

**Vermont Care Partners FACT SHEET**  
**Reimbursement Challenges**

- **Designated and Specialized Service Agencies need annual COLAs of 3% for the next 4 years to achieve a viable and sustainable system of care – this would require \$4.8 million in GF for FY'17**
  - The aggregated COLAs received by the DA/SSAs over the last 10 years are 13% behind the New England CPI – we didn't have adequate compensation then according to the PHPG study
  - We need to stabilize this system after years of cuts and increased uncovered costs such as health insurance, electron health records development, etc.
  - New federal Department of Labor overtime rules will require overtime pay that has not been budgeted
- **Our \$383 million System of care is essential to VT's safety net, economy and health reform efforts**
  - The social determinants of health play a larger role than genetics, environment and medical care all combined on health outcomes and costs
  - We effectively serve Vermonters with complex and costly health conditions at low costs
  - RBA data shows successful cost avoidance of emergency room , inpatient and institutional care
  - Substance abuse services to address Vermont's opiate crisis require adequately paid staff
  - Our services are essential to address child abuse and neglect, and for kids to succeed in school
  - Our services reduce costs in the criminal justice system
  - We help people achieve employment and stay in the workforce
- **Low Medicaid rates lead to inadequate compensation to 13,000 workers & reduced quality of care**
  - Recruitment and retention of skilled and trained staff is a growing challenge because of low compensation, that does not keep up with inflation
  - Bachelors level staff receive salaries \$16,000 below state employees doing equivalent work and masters level staff receive salaries \$13,000 below state employees doing equivalent work
  - Our staff are being asked to do more and work with people with more complex needs
  - Quality of care is based on long lasting, trusting relationships that are disrupted by our staff turnover rates that average 27.5%
  - Hundreds of staff vacancies reduce access to needed services and supports
- **Unlike other health providers we can't cost shift to commercial insurance**
  - Designated Agencies depend on Medicaid and state funding for over 85% of our revenues
- **There is increasing demand for Developmental Disabilities. Mental Health and Substance Use Disorder Services**
  - Recent growth in the Developmental Services budget is due to new people and services; costs per person have remained constant and are below the national average
  - More babies now survive with life-long disabilities and health conditions
  - More people with disabilities and live to be senior citizens with multiple needs
  - We are seeing an increase in some health conditions: autism, early on-set Alzheimer's disease, addictive disorders, and mental health challenges for children and families
  - In spite of new investments over 400 Vermonters are waiting for treatment for opiate addiction
- **Investment in Designated Agencies has proven outcomes**
  - Vermont has no state school, few psychiatric inpatient beds and low incarceration rates Data shows high employment placements, successful recovery from addictive disorders, successful interventions with school children and other great outcomes – Lets build on our success