



Justice Center

THE COUNCIL OF STATE GOVERNMENTS

Vermont Justice Reinvestment II

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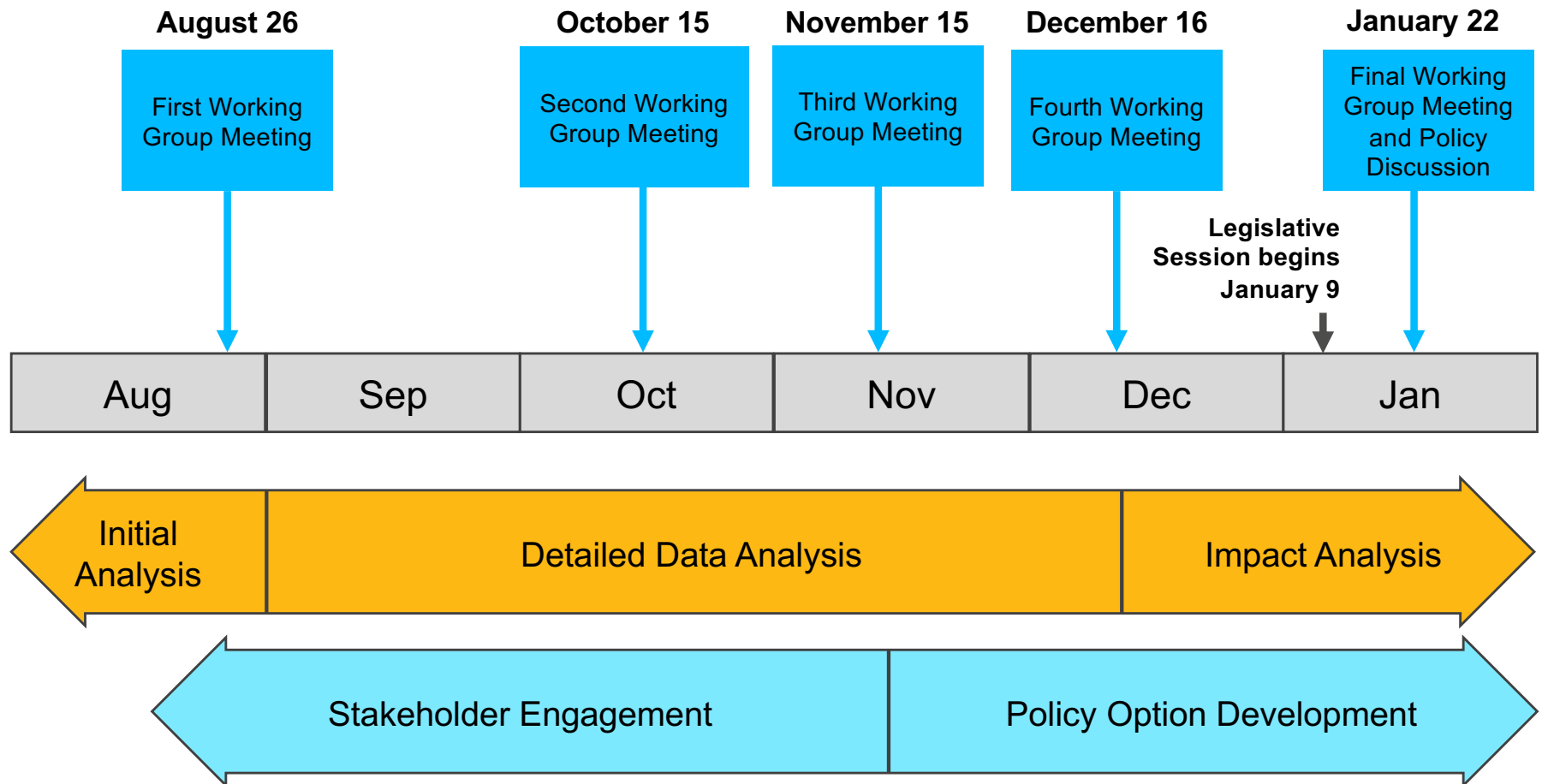


JUSTICE REINVESTMENT

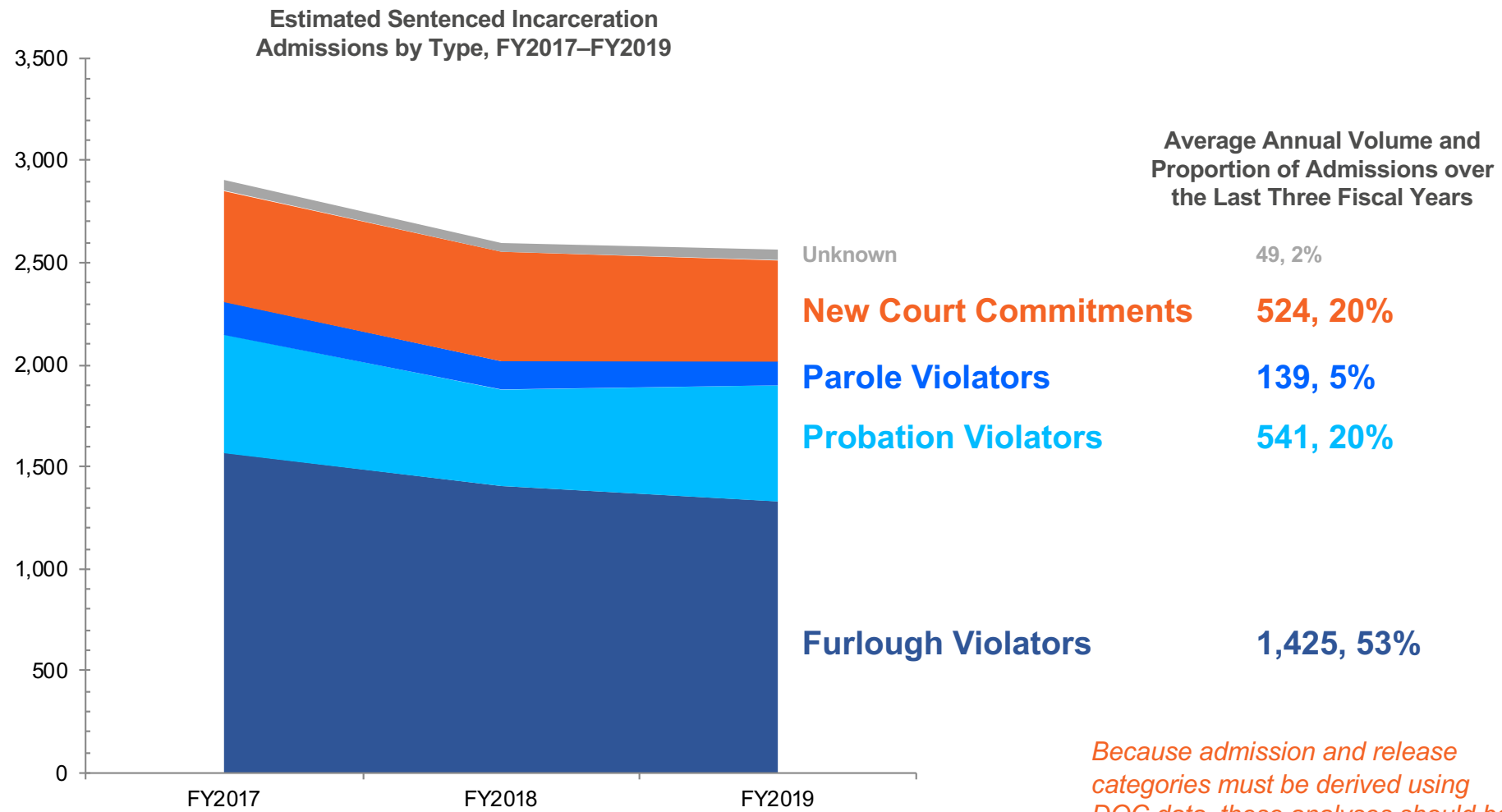
A data-driven approach to identify and respond to public safety challenges.

Supported by funding from the U.S. Department of Justice's Bureau of Justice Assistance (BJA) and The Pew Charitable Trusts.

The Vermont Justice Reinvestment II Working Group has held four meetings, and it's fifth, focused on policy recommendations, is slated for January 22.



Almost 80 percent of sentenced DOC admissions are for people returned or revoked from furlough, parole, and probation, primarily driven by furlough violators.

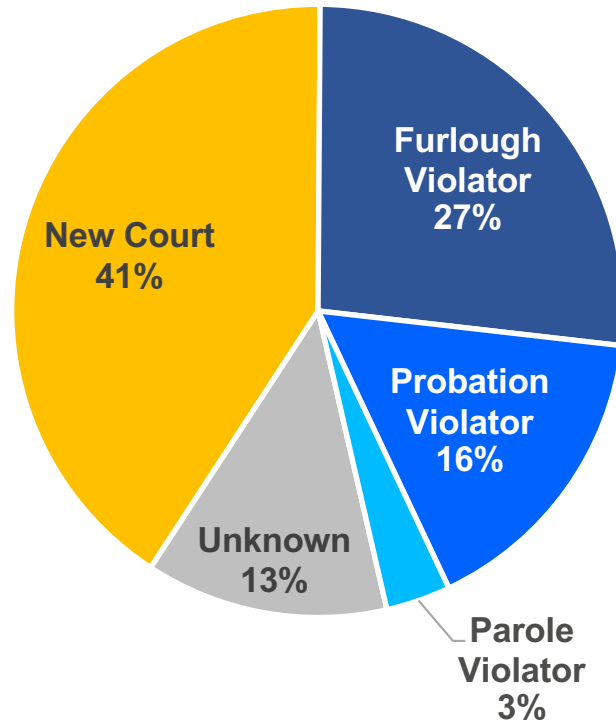


Because admission and release categories must be derived using DOC data, these analyses should be considered strong estimates.

Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

Nearly half of Vermont's sentenced prison population at the end of FY2019 consisted of people who were returned from community supervision, primarily furlough.

1,318 Total People in Sentenced Incarceration
Population by Admission Type at the End of FY2019

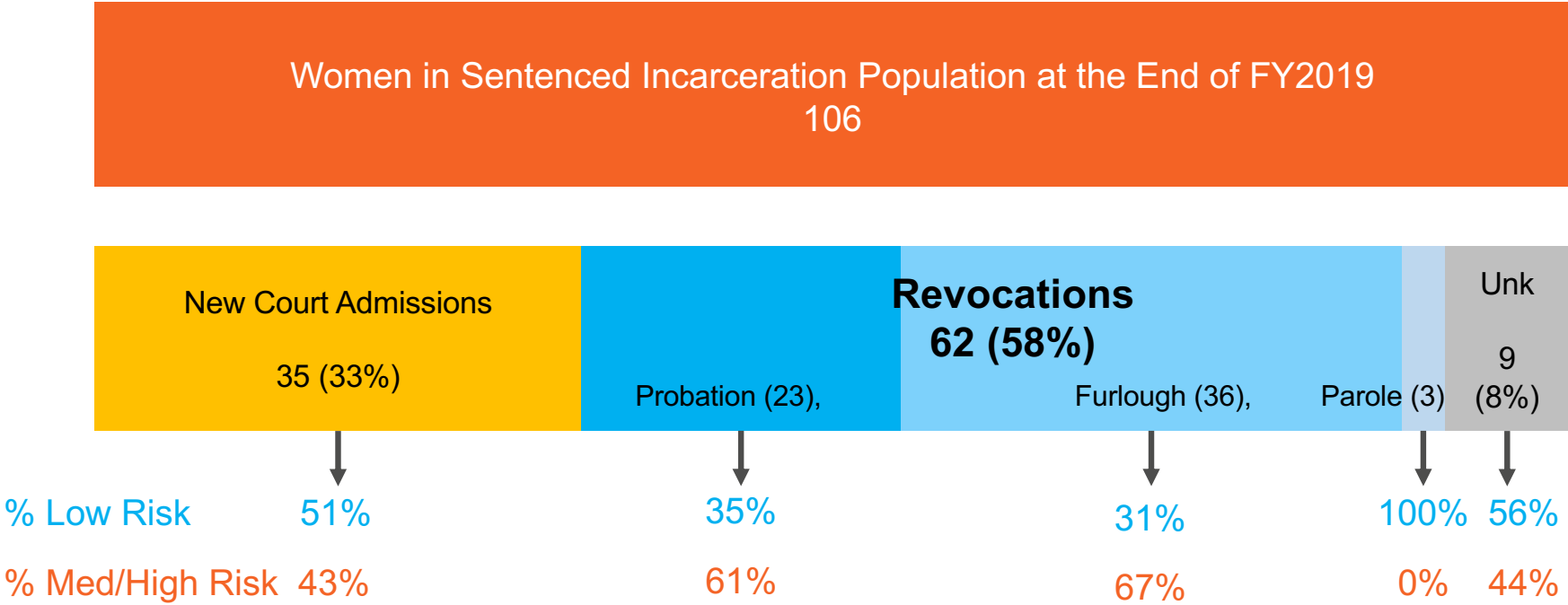


Furlough violator admissions make up a large proportion of admissions, but because of relatively short lengths of stay, they contribute a smaller percentage of the snapshot sentenced incarceration population at any given time.

Because admission and release categories must be derived using DOC data, these analyses should be considered strong estimates.

Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

Prison returns and revocations account for more than half of the female incarcerated population, with nearly all returns and revocations for those on furlough or probation.

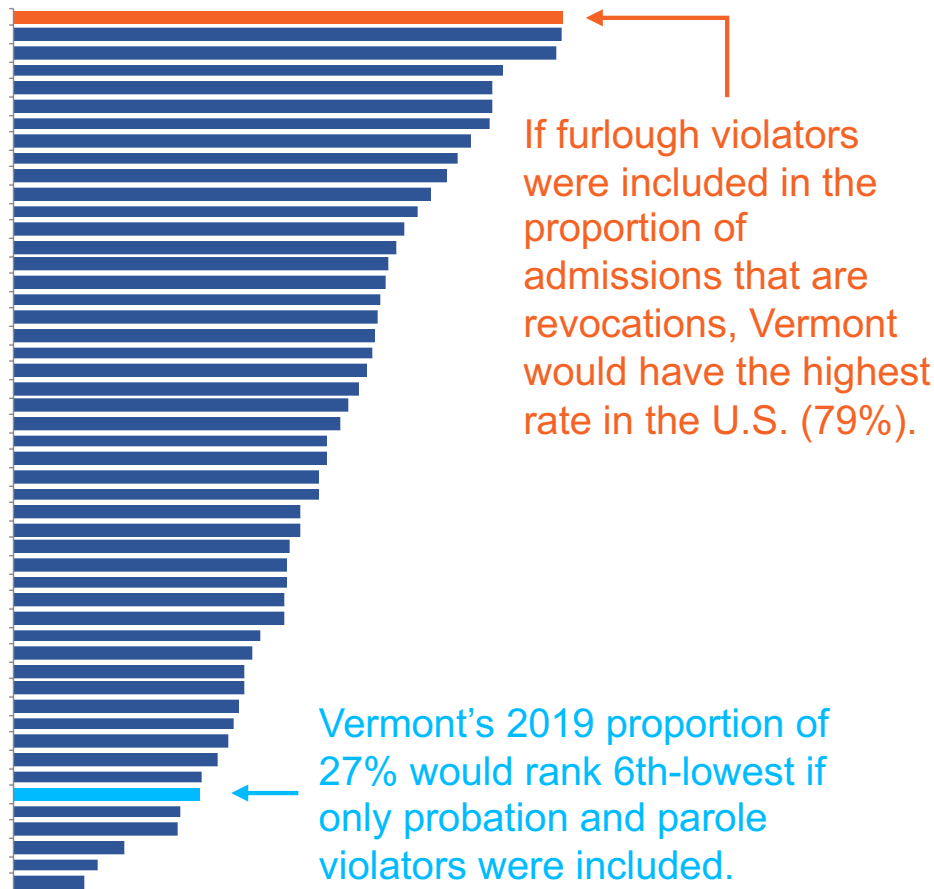


Women returning for probation and furlough violations have higher criminogenic risk than new court admissions, underscoring the importance of targeting supervision programming and treatment for people based on risk rather than offense.

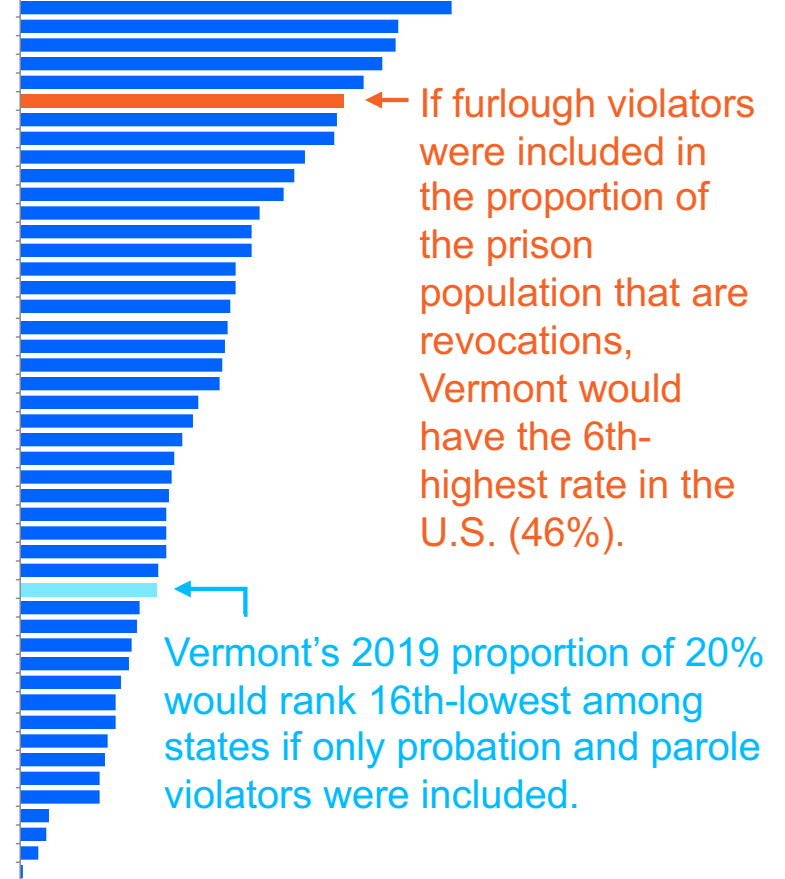
Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

Vermont's revocation rates are fairly low nationally when accounting only for probation and parole, but with furlough included Vermont's position would change dramatically.

Revocations as a Proportion of Admissions Among 48 States Reporting Data from 2017



Revocations as a Proportion of Admissions Among 45 States Reporting Data from 2017

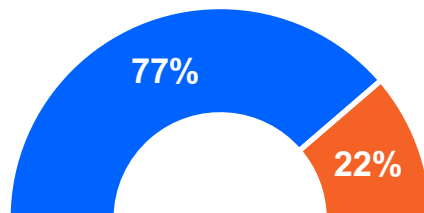


Sources: Data from the Vermont Parole Board and the Vermont Department of Corrections, CSG Justice Center Confined and Costly, <https://csgjusticecenter.org/confinedandcostly/>.

Because admission and release categories must be derived using DOC data, these analyses should be considered strong estimates.

The data indicates that people who fail on furlough are committing technical violations within a short period of time, resulting in multiple returns to prison.

Furlough Returns
Technical New Crime



Among 668 furlough returns with technical violations only:

- 46% included program or work failures
- 42% included a loss of housing
- 35% included drug or alcohol issues
- 22% included OOP or curfew violations
- 7% included violent or threatening behavior
- 4% included a sex offender condition violation
- 3% included a DV condition violation

The average technical return had 1.6 violation categories flagged.

2,929 estimated individuals had furlough returns over the past four years for a total of over 5,800 furlough return events*

The average person had two furlough returns within these four years alone.

228 people (8%) had five or more furlough returns over the course of their time with DOC.

The median length of time spent on furlough before returning to sentenced incarceration was four months.

1,288 people (44%) had two or more furlough returns within the period

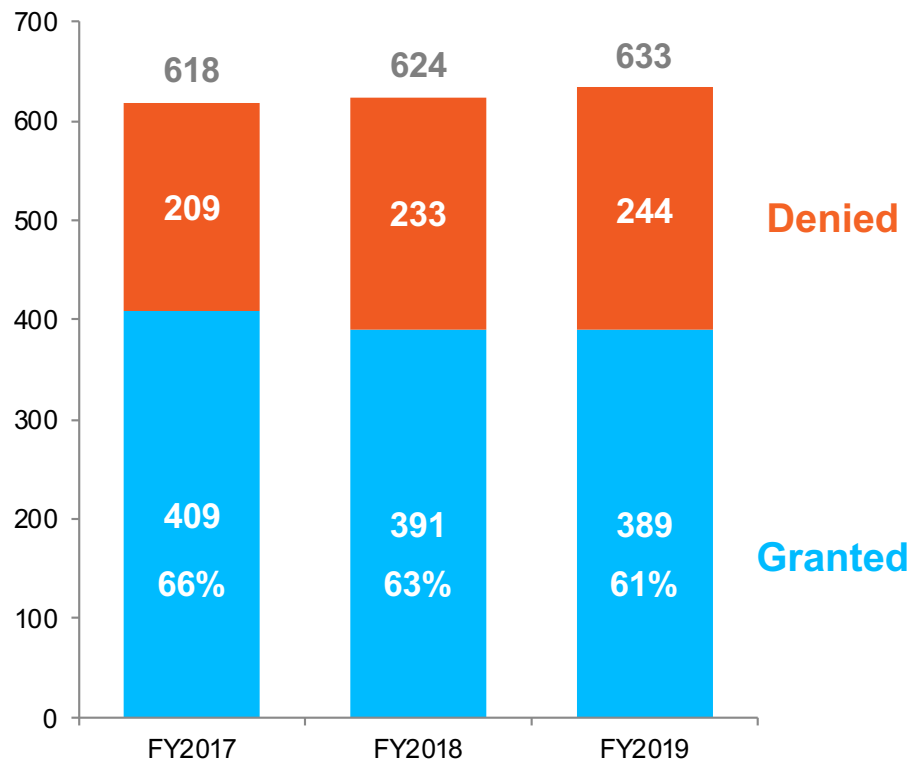
* A small number of individuals had furlough returns associated with different criminal sentencing events within the four-year period (145).

Because admission and release categories must be derived using DOC data, these analyses should be considered strong estimates.

Sources: Data from the Vermont Parole Board and the Vermont Department of Corrections, CSG Justice Center Confined and Costly, <https://csjusticecenter.org/confinedandcostly/>, The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

Often, parole is granted to people who have already navigated some of the highest-risk months while supervised on furlough.

Vermont Parole Board Release Decisions, FY2017–FY2019



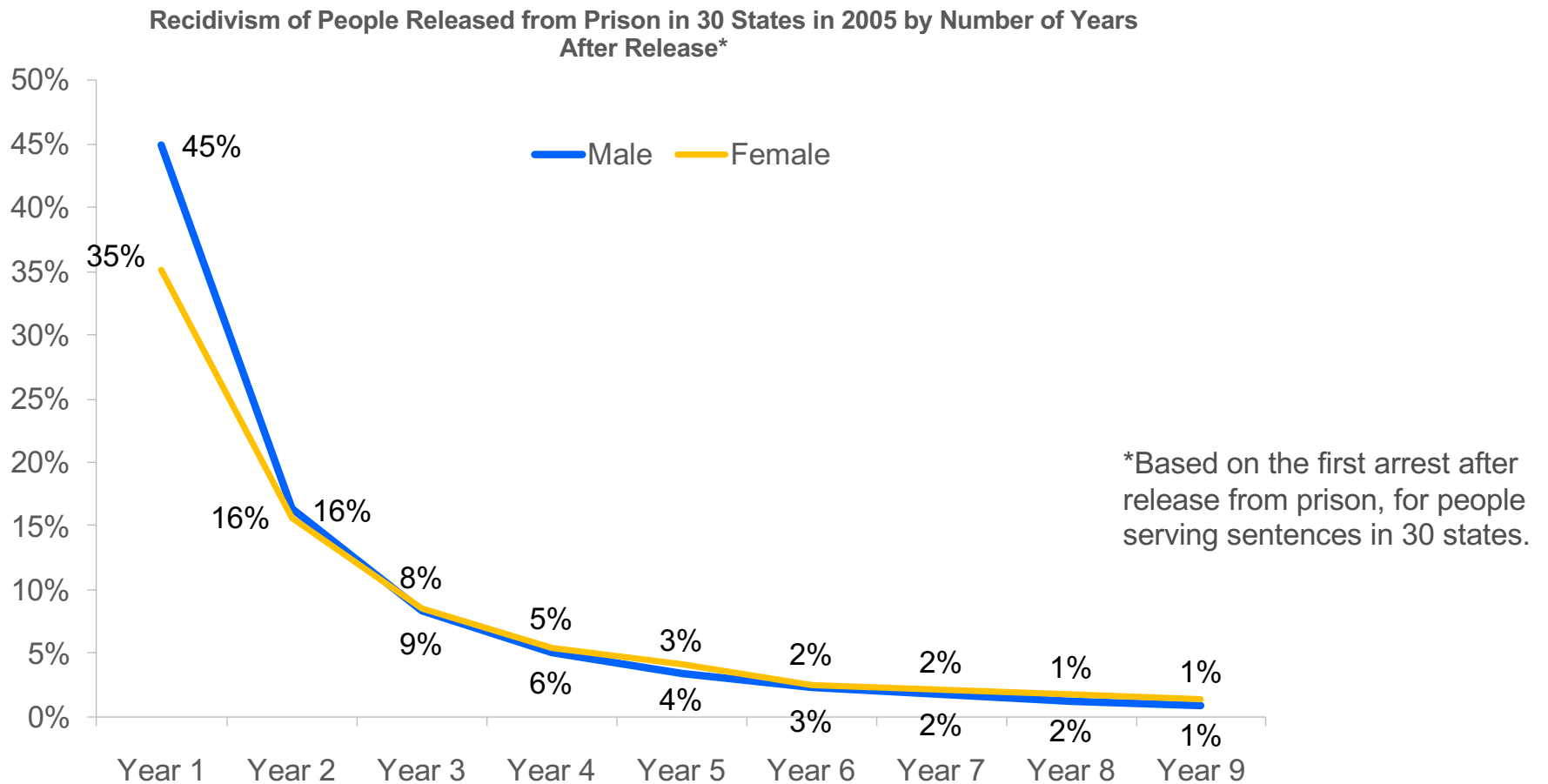
Only an estimated 10% of parole grants are for people in the sentenced incarceration population, while 90% of people who are granted parole have already been in the community on furlough.

Using a sample of ~500 people placed on furlough whose next legal status was parole supervision, the average period spent on furlough before parole approval was 7 to 8 months.

Because admission and release categories must be derived using DOC data, these analyses should be considered strong estimates.

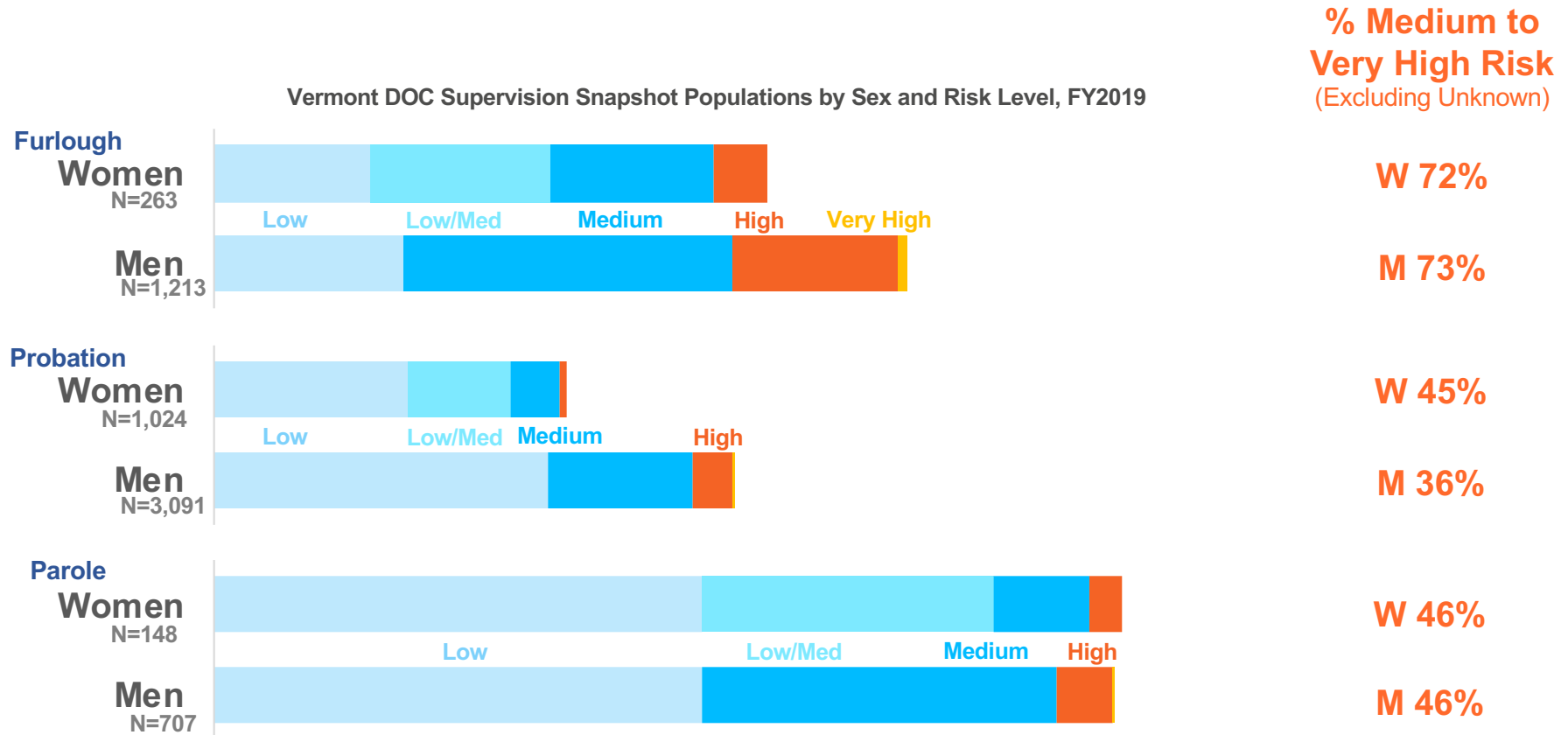
Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

The principle of frontloading involves focusing supervision and supports on people during the first year after release when they are most likely to reoffend.



Sources: Matthew R. Durose, Alexia D. Cooper, Ph.D., and Howard N. Snyder, Ph.D. *Recidivism of Prisoners Released in 30 States in 2005: Patterns from 2005 to 2010* (Washington DC: Bureau of Justice Statistics, April 2014).

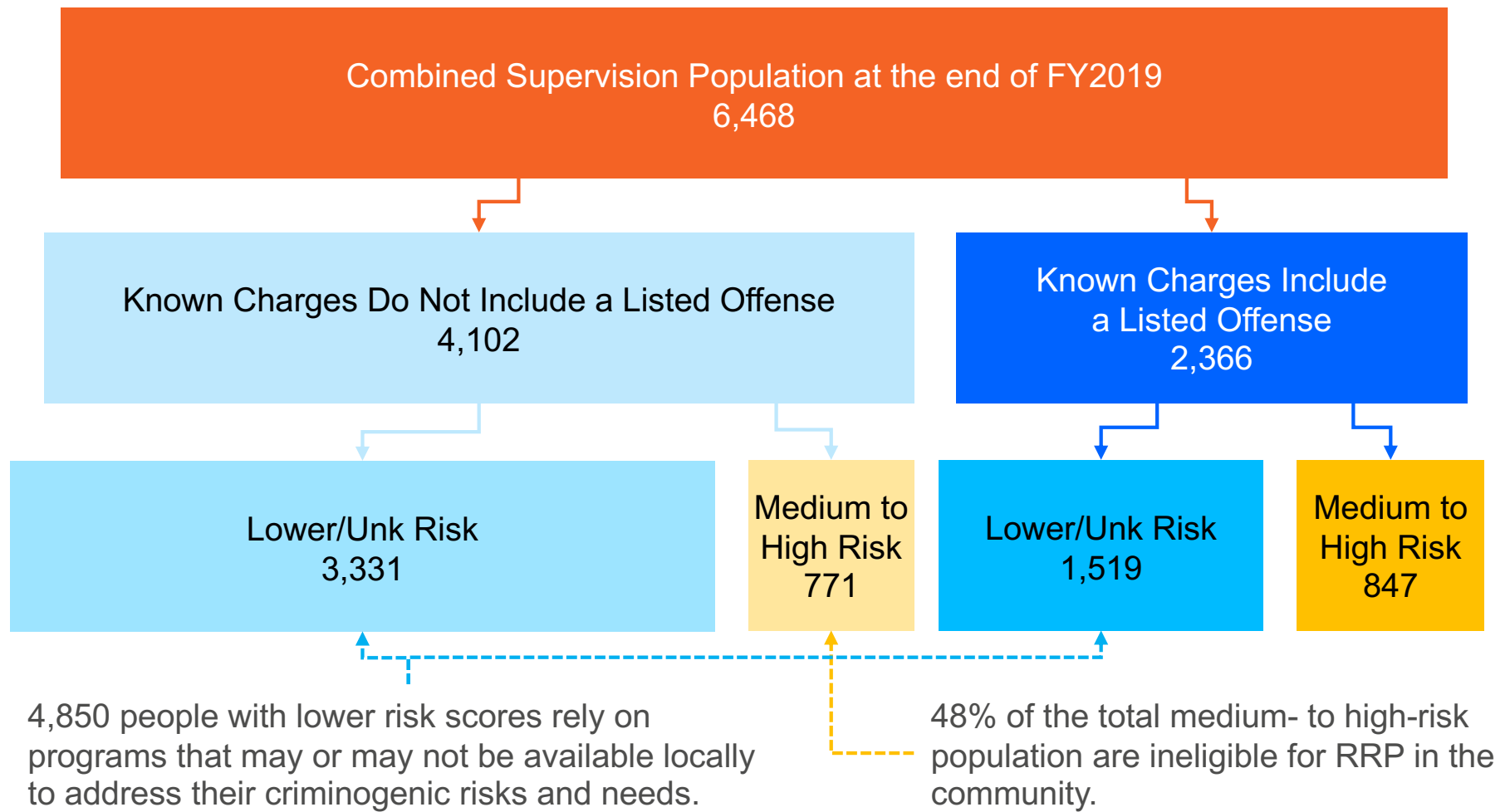
In Vermont, people on furlough are a higher risk group and are facing the most vulnerable period immediately following release from prison.



The ORAS risk assessment instrument used in Vermont yields different risk level categories for men's and women's populations. The women's risk levels are low, low/med, medium and high, while the men have low, medium, high and very high risk levels.

Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

Among people on supervision, almost half of the medium-high risk population does not receive risk-reduction programming based on the same eligibility criteria.



Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

There are critical gaps in how people within the corrections system with behavioral health needs are identified and connected to resources.

→ DOC facilities have worked hard to develop mechanisms for behavioral health screening and assessment, but there are still gaps in identifying people with co-occurring disorders and mental health needs that do not rise to serious mental illness (SMI).

→ Despite case planning policies aimed at ensuring behavioral health information guides treatment and programming referrals, information sharing challenges prevent this information from being appropriately shared in a way that would best support effective reentry planning.



→ Mental health and substance use counseling resources are limited within DOC facilities and in the community, requiring the department to use a “triage” approach focused primarily on SMI and MAT populations.

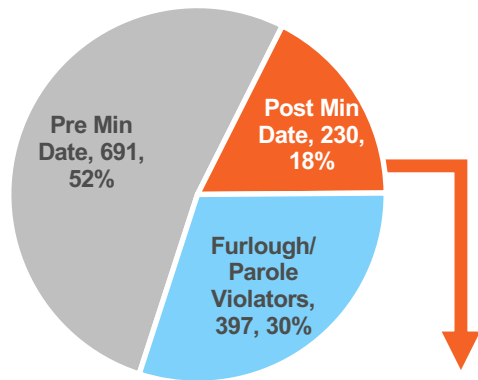
→ Current cross-system mental health training does not adequately focus on training for responding to people with addictions or co-occurring disorders.

→ Appropriate housing is a significant challenge for people with behavioral health needs in the criminal justice system. DOC does not currently have resources to screen for housing needs among detainee and sentenced populations.

Identifying people with co-occurring disorders, non-SMI, and housing needs; sharing information more effectively; and connecting them to community services, will all require expanding existing partnerships and resources.

The current availability of reentry housing does not match the needs of people accessing it.

1,318 Total People in Sentenced Incarceration Population at the end of FY2019



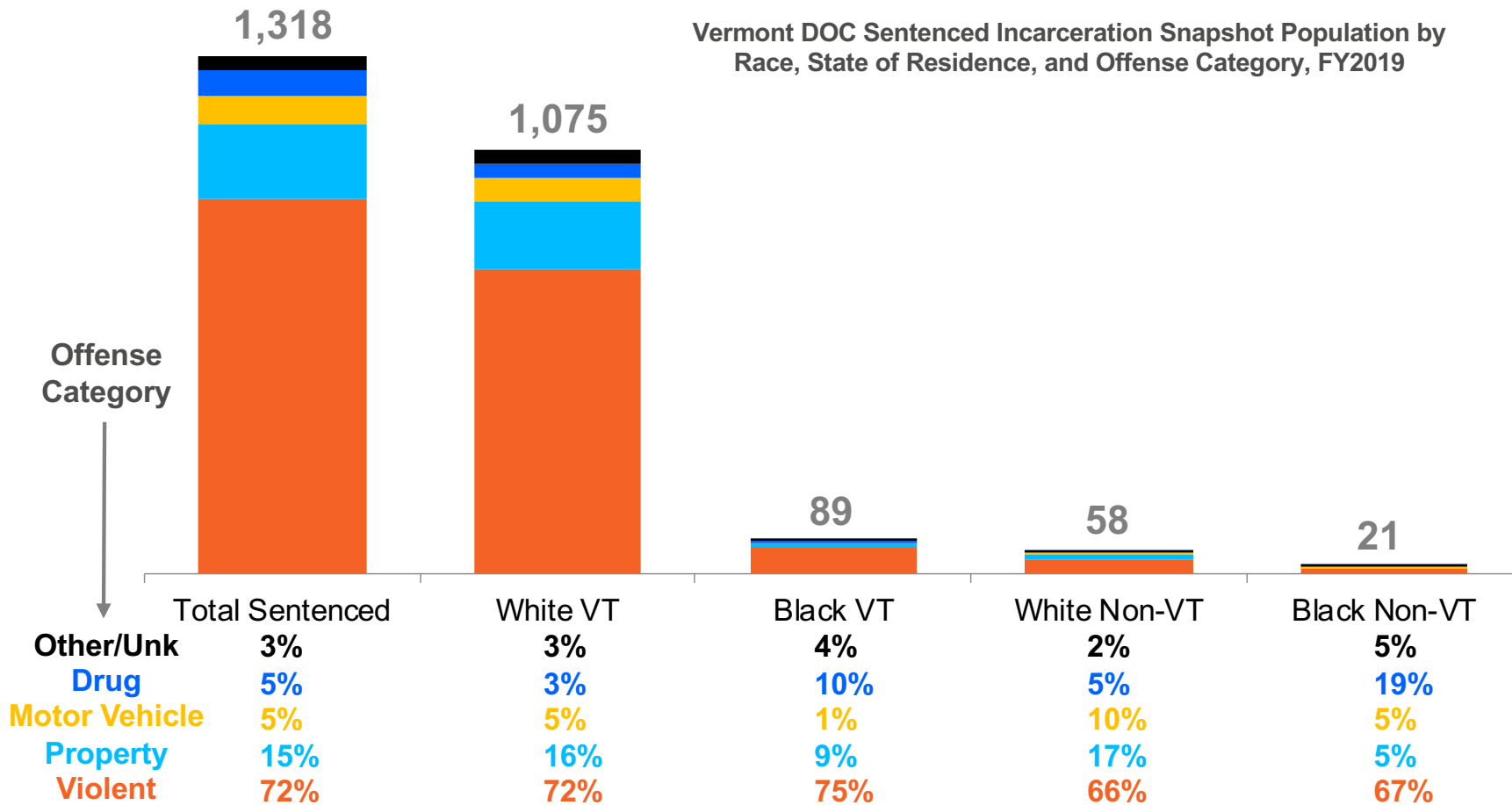
Programming Issues	38%
Lack of Housing	26%
Holds/Security/Safety	24%
Plan to Max Out	6%
Unknown	6%

- ✓ Vermont DOC has a Transitional Housing budget dedicated to supporting reentry for the sentenced population and has established grants with an array of housing providers across the state.
- ✓ Vermont has pioneered certain housing options, including Pathways (Housing First Model), to serve people with complex needs.
- ✗ Vermont has a network of sober housing options available for people returning from prison, but these options often have rigid rules about relapse that differ from current evidence-based practices and some disallow the use of MAT, resulting in increased revocations for people who relapse and lose their housing.
- ✗ Under DOC's transitional housing program, approximately 20 percent of beds at any given time go unused. Some DOC clients are denied entry because of past violations of program agreements, causing beds to be vacant.
- ✗ Only a limited number of DOC's population accesses Pathways, and there is no formal funding bridge to support people finding and maintaining stable services after they leave community supervision.

Source: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

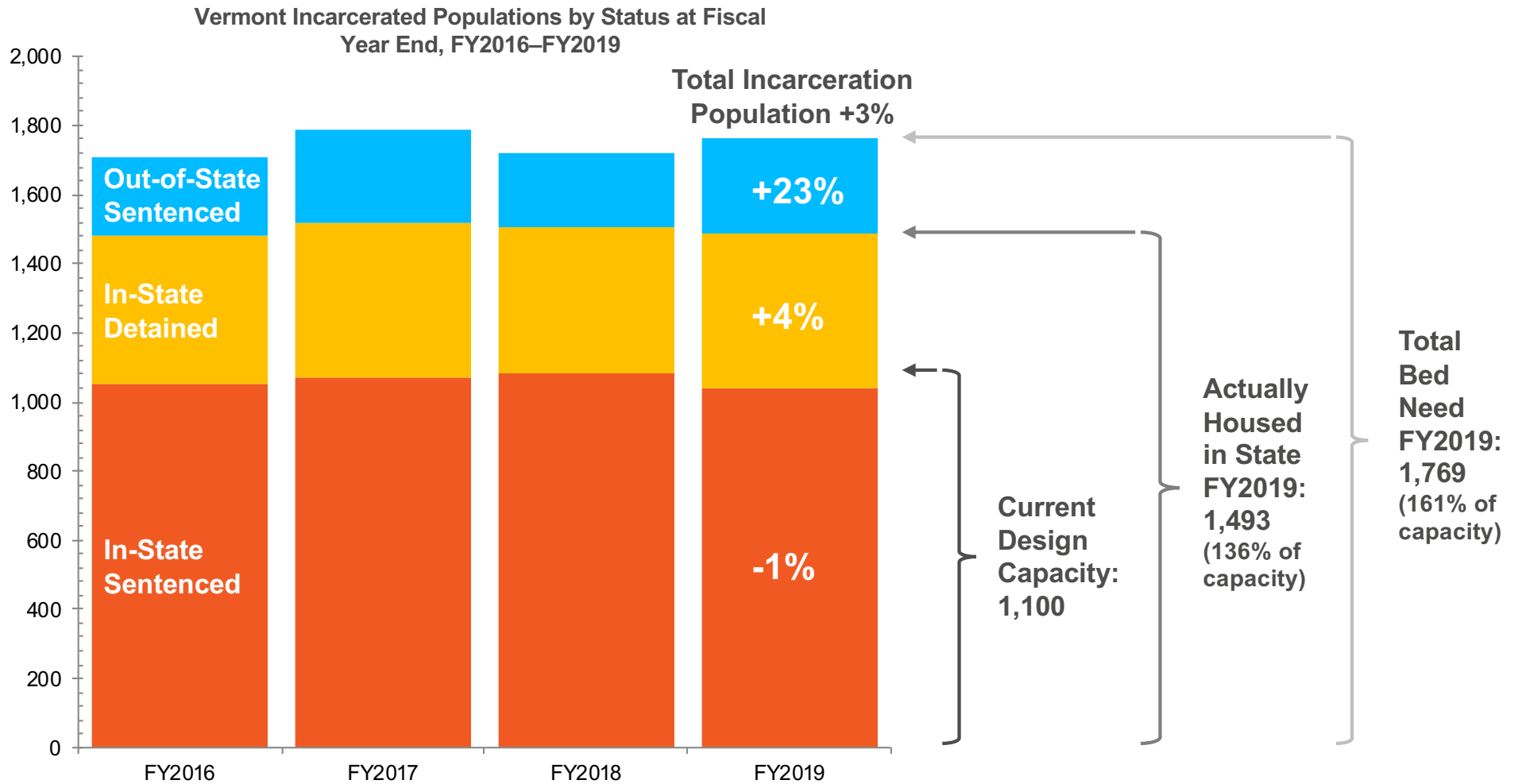
There are differences across offense types by race and state of residency, and additional analyses will be necessary to examine why.

Vermont DOC Sentenced Incarceration Snapshot Population by Race, State of Residence, and Offense Category, FY2019



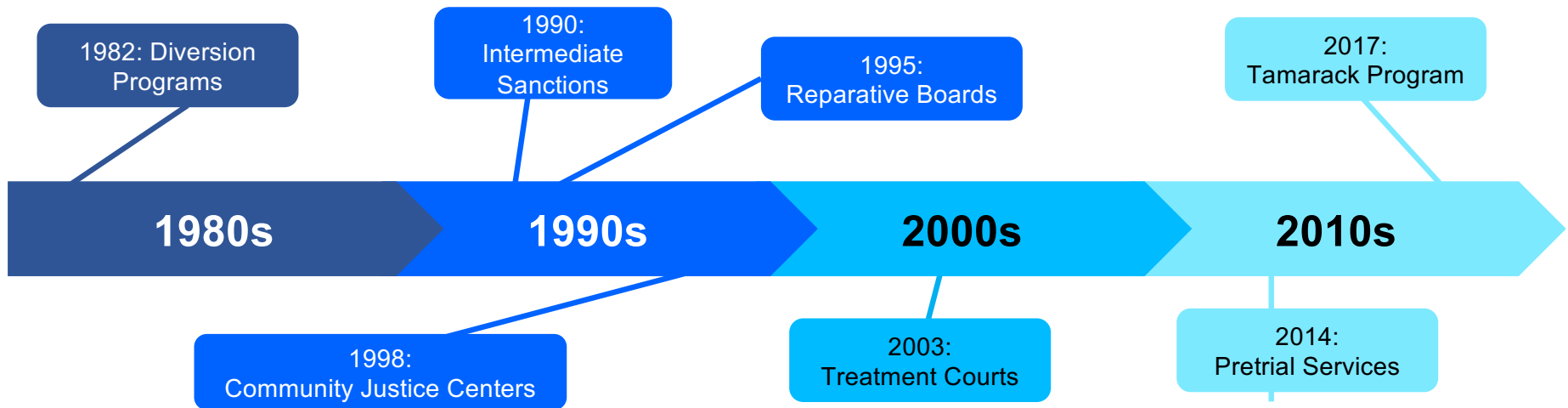
Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

Vermont incarcerates more people than current facilities can accommodate, and that incarceration population is growing.



Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

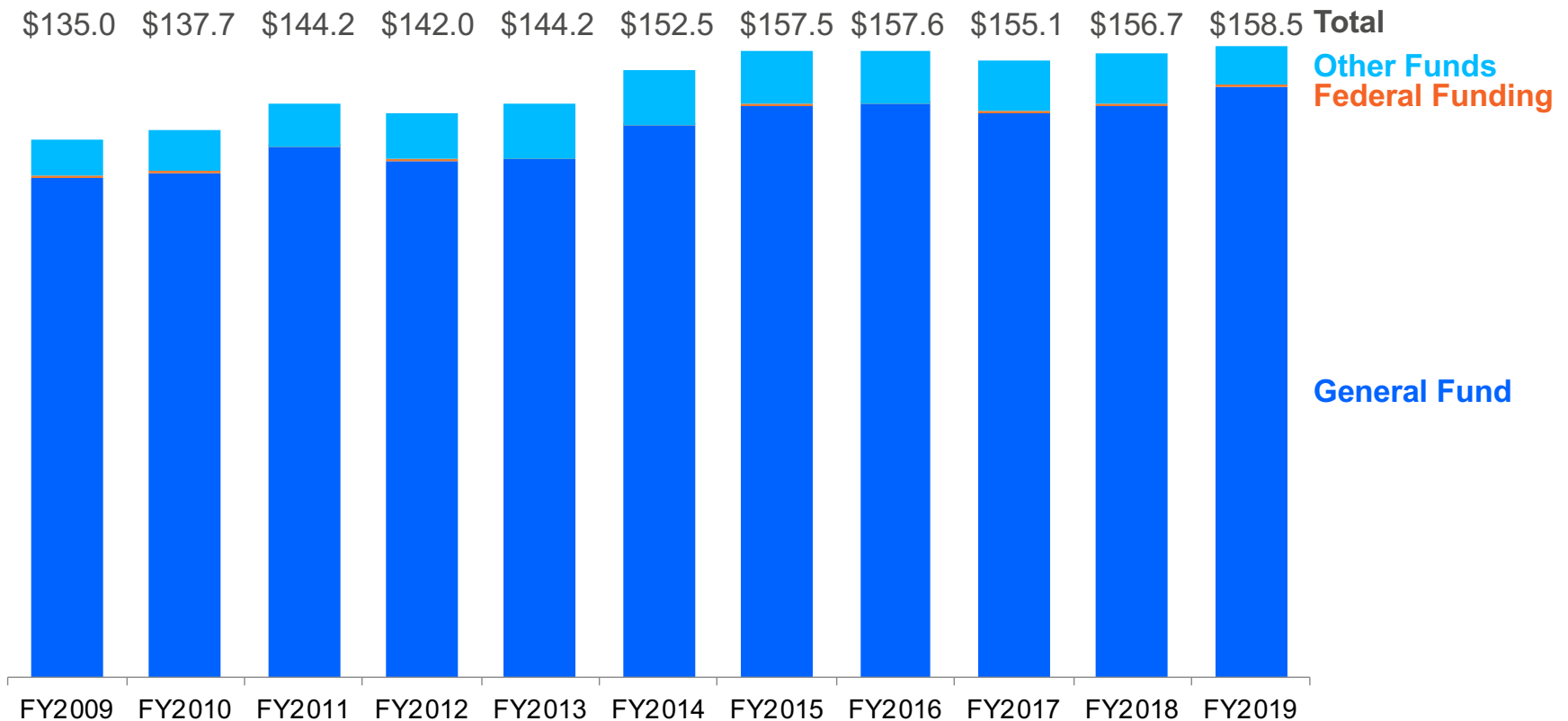
Vermont has an array of “off ramps” at the front end of the system for people with limited criminal history, which means it is likely that higher-risk people will progress into corrections populations.



- Most of these opportunities are available across the state, but the consistency in the types and quality of the services that are offered likely varies by county.
- Referrals to most of these programs rely on local actors, principally state’s attorneys, which will lead to variances in who is able to receive or participate in these programs.
- Only one of these diversion programs (Tamarack) has broad enough eligibility criteria to allow for people with more extensive criminal histories or who are charged with more serious offenses to participate.

In the face of a growing incarcerated population, level funding is equivalent to budget cuts, which de-invests in programs and services for people who are in the corrections system.

Department of Corrections Budget Appropriations by Funding Source in Millions of Dollars, FY2009–FY2019



Sources: Data from the Vermont Department of Corrections.

Justice Reinvestment II has aimed to improve public safety in Vermont, while focusing on immediate opportunities to reduce recidivism and achieve long-term savings.



At the outset of the project, the working group identified that Justice Reinvestment II would primarily seek to:

- Analyze how increases in some categories of crime may be impacting other parts of the state's criminal justice system.
- Explain the connection between supervision revocations and incarceration.
- Assess how individuals' behavioral health challenges, such as serious mental illnesses and substance addictions, play a role in their movement through and their reentry from the criminal justice system.
- Identify where Vermont's data tracking and analytics must be strengthened to provide lawmakers with sustainable information to guide safe policymaking in future legislative sessions.

Achieving systemic change that increases public safety will require incremental and impactful changes that must be measured and monitored to know where additional changes can build on what works and improve on what doesn't.

Justice Reinvestment II recommendations are focused on achieving a safer, more equitable, more informed criminal justice system through immediate and long term policy changes and state investments.

- 1. Reduce recidivism and revocations to prison.**
- 2. Achieve a more equitable system across race and geography.**
- 3. Improve data and reporting to inform decision-making.**
- 4. Reinvest to support individual success on supervision and effective policy implementation.**

1. Reduce recidivism and revocations to prison.

The following recommendations aim to immediately strengthen community supervision, improve outcomes for people who are supervised in the community, and reduce recidivism statewide.

A	Restructure and consolidate furlough legal statuses.
B	Establish presumptive parole for people convicted and incarcerated for unlisted offenses.
C	Strengthen current policy that allows people to earn time off their sentences for good behavior.
D	Ensure more consistency and due process in responses to community supervision violations.
E	Require more information for certain cases at sentencing.
F	Strengthen connections to appropriate behavioral health treatments and services.
G	Quantify the reentry housing needs for corrections populations.

Restructure and simplify community supervision by consolidating current supervised release furlough statuses.

POLICY RECOMMENDATIONS

- Consolidate most supervised release furlough statuses into a single status, “Supervised Community Release,” for people who are not eligible for presumptive parole or who were returned or revoked to prison for technical violations of parole.
- Redefine this status as a supervision rather than incarceration legal status.
- Revise current policy to allow for less restrictive definitions of approved housing for release onto Supervised Community Release.
- Connect people on Supervised Community Release to intensive supervision and community-based services as appropriate for their risk and needs.
- Allow people who are successful on furlough for a period of 4–6 months to receive presumptive parole, with conditions set by the Parole Board.

REASONING

Consolidating community supervision furlough statuses will allow DOC to continue releasing people at or near their minimum sentence onto community supervision, while ensuring that people who are at a high risk of recidivating or failing on supervision can connect with appropriate and effective programming and services in the community.

Establish presumptive parole for people convicted of unlisted offenses.

POLICY RECOMMENDATIONS

- Establish that a person may qualify for presumptive parole if:
 - Their underlying offense is not a listed crime.
 - They have completed risk-reduction programming if they are assessed as having medium to high criminogenic risk and are sentenced to 1+ years incarceration.
 - They are case-plan compliant for at least 30 days prior to release.
- Connect people released on parole to intensive supervision and community-based services as appropriate for their risk and needs.
- Ensure those on presumptive parole are subject to the Parole Board's revocation hearing process.

REASONING

- Most people are already released from prison at their minimum sentence, and the supervising agency (DOC) would remain the same under this policy.
- Presumptive parole would mean more people have access to stronger due process when facing revocations to prison, and would reduce the administrative burdens supervision staff currently experience in preparing lengthy parole reports for people who have already been supervised in the community on furlough.
- Requirements for higher-risk people to complete risk-reduction programming can incentivize participation.
- Stronger connections to intensive supervision services based on risk will help reduce recidivism and parole failures in the community.

Strengthen legislation that allows people to earn time off their sentence for compliant behavior.

POLICY RECOMMENDATIONS

Revise and implement the enacted good time bill to allow sentenced incarcerated people to earn time off their minimum sentence for good behavior while incarcerated, with two key changes:

- Remove the requirement that people participate in DOC recommended programming to earn time off, and instead require that eligibility for furlough and presumptive parole release include participation and completion of programming.
- Consider increasing the amount of time a person may earn to 7 days off the minimum sentence for every 30-day period they serve without a major disciplinary rule violation (DRV).

REASONING

- Connecting earned good time to programming completion will make good time extremely difficult to calculate and track, while the incentives for programming can come from release eligibility criteria.
- The current statute allows a person to earn 5 days off their minimum for 30 days without a DRV, but in the past, Vermont offered people as much as 10 days off their minimum for 30 days without a DRV. Additional time may further incentivize good behavior while achieving more savings that can be reinvested in supervision programming and treatment.

Strengthen the effectiveness of violation responses for people on community supervision.

POLICY RECOMMENDATIONS

- Identify where short-term incarceration sanctions in response to supervision violations can be safely reduced to better achieve behavior change.
- Improve the quality and consistency of graduated sanctions information that DOC collects in its case management system.
- Formalize the use of incentives in supervision practices, and formally track their implementation.
- Explore establishing revocation caseloads as an alternative to revocation for technical violations.
- Explore establishing presumptions that certain types of technical violations should not result in revocations or returns to prison.
- Ensure stronger due process for people supervised on furlough who are facing revocations to prison.

REASONING

- Research shows that the use of short-term sanctions to incarceration, while necessary for public safety in some cases, does not achieve behavior change and can undermine or disrupt a person's ability to obtain and maintain treatment, housing, and employment.
- Supervision officers indicated inconsistent use of the case management system to track how graduated sanctions are used in practice, making it impossible for DOC to currently assess the use and effectiveness of this policy.
- Incentives and sanctions must be used at a 4:1 ratio to successfully change behavior, which requires the same structure and guidance for the use of incentives as exists for sanctions.

Provide more information at sentencing to better guide program and treatment supervision planning.

POLICY RECOMMENDATIONS

- Expand the use of presentence investigation reports (PSIs) to inform sentencing and programming decisions, possibly to include all domestic violence cases.
 - Explore how the current PSIs may be redesigned to emphasize a more efficient information collection and report format that specifically focuses on risk assessments and behavioral health.
- Consider refocusing current community-based staff to write and deliver PSIs in a timely manner, and to ensure that supervising officers are able to provide home visits for clients in accordance with best practices.
 - This may be possible by repositioning community corrections officers (CCOs) as supervision officers with a focus on developing PSIs and lower-risk supervision caseloads.

REASONING

- When efficiently designed and delivered, PSIs can provide critical information regarding a person's risk and needs that may then inform supervision conditions.
 - PSIs are rarely ordered outside of cases for which they are required, but a survey of Vermont judges found that 94 percent of respondents identified PSIs as helpful in determining final sentencing decisions.*
- Focusing an expansion of PSIs on cases that involve intensive supervision, such as Pre-Approved Furlough and domestic violence cases, can connect people immediately and appropriately to programs and services that meet their individual risks and needs.
- Community corrections officers were originally established to conduct home visits for people sentenced to home confinement furlough, but their current function undermines best practice by disconnecting supervision officers from observing clients outside of the office setting.

*CSG Justice Center survey of judges, December 2019

Develop more robust identification and connections for people with behavioral health needs who move through the corrections system.

POLICY RECOMMENDATIONS

- Use nationally validated behavioral health screening tools for all people who are sentenced to incarceration for any period of time, and add mental health screening questions to the Supervision Level Assessment (SLA) tool for people on probation.
- Strengthen the impacts of DOC case managers by establishing an appropriate caseload and defined role that will enable them to immediately connect people with appropriate and effective services upon their release to community supervision.
- Standardize behavioral health and reentry information policy and procedures between DOC contracted health care staff, case managers, reentry officers, hubs and spokes, designated mental health agencies, and other community service providers.
- Develop care coordination and case management protocols for executive agencies that serve people with behavioral health needs who are under DOC custody.
- Pursue opportunities to expand access to substance use counseling services for people in the criminal justice system who receive MAT inside DOC facilities and within community settings.

REASONING

- The ORAS-CST includes a domain for behavioral health needs but is not a validated behavioral health screening tool. The Supervision Level Assessment (SLA) tool screens for substance use but not mental health needs for people on probation.
- Due to information sharing inconsistencies, supervision officers do not always have consistent or comprehensive knowledge of clients' behavioral health needs.
- Counseling is offered to clients in the community-based hub and spokes, and DOC offers medical supports, such as MAT, inside facilities; however, due to resource and workforce challenges, DOC is more limited in its ability to offer clinical supports to reach best practices in clinical intervention.

Assess and quantify the specific housing needs for people who are on community supervision or incarcerated in Vermont.

POLICY RECOMMENDATIONS

- Develop and implement a DOC facility homeless screening tool to track reports of homelessness.
- Establish data match partnerships to identify and quantify high utilizers across DOC, the Department of Mental Health (DMH), and the Department of Health's Division of Alcohol and Drug Programs (VDH).
- Explore establishing a partnership between DOC, DMH, and VDH to contract with housing providers to coordinate responses for shared clients and identify where and how the state can better leverage local and federal housing vouchers.
- Explore how DOC's community-based grantees (i.e., Pathways) may be able to identify appropriate housing vouchers or other funding, as well as directly bill Medicaid for clinical services.
- Establish evidence-based norms and expectations for housing grants and certifications for sober and recovery housing providers, including allowing the use of medications and restricting evictions due to relapse.
- Explore opportunities to release people who are held in prison past their minimum due to lack of approved housing by revising housing requirements for furlough release.

REASONING

- A housing needs screening assessment combined with a data match across AHS departments can quantify the scope of DOC housing needs and shared high utilizers of homeless and behavioral health services, and while DOC, DMH, and the VDH have shared clients, each department contracts separately with housing providers.
- Under DOC's transitional housing program, approximately 20 percent of beds at any given time go unused and some DOC clients are denied entry based on past violations of program agreements, resulting in vacant beds that cannot be filled.

Vermont can better analyze and explore statutory changes that may counteract disparities in sentencing outcomes.

POLICY RECOMMENDATIONS

- Analyze sentencing patterns to identify where the use and length of incarceration may result in or exacerbate racial disparities.
- Direct the Sentencing Commission to work with the Racial Advisory Panel in exploring where Vermont can establish standardized sentencing guidance in statute for certain types of offenses that may contribute to racial and geographic disparities.
- Request and review existing data from key stakeholders, including law enforcement, state's attorneys, the defender general's office, the attorney general's office, the judiciary and the DOC, related to race and ethnicity with respect to plea agreements, sentence types and length, criminal history, offense severity, and other key metrics that may further identify differences in how people are charged and sentenced by county, race, and gender.
 - Identify where current data systems and collections are insufficient for additional analyses and what staffing or resources are needed to support more robust reporting.

REASONING

- The role and focus of both the Racial Disparities Advisory Panel and the Sentencing Commission offer the potential for two existing entities to analyze and consider where and how statutes might guide criminal justice actors toward more consistent and equal treatment of individuals.
- In its final report, the Racial Disparities Advisory Panel identified areas for data improvement and necessary resources and staffing to ensure that data is accurately and consistently collected and measured to reflect racial biases and disparities throughout the criminal justice system.

The state should explore opportunities to centralize alternative justice programs for greater efficiency and expand partnerships between law enforcement and behavioral health agencies and experts.

2B POLICY RECOMMENDATIONS

- Explore opportunities to consolidate the administration of reparative panels, court-ordered diversion, Tamarack, and Pretrial Services into shared regional locations managed by central nonprofits and establish performance measures for funding these programs.
- Explore the potential to expand types of cases and offenses that may be referred to diversion programs, including reparative boards.

REASONING

- Stakeholders have varying levels of confidence in the quality and outcomes of alternative justice programs and highlighted those counties with more centralized services under consolidated management as a strong model.
- Performance-based contracting can ensure greater consistency in what people can receive and access statewide.

2C POLICY RECOMMENDATIONS

- Explore how the Department of Health's Division of Alcohol and Drug Abuse Programs can participate in crisis training for law enforcement to ensure that this training includes information on substance addiction and co-occurring disorders.
- Expand the Community Outreach program, currently operating only in Chittenden County, embedding social workers within local law enforcement agencies across all Vermont counties to respond to behavioral health crisis calls.

REASONING

- Existing law enforcement crisis training does not include sufficient information on substance addiction and co-occurring disorders.
- When responding to behavioral health crisis calls, law enforcement has varied access to community-based resources, including embedded social workers and case management.

Vermont must invest in sustained, agency analytic capacity.

3A POLICY RECOMMENDATIONS

- Fund the DOC to enable adequate staffing for data and research needs, including conducting data extracts and providing consistent oversight to the quality and input of data in the case management system.
- Require the DOC to provide the legislature with an annual report—to include a defined set of key measures and updates regarding corrections funding, populations, and outcomes—in addition to special reports the legislature may request of the DOC.

REASONING

- Current staffing within DOC limits the department's ability to maintain and analyze current data systems and case management information that would better inform policymaking.
- More consistent reporting on key corrections measures would provide policymakers, the public, and DOC staff with more information to guide decision-making and understanding of current challenges and progress.

Vermont should explore where additional research partnerships may prove helpful in the future.

3B**POLICY RECOMMENDATIONS**

- Request and review data from key stakeholders related to race and ethnicity with respect to key metrics that may further refine and identify where differences exist in how people are charged and sentenced by county, race, and gender. Important considerations for this recommendation include an understanding of what data is currently collected and should be collected, as well as resources that are available for extraction, analysis, and reporting.
- Support partnerships between the DOC and local universities and other research organizations to conduct specific research projects, similar to the partnership and agreements between DOC and the CSG Justice Center.

REASONING

- Current data can be improved and analyzed further to provide more information regarding the role that race and geography play in how people interact with and move through the criminal justice system.
- A productive partnership between DOC and research organizations may provide helpful capacity for specific research projects, including further analyses of racial and geographic disparities.

To lower recidivism and improve behavioral health, Vermont must consider up-front investments that will fund immediate improvements, with cost savings and reinvestments to follow.

Establish a protected, dedicated fund to support evidence-based programs and services that reduce recidivism and improve behavioral health among criminal justice populations.

Expand access to risk-reduction programming for all medium- to high-risk people, regardless of offense.

Increase access to gender-responsive programming.

Strengthen and sustain domestic violence programming.

- Reduce reliance on fee-for-service funding.
- Invest in statewide coordination of current programs and allow for more types of programming based on risk.

Target gaps in behavioral health services.

- Expand mental health services for the non-Serious Mental Illness (SMI) population.
- Create more services for people with co-occurring disorders.
- Explore providing counseling services for people receiving MAT.

Identify housing needs and provide additional supports.

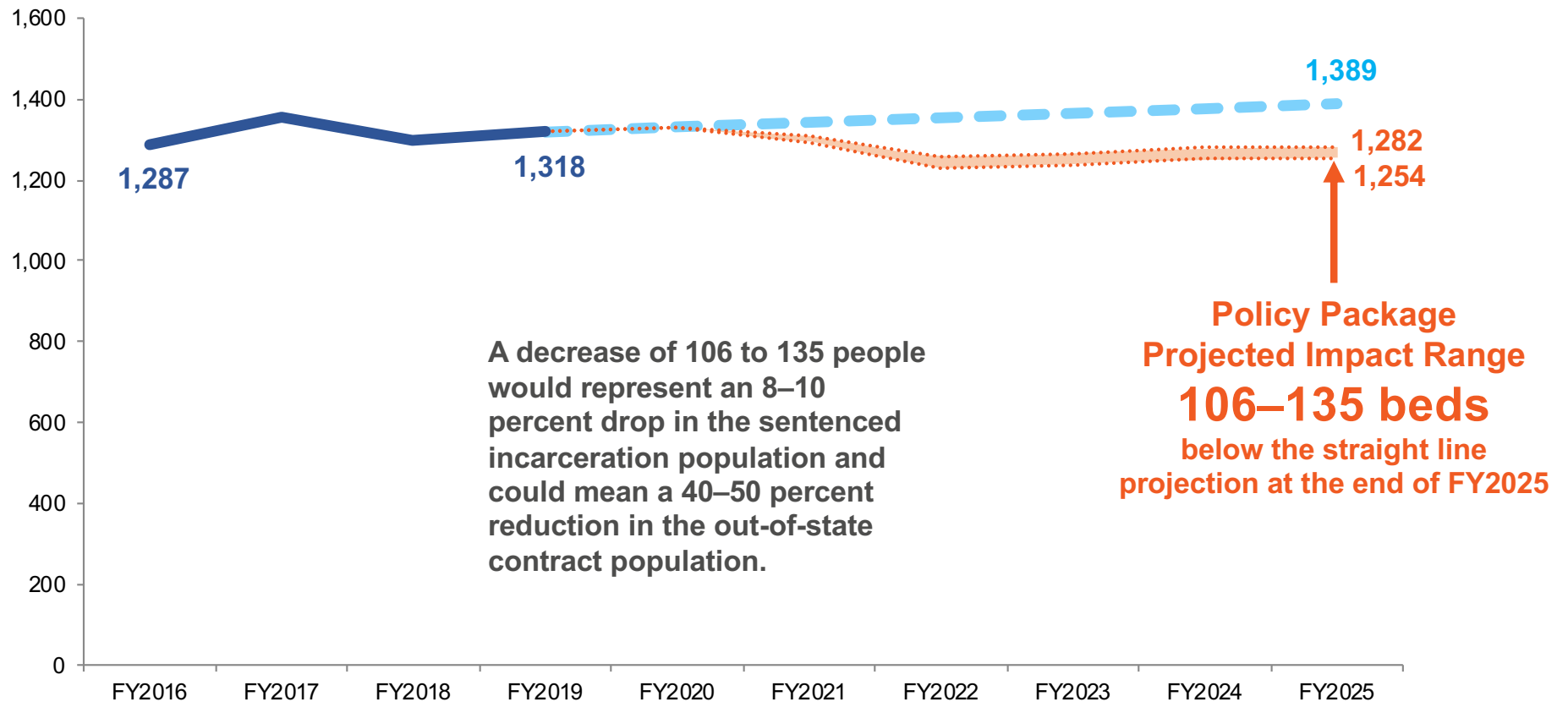
- Use information from housing assessment tools to identify needs among people incarcerated and supervised in the community.
- Explore the potential for data matching that may support a gap analysis for housing and behavioral health needs and resources.

Expand DOC data capacity to monitor progress and provide more consistent information and guide decision-making.

Expand the Community Outreach Program to embed social workers with law enforcement agencies statewide.

As drafted, the current policy package could begin to shift the sentenced population trajectory and reduce contract bed needs significantly.

Vermont Sentenced Incarceration Populations at Fiscal Year End and Projected Impacts



Sources: The Council of State Governments Justice Center analysis of data from the Vermont Department of Corrections.

A projected decrease of 106 to 135 people in the prison population by the end of FY2025 would generate \$11 to \$14 million in averted contract bed costs.*

The impact model includes a range of potential impacts based on the percent reduction in revocations from supervision that Vermont is able to achieve (5–20 percent reduction)



	Range	FY2021	FY2022	FY2023	FY2024	FY2025
Potential Bed Savings at Fiscal Year End	Low End	-35 beds	-96 beds	-99 beds	-97 beds	-106 beds
	High End	-49 beds	-124 beds	-127 beds	-125 beds	-135 beds
Potential Averted Cost per Year	Low End	\$0.2M	\$2.3M	\$2.9M	\$2.9M	\$2.8M
	High End	\$0.2M	\$3.0M	\$3.6M	\$3.6M	\$3.5M



5-year potential averted cost totals range from **\$11M to \$14M**

* Averted costs are calculated on the current contract rate per person per day of \$73. If that rate were raised, averted costs would increase.



Thank You

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