

Immunizations S199

The bill S.199, introduced by Senator Mullin, removed the philosophical exemption to the requirement that all children entering public school or a registered childcare center receive all recommended vaccines. Voices for Vermont's Children supported this bill as the most immediate and effective way to reverse Vermont's declining immunization rates. This bill passed through the Senate in early March with a vote of 25-4.

The House Committee on Health Care significantly amended the bill to keep the philosophical exemption in place. Members of this committee and many House Representatives in general felt that the removal of the philosophic exemption to vaccination would have been a significant reduction of parental rights. Furthermore, many remain uncertain whether the philosophical exemption is the primary cause of our dropping vaccination rate. Instead, the House bill called for more parental education around the risks and benefits of vaccination and additional fall reporting requirements for schools and childcare centers regarding the vaccination rates of their student body. After significant and contentious debate on the floor, the amended bill passed 130-3, keeping the philosophical exemption to vaccination in tact.

Voices for Vermont's Children supported the new data requirements in the House amendments which required schools and childcare centers to report vaccination data for their entire student body, disaggregated by vaccination type and, in cases where an exemption was claimed, by exemption. While this alone will not improve Vermont's vaccination rates, Voices for Vermont's Children sees it as a first step to clearly indicate the cause of our dropping rates and provide the evidence we need to take successful action in the future. However, Voices for Vermont's Children did not support the September deadline for this reporting requirement and successfully advocated for the additional information to be added to the existing reporting requirements, which are collected by the Department of Health on January 1st.

A conference committee was convened and compromised on a bill that looked very much like House version. Its main substantive points include:

1. Schools must make their rates available to the public for each required vaccination.
2. Schools must submit vaccination information for their entire student body to the department of health every year on January 1st. The department of Health will analyze this information both by vaccine type as well as, in cases where a student is not immunized, by the exemption claimed.
3. Children who are in the process of being immunized, but are not up to date, will be permitted to stay in school or in their childcare facility without a required immunization for up to six months.

4. The philosophical exemption remains intact, but the name of the exemption is changed to personal conviction.
5. Parents and guardians who wish to exercise their personal conviction not to vaccinate, must do so every year and sign a statement acknowledging that they have received educational information regarding vaccination, and that they understand that their choice puts not only their child, but also other children, at greater risk of contracting preventable infectious diseases.
6. A work group was created to study how immuno-compromised students and students with special health needs can be protected in cases where the school in their district has a low vaccination rate and to study the feasibility of permitting them to attend schools outside their district of residence.
7. A 90% threshold for MMR (measles, mumps, rubella), and Tdap (tetanus, diphtheria, pertussis) or Dtap (diphtheria, tetanus, pertussis). If statewide rates fall below 90% for those immunizations, the Department of Health would suspend the personal conviction for the indicated immunization for three years. (note: this was removed in the final version)

Voices for Vermont's Children supported this compromise.

In the final week of the session, however, it became clear that the House was not going to pass the conference committee amendment that set the 90% threshold. In response to this, an amendment was proposed by Representative Mike Fisher to remove that piece of the bill. The bill then passed with strong support in both bodies. While the removal of the 90% threshold was a disappointment, Voices for Vermont's Children advocated for its removal in order to pass the bill and improve Vermont's vaccination data. We celebrate the passage of S.199 as an important first step in understanding and solving Vermont's serious problem with declining vaccination rates.

Juvenile Jurisdiction H.751

H.751, which passed in the final week of the session, is intended to enhance opportunities to treat youths ages 16 and 17 as juveniles in the family division of the superior court by extending the age of jurisdiction beyond 18, while preserving the discretion of the state's attorneys to bring criminal charges in appropriate cases. Voices for Vermont's Children supported this bill because research and evidence show that young people prosecuted as juveniles are much more likely to receive the services necessary for their rehabilitation and are much less likely to reoffend.

Vermont is one of only 2 states that allows prosecutors absolute discretion concerning where they may file, even the most minimal criminal charges, against 16- and 17- year-olds. Prosecutors may file cases against 16- and 17- year old children in either juvenile court, which would mean the youth does not end up with an adult criminal record, or in adult court where they will have a permanent criminal record. Under H.751, to be charged in criminal court,

children would still have to be under age 18 when they commit an offense, but by raising the age of supervision, the juvenile court will be able to continue to oversee them until the terms of their sentencing and probation are complete. Last fall, a survey was sent out to all prosecutors in the state asking them to name the greatest barriers to filing charges against 16- and 17- year-olds in juvenile, as opposed to adult court. The overwhelming response was that juvenile court lost supervision of these youth at age 18. The survey indicated that many more these cases would be filed in juvenile court if the age of jurisdiction was raised to 20.

While the House passed an early version of this bill that raised the age of jurisdiction from 18 to 20, this extension hit a road block in the Senate Judiciary Committee where the age of jurisdiction was extended by only six months. The final version of H.751 included the following the points:

1. The age of juvenile jurisdiction was extended six months beyond a child's 18th birthday.
2. Young people given a citation to appear in Family Division will be given the option to undergo a preliminary screening, likely the existing Youth Assessment and Screening Instrument (YASI).
3. At the preliminary hearing, if there is an admission entered, the court will be able to move directly to disposition, which could lead to a direct referral to a DCF approved community program without the young person being placed on probation. If they then fail to comply with the community based program requirements, they would be referred back to the court for further proceedings. If they commit a new criminal offense, they would be subject criminal court proceedings for the new offense.
4. DCF, in conjunction with the court administrator's office and Court Diversion, will be required to provide a report back to the legislature In December, 2013 with data on the impacts of these changes.

Voices for Vermont's Children supported H.751 and celebrates its passage as the best compromise possible, given the strong opposition posed by the Senate Judiciary Committee.

The Higher Education Endowment Trust Fund S.121

In his State of the State Address, Governor Shumlin proposed that \$8 million be taken from the Higher Education Endowment Trust Fund, which provides scholarship money to low-income Vermont students who wish to pursue post-secondary education in Vermont. The Governor wanted to give this money to UVM and the Vermont State Colleges for one-time improvements and justified the use of this money by noting that in 2011 the fund received \$11 million, its largest principle addition to date.

The Senate Committee on Education took up this request in S.121, a bill introduced by Senator Philip Baruth. This bill would have reduced that amount taken from the fund from \$8 million to \$6.5 million. It also stipulated “that the decision of the general assembly to distribute unexpectedly high estate fund tax funds levied in fiscal year 2012 for purposes in addition to those specifically defined in statute shall be a one-time exception to the general and enduring use of trust fund assets.”

Voices for Vermont's Children testified against taking any money out of this fund. Because the trust fund rarely receives large principle additions, we consider this \$11 million as a unique opportunity to expand the scholarship program and help make higher education more affordable for Vermont students. The high cost of our state university is as much a disadvantage to Vermont students as the quality of the institution is an advantage because cost is a barrier that prevents financially disadvantaged student from being able to access UVM’s superior educational opportunities. According to a 2011 comparative study of state Universities, UVM has the 14th highest in-state tuition in the country and the 7th highest average debt at graduation.

We are happy to report that this fund remained untouched in this legislative session.

Health Care H.559

The legislature worked on and passed H.559, a bill related to health care reform implementation in preparation for the Health Care Exchange, which is mandated by the federal Affordable Care Act (ACA) and set to begin in January 2014. Voices for Vermont's Children strongly supports Vermont’s efforts toward health care reform and lauds both the legislature and the administration for their work this year.

Included here are descriptions of those parts of H.559 that will have a direct impact on Vermont’s families.

- **Definition of Small Employer:** Under the ACA, states may define small employers as business with either 50 and fewer or 100 and fewer employees. Because Vermont decided to require that all small businesses purchase health insurance through the Health Care Exchange starting in 2014, this was a contentious issue. The more people in the exchange, the better the market and the lower the cost of health care premiums. From an exchange perspective, therefore, it would have been advantageous to include as many groups as possible, but the legislature opted to define small business as those employing 50 or fewer full time employees. Voices for Vermont's Children was disappointed by this decision because it will mean higher premiums for individuals in the marketplace and because it will mean fewer people will have access to the benefits provided by the Exchange, such as high deductible limits, a base-line for health benefits, and federal subsidies for lower income families.

- **Requirement that all individual and small group insurance be purchased within the exchange:** H.559 requires that all individual and small group insurance be sold through the

Exchange. Voices for Vermont's Children supports this decision in the interest of increasing the number of people purchasing insurance through the exchange so that premiums are thereby lowered and to increase Vermont's eligibility for federal tax credits and subsidies. Furthermore, the ACA requires that plans sold outside the exchange essentially resemble those offered inside the exchange so there is no real advantage or greater choice of plans if these groups had been permitted to purchase insurance outside the exchange.

- **Dental Benefits:** Pediatric dental care is required by the ACA. In addition, H.559 allows dental benefits to be offered in conjunction with qualified benefit plans in the Exchange. Voices for Vermont's Children strongly supports the inclusion of dental benefits and will look for opportunities to increase Vermonters' access to dental care wherever possible throughout the Health Care Reform process.

- **Inclusion of Bronze Plan:** Under the ACA, health plans will be categorized as platinum, gold, silver, and bronze depending on their levels of cost sharing. This means that they are categorized by the percentage of care that is paid for out of pocket by the insured. Bronze level plans will have high deductibles and represent the least coverage permitted under the ACA. Inclusion of bronze level plans in the Exchange is left to each state's discretion. Voices for Vermont's Children is disappointed that the legislature chose to require the inclusion of bronze plans into our exchange because that level of coverage is not affordable for many families. Despite this legislation, however, it is uncertain whether bronze plans will actually be available in the Exchange because many experts believe it may be impossible to design a bronze plan to meet the ACA's limits on deductibles for small groups, which are capped at \$2,000 for an individual and \$4,000 for a family.

- **Global Commitment, Choices for Care, SCHIP Waiver:** H.559 includes permission for the Agency of Human Services to seek or renew federal waivers for Medicaid, Choices for Care, and SCHIP programs. This means that Vermont hopes to maintain and expand the existing public care model and use matching federal funds for our Exchange subsidies. The bill also requires that there is streamlined transition between Medicaid and the Exchange. Voices for Vermont's Children is very supportive of these intentions. One of the major problems with our current public health system is churning, which is when people go on and off public health care due to changes in circumstances or failures to comply with paperwork or premium requirements. We are very hopeful that the Exchange will make churning obsolete and that Vermonters will enjoy stable health coverage.

- **Transition planning for those currently in VHAP and Catamount Health:** H.559 expresses legislative intent that the transition from Catamount and VHAP to the Exchange and its subsidy program will occur with minimum financial exposure for low-income Vermonters and for the state. The bill requires the Department of Vermont Health Access in consultation with the Medicaid and Exchange Advisory Committee, to evaluate options for affordable coverage for people over 133% of the federal poverty level. Voices for Vermont's Children sees this as a critical assurance, but recognizes that the funding scheme for the Exchange is still undetermined, and so will be watching the real details of this intention unfold very carefully.

Environmental Toxins

S.92, an act that requires schools to use green cleaning products successfully, moved through the legislature early in the session. Voices for Vermont's Children strongly supported this bill and was very happy to see it pass. Thanks to this legislation, distributors of cleaning products will be limited to an approved list of safe cleaning products that they may sell to schools. Schools will, however, be permitted to use up their old cleaning supplies before transitioning to those on the approved list.

S.24, The Kid-Safe Products Act is a bill intended to protect Vermont's children from exposure to harmful chemicals. Voices for Vermont's Children supports this bill, which, unfortunately, stalled in the legislature this year. We believe that parents ought to be able to assume that the products they purchase for their children are safe. Instead, a recent analysis found unsafe levels of toxins like lead, cadmium and arsenic in children's jewelry sold in Vermont stores.

S.24 prioritizes the most harmful chemicals in children's products, requires the use of cost-effective safer alternatives, and honors the consumer's right to know which chemicals are in the products we use every day.

Protecting our kids from toxic chemicals is a commonsense measure, and we are going to work hard to help move it through the legislature next year. Thanks in advance for supporting Kid-Safe Products.

Vermont Legislature Takes Important Step Toward Ensuring Comprehensive Dental Coverage For Pregnant and Postpartum Women

The Vermont Oral Health Care for All Coalition applauds the Legislature for its vote to provide comprehensive dental coverage for pregnant and postpartum women who receive Dr. Dynasaur/Medicaid benefits. Currently, pregnant women are allowed a yearly cap of \$495 per year through the program. The new option lifts the cap and will allow pregnant women covered by Dr. Dynasaur/Medicaid to receive comprehensive dental benefits while pregnant and for 60 days postpartum, regardless of their age. Oral health care is critically important for both mothers and their babies, since poor oral health among pregnant women can lead to low-weight, pre-term births. According to the most recent data provided by the Department of Vermont Health Access, nearly 2,000 pregnant and postpartum women in Vermont received dental care through the Dr. Dynasaur/Medicaid program.

“Lack of access to dental care for pregnant women in Vermont has been a serious health concern for women themselves and their children since oral health problems can begin even before birth,” said Peter Sterling, Executive Director of Vermont Campaign for Health Care Security Education Fund. “We congratulate the Legislature for recognizing that oral health is important to the overall health of women and their children.”

Vermont residents who lack access to affordable dental care often seek care for preventable conditions after problems have occurred. About 5,000 people go to Vermont emergency rooms, the most expensive place to receive care, for dental problems each year. Among children, tooth decay is the most common childhood illness, affecting nearly 6 in 10 children, and is more common than asthma.

The Vermont Oral Health Care for All Coalition, led by Voices for Vermont's Children, VT Campaign for Health Care Security Education Fund, People's Health & Wellness Clinic, Community of VT Elders, and VT Low-Income Advocacy Council, has worked during the last two years to build a statewide consumer voice and raise public awareness of the need for better access to affordable dental care. The Coalition's comprehensive agenda includes expanding dental coverage, adding a Licensed Dental Practitioner to the dental team, and including dental care in Green Mountain Care. This past year a priority of this consumer-based coalition of 41 organizations has been to expand dental coverage for pregnant women on Dr. Dynasaur/Medicaid.

"We applaud the recognition by policymakers of the need for this group of adults to receive a comprehensive dental benefit. Thank you to members of the House and Senate Appropriations Committees, especially Chair Martha Heath for her leadership and Vice-Chair Mitzi Johnson for championing this initiative in the House, and Chair Jane Kitchel for her leadership in the Senate," said Sheila Reed, Associate Director of Voices for Vermont's Children.

To learn more about the Vermont Oral Health Care for All Coalition and its agenda, please visit www.vtoralhealth4all.org.

Early Childhood Issues - Kids Are Priority One Legislative Wrap Up

ISSUES AT A GLANCE

Congratulations! We did it! At the close of the 2012 legislative session on Saturday, May 5th, the Kids Are Priority One Coalition, working alongside key partners, made significant progress on several fronts:

\$116,000 in the FY13 (July 1, 2012-June 30, 2013) budget for 2 more child care licensors, plus 2 additional licensors (for a total of 4 new licensors) being funded for two years by the Turrell Fund, with the understanding that the state will pick up the cost of these two licensors at the end of the two-year period.

\$100,000 from the Workforce Education Training Fund earmarked for professional development of the early childhood and afterschool workforce.

A directive to Building Bright Futures to develop recommendations by January 15, 2013, for increasing access to high-quality early education.

A directive to Building Bright Futures to develop initial recommendations by January 15, 2013, for a long-term financial sustainability plan for funding a comprehensive system of early childhood services.

ISSUES UP CLOSE

Child Care Licensors

Adding four new licensors to the Child Development Division's child care licensing staff will make a big difference in terms of ensuring that Vermont's regulated early care and education programs are meeting minimum quality standards.

Professional Development

These funds will be a shot in the arm to Vermont's under-resourced professional development system. They will help to expand and strengthen an infrastructure that is critical to improving the quality of early care and education in Vermont.

The Kids Are Priority One Coalition recommended that \$100,000 from Vermont's Workforce Education Training Fund be set aside annually to expand professional development opportunities for the early childhood and afterschool workforce. (For more information about this Fund, [click here](#).) The Senate Education Committee inserted this request into S.218. The bill passed the committee and was sent to the Senate Appropriations Committee. There it passed as a one-time allocation from Fiscal Year 2012 Workforce Education and Training Fund. While a one-time allocation, it will still be a substantial infusion of funds into Vermont's professional development system. Because these are FY12 funds, this allocation does not show up in FY13 budget, but the budget bill does give the Department of Labor the authority to carry forward the funds.

The Child Development Division (CDD) will submit one application for these funds to the Vermont Department of Labor, which manages the Workforce Education Training Fund. CDD is currently working on this application, which must be submitted soon as these are FY12 dollars. If you have a specific training topic that you would like to see included in CDD's application, please contact Jan Walker at jan.walker@state.vt.us or (802) 769-6162.

Increasing Access to High-Quality Early Education

This directive to Building Bright Futures presents us all with an exciting opportunity. It provides a legislatively-established vehicle for advancing the discussion about where to go from here in terms of ensuring greater access across the state to affordable, high-quality early education for Vermont's young children. Do we build on Act 62? Do we look to other ways to increase access

to high-quality early education for preschool children? How do we fund any such expansion? The Kids Are Priority One Coalition looks forward to being part of this discussion.

The Coalition was involved from the beginning in discussions about a bill that started out in the Senate Education Committee, sponsored by Senator Sara Kittell (Franklin) and Senator Ginny Lyons (Chittenden). Below is the language from S.218 that the Senate Appropriations Committee added to the FY13 budget bill and is in the final budget that was approved:

Sec. E 318 ACCESS TO HIGH-QUALITY EARLY EDUCATION

(a) In consultation with appropriate state agencies, community partners, and stakeholder groups, the building bright futures state council shall develop recommendations to increase access to high quality early care and education for Vermont children as follows:

(1) Pursuant to 16 V.S.A. § 2905, in order to increase access to high quality early care and education for three- and four-year -old children, the council shall develop recommendations designed to:

(A) Promote equitable opportunities throughout the state, including the availability of publicly supported programs to similarly situated families in different communities;

(B) Determine the best way to use community-based child care and education programs and review the interaction between developing publicly funded school-based pre-kindergarten and kindergarten programs and the infrastructure and financial health of existing child care programs in the private and nonprofit sector, and how that interaction affects programs serving infants through age two;

The council will present its recommendations concerning to the house and senate committees on education on or before January 15, 2013.

Note the emphasis on community-based programs. The Senate Education Committee, where this language originated, wants to make sure that Act 62 and any legislation that follows create a level playing field for community-based programs. For example, many early childhood educators would like Building Bright Futures to re-examine the current requirement regarding supervision of family child care providers, which they feel puts them at a disadvantage in terms of meeting the Act 62 quality requirements.

Financing Recommendations

When the Kids Are Priority One Coalition's Policy Committee met last December, it underscored the importance of developing a coherent plan for increasing and sustaining Vermont's public investment in its child development services. During Early Childhood Day at the Legislature, the Coalition distributed the first draft of its early childhood financing brief and offered a work session on financing. The work envisioned in this directive

will bring us one step closer to achieving the Coalition's goal regarding early childhood financing. The Kids Are Priority One Coalition looks forward to working with Building Bright Futures and other partners to develop these recommendations.

With encouragement and support from the Kids Are Priority One Coalition, Building Bright Futures and the Department for Children and Families, the Senate Appropriations Committee added the following language to the FY13 budget bill. This language is in the final budget bill approved by the legislature:

Sec. E318

(2)The council shall develop recommendations for a long-term financial sustainability plan for funding a comprehensive system of early childhood services that shall include early care and education, prevention and early intervention, nutrition, mental health and physical health and include but be not limited to new ways to leverage federal funds.

The council shall present an initial report concerning (2) to the house and senate committees on human services and health and welfare and to the house and senate committees on appropriations on or before January 15, 2013.

OTHER EARLY CHILDHOOD ISSUES

Strengthening Families Grants

Effective advocacy by two early childhood programs resulted in lively discussions about public funding of early care and education programs that serve a large percentage of children from low-income families. These discussions led to two legislative decisions:

1. A \$200,000 one-time allocation for FY12 (ending June 30, 2012) for eligible Strengthening Families grantees (grantees have already applied for these funds, and the funds have been disbursed by the Child Development Division);
2. Language in the FY13 budget directing the Department for Children and Families (DCF) to set aside up to one-half of one percent from the Child Care Financial Assistance (subsidy) Program to assist programs experiencing financial hardship. Disbursement of these funds for this purpose is left to the discretion of the DCF Commissioner.

Vermont Early Educators United

Many early childhood educators and their partners from the American Federation of Teachers worked to pass a bill in the Senate that gives child care providers the right to choose to collectively bargain with the state over issues that the state controls. The child care providers

would work with the state to set policies related to their profession. This non-traditional union model is in effect in 12 states.

The bill was approved last session by the House and sent to the Senate for Senate action in the second year of the legislative biennium (two-year legislative cycle). However, for a variety of political reasons, the Senate never fully debated the bill, and attempts to get the bill passed as an amendment to other bills failed. Although the bill died in the Senate, Vermont Early Educators United states that it will be back next biennium to work for passage of the legislation.

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About Voices for Vermont's Children

Voices for Vermont's Children is a statewide child advocacy organization whose mission is to promote public policy that enhances the lives of children and youth in Vermont.

To learn more about our organization, please visit our website [<http://www.voicesforvtkids.org>].

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