

Health Care Reform Work Group: Subgroup on System Stabilization

JULY 26, 2022 MEETING SUMMARY

Revised Principles to Guide Solutions Discussion

1. Invest in strategies focused on high-value care that align with our long-term health care reform goals and objectives.
2. Work to balance cost with needed care for Vermonters, and to align revenue with access to necessary care.
3. Be predictable and flexible, measure outcomes, and adapt strategies if not achieving agreed-upon goals.
4. Maintain or improve quality of care and access, including making it possible for patients to receive care in the most appropriate setting possible, which may mean evolving how and where care is provided.
5. Strengthen primary care, mental health, post-acute and long-term care.

Meeting Focus: Challenges with Patient Flow

Identified challenges:

1. Difficulty discharging complex patients, especially those with mental health disorders and substance use disorders
2. Difficulty placing low acuity patients due to decreased bed availability associated with staffing shortages
3. High-intensity staffing requirements in a restraint-free environment when serving patients with violent behaviors and/or dementia
4. Limited access to pain management specialists for patients who recently has surgery

Solutions Discussion: Patient Flow

1. Foster conversations between Designated Agencies and hospitals to reach agreement on crisis response

- Rationale: Communication could improve patient flow.
- Come to agreements for crisis response at a local level
- Address the medical director issue; engage OneCare in the discussion
- Conduct a feasibility study for a pilot with Woodridge, Helen Porter and UVMMC

2. Clarify statewide use of force policy

- Rationale: Clarifications will help law enforcement understand their role in crisis response and better coordinate with behavioral health teams.
- Lack of clarity impacts law enforcement and their ability to respond with crisis teams effectively

Solutions Discussion: Patient Flow

3. Consider rule and methodology changes for special provisions for Medicaid rates.

- Rationale: More flexible special provisions for rates could support provider financial stability.
- *DVHA to review*

Other Solutions Discussion Ideas

1. Provide support along the entire continuum of crisis care
2. Address access for Medicaid-pending patients
 - Accepting pending individuals affects provider cash flow and pending status can result in patients being turned away
3. Staffing, training, and regulation around elder care
 - e.g., geriatric psychiatry