

Valley Vista:

Conversion of 14 youth beds licensed by DCF to 14 adult beds licensed as Therapeutic Community Residence (TCR) beds by DAIL

GMCB-005-19con

- Green Mountain Care Board address: 144 State St., Montpelier, VT 05602. My number: 802-828-2918.
- Send applicant a copy of: VUO and financial tables.

Project Overview

Program Description:

Valley Vista is a 99-bed inpatient addiction treatment program for men and women suffering from substance use disorder often complicated by co-occurring mental health conditions. Valley Vista Bradford is an 80-bed alcohol and substance use treatment center located in Bradford, Vermont ("Valley Vista Bradford"). Valley Vista Bradford is licensed as a Therapeutic Community Residence for 66 adult beds from DAIL and licensed for 14 residential beds by DCF. Valley Vista Vergennes is a 19-bed alcohol and substance use treatment program located in Vergennes, Vermont ("Valley Vista Vergennes"). Valley Vista is part of a larger organization, Meridian Behavioral Health (MBH), which includes residential and outpatient treatment for substance use disorder and/or substance user disorder/mental health disorders, psychiatric treatment programs, lab processing, and medication assisted therapy. MBH is based out of New Brighton, MN and has facilities in Minnesota, North Dakota, Vermont, Maryland, and Louisiana.

Recognizing the individual needs of every patient, each gender-specific program makes use of multiple, evidence-based therapeutic modalities including health realization, Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Seeking Safety, Smart Recovery, 12-Step programming and the Seven Challenges. Humility, acceptance and accountability underscore the work we do and service we provide to those seeking a life of enduring recovery. Each patient is treated with respect, dignity, anonymity and validation in an intimate, safe and therapeutic environment. With two beautiful Vermont locations, in Bradford and Vergennes, Valley Vista offers recovery from addiction in humble and tranquil settings.

Each Valley Vista program, whether men's or women's, is designed to provide treatment in an intimate, safe and secure therapeutic environment offering an assurance of anonymity, respect, dignity and validation for all program participants served. Each residential treatment program offers services from withdrawal management to discharge and comprehensive aftercare planning, ensuring program participants have a continuum of care that supports enduring recovery. Valley Vista residential programs are well-structured and feature a dedicated staff including a Program Director, Primary Therapists, Primary Therapist in Training, Continuing Care Specialists and 24-hour / 7 days-a-week floor supervision by trained recovery specialists, some of whom are certified recovery coaches. The Valley Vista board-certified psychiatrist is integrated as a part of each program.

Program Services:

Program Services:	Provider:
Medically supervised detoxification	MD, APRN, RN, LPN, LADC, Counselors, Recovery Specialists
24/ 7 residential care	MD, APRN, RN, LPN, LADC, Counselors, Recovery Specialists
Mental health services for the treatment of co-occurring conditions	MD, APRN, RN, LPN, LADC, Counselors, Recovery Specialists
Medical services provided by 24/ 7 nursing staff supported by licensed medical providers	MD, APRN, RN, LPN, LADC, Counselors, Recovery Specialists
Individualized comprehensive treatment plans	LADC, Counselor
Individual therapy / counseling	LADC, Counselor
Family / relationship therapy	LADC, Counselor
Recovery-focused groups and discussion lead by clinical staff, self-directed by patients, and outside 12-Step based facilitators	Counselors, LADC, Recovery Specialist and outside speakers/providers
Group therapy	MD, APRN, RN, LPN, LADC, Counselors, Recovery Specialists
Cognitive Behavioral Therapy	LADC, counselor
Psycho-education groups	MD, APRN, RN, LPN, LADC, Counselors, Recovery Specialists
Insight to spirituality	LADC, Counselors, Recovery Specialists
Therapy dog services provided by trained canine handlers	Contracted offsite volunteer
Anger management	LADC, Counselors, Recovery Specialists
Expressive therapies	LADC, Counselors, Recovery Specialists
Insight into accountability	LADC, Counselors, Recovery Specialists
Yoga provided by staff and outside certified instructors, two-times weekly	Contracted offsite
Twice-monthly meetings by Vermont Recovery Network	Vermont Recovery Network
Specialized dietary services for diabetes, vegetarian, vegan, and as needed or prescribed	METZ contractors
Comprehensive post-completion aftercare planning managed by the Continuing Care Specialist in collaboration with each patient and Primary Therapist	Continuing Care Specialists, LADC, Counselors

Proposed Changes

Valley Vista Bradford has discontinued its adolescent treatment program and is requesting to convert its 14 DCF licensed residential beds to 14 DAIL Therapeutic Community Residence licensed, adult, residential beds. This change would allow us to reallocate our resources to address the high demand for adult substance abuse treatment in Vermont. This conversion is supported by DCF and ADAP, as it is in alignment with the current treatment needs in the state of Vermont.

Timeline for Changes:

Valley Vista Bradford is ready to implement the changes as soon as the CON is approved.

Statutory Criteria and HRAP Standards

- 1. Proposed project aligns with statewide health care reform goals and principles because the project:**
 - A. takes into consideration health care payment and delivery system reform initiatives;**
We are offering withdrawal management and substance abuse treatment services at the appropriate level of care.
 - B. addresses current and future community needs in a manner that balances statewide needed (if applicable); and**
We are increasing our capacity for adult substance abuse residential treatment by 14 beds, which will allow us to decrease the time it takes to access treatment.
 - C. is consistent with appropriate allocation of health care resources, including appropriate utilization of services, as identified in the HRAP pursuant to section 9405 of this title.** Serving more patients at a residential level of care will decrease costs that would be spent treating these individuals in a hospital setting.

CON STANDARD 4.4: Applications involving substance abuse treatment services shall include an explanation of how such proposed project is consistent with the Department of Health's recommendations concerning effective substance abuse treatment or explain why such consistency should not be required.

On April 5, 2019, Valley Vista leadership met with Megan Mitchell, Director of Clinical Services with Vermont Department of Health Division of Alcohol and Drug Abuse Programs, and Cynthia Seivwright, Division Director with Vermont Department of Health Division of Alcohol and Drug Abuse Programs. During this meeting, both Ms. Mitchell and Ms. Seivwright acknowledged that they are in support of Valley Vista's plan to increase capacity for adult beds by 14, dissolving the DCF license, and requesting DAIL to license the 14 beds.

CON STANDARD 4.5: To the extent possible, an applicant seeking to implement a new health care project shall ensure that such project supports further integration of mental health, substance abuse and other health care.

Not Applicable. Valley Vista is not implementing a new program, only increasing capacity of an existing program.

CON STANDARD 4.6: Applicants for mental health care, substance abuse treatment or primary care related certificates of need should demonstrate how integration of mental health, substance abuse and primary care will occur, including whether co-location of services is proposed.

Valley Vista offers a comprehensive biopsychosocial assessment in which all dimensions are reviewed and evaluated. From this we complete a comprehensive treatment plan that is individualized to each patient that reviews all biopsychosocial factors that can be addressed while in treatment in addition to them working with the continued care specialist to create a transition plan that allows the patients to continue to address the needs while in outpatient. It is noted, we also complete a history and physical and this will provide a direction for the medical care that a patient may need, some of which can be supported while in treatment and some in which we refer to the local health clinic to address. We do have an OBGYN that comes to site at VV Wednesdays to address patient needs.

Triple Aims: Institute of Healthcare Improvement (IHI), Triple Aims: Explain how your project is:

(a) improving the individual experience of care; Providing withdrawal management and substance abuse treatment services in a residential setting will give individuals a more comfortable, appropriate environment than they would receive in a hospital setting.

(b) improving health of populations; We are increasing our capacity for adult substance abuse residential treatment by 14 beds, which will allow us to treat more individuals seeking care.

(c) reducing the per capita costs of care for populations. Providing services at the residential level of care is less costly and more appropriate setting than the hospital level of care.

2. The cost of project is reasonable because each of the following conditions is met:

- A. The applicant's financial condition will sustain any financial burden likely to result from completion of the project;** There will be no financial burden associated with this change, as the facility is merely requesting to replace adolescent licensed beds with adult licensed beds. Valley Vista expects to see an increase in Medicaid and Commercial and a decrease in Self Pay with the conversion; however, no decrease in total revenue is expected.
- B. The project will not result in an undue increase in the costs of medical care or an undue impact on the affordability of medical care for consumers. In making a finding, the Board shall consider and weigh relevant factors, including:**
- (i) The financial implications of the project on hospitals and other clinical settings, including the impact on their services, expenditures and charges; and**
There will be no financial burden associated with this change, as the facility is merely requesting to replace adolescent licensed beds with adult licensed beds.
 - (ii) Whether the impact on services, expenditures, and charges is outweighed by the benefit of the project to the public;**
Providing services at the residential level of care is less costly and more appropriate setting than the hospital level of care, which is not an appropriate setting.
- C. Less expensive alternatives do not exist, would be unsatisfactory, or are not feasible or appropriate.**
Providing services at the residential level of care is less costly and more appropriate setting than the hospital level of care, which is not an appropriate setting.
- D. If applicable, the applicant has incorporated appropriate energy efficiency measures.** N/A
3. **There is an identifiable, existing, or reasonably anticipated need for the proposed project that is appropriate for the applicant to provide.** Valley Vista currently has a waitlist for adult males seeking treatment for substance use disorder. By increasing capacity for adult males, individuals in need of treatment will have a shorter wait to access services.
4. **The project will improve the quality of health care in the State or provide greater access to health care for Vermont's residents, or both.** Valley Vista currently has a waitlist for adult males seeking treatment for substance use disorder. By increasing capacity for adult males, individuals in need of treatment will have a shorter wait to access services. In addition, providing services at the residential level of care is less costly and more appropriate setting than the hospital level of care, which is not an appropriate setting.

5. **The project will not have an undue adverse impact on any other existing services provided by the applicant.** The Project will not have an undue adverse impact as we stated prior due to switching the DCF license for DAIL license with the staff already allocated into the plan from the previous licensed program.
 6. ***REPEALED*** N/A
 7. **The applicant has adequately considered the availability of affordable, accessible transportation services to the facility, if applicable.** This does not apply as we are simply converting licensing beds with no location change.
 8. **If the application is for the purchase or lease of new Health Care Information Technology, it conforms with the Health Information Technology Plan established under section 9351 of this title.** Valley Vista, uses Procentive, a web-based EHR system for the management of patient documentation. Valley Vista will continue using Procentive to manage patient documentation for the additional 14 DAIL licensed beds.
 9. **The applicant must show the project will support equal access to appropriate mental health care that meets the Institute of Medicine's triple aims. 18 V.S.A. § 9437(9).** As explained in the program overview, we offer integrated services for MH and SA through individual, group, skills, psych for the wellbeing of all of our patients.
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