

H. 679 Fiscal Year 2022 Budget Adjustment Bill as Passed by the House – Human Services-Related Items

The budget adjustment increases unduplicated appropriations by \$358.6M, which is 4.9% over the budget passed in May. This reflects the one-time General Funds currently available within the FY 2022 forecast, appropriating an additional \$113M. This bill also allocates \$106.3M more ARPA State Fiscal Recovery (SFR) funds. Federal matching funds in Medicaid and other smaller special funds adjustments make up the balance of the total increase. These funds are being spent to address the costs of operating state government, including programs that provide services and benefits to Vermonters during the ongoing COVID-19 pandemic. This budget adjustment maintains the full funding for the statutorily required stabilization reserves including the budget stabilization reserve, the Rainy-Day reserve, the transportation fund reserve, and the education fund reserve.

See below for key provisions in the Budget Adjustment Bill related to Human Services.

• AHS-wide:

- 1. Funds workforce retention programs in the following critical areas:
 - a. Healthcare provides a total of \$60M (including ARPA SFR, Global Commitment, and Home and Community Based Services funds) for staff retention related payments to shore up critical provider systems for assisted living residences, nursing homes, residential care homes, home health agencies, designated and specialized service agencies, substance use treatment providers, and recovery centers
 - b. Childcare provides \$6M ARPA SFR for retention payments for Childcare staff
 - c. Dept of Corrections employees funds \$4.9M for staff recruitment and retention proposals per the Collective Bargaining Agreement
 - d. Dept of Mental Health Employees Vermont Psychiatric Care Hospital & Middlesex Therapeutic Care Residence funds retention proposals per the Collective Bargaining Agreement of \$1.8M gross (\$760K GF)
 - e. Vermont Veterans Home funds retention proposals per the Collective Bargaining Agreement \$129K
- 2. Provides \$25M to address emergent and exigent circumstances related to the COVID-19 pandemic. Funds will be used to meet current COVID-related grant & contractual obligations, as well as to provide financial support to providers to prevent business closures and disruptions
 - a. Known costs support through executed AHS contracts
 - i. Sub-acute beds up to \$5M
 - ii. ICU capacity up to \$7.5M
 - iii. TLC Staffing Supports up to \$2.5M +
 - b. Anticipated costs Provider Emergency Relief \$10M to respond to emergent needs where without financial intervention the provider will either have to reduce capacity or face closure



• Secretary's Office:

- 3. Net-neutral shift of 211 contract from AHS SO to DCF
- **4.** Uses GF carryforward to fund technical assistance for the 1115 Global Commitment and All-Payer Model waivers

• DVHA:

- 5. Funds Medicaid caseload and utilization increase of \$67.5M gross (\$28.7M state).
- 6. Adjusts Medicaid rates for participating providers by \$4.7M gross (\$2.1M GF)
- 7. Funds CY settlement with the Accountable Care Organization (ACO) due to the contractual risk sharing arrangement
- 8. Buy-in increase roughly 14% increase for Medicare Part B Premiums
- 9. Access to Care Increase Emergency Department Per Diems reduce wait times

• **DMH**:

- 10. New secure residential one-time start-up costs of \$150K GF
- 11. Adds \$440K GF to maintain the 988 Suicide Prevention Line.

• DCF:

- 12. Adds funds for DCF adoption and substitute care caseload.
- 13. Funds \$6.1M at DCF-Office of Economic Opportunity (OEO) for Emergency Housing Plan initiatives including rental risk mitigation, transportation for General Assistance clients, and rapid resolution housing.
- 14. Adjustments to earnings due to capped federal funds and alignment of expenditures to actuals
- 15. Child Development Division Subsidy Caseload underutilization of \$814K GF
- 16. Supports the Vermont Food Bank with \$6M ARPA SFR for pandemic-related food assistance.

• DAIL:

- 17. Adds \$1M ARPA SFR for the Adult Day service providers for operating costs through the end of FY 2022
- 18. Provides initial funding for the Long-term Care Oversight Initiative
- 19. Brain Injury utilization increase

• VDH:

20. Adds \$167K GF to support four statewide syringe service programs.

• Vermont Veterans Home:

21. Support Vermont Veterans Home costs of traveling nurses, PPE, and misc. operating/repairs.

Housing:

22. Adds \$55M in total to ACCD for VHCB for housing and increased shelter capacity (\$30M GF + \$25M ARPA SFR).