

MEMORANDUM

TO: Representative William J. Lippert Jr., Chair

FROM: Sarah Squirrell, Commissioner, Department of Mental Health

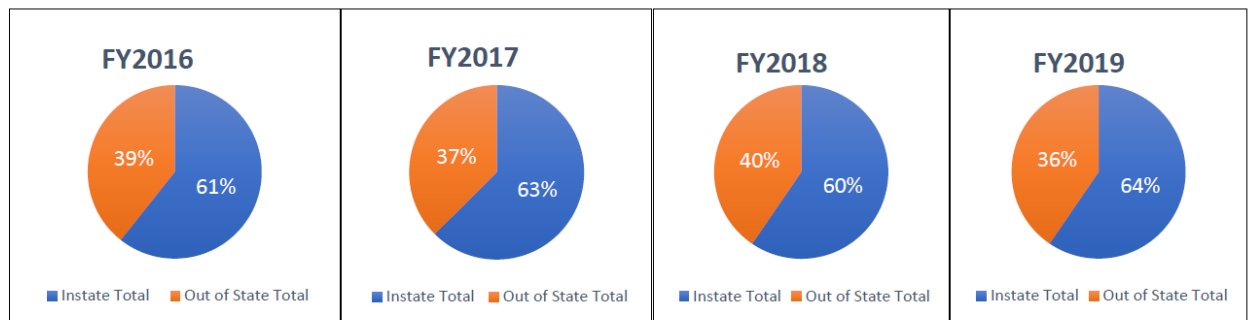
DATE: February 21, 2020

SUBJECT: Follow up to Questions Received During Testimony February 10-14, 2020

Question: Can you give us a sense of the children in care in-state vs. out-of-state?

See the charts below for a current listing of residential facilities, locations in- and out- of state, capacity and rates. More comprehensive information on this was provided in a memo to this Committee dated January 16, 2020.

The following pie charts represent the breakdown of in-state placements compared to out-of-state placements. If a child was placed in more than one program in a fiscal year, they are represented more than once.



Residential Payment Summary for Fiscal Year 2019 and First Half of FY 2020
 Printed on Jan 7, 2020

Childrens Residential Programs

	Organization	State Location	County	Capacity*	# DMH youth placed in FY 19 and FY 20 YTD	Treatment Daily Rate	Room and Board Daily Rate
In-state PNMI	Brattleboro Retreat Abigail Rockwell	VT	Windham	8	10	\$ 474.98	\$ 74.95
	Brattleboro Retreat Linden St	VT	Windham	15 (10 open)	10	\$ 754.83	\$ 49.24
	Brookhaven	VT	Orange	8	1	\$ 411.90	\$ 61.31
	Community House	VT	Windham	8	5	\$ 263.15	\$ 50.85
	Howard Center- Park St.	VT	Rutland	10	2	\$ 420.97	\$ -
	Howard Center Transition House	VT	Chittenden	4	1	\$ 480.39	\$ 69.73
	Northeastern Family Institute (NFI) Group Home	VT	Chittenden	6	6	\$ 418.08	\$ 84.62
	NFI Allenbrook	VT	Chittenden	8	0	\$ 287.97	\$ 39.37
	Vermont Assessment Center at Newbury	VT	Orange	8	3	\$ 531.26	\$ 64.58
	Vermont School for Girls	VT	Bennington	25	16	\$ 295.27	\$ 43.68
Crisis and Diversion	Howard Center- Crisis Program	VT	Chittenden	6	326**	\$ 887.93	\$ 35.58
	NFI Hospital Diversion- Brattleboro	VT	Windham	6 (4 open)	DVHA funded	DVHA Rate	
	SEALL, Inc.	VT	Bennington	18	1	\$ 477.07	\$ 47.30
Small Group Homes	NFI Hospital Diversion- South Burlington	VT	Chittenden	6	DVHA funded	DVHA Rate	
	NFI DBT House	VT	Windham	4	7	Case Rate	Case Rate
	NFI Village House	VT	Chittenden	3	7	Case Rate	Case Rate
	NFI Shelburne House	VT	Chittenden	3	4	Case Rate	Case Rate
	WCMH Evergreen	VT	Washington	4	3	Case Rate	Case Rate
	WCMH Odin	VT	Washington	4	4	Case Rate	Case Rate
	WCMH Crescent	VT	Washington	4	3	Case Rate	Case Rate
WCMH Skyline	VT	Washington	4	2	Case Rate	Case Rate	
WCMH ICAP	VT	Washington	2	4	Case Rate	Case Rate	
Out of State PRTF/PNMI Programs	Foundations Behavioral Health	PA	Out of State	Varies	2	\$ 283.73	\$ 286.27
	Becket NH	NH	Out of State	Varies	14	\$ 274.83	\$ 54.30
	Pine Haven Boys Center	NH	Out of State	Varies	4	\$ 158.88	\$ 71.23
	Devereux Foundation	MA	Out of State	Varies	10	\$ 212.28	\$ 70.76
	Harbor Point Behavioral Health	MA	Out of State	Varies	1	\$ 276.45	\$ 223.55
	Hillcrest Educational Centers	MA	Out of State	Varies	10	\$ 299.39	\$ 183.50
	JRI Centerpoint	MA	Out of State	Varies	1	\$ 684.92	\$ 288.30
	JRI (Pelham, Walden and Meadowridge)	MA	Out of State	Varies	6	\$ 220.24	\$ 73.41
	Spaulding Youth Center	MA	Out of State	Varies	1	\$ 166.68	\$ 136.33
	Stetson School	MA	Out of State	Varies	2	\$ 222.67	\$ 51.42
	Steven's Children's Home, Inc.	MA	Out of State	Varies	2	\$ 167.69	\$ 90.30
	Easter Seals Zachary Road	NH	Out of State	Varies	2	\$ 391.85	\$ 97.96
	JRI Littleton	MA	Out of State	Varies	2	\$ 220.24	\$ 73.41
	Mountain Lake Academy	NY	Out of State	Varies	2	\$ 300.64	\$ 145.02
Sandy Pines	FL	Out of State	Varies	1	\$ 360.00	\$ 140.00	
Coastal Harbor	GA	Out of State	Varies	1	\$ 247.00	\$ 165.00	

*The available capacity of these programs are for both children in DCF custody as well as Children approved for residential treatment through DMH.

** represents admissions (ie. some children have multiple admissions)

Green highlight: rates vary each month based on utilization (100% funded for total allowable costs)

Question: How many children are typically awaiting placement, and for how long, in emergency rooms?

The first chart below illustrates the amount of children/youth under 18 discharged from emergency departments into hospitals (during this time frame all admissions were at the Brattleboro Retreat), and the mean wait times for that placement. The second chart shows children/youth awaiting (any) placement in the emergency department (those eventually admitted to a hospital as well as those who were not hospitalized but discharged to other lower levels of care), and mean wait times.

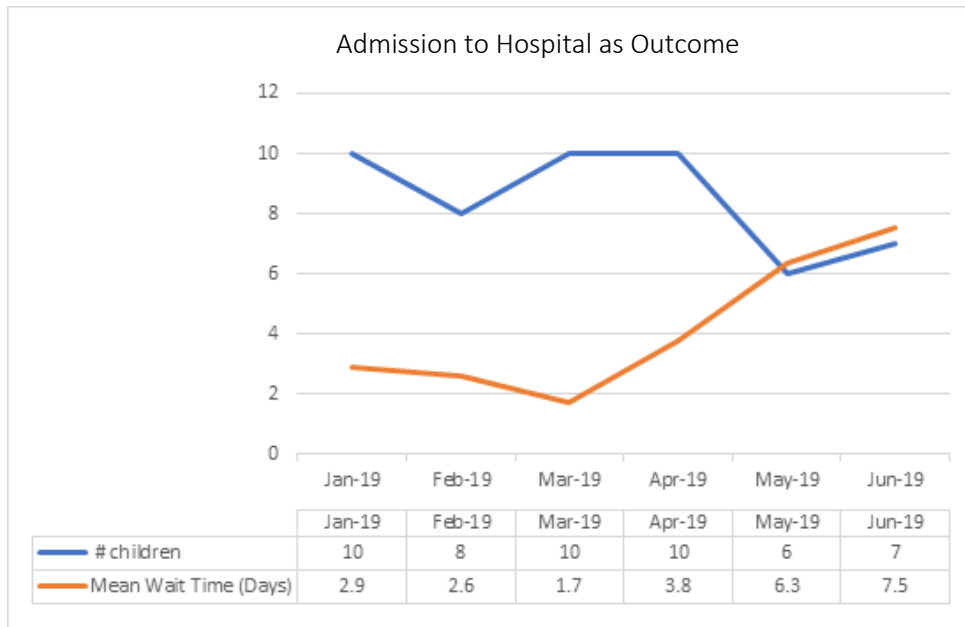


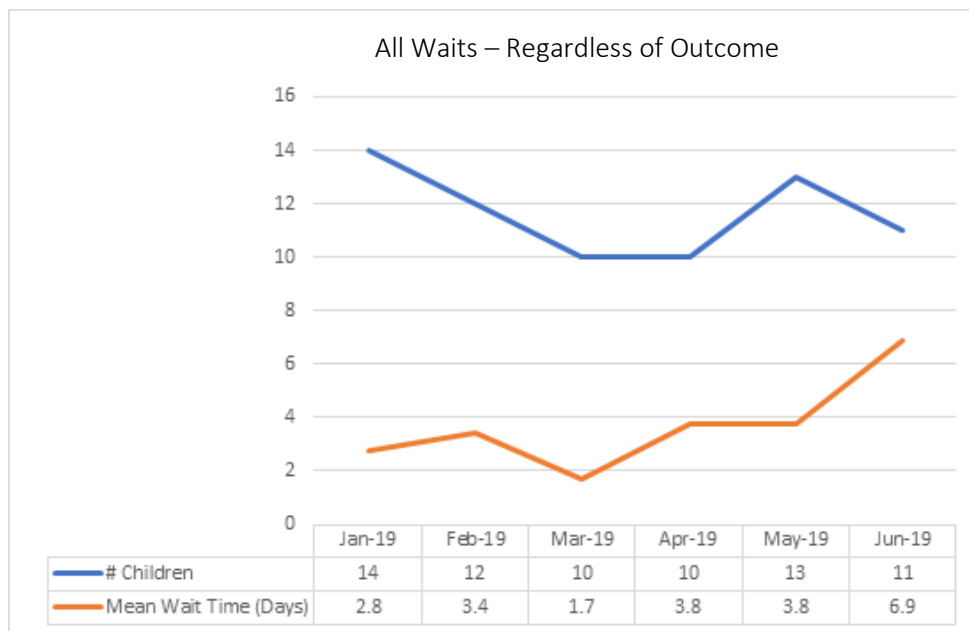
For example, in January of 2019 there were 14 children/youth who were in an emergency department awaiting placement for care, and the average time they waited was 2.8 days. Ten of the 14 children/youth were discharged and admitted to inpatient hospital care, and their average wait time was 2.9 days. We use the term inpatient hospital here to mean Brattleboro Retreat (our only in-state hospital level of care for children/youth). For the time period of January 19-June 19, all emergency evaluation (involuntary) placements were to Brattleboro Retreat. There were no out-of-state placements for reported voluntary Medicaid patients.

Key notes about what is reflected in this data:

- DMH data only includes emergency department wait time on *involuntary youth patients* (emergency evaluations or warrants) and *certain voluntary patients who are Medicaid*, and are reported to DMH.
- This data does not reflect 100% of voluntary Medicaid patients.
- DMH does not receive data on other voluntary patients.
- Involuntary youth patients can only be admitted to Brattleboro Retreat, and not to out of state hospitals.

Because not all children/youth were discharged into a designated hospital, the number of them on each chart, and mean wait times differ. Other places they may have been discharged are back into their homes/communities, or a lower level of (non-hospital) care.





Question: We would like more informational overview on MRSS

Please see attached 2 and 5-pg. Mobile Response and Stabilization Services documents.

Question: How much of CRT expenses are for inpatient vs. community services?

Approximately \$4 million (6%) of CRT expenses are for inpatient hospital care.

Question: What grants does DMH have in their budget?

Please see the following table of active grants.

Mental Health	FY20 Est. \$	Source
Direct Federal Grants:		
<i>Social Services Block Grant</i>	409,003	Direct Federal Funded
<i>Mental Health Homeless / PATH</i>	300,000	Direct Federal Funded
<i>Mental Health Block Grant</i>	1,323,149	Direct Federal Funded
<i>Promoting Integration of Pprimary and Behavioral Health Care (PIPBHC)</i>	1,782,243	Direct Federal Funded
<i>Employment Development Initiative</i>	47,935	Passthrough Federal Funded
<i>Transformation Transfer Initiative Bed Board</i>	150,000	Passthrough Federal Funded
<i>Behavioral Health Service Information System</i>	137,363	Passthrough Federal Funded
<i>Transformation Transfer Initiative Housing</i>	150,000	Passthrough Federal Funded
<i>Vermont Suicide Prevention</i>	59,539	Private Donations

Collaborations with other agencies and/or departments:

<p><i>Project Aware</i> Promote awareness of mental health issues and healthy development of school-aged youth and prevent youth violence.</p>	36,320	Federal grant through SAMHSA to the Agency of Education
<p><i>Maternal Depression</i> Expand health care providers to screen, asses, treat and refer pregnant and postpartum women for maternal depression and related behavioral health disorders.</p>	60,000	Federal grant (HRSA) to the Department of Health
<p><i>Opiod MOU</i> Supports opiod overdose prevention training</p>	63,149	Grant through CDC to VDH
<p><i>Preschool Development Grant</i> Birth through Five (PDG-5)</p>	138,308	Federal grant to DCF
<p><i>Housing Opportunity Grant Program</i> Emergency and overnight and day shelter</p>	24,881	DMH MHBG one-time funds. Collaboration with DCF/OEO