Vermont Department of Health: Substance Use Disorder System of Care Enhancement

Recovery Support Services (RSS) Initiative
Monthly Recovery Center Director Touchpoint

November 6, 2025

VERMONT
DEPARTMENT OF HEALTH

Agenda

- Welcome
- Overview of Proposed Meeting Plan January – April 2026
- October Meeting Follow-ups
- Next Steps for RSS Medicaid Budgeting and Rate-Setting
- Organizational Change Management Discussion: Communicating Change
- Closing

Overview of Proposed Meeting Plan
January – April 2026

Proposed Meeting Plan January – April 2026

The visual below depicts a proposed meeting plan for the beginning of 2026

January 2026	February 2026	March 2026	April 2026
			
RCD Touchpoint Virtual 1 Hour	**RCD Touchpoint** Virtual 1 Hour	**Q&A Session** Virtual 30 Minutes	**RSS Meeting** In-Person Half or Full Day

Formats

RCD Touchpoint: Typical monthly meeting that includes updates from VDH, change management support, and discussion of key RSS topics
Q&A Session: Open forum for Centers to bring questions from prior meetings or from review of training materials
RSS Meeting: Similar to meetings held in Waterbury in January and October this year; includes space for collaboration as well as presentation from VDH

October Meeting Follow-ups

October Meeting Follow-ups

Recovery Partners of Vermont (RPV) held their fourth annual conference October 21-22, 2025

<u>Discussion Questions:</u>

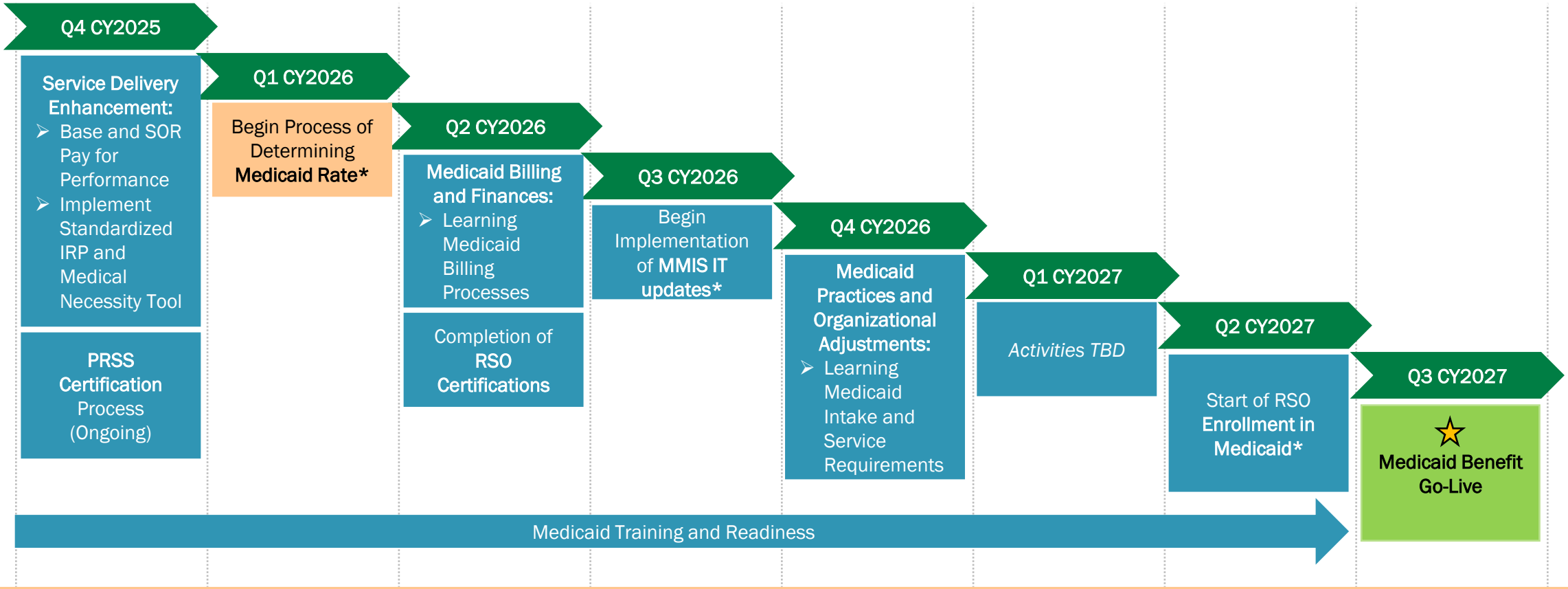
1. What are your **main takeaways** from the RPV conference?

2. What, if any, additional opportunities have you had to have collaborative discussions since the October 8th meeting?

Thank you for your feedback on the October 8th RSS meeting! From the event evaluations, we understand that two focus areas moving forward are thinking about **data systems** (RDP; EMRs) and deepening understanding of **process and budget changes** related to Medicaid billing and reimbursement.

Next Steps for RSS Medicaid Budgeting and Rate-Setting

Rate-setting in Context of Draft High-Level Timeline



- The RSS rate-setting process will be carried out in coordination with the Department of Vermont Health Access (DVHA) Payment Reform unit. The Department of Health will make informed recommendations to develop the rate.
- The Department of Health, in coordination with AHS Medicaid Policy, must ensure that the RSS Medicaid budget does not exceed available State Medicaid funds, and the State will need to periodically review and update the RSS Medicaid rate in the future.

**Activity involves significant coordination with entities outside of the Department of Health and timeframes represented here are estimates provided for educational purposes.*

RSS Medicaid Budgeting Process

During the October RSS meeting, the Health Department shared the following draft RSS Medicaid rate and budget, along with key assumptions about the number of individuals served and number of sessions per participant

- Having had time to reflect over the last few weeks, do you have any **additional feedback** on the draft budget to share with the Department at this time?
- For those who have been able to **collect Center data about the number of individuals served and average number of sessions per participant**, do you have any **insights** to share that may adjust the assumptions used here?
- To ensure that the Health Department can have informed conversations around rate-setting and budget projections, please be sure to share your data on number of individuals served and average number of sessions per participant by **Monday, 11/17** using the form here

Category	Amount
Average Rate per Hour	$49.34
# Served	3,107
Number of Sessions (# served multiplied by 6 average coaching sessions per participant)	18,642
Estimated Annual Budget Across all 12 RSOs	**$919,796**

Organizational Change Management: Communicating Change

Organizational Change Management

As the Department of Health engages Recovery Centers to implement new requirements (e.g., RSO Standards, PRSS Certification requirements, Medicaid service delivery tools), it is critical that information and updates are shared across the organization

In breakout groups, discuss the following questions. Then, we will come back together to share:

1. What processes are you currently using to ensure that **decisions made with the Department of Health are communicated** throughout your organization? What is working or not working?

2. How have you communicated to your staff thus far about requirements related to implementation of **Individualized Recovery Plans (IRPs) and medical necessity questions**?
   a) At what frequency and through what process are **supervisors currently reviewing IRPs** at your Center? What are they finding in these reviews?