



Fiscal Year 2021 Budget Summary

Mark A. Levine, MD
Commissioner

January 29, 2020

Public health keeps kids healthy and communities strong

Public health and prevention programs in your community:



We all benefit

Public Health in Vermont

★ Health Department Local Offices



Vision

Healthy Vermonters living in healthy communities

Mission

Protect and promote the best health for all Vermonters

- 1 Effective and integrated public health programs
- 2 Communities with the capacity to respond to public health needs
- 3 Internal systems that provide consistent and responsive support
- 4 A competent and valued workforce that is supported in promoting and protecting the public's health
- 5 A public health system that is understood and valued by Vermonters
- 6 Health equity for all Vermonters

Provide access to reproductive health services

You may qualify for free family planning services.



The Immunization Program is working to prevent disease by ensuring high vaccination rates

Children 19-35 months

- 90% of all children have received 1 dose of MMR
- 76% have completed the series of 7 vaccines recommended for young children

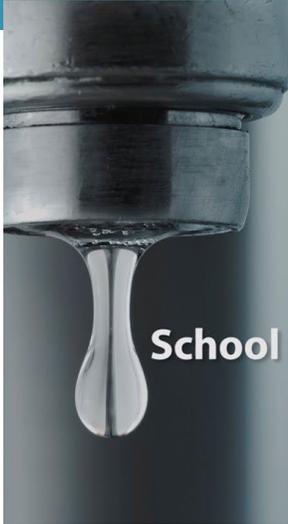
Teens 13-18 years

- 70% have received 1 dose of HPV vaccine and 56% are up-to-date
- Over 80% are up-to-date on Tdap, hepatitis B and MMR

The percentage of K-12 students in Vermont up-to-date on all required vaccines continues to rise:

- 90.8% (2012-13) -> 94.5% (2018-19)

Reduce exposure to toxins, especially among children.



Testing for lead
in drinking water:

School facilities manager training



VERMONT
DEPARTMENT OF HEALTH



Source: <https://leadresults.vermont.gov/>

Preserving our Children's Brains

- Lead in school drinking water
- A trio of laws to combat vaping
- A focus across state government on building resilience and preventing toxic stress
- Creation of Substance Misuse **Prevention Council**

Factors that Affect Health

*Smallest
Impact*



*Largest
Impact*



Examples

Condoms, eat healthy
be physically active

Rx for high blood
pressure, high
cholesterol

Immunizations, brief
intervention, cessation
treatment, colonoscopy

Fluoridation, 0g trans
fat, iodization, smoke-
free laws, tobacco tax

Poverty, education,
housing, inequality

Vermont – Healthiest State in US



Determinants rank #1 – We do very well in;

Health Behaviors = tobacco control, 3-4-50 measures (but not drug deaths or excessive alcohol)

Community Environment = air pollution, children in poverty, violent crime, low incidence Chlamydia (but not pertussis or occupational fatality rate)

Policy = immunizations and per capita public health funding, % uninsured

Clinical care = workforce (except dentists), % low birthweight

Outcomes rank #6

Positives: Reducing health disparities, low infant mortality rate

Negatives: Cancer deaths

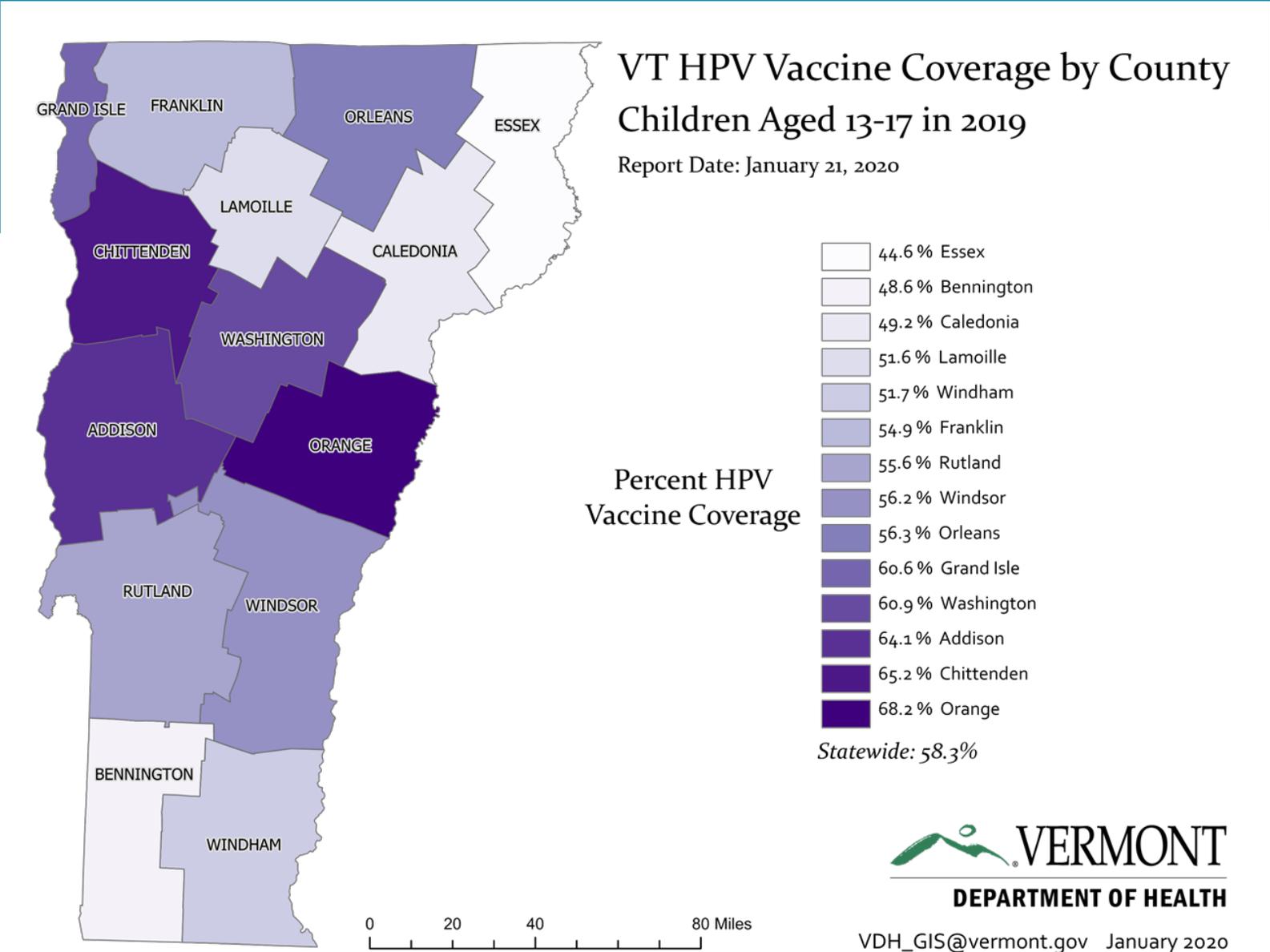
OVERALL STATE RANKING

This year's **healthiest** and **least healthy** states.



- #1 Vermont**
- #2 Massachusetts
- #3 Hawaii
- #4 Connecticut
- #5 Utah

- #46 Oklahoma
- #47 Alabama
- #48 Arkansas
- #49 Louisiana
- #50 Mississippi

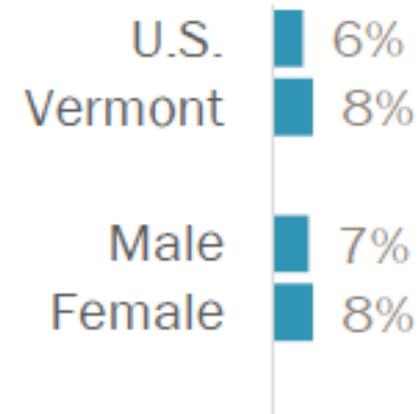


Alcohol Consumption – Heavy Drinking

One in twelve Vermont adults report drinking heavily in the last month (8%), significantly higher than 6% of U.S. adults.

- Heavy drinking is defined as more than two drinks per day for men and more than one drink for women.

Heavy Drinking Vermont Adults, 2018



In the United States, excessive alcohol use causes:

- 1 in 10 total deaths among working age adults (20-64)
- \$249 Billion in economic costs each year – about \$2.05 per drink
 - 40% of these costs borne by government

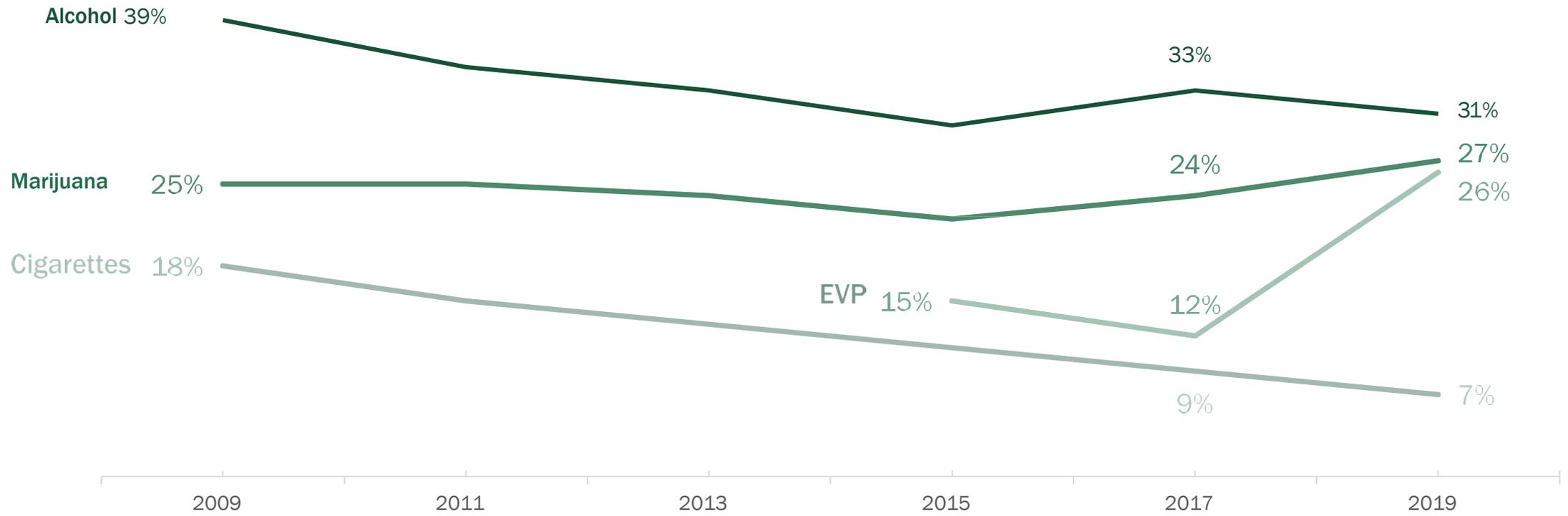
Source: <https://www.cdc.gov/chronicdisease/resources/publications/factsheets/alcohol.htm>

Substance Misuse Prevention Oversight and Advisory Council

1. Increase protective factors and build resilience and feelings of connectedness in Vermont communities, across all ages, cultures, and socioeconomic conditions.
2. Decrease risk factors for substance use in Vermont for individuals of all ages, cultures, and socioeconomic conditions.
3. Increase efficiency and collaboration on prevention efforts across all state, public, and private entities, through a consolidated and holistic approach to prevention that is sustainable, scalable, and equitable.

Current Alcohol, Tobacco, and Marijuana Use

Past 30 Day Alcohol, Marijuana, Cigarette, and EVP Use



HIGH SCHOOL Protective Factors

Family Connectedness

Nearly four out of five students (77%) ate dinner at home with a parent at least four times during the previous week.

School Connectedness

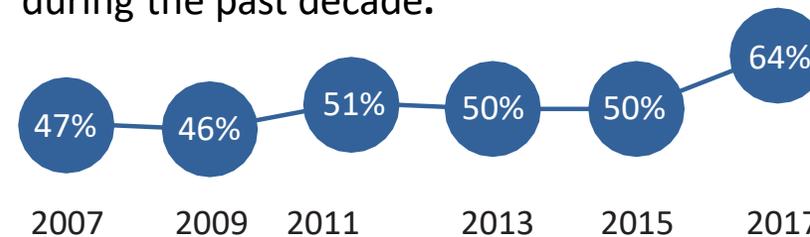
Four out of five students (80%) have at least one teacher or adult in their school they could talk to if they have a problem.

Constructive Use of Time

During a typical school week, 24% of students spend 10 or more hours participating in extracurricular activities such as sports, band, drama or other clubs. One-third (33%) are not involved in any extracurricular activities.

Community Connectedness

The percent of students who feel they matter in their community has significantly increased during the past decade.



Students of color and LGBT students are significantly less likely to feel that they matter in their community.

64%

All
Students

55%

Students
of Color

39%

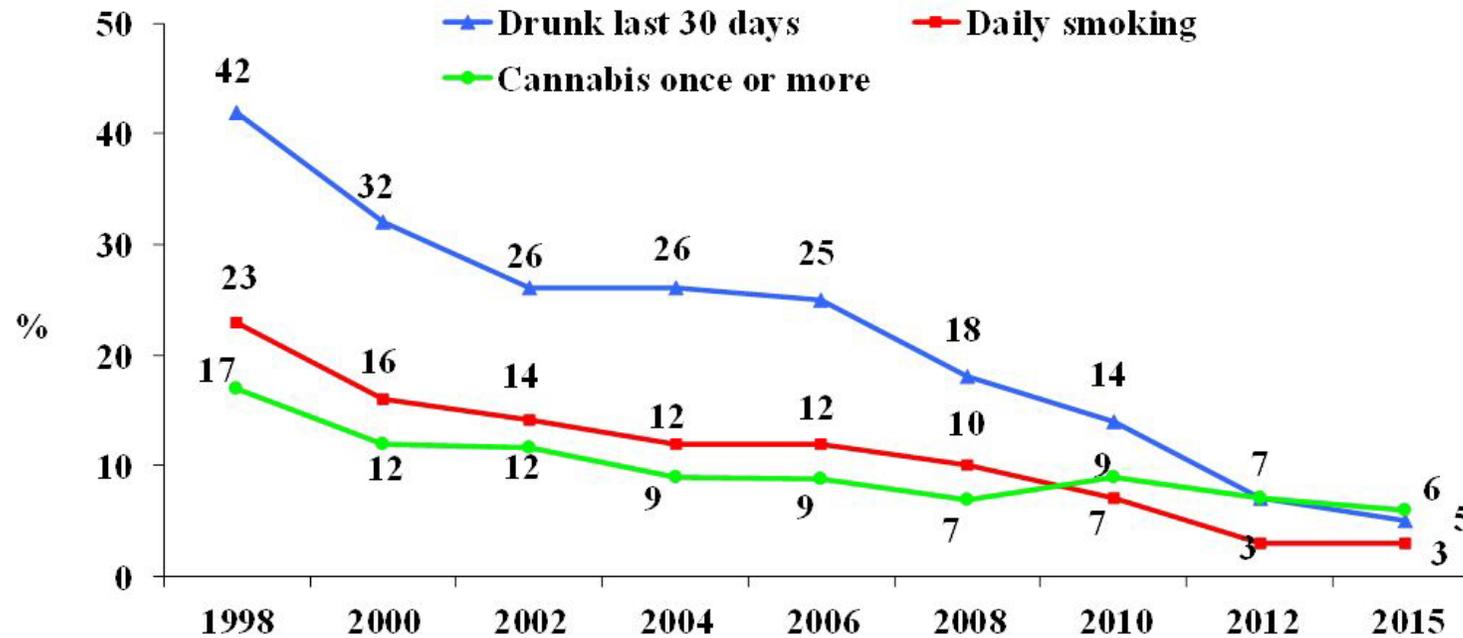
LGBT
Students

Universal Afterschool Network

- Built on successful model applied here and elsewhere
- Expands choices for every kid
- Supports parents

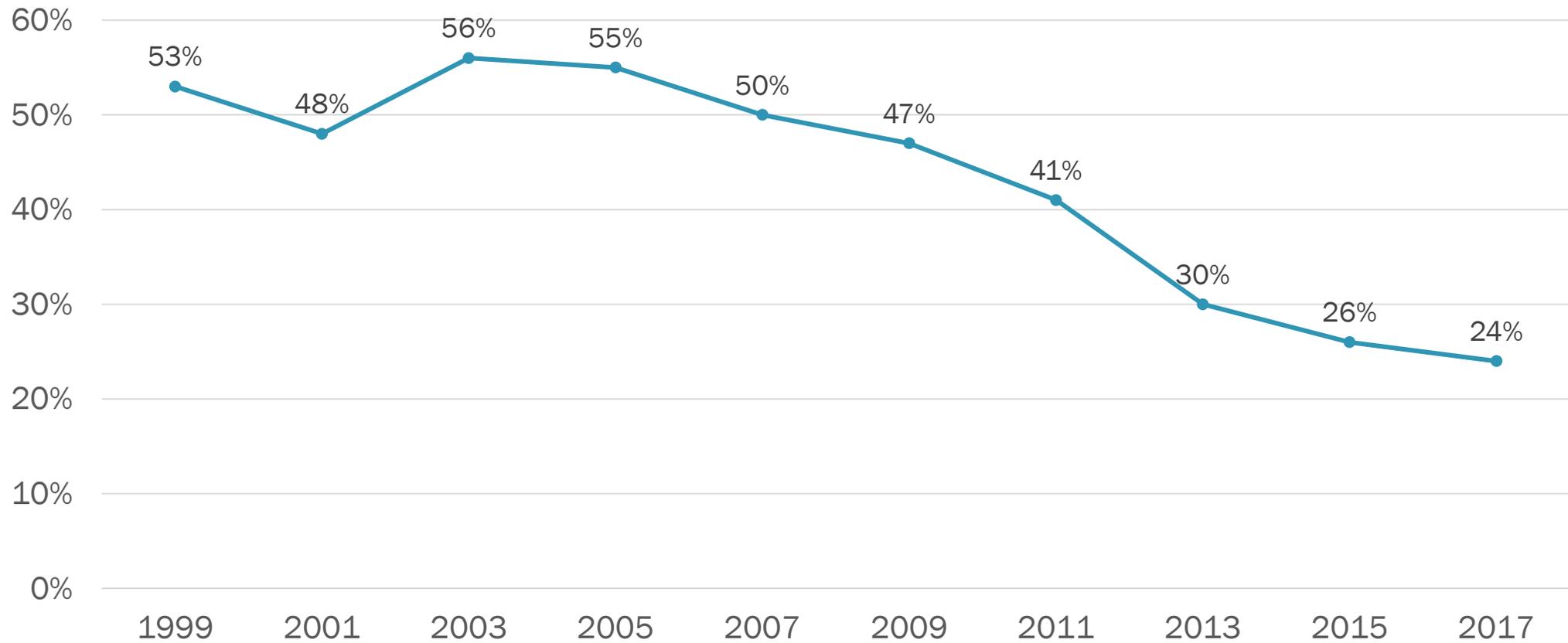
The Iceland Model

Substance use decrease amongst 15-16 year old adolescents

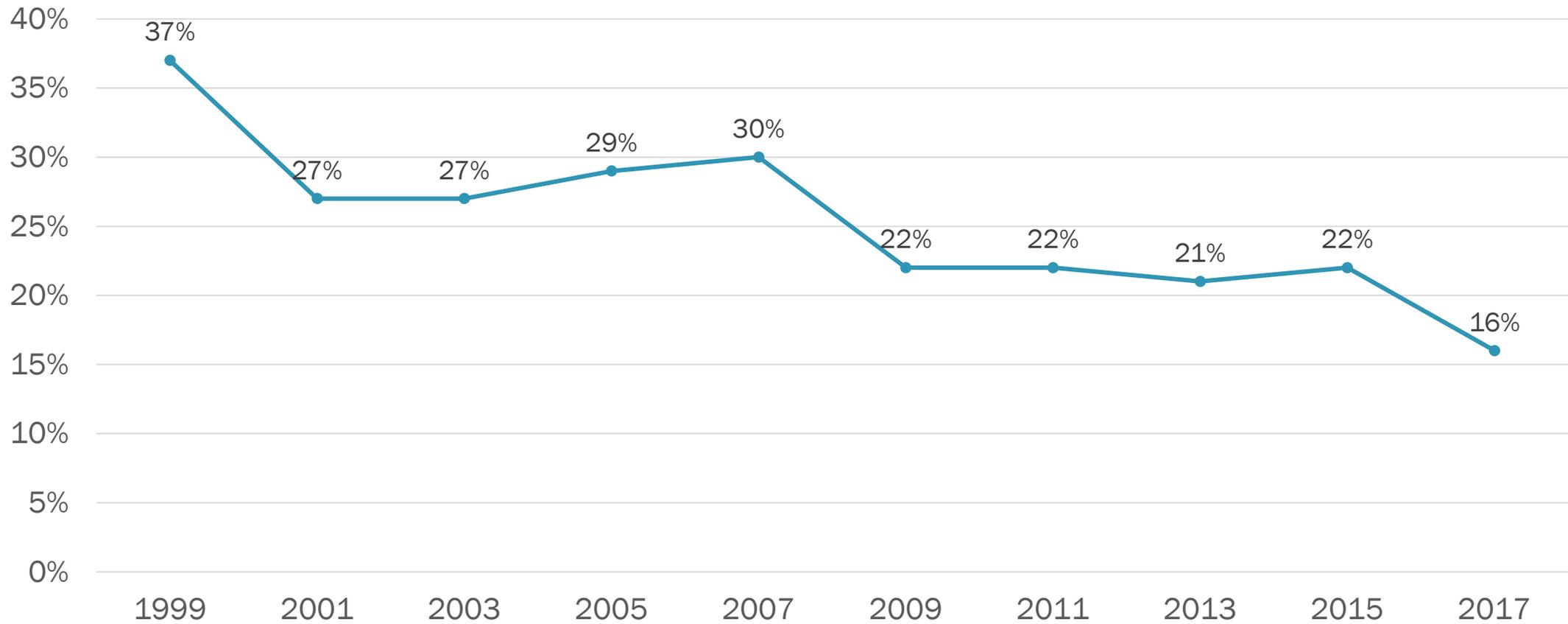


Source: StyleKristjansson, A. L., Mann, M. J., Sigfusson, J., Thorisdottir, I. E., Allegrante, J. P., & Sigfusdottir, I. D. (2019). Development and Guiding Principles of the Icelandic Model for Preventing Adolescent Substance Use. *Health Promotion Practice*.

Windham Southwest Supervisory Union YRBS Grades 9-12 Past 30 Day Alcohol Use 1999 - 2017



Windham Southwest Supervisory Union YRBS Grades 9-12 Past 30 Day MJ Use 1999 - 2017



Building Resilience and Primary Prevention of ACEs

- A focus on youth and families, a multigenerational approach, enhancing protective factors to strengthen Vermont families
- 5,600+ births per year
- Pediatric medical home family specialist screening for all new parents through DULCE and connecting to resources through CIS
- Vision: access to sustained evidence-based home visiting for all Medicaid families who could benefit
 - Nurse home visiting program
 - Family support home visiting program
 - For every \$1 spent, ROI in the \$3-5 range
 - Impact: child maltreatment, parental substance use, child health and school outcomes, family economic self-sufficiency

Sustained Home Visiting Proposal

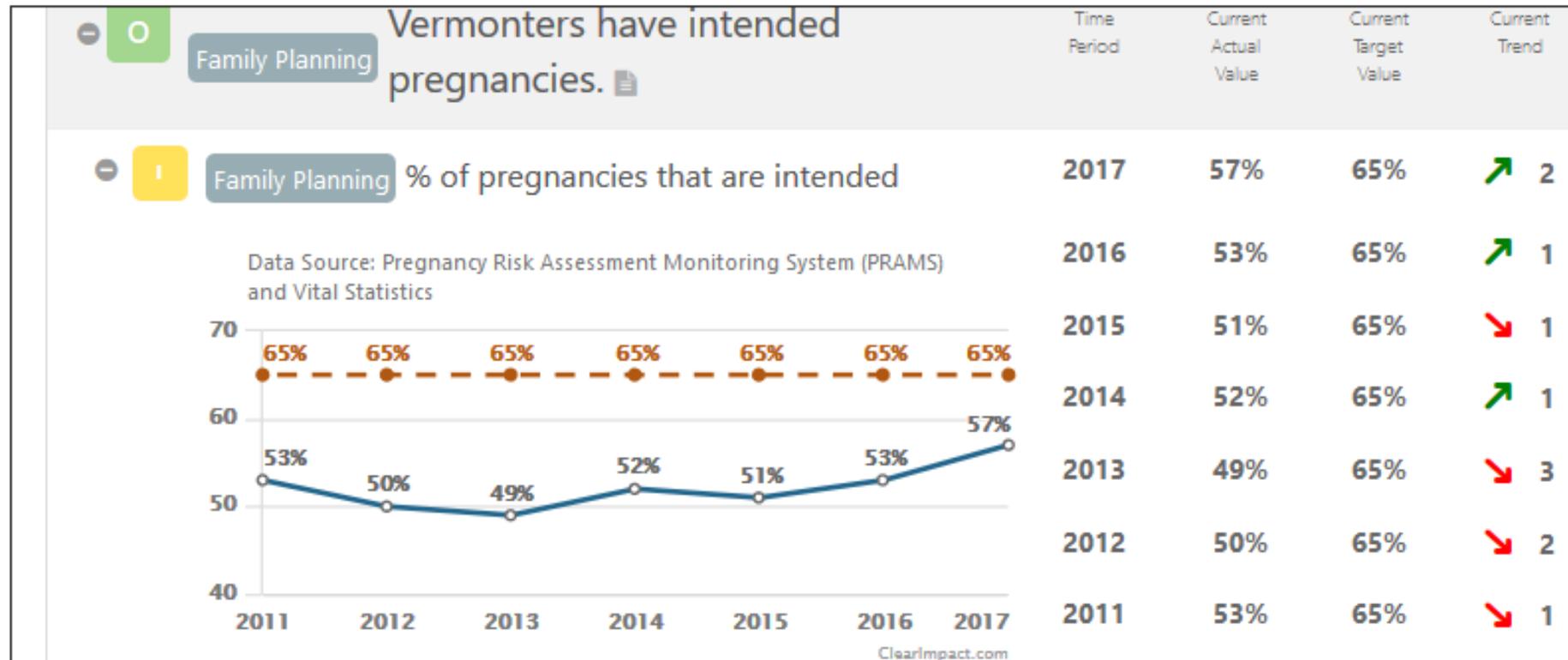


- Evidence based program shown to:
 - Improve maternal and child health,
 - Improve family economic self-sufficiency,
 - Promote optimal child development,
 - Prevent child abuse and neglect,
 - Reduce substance misuse,
 - Improve access to community resources.
- Current program funded by federal grant serves 325 families statewide.
- Governor's proposal would expand program statewide and serve 550 more families.

Evidence-based and Data-driven Public Health

FAMILY PLANNING SCORECARD

The scorecard reflects how we are doing to help women and families plan for a healthy pregnancy.



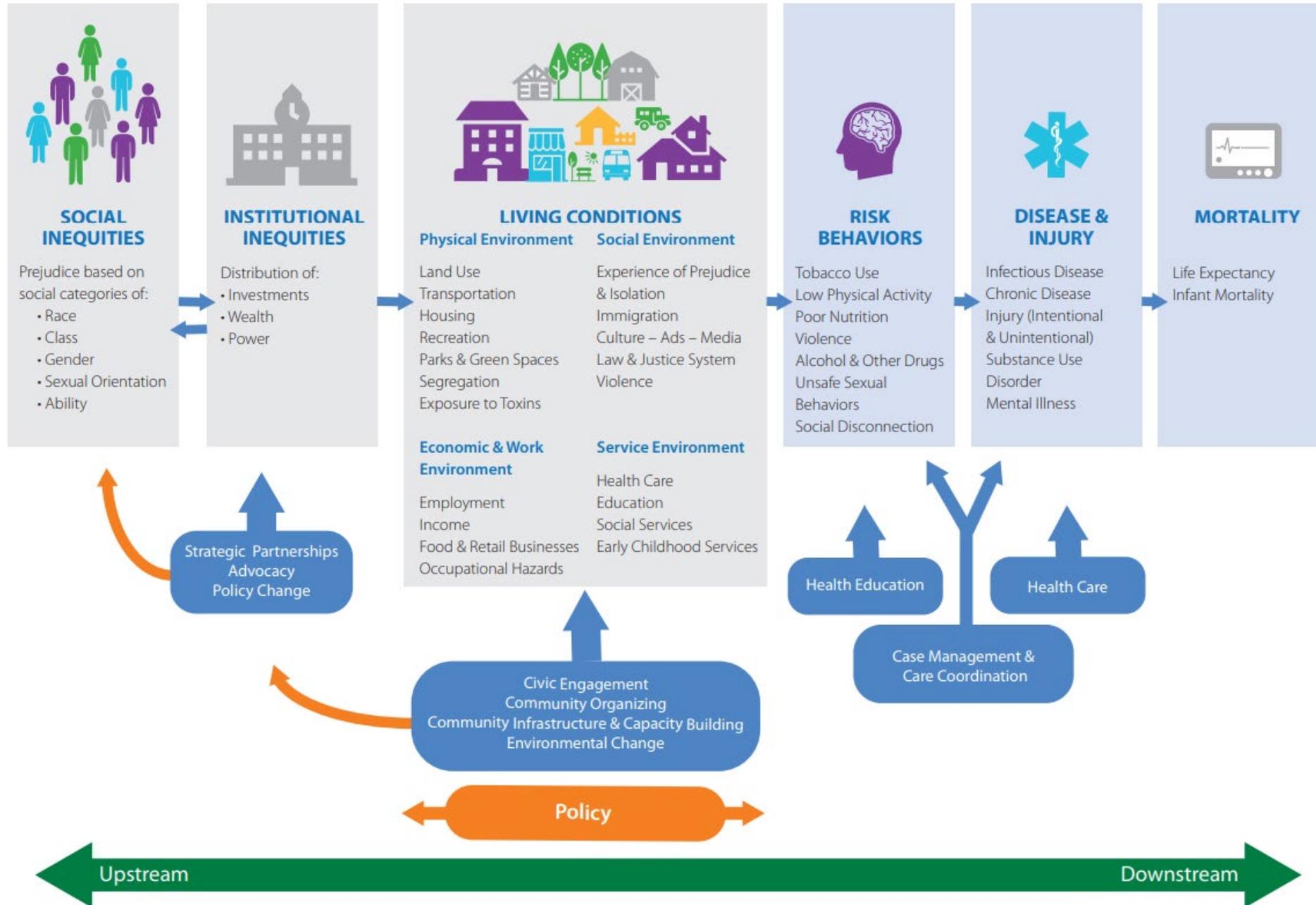
Importance of Health Equity



Health equity exists when all people have a fair and just opportunity to be healthy – especially those who have experienced socioeconomic disadvantage, historical injustice, and other avoidable systemic inequalities that are often associated with social categories of race, gender, ethnicity, social position, sexual orientation, and disability.

Source: [State Health Assessment 2018](#)

A Public Health Framework for Reducing Health Inequities



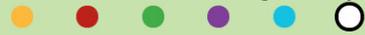
State Health Improvement Strategies

Invest in policies and infrastructure that create healthy communities - page 6.

Implement policies and promote norms that encourage physical activity and healthy eating, and discourage tobacco, alcohol, drug use/misuse.



Use health care reform and regulatory levers to support access to food, housing, transportation.



Expand housing and weatherization programs.



Form partnerships and shared investments to expand transportation services.



Expand community water fluoridation.



Invest in programs that promote resilience, connection and belonging - page 8.

Expand access to home visiting programs.



Promote the *Strengthening Families* system.



Expand opportunities such as mentoring, peer support and after-school programs for youth.



Implement strong school health and wellness plans, policies and programs.



Create community supports for people in recovery.



Implement *Zero Suicide* in health care systems.



Expand access to integrated person-centered care - page 10.

Integrate oral health, mental health, substance use disorder prevention into primary care.



Create a universal system for developmental screening and referrals for children and families.



Implement SBINS* for health behaviors, housing, transportation, food and economic security.



Integrate oral health into health care practice and other settings (nursing homes, schools, etc.).



Promote practice improvements and professional development for early care and learning providers.



* Screening, Brief Intervention & Navigation to Services

Adopt organizational and institutional practices that advance equity - page 12.

Meaningful community engagement • Equitable programs, policies and budgets • Respectful care and services • Informed actions and decisions

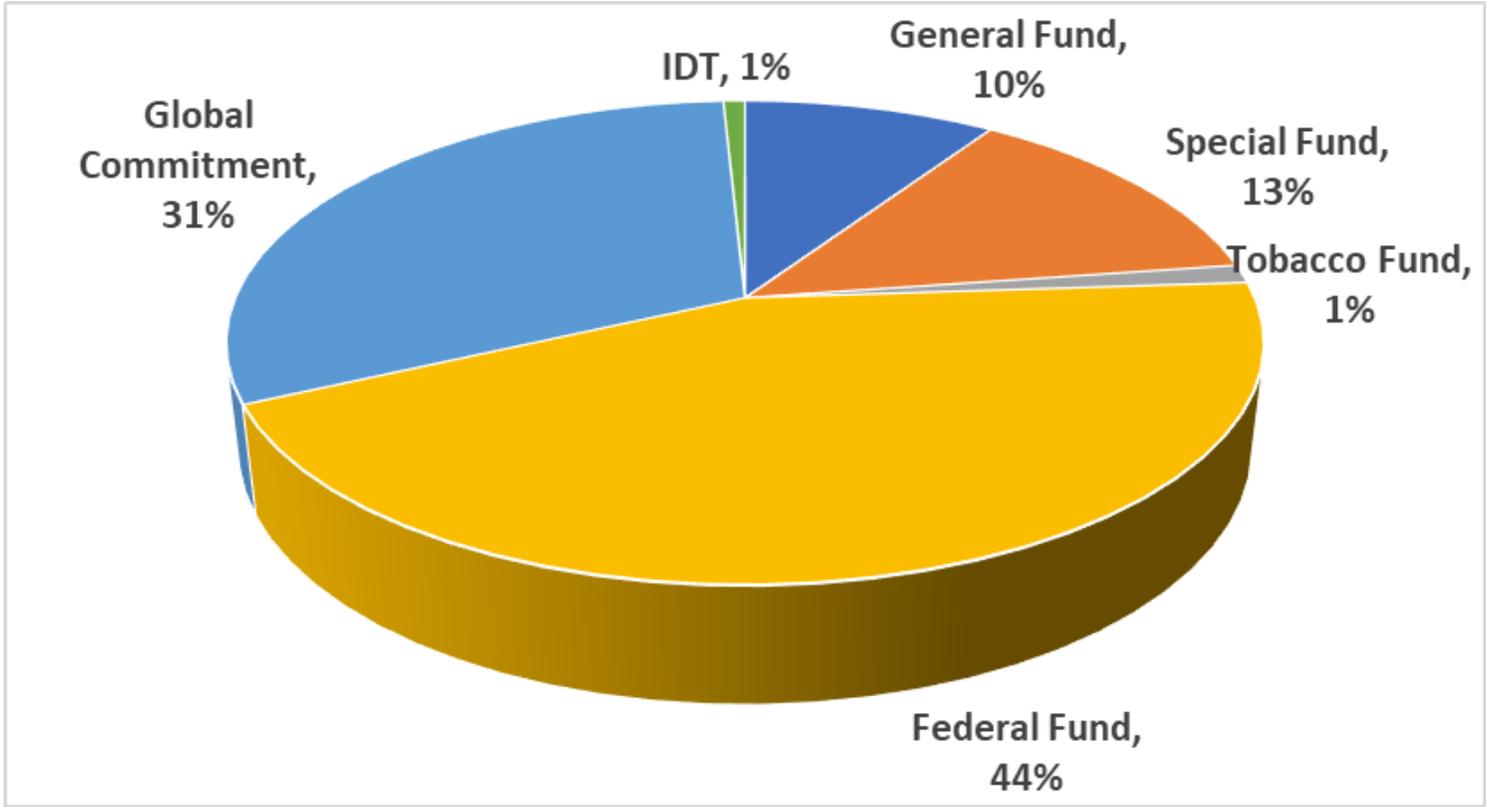


**Agency of Human Services
Vermont Department of Health
FY 2021 Governor's Recommend Budget**

Mission: To protect and promote the best health for all Vermonters.

FY 2021 SUMMARY & HIGHLIGHTS

Current service budget is funded
No reductions to programs, staff or services.



General Fund	\$ 15,547,422.00
Special Fund	\$ 22,126,114.00
Tobacco Fund	\$ 2,038,835.00
Federal Fund	\$ 73,183,810.00
Global Commitment	\$ 51,622,851.00
IDT	\$ 1,335,387.00
Total	\$ 165,854,419.00

Agency of Human Services - Department of Health

Fiscal Year 2021 Executive Budget Recommendation

FY21 Department Request - VDH							
ADMINISTRATION APPROPRIATION	GF	SF	IdptT	FF	Medicaid GCF	Invmnt GCF	TOTAL
VDH Admin & Support - As Passed FY20	2,867,817	1,824,499	91,218	7,063,414		3,510,576	15,357,524
Personal Services:							
Salary and Fringe Increase/(Decrease) - Existing Positions	46,923	(4,498)		(45,166)		13,029	10,288
Retirement Increase - Existing Positions	5,910	985		12,308		2,915	22,118
ISF Increase - Workers Compensation (505200)	40,516	10,363	605	65,032		18,968	135,484
Net Personal Services Expense Account Code Changes	20,992	19,772	818	10,032		(51,614)	0
							0
							0
Operating Expenses:							0
ISF Increase - VISION (516671)	13,672	6,165	228	25,344		7,392	52,801
ISF Increase - Communications and Info Tech (ADS) (516685)	16,021	6,565	405	29,042		8,471	60,504
ISF Increase - Property and Commercial Insurance (516000)	2,420	580	40	3,840		1,120	8,000
ISF Increase - State Liability (GL) (516010)	11,579	4,931	241	21,158		6,171	44,080
ISF Increase - Human Resources (519006)	8,623	3,280	168	15,249		4,448	31,768
SLA Increase - ADS (516660)	119,962	29,439	957	189,927		55,395	395,680
Net Operating Expense Account Code Changes	19,382	151,520	901	(76,034)		(95,769)	0
							0
Grants:							0
							0
FY21 Changes	306,000	229,102	4,363	250,732	0	(29,474)	760,723
FY21 Gov Recommended	3,173,817	2,053,601	95,581	7,314,146	0	3,481,102	16,118,247

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Personal Services:									
Salary and Fringe Increase/(Decrease) - Existing Positions	422,734	193,471		73,193		(435,142)		(74,371)	179,885
Retirement Increase - Existing Positions	39,684	18,288		2,369		111,014		35,660	207,015
Salary and Fringe Increase - New Positions						489,744			489,744
Retirement Increase - New Positions						2,179			2,179
Salary and Fringe Shift - NRC Agreement State Revenue	(100,126)	100,126							0
Net Personal Services Expense Account Code Changes	182,719	148,775		15,317		375,000		208,785	930,596
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Operating Expenses:									0
ISF Decrease - Fee for Space (515010)	(5,235)	(1,165)				(14,000)		(6,709)	(27,109)
Net Operating Expense Account Code Changes	440,324	76,305		3,820		614,398		519,337	1,654,184
									0
Grants:									0
Sustained Home Visiting for Newborns							2,192,502		2,192,502
FY21 Changes	980,100	535,800	0	94,699	0	1,143,193	2,192,502	682,702	5,628,996
FY21 Gov Recommended	11,139,267	18,766,447	1,088,918	1,239,806	25,000	47,378,000	3,123,935	12,819,624	95,580,997

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Sustained Home Visiting for Newborns							2,192,502		2,192,502
FY21 Changes	980,100	535,800	0	94,699	0	1,143,193	2,192,502	682,702	5,628,996
FY21 Gov Recommended	11,139,267	18,766,447	1,088,918	1,239,806	25,000	47,378,000	3,123,935	12,819,624	95,580,997

Agency of Human Services - Department of Health Fiscal Year 2021 Executive Budget Recommendation

FY21 Department Request - VDH									
Public Health Appropriation	GF	SF	Tob	IdptT	Ptrust	FF	Medicaid GCF	Invmnt GCF	TOTAL
As Passed FY20	10,159,167	18,230,647	1,088,918	1,145,107	25,000	46,234,807	931,433	12,136,922	89,952,001
Personal Services:									
Salary and Fringe Increase/(Decrease) - Existing Positions	422,734	193,471		73,193		(435,142)		(74,371)	179,885
Retirement Increase - Existing Positions	39,684	18,288		2,369		111,014		35,660	207,015
Salary and Fringe Increase - New Positions						489,744			489,744
Retirement Increase - New Positions						2,179			2,179
Salary and Fringe Shift - NRC Agreement State Revenue	(100,126)	100,126							0
Net Personal Services Expense Account Code Changes	182,719	148,775		15,317		375,000		208,785	930,596
									0
									0
Operating Expenses:									0
ISF Decrease - Fee for Space (515010)	(5,235)	(1,165)				(14,000)		(6,709)	(27,109)
Net Operating Expense Account Code Changes	440,324	76,305		3,820		614,398		519,337	1,654,184
									0
Grants:									0
Sustained Home Visiting for Newborns							2,192,502		2,192,502
FY21 Changes	980,100	535,800	0	94,699	0	1,143,193	2,192,502	682,702	5,628,996
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Agency of Human Services - Department of Health Fiscal Year 2021 Executive Budget Recommendation

FY21 Department Request - VDH							
ADAP Appropriation	GF	SF	Tob	FF	Medicaid GCF	Invmnt GCF	TOTAL
As Passed FY20	1,946,686	1,170,177	949,917	17,574,970	28,909,288	5,606,801	56,157,839
Personal Services:							
Salary and Fringe Increase/(Decrease) - Existing Positions	(215,169)	(17,518)		242,059			9,372
Retirement Increase - Existing Positions	1,946	1,722		16,559			20,227
Salary and Fringe Increase - New and Reallocated Positions		104,945		498,608			603,553
Retirement Increase - New and Reallocated Positions		490		2,352			2,842
Operating Expenses:							0
Net Operating Expense Account Code Changes	8,000	21,250		157,116			186,366
							0
Grants:							0
Recovery Center Funding Shift	(165,000)					165,000	0
SUD Treatment Cost Shift - Medicaid to Medicare					(1,950,024)		(1,950,024)
Adjustment for Reduced SUD Treatment Utilization	(342,125)					(532,875)	(875,000)
FY21 Changes	(712,348)	110,889	0	916,694	(1,950,024)	(367,875)	(2,002,664)
FY21 Gov Recommended	1,234,338	1,281,066	949,917	18,491,664	26,959,264	5,238,926	54,155,175

Agency of Human Services - Department of Health Fiscal Year 2021 Executive Budget Recommendation

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