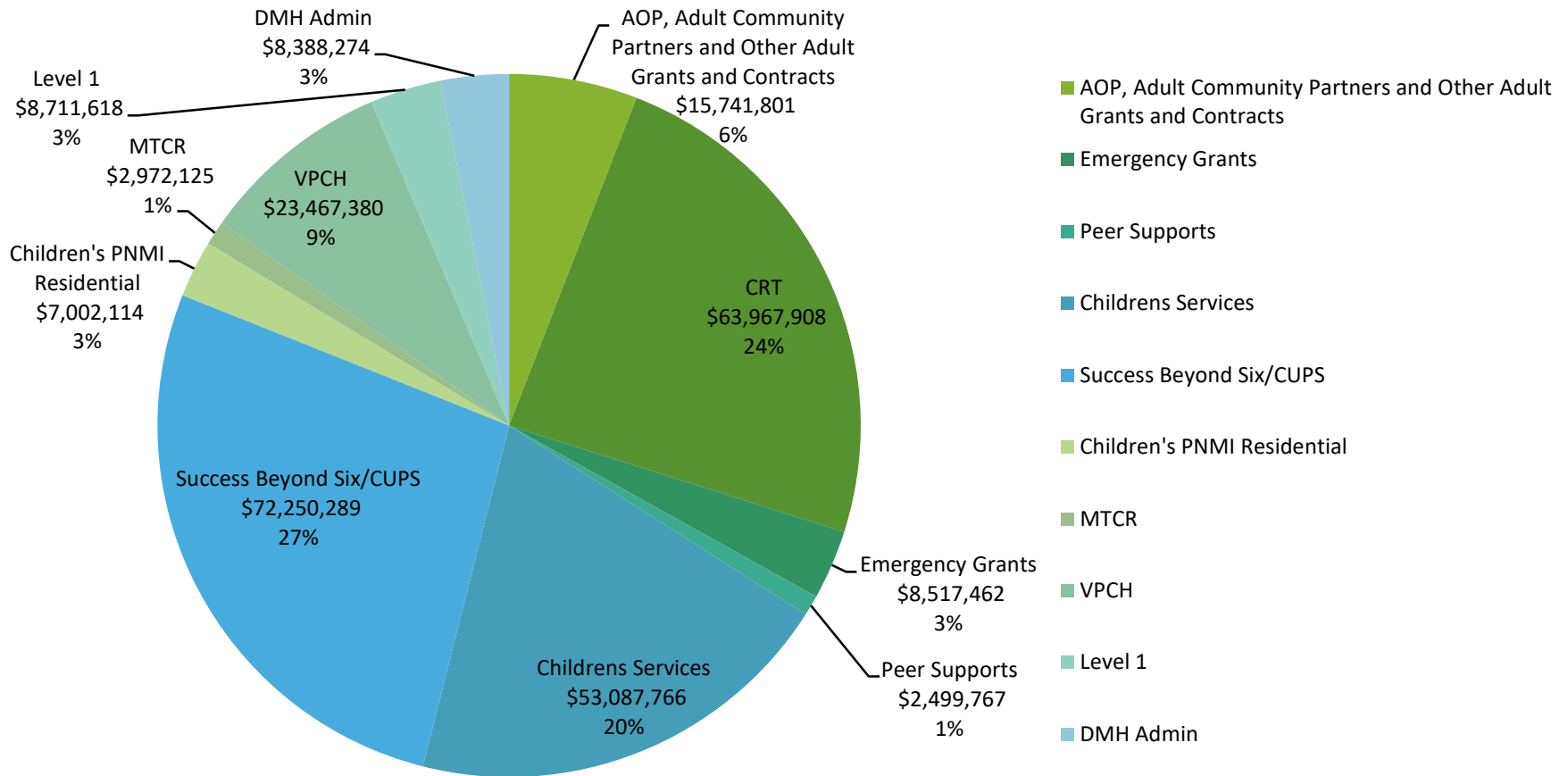
### FY20 Capital Bill

- \$5M in funding allocated towards the replacement of Middlesex Secure Residential

### FY19 & FY19 BAA

- Successful realization and implementation of several **grants and pilots** advancing integration of mental health, health care and collaboration with public education
- Expanded **Hospital Diversion** Program to add 6 beds for children and adolescents in southern Vermont (Cont. FY19)
- Funding to establish **Community Outreach Teams** in Chittenden County (Cont. FY19)

# FY20 Proposed Expenses



# FY 2020 Budget Ups and Downs

## Salary and Fringe Increases

Gross: \$579,582                      GF equivalent: \$241,262

- Annualization of the fy18 salary and related fringe changes per the following:
- Salary: \$142,392
- Retirement: \$465,086
- Other Fringe: \$(27,896)

## Eliminate Sheriff Supervision (BAA Item)

Gross: (\$582,029)                      GF equivalent : (\$268,490)

- Eliminated only the sheriff supervision taking place in hospital Emergency Departments.
- Per Centers for Medicare and Medicaid Services (CMS) standards non-hospital personnel may not put hands on, restrain, contain in any way, or otherwise stop a person from leaving the ED.

## Physician Contract with University of Vermont Medical Center (UVMCC) (BAA Item)

Gross: \$214,558                      GF equivalent : \$98,976

- DMH re-negotiated the UVMCC contract; and UVMCC required salary increases for their Psychiatrists.
  - Recent retirements
  - Hiring/retention issues due to salary level

# FY 2020 Budget Ups and Downs CONT.

## **Recognition of additional Medicare Revenue for VPCH (BAA Item)**

Gross: \$0      GF equivalent : **(\$345,975)**

- Billings based on prior two years history
- Reduces the need for GC Investment funds

## **Increase to VPCH Operating Costs (BAA Item)**

Gross: \$750,000      GF equivalent: \$345,975

- Travel nurse contracts are still heavily utilized due to staff retention

## **Contract Reductions**

Gross: **(\$155,979)**      GF equivalent: **(\$74,523)**

- Reduce children's psychiatric consultation to primary care
- Savings to VPCH pharmacy contract

## **Internal Service Funds (Workers Comp)**

Gross: \$176,689      GF equivalent : \$82,239

- Annual increase to Workers Compensation Insurance for DMH.

# FY 2020 Budget Ups and Downs CONT.

## Operating Internal Service Fund Changes

Gross: \$302,858                      GF equivalent : \$144,174

- Annual increase to internal service funds such as Fee for Space, Insurance, DII, Finance and Management Systems (VISION), HR, etc.

## Operating Expense Savings

Gross: **(\$17,054)**                      GF equivalent : **(\$51,724)**

- Savings based on historical spend

## HUD Funding Impact – (HC Branches)

Gross: \$120,07                      GF equivalent : \$120,076

- Replacement of HUD funding for Howard Center Branches program.

## Child/Youth Residential (BAA Item)

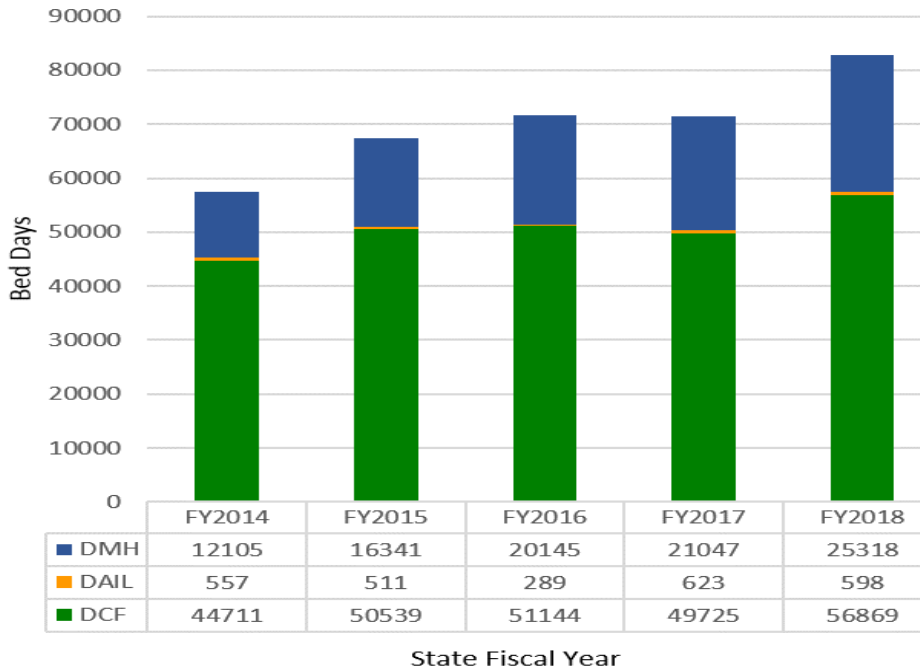
Gross: \$1,548,085                      GF equivalent: \$822,617

- DMH has an ongoing pressure in PNMI (private non-medical institutions – residential treatment for children).
- Extraordinary Financial Relief Requests
- Howard Center Crisis Stabilization is under

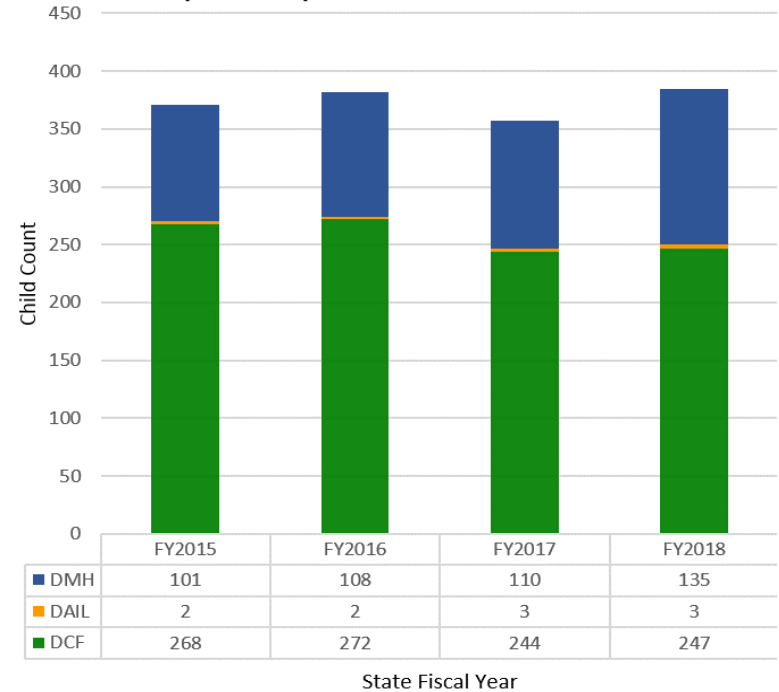


# Residential treatment

**Total Residential Bed Days by Department per Fiscal Year**



**Total Child Count in Residential by Department per Fiscal Year**



## FY 2020 Budget Ups and Downs CONT.

### **Room & Board Phase Down**

Gross: \$0                      GF equivalent: \$594,892

- Room and board must begin phasing out of using investment and into General Fund
- Phase out begins January 1, 2019 – 1/3 each year through calendar year

### **Adult CRT Enhanced Plans**

Gross: \$534,810              GF equivalent: \$246,708

- Includes scaling up My Pad housing (a housing model that provides on site supports to individuals living independently).
  - 2 more “My Pad” type residences (Chittenden and Addison) expected to open in 2019
- Enhanced community living while keeping folks out of inpatient setting
- Small cohort of CRT population with repeated hospitalizations
- May have had criminal justice interaction
- Cost-effective alternative to hospitalization

# FY 2020 SUMMARY & HIGHLIGHTS CONT.

## **Other Grant and Contract Reductions**

Gross: **(\$128,909)**      GF equivalent: **(\$63,409)**

- Copeland – Wellness Recovery Action Plan (WRAP) training
- TBI (utilization savings)

## **Allocation of AHS-wide Grants reduction plan (AHS net-neutral) (BAA Item)**

Gross: **(\$1,034,713)**      GF equivalent: **(\$477,313)**

- AHS-wide grant reduction initiative to implement best practice
- DMH has unachieved target
- Committed to quality improvement and monitoring outcomes

## **AHS/AOA changes:**

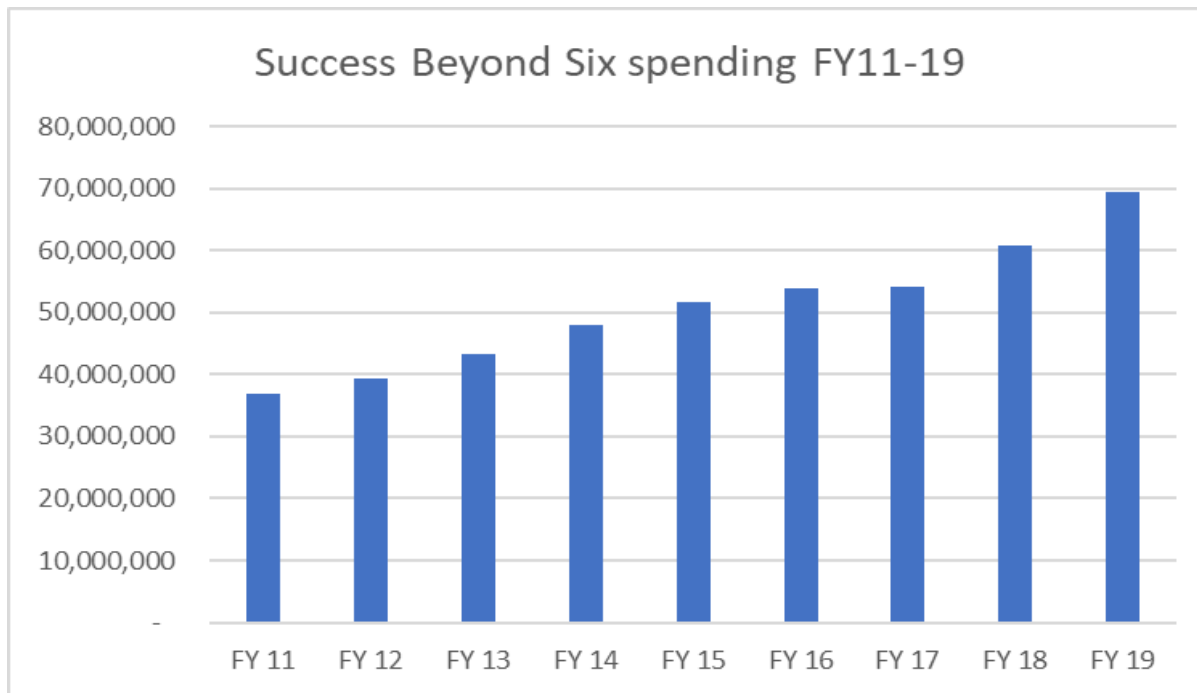
### **Success Beyond Six (SBS) - Locally matched (BAA Item)**

Gross: \$17,900,000      GF equivalent: \$8,257,270 (locally matched)

- Overall program growth
- Pressures in community-based, inpatient, crisis stabilization and residential
- Kids showing signs of depression, thoughts of suicide or harm to selves

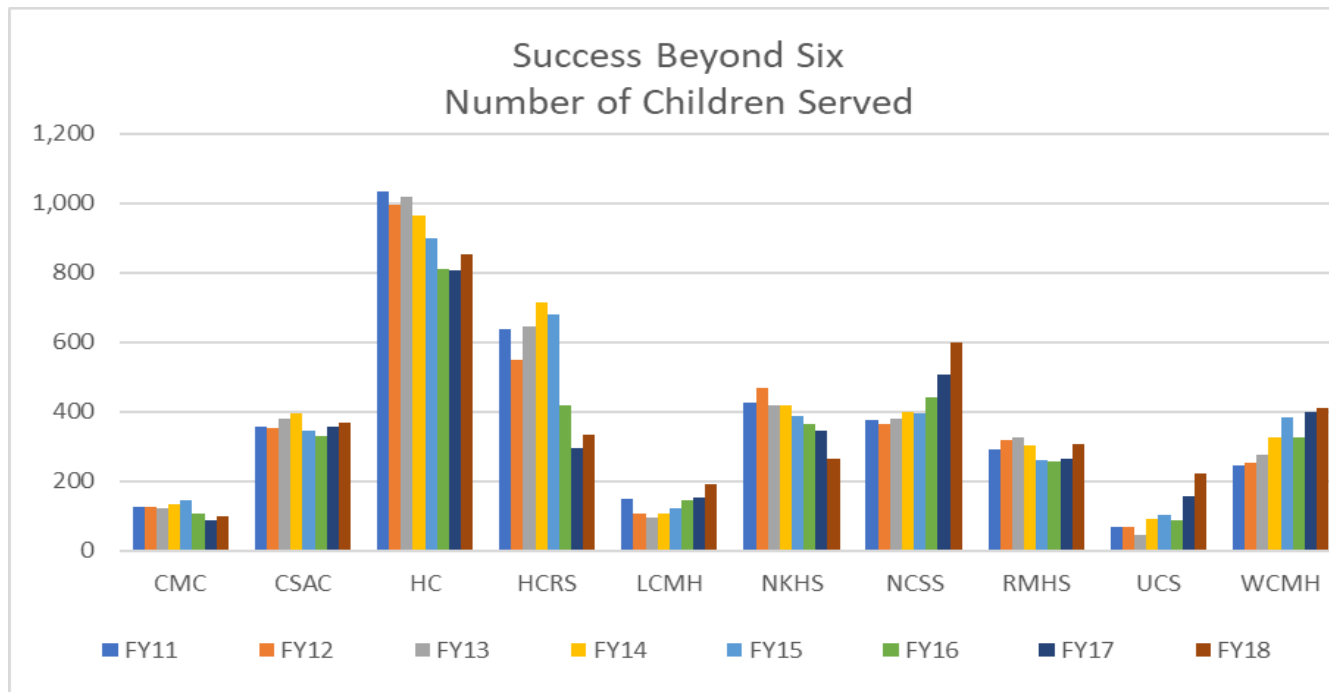
# School Mental Health

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# School Mental Health

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## FY 2020 Budget Ups and Downs CONT.

### **Applied Behavior Analysis (ABA) funding back to DVHA for NCSS (BAA Item)**

Gross: **(\$1,394,200)**      GF Equivalent: **(\$643,144)**

- Added to NCSS in FY 16 – 19
- DVHA has created a bundle for ABA beginning July 1

### **Move Children's Individual Service Budget (ISB) Funds back to DCF (BAA Item)**

Gross: **(\$1,500,000)**      GF Equivalent : **(\$691,950)**

- ISB funding for Laraway moving back to DCF
- Remaining DCF funds will be included in the new DMH bundle for kids

### **Agency of Digital Services (ADS) true-up from AHS Central Office (BAA Item)**

Gross: \$394,134      GF Equivalent : \$197,067

- True-up of ADS cost associated with the Department of Mental Health.

### **DVHA to DMH for Payment Reform (BAA Item)**

Gross: \$5,592,050      GF Equivalent : \$2,548,062

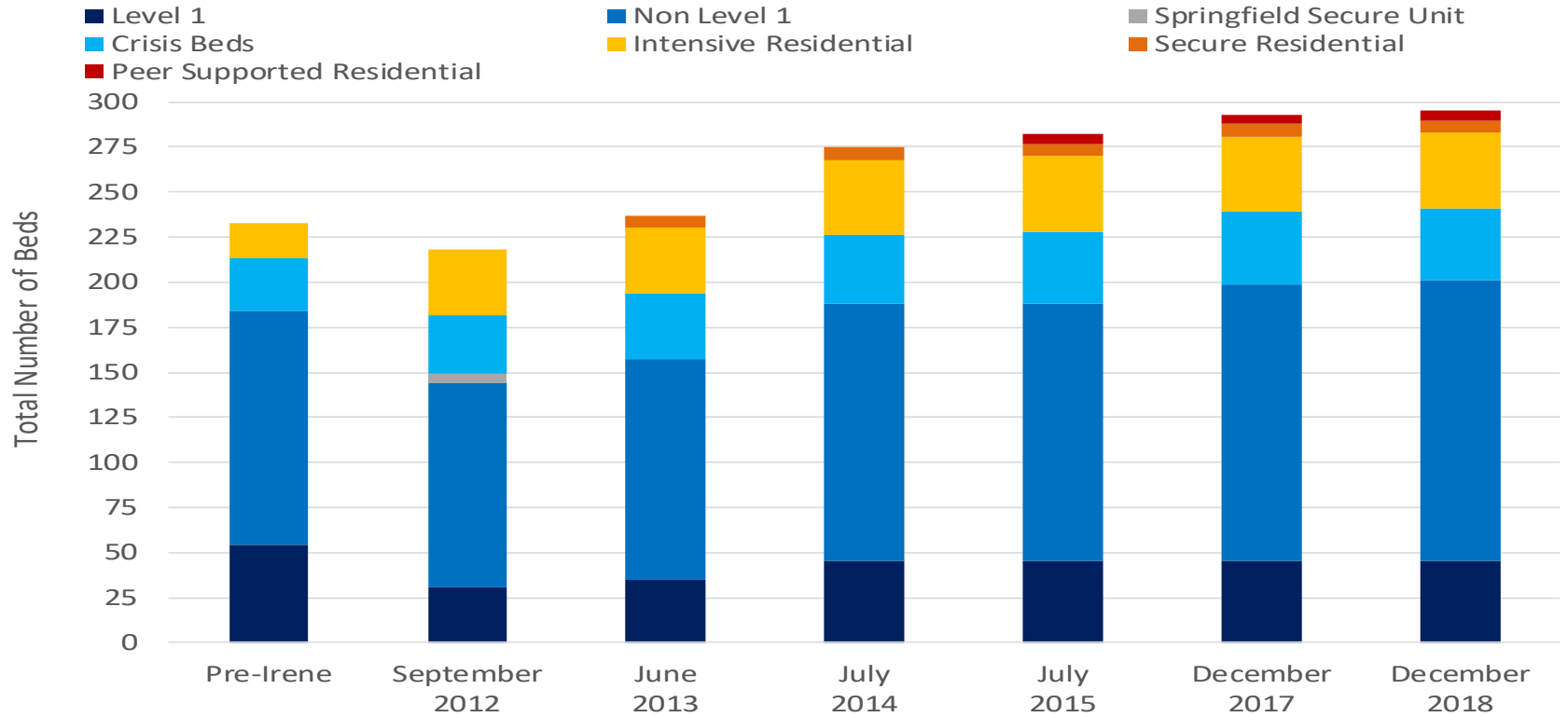
- DVHA funds going into the DMH bundles for kids and adults

### **12- New Level one Beds (2020)**

Gross: \$      GF Equivalent: \$

- Operation of 12 new Level 1 beds at Brattleboro Retreat 2<sup>nd</sup> half of FY'20.
- One time funds TBD

## Vermont Department of Mental Health Psychiatric Beds in Adult System of Care



5 temporary beds at Springfield Secure for displaced VSH patients

# Results Based Accountability

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COMMON LANGUAGE  
PROGRAMMATIC PERFORMANCE MEASURES



# Performance to Population

**POPULATION ACCOUNTABILITY**

**All Vermonters are Healthy**

- Rate of suicide deaths per 100,000 Vermonters
- % adults with any mental health conditions receiving treatment
- # of Vermonters trained in mental health first aid

**POPULATION RESULTS**

**Contribution Relationship**

**Alignment of Measures**

**PERFORMANCE ACCOUNTABILITY**

**CRT Program**

# of people served	
	% reporting positive outcomes

**CUSTOMER RESULTS**

**Appropriate Responsibility**



# Performance Measures

## 2018 Act 186 Outcomes

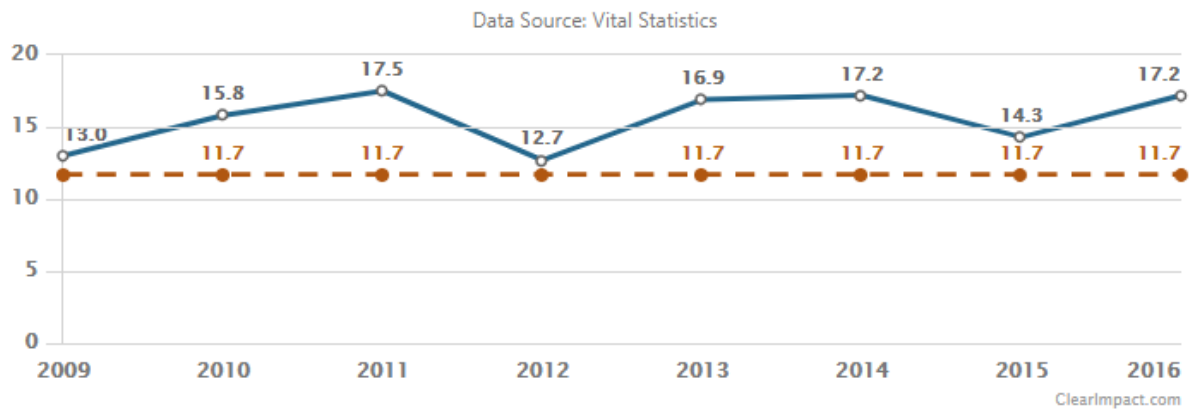
		Time Period	Current Actual Value	Current Trend
0	All Vermonters are healthy			
+ I	AHS Rate of suicide deaths per 100,000 Vermonters	2016	17.2	↗ 1
+ I	Act186 # of Vermonters trained in Mental Health First Aid	2017	2,974	↗ 4
+ I	Act186 % of Vermont adults with any mental health conditions receiving treatment	2016	56%	↘ 1

<http://mentalhealth.vermont.gov/reports/results-based-accountability>

# Performance Measures

○ All Vermonters are healthy 📄
Time Period    Current Actual Value    Current Trend

I **AHS** Rate of suicide deaths per 100,000 Vermonters



Time Period	Current Actual Value	Current Trend	Count
2016	17.2	↗	1
2016	17.2	↗	1
2015	14.3	↘	1
2014	17.2	↗	2
2013	16.9	↗	1
2012	12.7	↘	1
2011	17.5	↗	2
2010	15.8	↗	1
2009	13.0	↘	1
2008	14.1	↗	3

- [Story Behind the Curve](#)
- [Partners](#)
- [Strategy](#)
- [Why Is This Important?](#)
- [Notes on Methodology](#)
- [More »](#)

# Performance Measures

		Most Recent Period	Current Actual Value	Current Trend
CRT Community Rehabilitation and Treatment (CRT)				
How_Much # served in CRT		SFY 2018	2,628	1
How_Well % of CRT clients receiving follow up services within 7 days of psychiatric hospitalization discharge		SFY 2017	<b>81%</b>	1
Better_Off % of CRT clients reporting positive outcomes		SFY 2016	<b>74%</b>	1

<http://mentalhealth.vermont.gov/reports/results-based-accountability>

# Performance Measures

Inpatient Services		Most Recent Period	Current Actual Value	Current Trend
[-] P	VPCH Vermont Psychiatric Care Hospital (VPCH)			
[+] PM	VPCH Average length of stay in days for discharged patients	SFY 2018	146	↗ 1
[+] PM	How_Well # hours of seclusion and restraint per 1,000 patient hours	SFY 2018	0.71	↘ 1
[+] PM	How_Well % of discharges readmitted involuntarily within 30 days of discharge	SFY 2017	7%	→ 1

# Performance Measures

<b>Integrating Family Services (IFS)</b>		Time Period	Current Actual Value	Current Trend
<b># of children and youth served in IFS</b>	FYQ1 2019	1,322	1	
<b>% of those served who agree that services were right for them</b>	SFY 2017	96%	2	
<b>% of those served who agree that services made a difference</b>	SFY 2017	93%	2	

<http://mentalhealth.vermont.gov/reports/results-based-accountability>

# Performance Measures

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## RBA Clear Impact Scorecards

- The Department of Mental Health has several RBA scorecards containing data and performance measures related to our system of care.
- To view the RBA Scorecards for the Department of Mental Health:

<http://mentalhealth.vermont.gov/reports/results-based-accountability>

[The Department of Mental Health \(DMH\) Scorecard](#)  
[Reducing Seclusion and Restraint in Vermont's Psychiatric Hospitals](#)  
[Vermont Psychiatric Care Hospital \(VPCH\) Outcomes](#)

[DMH System Snapshot](#)  
[DMH Continued Reporting](#)

# Mental Health Payment Reform

Section 12 of Act 113 of 2016 requires the Secretary of the Agency of Human Services to embark upon a multi-year process of payment and delivery system reform for Medicaid providers that is aligned with the Vermont All-Payer Accountable Care Organization Model and other existing payment and delivery system reform initiatives.

<b>Effective Date</b>	January 1, 2019
<b>Payment Model</b>	Monthly Case Rates: Child Case Rate & Adult Case Rate + Value-based Payments
<b>Total Funds</b>	~\$98,000,000 (~\$40,000,000 for the child case rates and ~\$58,000,000 adult case rates)
<b>Services</b>	Mental Health Services provided by Designated Agencies and NFI and Pathways Vermont <u>Waiver:</u> <ul style="list-style-type: none"><li>• Specialized mental health services for individuals with serious and persistent mental illness.</li><li>• Specialized mental health services for children under 22 with a serious emotional disturbance.</li></ul> <u>State Plan:</u> mental health clinic services, specialized rehabilitation services



## **Inpatient Capacity**

- Funding for **12 new level 1 beds** at the Brattleboro Retreat
- \$5M in funding allocated towards the **replacement of Middlesex Secure Residential**
- UVM Health Network – **development of additional in-patient capacity at CVMC**

## **Community Capacity**

- Build on and expand community supports and program that include **community outreach, Pre-ED Diversion, mobile crisis**
  - Peer respite
- Expand **short term and long term supported housing options**
  - My Pad
- **Geriatric psychiatry** community capacity
- **Mobile response** for children & families

## **Promotion, Prevention & Early Intervention**

- Early Childhood & Family Mental Health (ECFMH)

## **Systems & Finance**

- Successful implementation of **Mental Health Payment Reform** – children and adults (Jan 2019)
- Future of the Mental Health System in Vermont – 10 Year Vision

# Contact Information

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