

MEMORANDUM

TO: House Committee on Health Care

FROM: Samantha Sweet, Deputy Commissioner, Department of Mental Health

DATE: February 25, 2025

RE: FY26 Budget - Follow-up to February 19th Testimony:

The Department of Mental Health (DMH) has reviewed the testimony presented by the Howard Center on February 19th. We appreciate the opportunity to respond and provide additional information to inform your budget recommendations.

Each year, DMH and other state agencies systematically review budgets to ensure alignment with our evolving vision and to identify opportunities to improve quality and efficiency of care to Vermonters. This year, DMH identified two areas for integration at the Howard Center (as well as one at the Northeast Kingdom Human Services):

1. Embedded Social Workers in Milton Family Practice and First Call
2. Community Outreach initiative

To ensure the success of mobile crisis services, DMH believes we must concentrate efforts on directing communities to 988 as the primary access point. This unified focus will help achieve stable funding and support the actual cost of these services—an outcome we all share. We understand that the communities and the committee are hesitant to make this change now.

We understand that it can feel as though there is never a “right” time to integrate programs—whether a program is in its 24th year (such as the social workers at the family practice) or its 2nd year (such as enhanced mobile crisis). We respect that communities and employers become deeply invested in these programs, their missions, and staff. However, in a small state with finite staffing and resources, it is essential to streamline and use our resources as efficiently as possible. When multiple “levers” or parallel services are available, they can become engrained in practice and more difficult to change in the future.

Therefore, DMH continues to recommend the immediate integration of these programs. We also acknowledge the Committee’s role in deciding what best serves Vermonters. If you opt to sustain these



programs for another year, DMH respectfully requests that you guide providers to use that time to prepare for full integration next year.

Lastly, we must also address a compliance issue that DMH only became aware of during the testimony. The existing funding for social workers is tied to the federal [EPSDT \(Early and Periodic Screening, Diagnostic and Treatment\) mandate](#). Under audit, agencies must demonstrate that these funds are used 100% for individuals aged 0–22. These funds cannot serve as general capacity funding or cover the full cost of staff that provide services across the age span. At this point, the work required to bring these positions into compliance may exceed their value if they will only be funded for one more year.

Thank you for the opportunity to clarify DMH's position. We remain committed to partnering with the Committee to ensure the highest-quality mental health services for Vermonters, delivered in the most efficient and sustainable way possible.

