

Dear Respected Legislators,

We are writing in response to the September meeting of the joint oversight committee, and in particular the testimony from Wellpath's Dr. Hodge.

Her assertions, that everything is working well, that responses are being managed in a timely manner, and that transition to the community for offenders is smooth and like a "warm handshake" are unfounded and not based on true living examples.

In this case it is obvious we are only getting a report from the provider. In the community, if the patient complains, there would be a choice to switch providers or even file a formal complaint. In this case, the only choice is for those incarcerated to tell their loved ones, and hope we can do the reporting for them. So we are reporting. And we hope you will listen.

According to dozens of reports from incarcerated individuals, the wait time/response to sick slips has increased to many days, weeks, and in some cases not at all. One elderly individual has been asking for COVID-19 booster shots/shingles since the spring. He has also requested a new HIPPA form so his loved ones can speak with Medical for many months with no response. His loved one has engaged with the DOC constituency portal multiple times asking for help on these simple issues with no response from Wellpath providers at SSCF.

During her testimony last month Dr. Hodge from Wellpath described the transition to the community as a "warm handshake". Unfortunately there was nothing warm and no handshake for a recent detainee with Type 1 diabetes who experienced traumatizing care during his weeks before sentencing. He was moved twice from NSCF to SSCF a week before his hearing and confined to a solitary holding cell with no access to personal hygiene, phone or forms. When his hearing was postponed he was moved back to NSCF for a week only to be returned to the same solitary holding cell at SSCF where his insulin schedule and amounts were randomly changed by an on-call doctor despite his pleas for them to remain stable. Upon his release he was not given any prescriptions for his diabetes meds and was forced to use a sibling's insulin to get through the night. What is the policy on release of detainees and their medical prescriptions? There was no contact with the supposed re-entry coordinator that Dr. Hodge testified were in place at facilities and in our research we have not located them, nor have any incarcerated folks heard of this support person.

Dr. Hodge described a glowing mental health program. However we have multiple testimonies of people not continued on their psych medications that they were on for years in the community. Some have even been told by Wellpath that there is a shortage of their medications and that is the cause. Upon local research of pharmacies we are told those medications are easily obtained.

Where are the full psychiatric exams for our Vermonters coming into DOC care?

We have citizens who have served more than 17 years for charges obviously based on mental health issues but they have received no mental health care attention and may be released soon.

For safer communities, wouldn't we want an evaluation, diagnosis and appropriate care? Dr. Hodge made it sound like all of this was happening, but in fact, it is not.

Why isn't the committee speaking to the patients (in this case the incarcerated citizens) to verify care?

Why is the committee relying on testimony from a third party private sector vendor?

We need oversight and consistent reporting from Wellpath. We need to insure our incarcerated citizens are not having their right to healthcare taken away. We need access to the NCCHC policies and standards that the DOC says are not available to the public as they are classified as "secret".

We can do better here in Vermont.

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