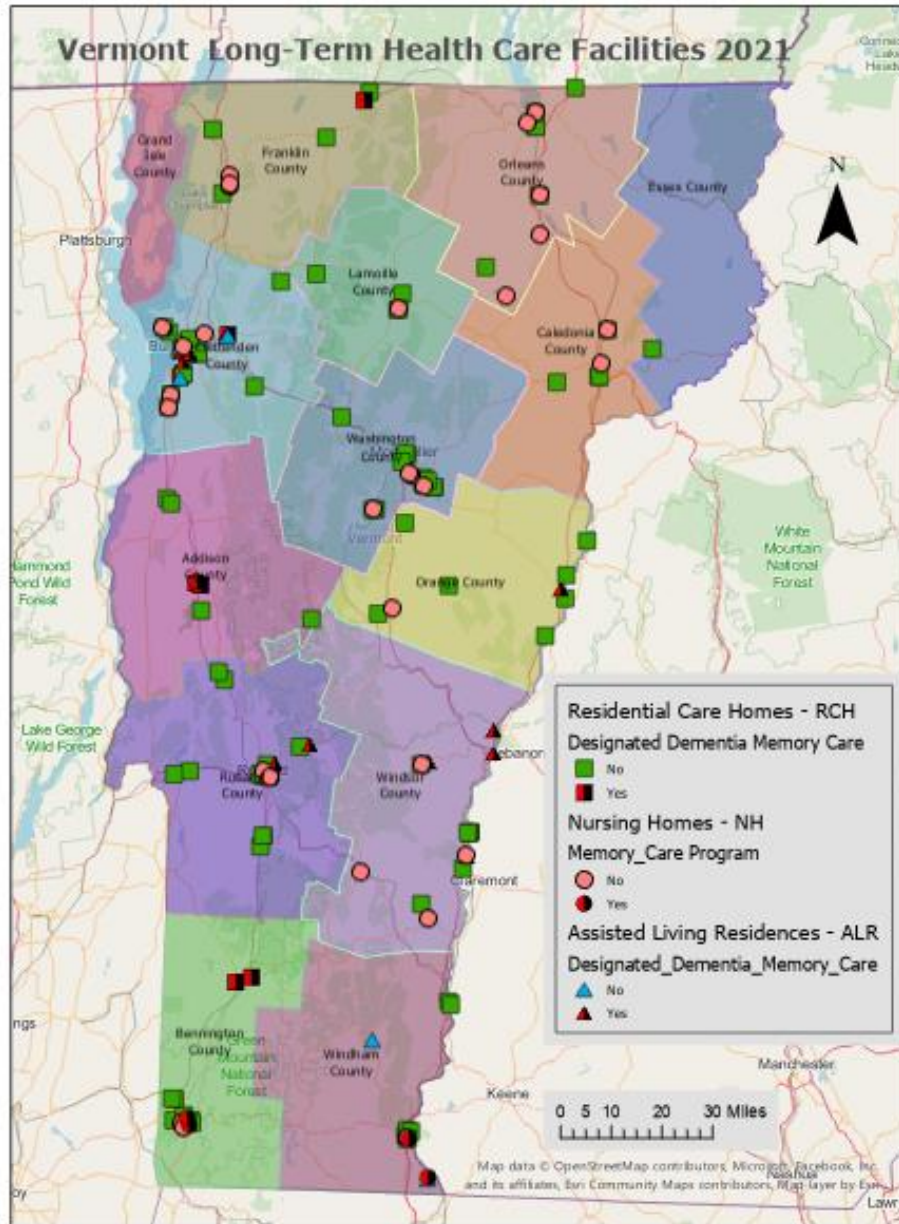


# Vermont

## Long-Term Health Care Facilities

### Locational Demand Analysis



Issue 1: June 15, 2022, Issue 2: March 6, 2023

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## Executive Summary

### Meeting the Demand for Long-Term Care Facilities in Vermont

This study reviews the existing Vermont Long-Term Health Care Facilities and forecasts their demand for the year 2030 by Location, Facility Type and Service Type. The Facility Types are Residential Care Homes (RCH), Assisted Living Residences (ALR) and Nursing Homes (NH). Service Type Beds are herein defined as Memory Care-Special Care (MC-SC) and Other Care.

The goal of this study is to present the order of magnitude numbers and inform LTC facility owners and operators, governmental, educators and other interested parties of the locational demand outlook for Long-Term Care facilities in Vermont. A summary of expected costs and personnel requirements is also provided. Finally, ways to support the expansion and sustainability of Vermont's Long-Term Care (LTC) Facilities are outlined.

Looking at the data, Vermont is facing a burgeoning demographic and locational challenge in LTC facilities and caring for its seniors. This study reveals that the current real estate and personnel commitment to LTC locations and Memory Care bed facilities needs to be expanded significantly to meet this challenge.

#### Key Findings:

- **There are presently (late 2021) 156 Long Term Care Facilities with 6441 Beds.** There are 103 RCH, 17 ALR, and 36 NH Facilities. RCH Facility types have 2201 Standard and 217 Memory Care-Special Care Beds, ALR Facility types have 911 Standard and 262 MC-SC beds, and Nursing Home Facility types have 2626 Other Care and 224 MC-SC beds.
- **The 2021 availability of Facilities and Service Type beds is uneven across the State.** Bennington County has 74 beds per 65+ 1000 population while Orange County has 25 beds per 65+ 1000 population. The VT average is approx. 50 beds per 65+ 1000 population. Grand Isle County has no facilities, Essex County effectively has no facilities, Vt Rt 100 below Waterbury to Mass. has minimal facilities.
- **The 2021 to 2030 increase of 33,000 in the 65+ population is a result of the "Baby Boom".** The VT 65+ Population in 2021 was estimated at 132,000 with a 2030 population estimated at 165,50. The 65+ cohort wave is estimated to peak between 2030 and 2035.
- **The forecast indicates the need for 3500 Total Additional beds with 700 beds Designated for Memory Care and 31 new locations by 2030.** The forecast utilizes a state top-down and county bottom-up forecasting process of the facility type, and service bed counts over the next 9 years, equating to approx. **390 beds per year, providing a 2030 total in-service of 10,000 beds.**
- **The capital cost to build the new facilities is estimated between \$1.46 Billion and \$2.45 Billion** from 2022-2030.
- **The additional beds operating cost is estimated to be around \$800 Million** over the 9-year 2022-2030 period.
- **An additional 2550 LTC Staff members will be required by 2030,** consisting of 1000 Admin Staff, 800 Memory Care Nursing Staff and 750 Standard Care additional Nursing Staff.

## **Meeting The Challenge – Government Action:**

The building of facilities and providing the personnel required for 3500 additional Beds over 9 years can be attained through coordinated action and resolve between the State of VT, City and Towns, and the Facility Owners. Below are suggestions to support the necessary growth in and sustainability of Long-Term Health Care Facilities.

### **Support Facility Expansion -**

- **Ensure investors and operators that State compensation for services is adequate** now and, continuing to cover the capital investment and operating cost.
- **Establish an Ombudsman or Division of DAIL for Long-Term Health Care Facility Implementation.** This ombudsman will facilitate actions between Facility Owners and Operators, State and Local governments, Financing, Education, and Building Contractor members to ensure the necessary facilities are built and provide annual reports to the State Executive and Legislative branches on Facility expansion.
- **Establish Quantifiable Long-Term Care Facility Objectives in the State Plan on Aging**
- **Establish a Regional Long-Term Care Commission** between the Northeastern States to foster cooperation and long-term planning in such areas as; Education, Employment, Facility requirements, Personnel requirements, Tax policy, and co-ordinate when new facilities being built near a bordering state.
- **Foster Workforce housing to be provided for new and existing facilities.**
- **State to Coordinate with local Cities and Towns on zoning** and building approvals.
- **State to Co-ordinate the multiple capital funding sources.** Co-ordinate State, Federal and Private funding sources to facilitate the building of the new LTC facilities.
- **State/Federal Govt. -Consider Underwriting/Guaranteeing Construction Loans**
- **Technology to support data for decision making. Establish a Facility Bed Inventory Database and web site for public identification of bed availability.** To Analyze and Forecast by Location, Facility Type and Service type a database needs to be established and maintained monthly.

### **Attract Long-Term Care Personnel –**

- **Offer Student tuition reimbursement** with an associated work time in the State.
- **Consider a Partial Salary Tax exemption, i.e., no income tax on the first \$50K of Salary.**
- **Relocation expense reimbursement** for moving to VT or within VT.
- **Provide the Living Wage** (as defined by the County specific MIT Living Wage Tables [Living Wage Calculator - Counties and Metropolitan Statistical Areas in Vermont \(mit.edu\)](https://livingwage.mit.edu)) for workers at these facilities in lieu of the minimum wage.
- **Ensure State and Regional educational facilities/programs are coordinated and available.**

**Meeting The Challenge Cont.**

**Support Facility Operating Cost –**

- **Provide the additional monies to bring the ACCS and ERC per diem level up** to the findings of the “Specific Home-And Community -Based Service Provider Rate Study” dated Feb. 15, 2023 given to the VT Legislature. (See page 34,35)
- **Provide a consistent yearly increase methodology to set the ACCS and ERC rates.** These increases could be tied to the US Bureau of Labor Statistics Northeast Regions **Annual CPI rate for Medical Care Services.** (See page 33)
- **Reduce the facilities depreciation term from 37 to 20 years.** State and Federal governments acknowledge that the Long-Term Care facilities, built in the next 10 + years may not have sufficient 65+ population with the passing of the “Baby Boomer Cohort” to economically operate.
- **Establish a lowered utility rate** category for the LTC Facilities (Water, Elec. Gas, Oil, etc.).
- **Establish a lowered State/Local Property Tax** category for LTC Facilities.

**Aging Effects on Other Facilities:**

Although beyond the scope of this report it should be mentioned that an additional 33,000 people 65 and older in VT by 2030 will exert a tremendous impact on Hospitals, Home Care, Hospice services, Primary Care Physicians, and Nurses in and near VT. One can only imagine the additional capital investment and personnel required to address the increase in Seniors.

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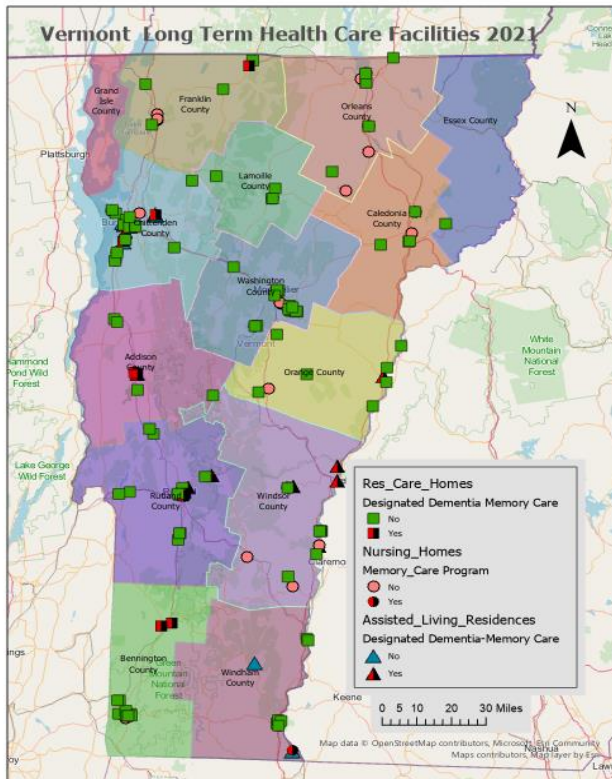
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## Vermont Present LTC Facility Summary 2021

### Present Facilities:

Vermont Long-Term Care Facilities are designated into three Facility Types by the State of Vermont, they are Assisted Living Residences (ALR), Residential Care Homes (RCH), and Nursing Homes (NH). The Beds within these facilities are split into two Service Types, Dementia-Memory Care-Special Care, and Other Care Beds. Residential Care Homes (RCH) also have two Personal Care Levels, Level III and IV.



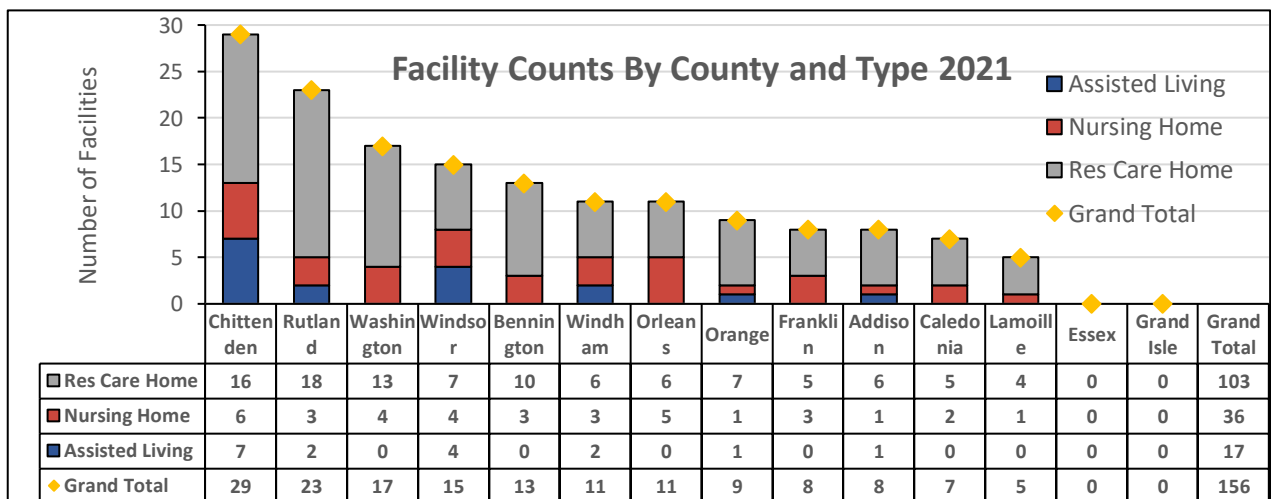
Map 1: All VT LTCH Facility Geographic Locations

There are 156 Long-Term Care Facilities in Vermont with 6441 Long Term Care Beds, consisting of 703 Dementia-Memory Care-Special Service beds and 5738 Other Care Beds. These beds are contained in 17 ALR Facilities with 1173 Beds, 103 RCH Facilities with 2418 Beds, and 36 NH Facilities with 2850 Beds. A list of these facilities can be seen in Appendix 1

The adjoining Map1 and Chart1 indicate the three types of facilities in the State, with most locations near population centers, hospitals, and major highways.

Of NOTE - There are no facilities in Grand Isle County. There is noticeably only one facility (6 Beds) along the VT Rt 100 corridor south from Waterbury to the Mass. border.

There are no facilities in the Central/Northeastern (Essex County) part of the Northeast Kingdom. There are few Assisted Living Res Facility locations in the State.





Present Facilities Cont.

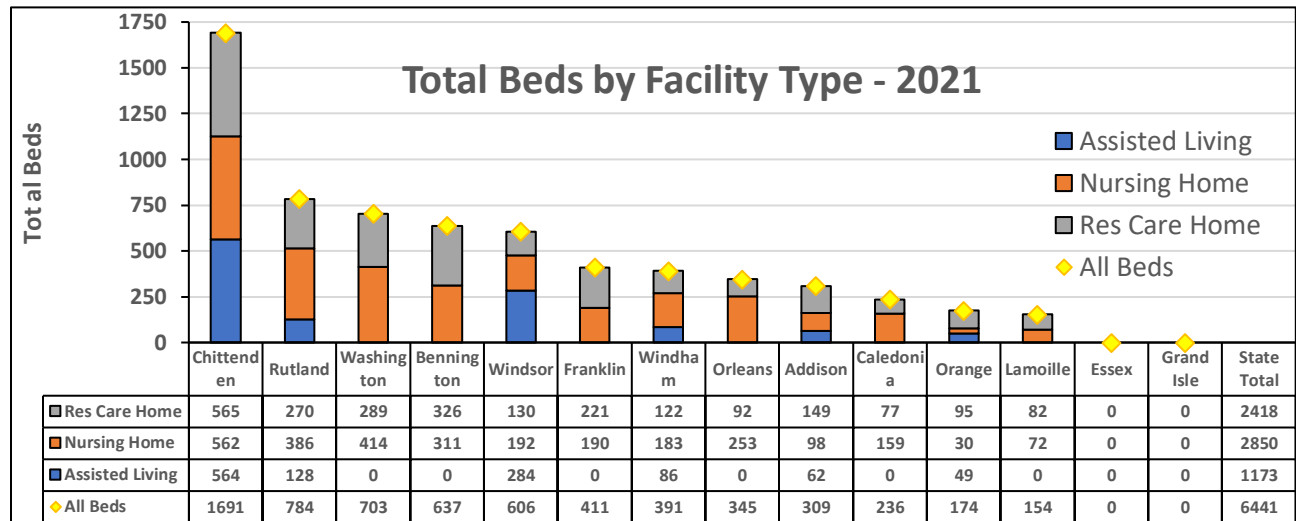


Chart 2: Total Beds by Facility Type by County

Residential Care Homes are present in 12 of the 14 counties and account for 37% of the State’s Beds. Nursing Homes are present in 12 of the 14 counties and account for 45% of the State’s Beds. Assisted Living Residences are present in 6 of the State’s 14 Counties, accounting for 18% of the State’s 6441 Total Beds.

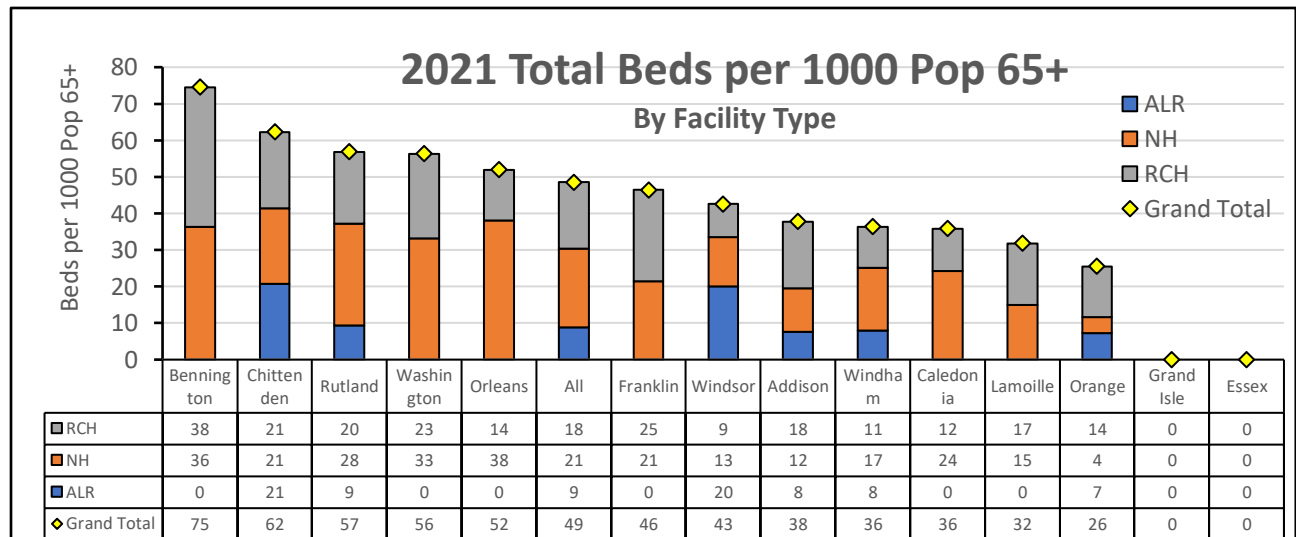


Chart 3: Total Beds per 1000 Pop 65+

Chart 3 indicates the 2021 Beds per 1000 Pop 65+. This creates a level index when reviewing present opportunities across the State by County and used to forecast future demand.

Present Facilities Cont.

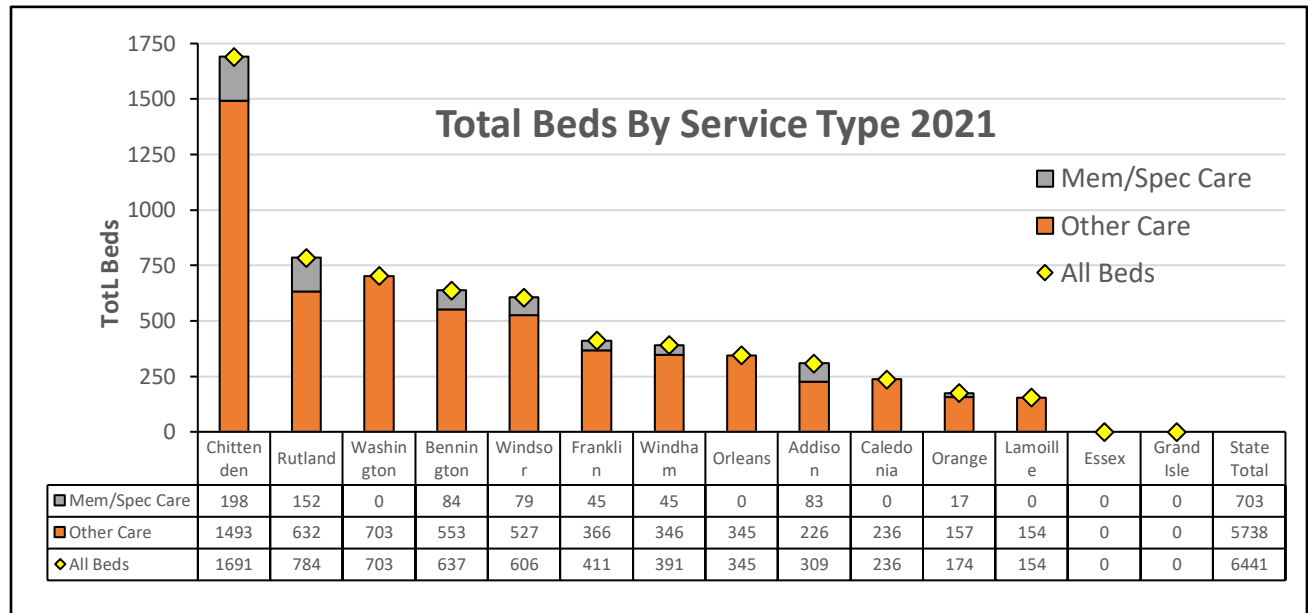


Chart 4: Total Beds by Service Type by County

There are 703 Dementia-Memory/Special Care Beds present in 8 of the 14 counties accounting for 11 % of the State’s 6441 Total Beds. There are 5701 Other Care Beds in 12 of the State’s 14 Counties accounting for 89% of the State’s Beds.

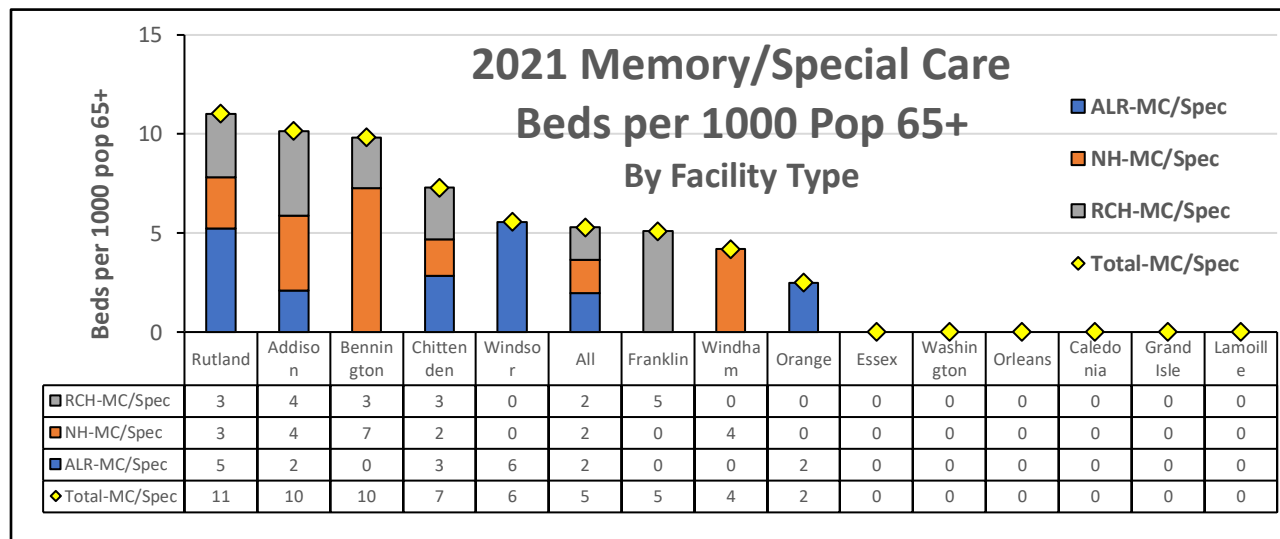


Chart 5: Memory Care Beds per 1000 pop 65+

Chart 5 Indicates the Mem Care Beds per 1000 Pop 65+. This creates a level index when reviewing present opportunities across the State by County and used to forecast future demand.

**Data Sources:** Facility inventory and historic county demographic data secured from the State of VT DLP<sup>1</sup> web site. Geographic data and spatial analysis utilized ESRI’s ArcGIS® software<sup>2</sup>.

1, 2 See Bibliography

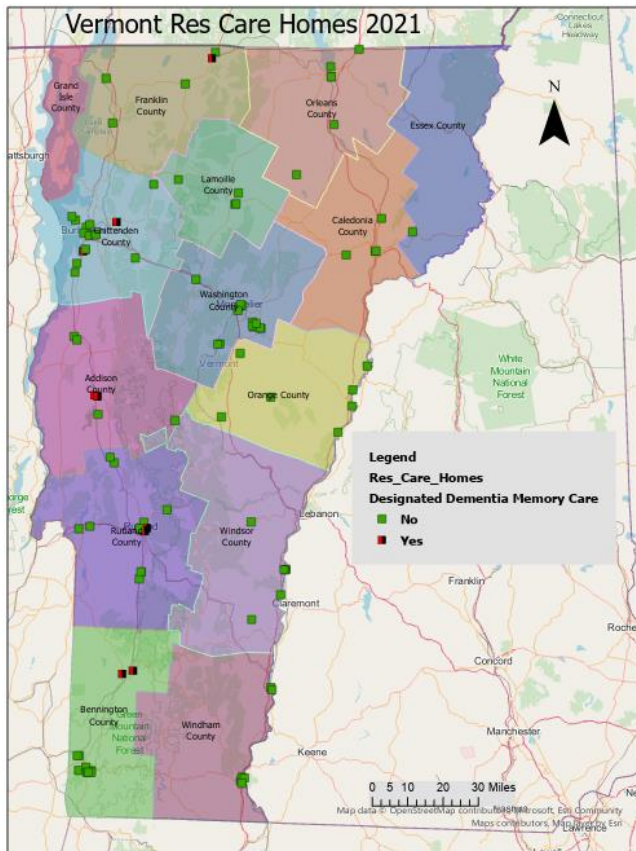


**Present Geographic Distribution:**

**Residential Care Homes - RCH:**

**In VT an RCH is defined as** “a place, however named, ...which provides... room, board, and personal care to three or more residents unrelated to the home operator.” 33 VSA 7102(10). There are two categories of RCHs: Level III and Level IV. Level III RCHs “provide [] personal care, defined as assistance with meals, dressing, movement, bathing, grooming, or other personal needs, or general supervision of physical or mental well-being, including nursing overview and medication management as defined by the licensing agency by rule, but not full-time nursing care.” 33 VSA 7102(10). Level IV RCHs provide “personal care” or “general supervision of the physical or mental well-being of residents, including medication management,” but, unlike Level III RCHs, they do not provide other nursing overview or care. 33 VSA 7102(10). Relevant laws: 33 VSA § 7102(10); RCH Rules 1.1 and 2.2(q) & (r)”

Indicated on Map 2 are the locations of RCH Facilities in Vermont.



Map 2: Res Care Home Geographic Locations

Indicated on Map 2 are the locations of RCH Facilities in Vermont.

Listed in the Charts below are indications of the various numbers of RCH facilities, and Service Types by County and Facility bed size distribution.

There are 103 RCH Facilities, located in 12 counties with a total of 2418 Beds. There are no RCH Facilities in Grand Isle County. Of Note-Essex has one 16 bed facility just inside its border near St

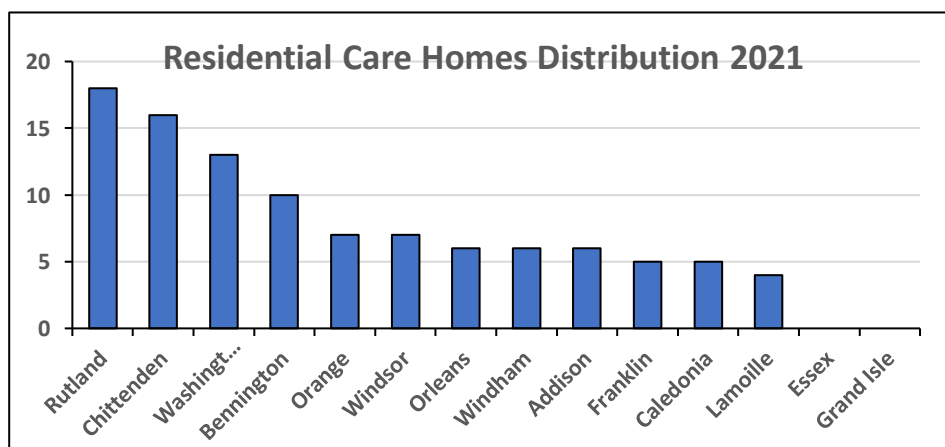
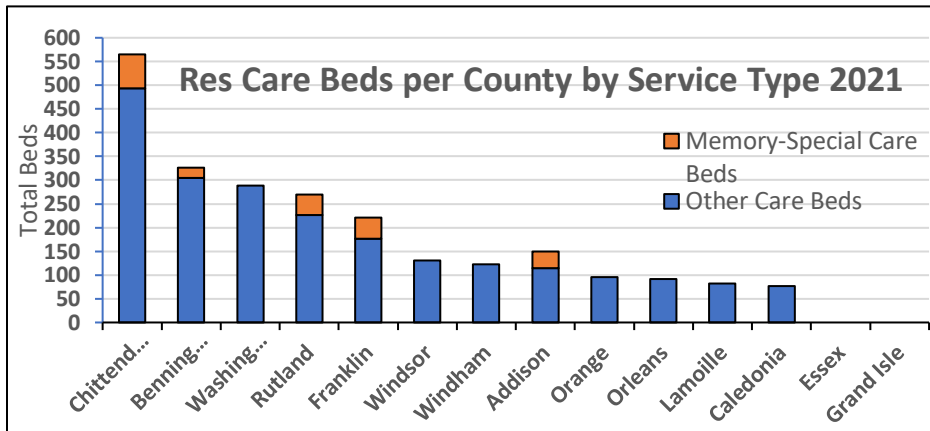


Chart 6: Res Care Home Facility Distribution by County

its border near St Johnsbury in Caledonia County. Due to the road network in Essex County this facility cannot be accessed directly by the remaining part of Essex County and therefore will be considered in the Caledonia County Serving Area

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

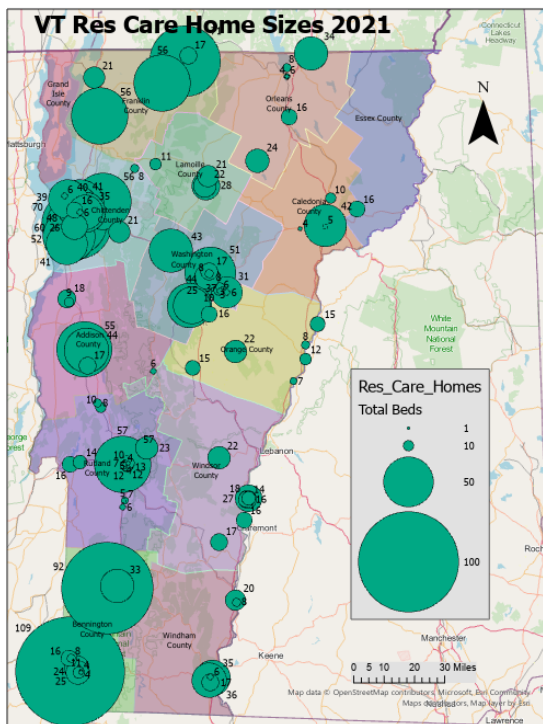
## RCH Facilities Cont.



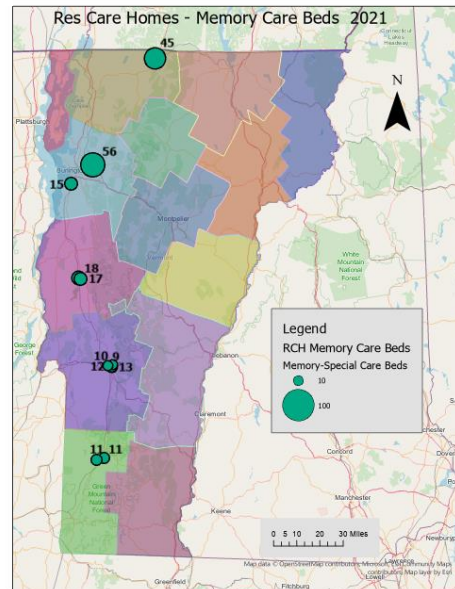
There are 2201 Other Care Beds and 217 State Designated Memory Care-Special beds for a Total of 2418 RCH Beds.

Eleven of the 103 RCH Facilities have State Designated Dementia-Memory Care Designations.

Chart 7: Res Care Beds by Service Type by County



Map 4: Res Care Home Bed Geographic Distribution



Map 3: Res Care Homes - Memory Care Beds

Map 3 Indicates the lack in the number and geographic distribution of RCH Memory Care Beds

Note: Nine Counties do not have RCH MC Beds.

Map 4 indicates the geographic distribution and total bed count of RCH Facilities.

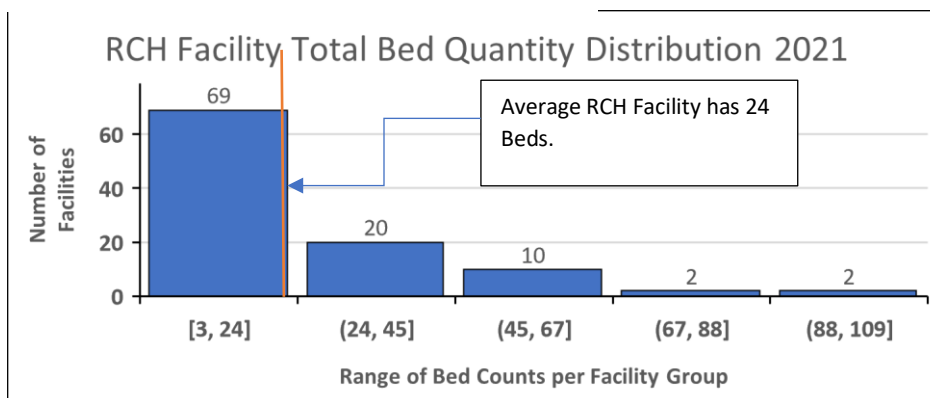


Chart 8: RCH Facility Bed Inventory Distribution

Chart 8 - Of the 103 RCH Facilities, the average size is

24 Beds. The largest Facility being 109 beds in Bennington, and the smallest one being 3 beds in Barre.

Ex. There are 10 facilities with 45 to 67 beds, 20 facilities with 24 to 45 beds, etc.

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

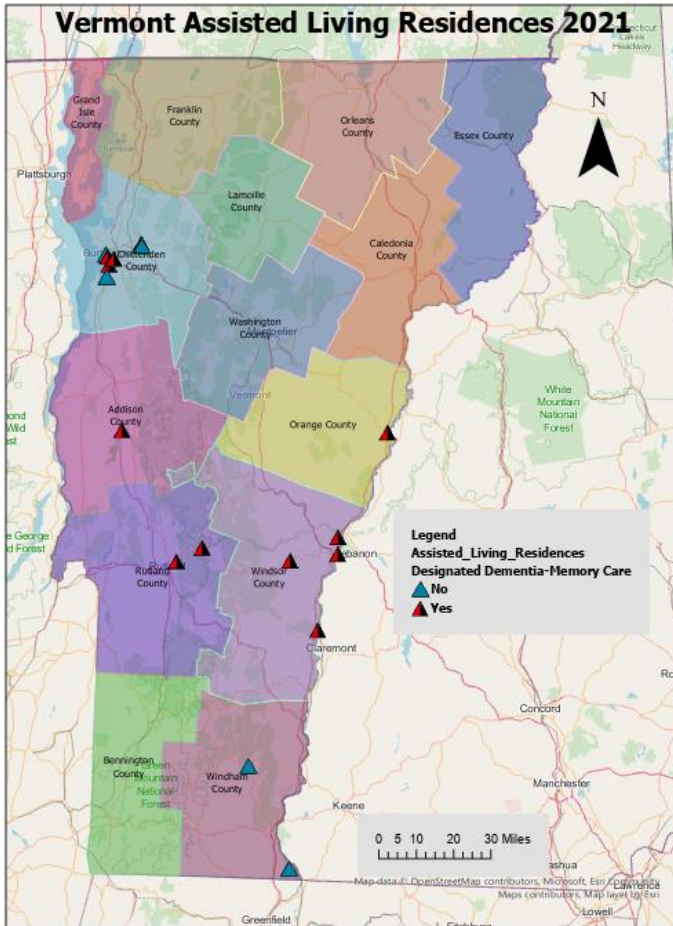
## Assisted Living Residences - ALR

In VT an ALR is defined as “A facility or program that combines housing, health, and supportive

services for the support of resident independence and aging in place. “Aging in place” means “remaining in a Residential despite physical or mental decline that might occur with aging or with disability.” Thus, ALR units offer, at a minimum, a private bedroom, private bath, living space, kitchen capacity, and a lockable door. Ultimately, “Assisted living shall promote resident self-direction and active participation in decision-making while emphasizing individuality, privacy, and dignity.” Relevant laws: 33 V.S.A. § 7102(1); ALR Rule 3.1.”

Of note is the small number of Assisted Living Res (ALR) Facilities with their locations being available in 6 of the 14 Counties. There is an absence of ALR Facilities in the Central and Northeastern part of the State.

The 2030 ALR Facility Forecast indicates a demand for growth in existing locations as well as the need for additional/supplemental facilities in areas not presently within commuting distances to existing ALR facilities.



Map 5: Assisted Living Res Facility Geographic Locations

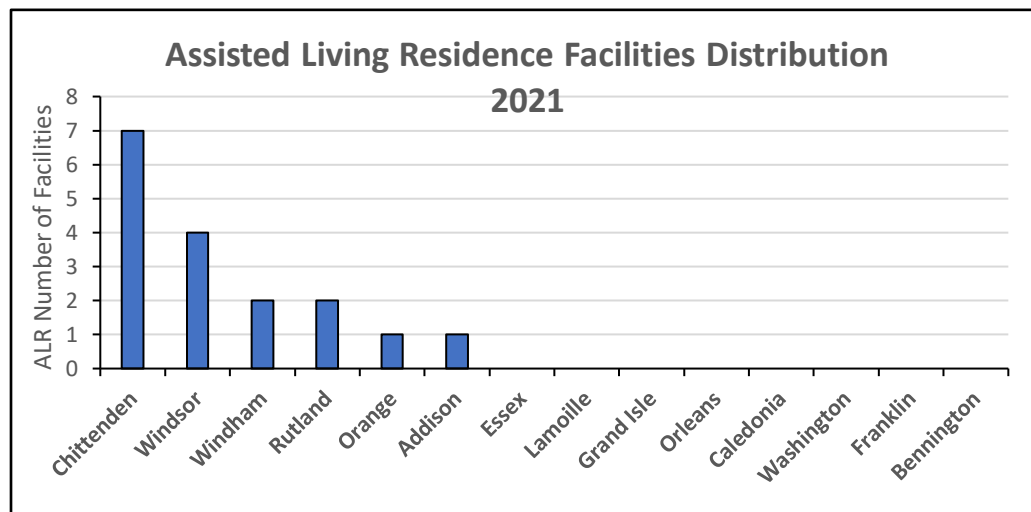


Chart 9: ALR Facility Distribution by County

There are 17 ALR Facilities, located in 6 counties, with 1173 total Beds.

Of Note – The absence of ALR Facility Locations in 8 of the 14 Counties.



Assisted Living Residences – ALR Cont.

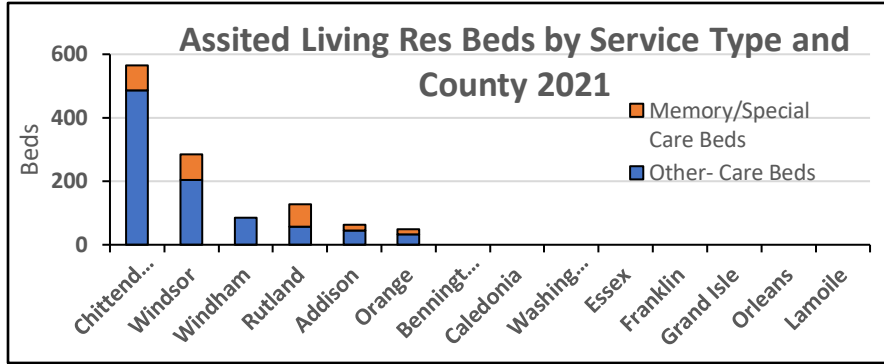
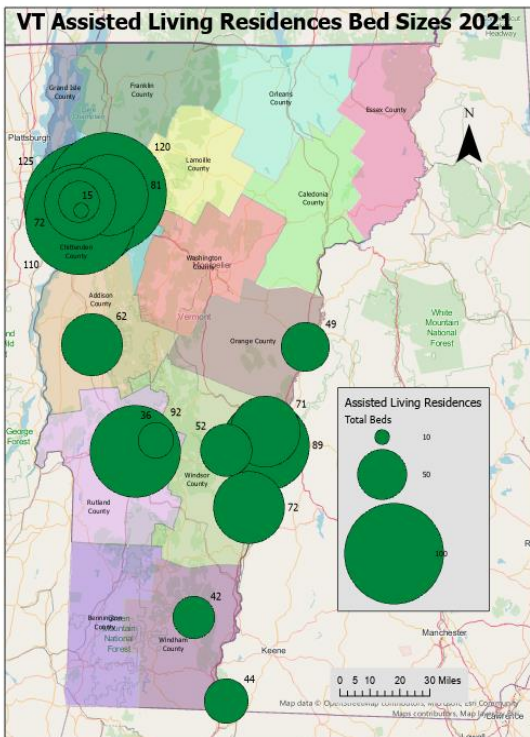
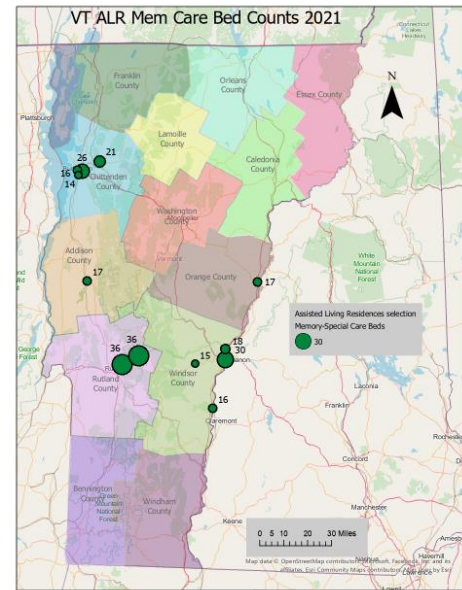


Chart 10: ALR Beds by Service Type by

There are 911 Other Care Beds and 262 State Designated Dementia Memory/Special Care Beds, for a total of 1173 Beds. Twelve of the 17 ALR facilities are designated by the State for Dementia-Memory Care.



Map 7: ALR Bed Geographic Distribution



Map 6: ALR Mem Care Bed Counts

Map 6 Indicates the lack of geographic distribution and bed counts of ALR Mem Care Beds.

Map 7 indicates the geographic distribution of the ALR Facility Total bed count.

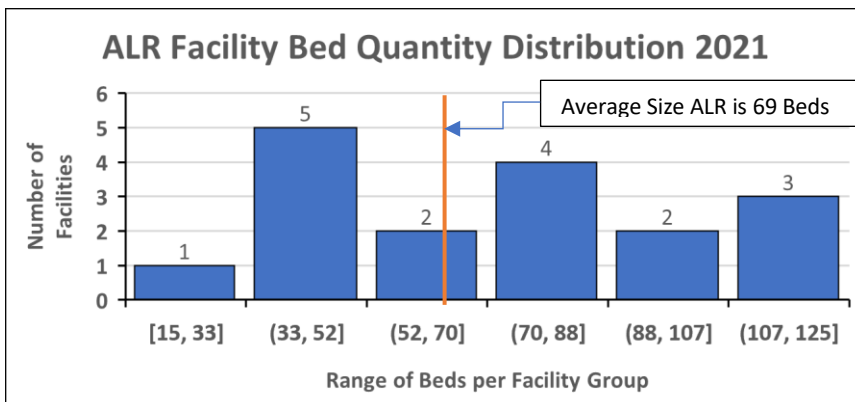


Chart 11: ALR Facility Bed Inventory Distribution

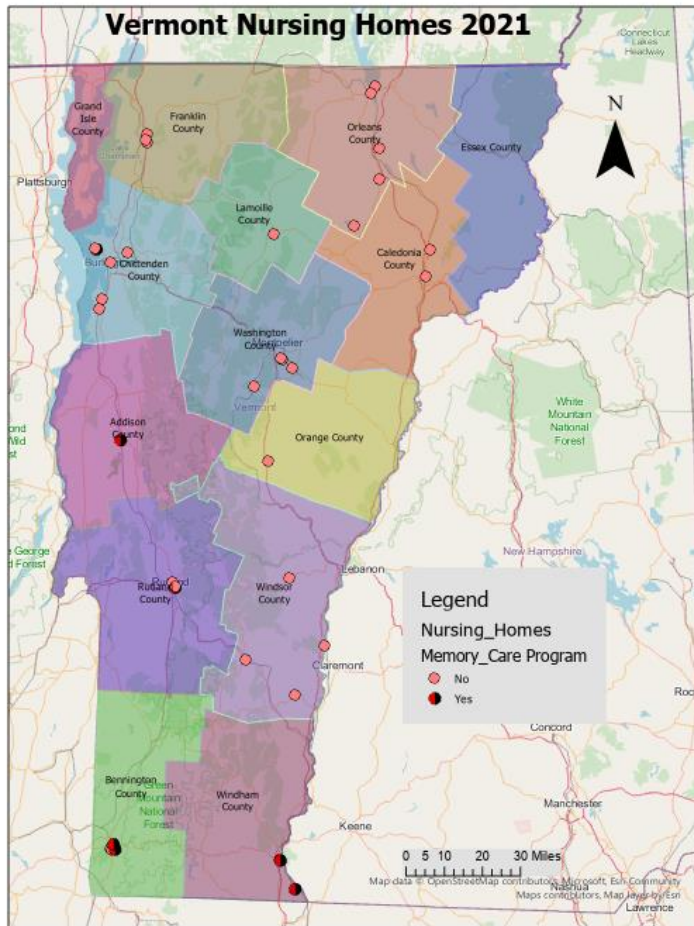
The average ALR Facility has 69 beds, with a distribution from the smallest of 15 beds in South Burlington to the largest with 125 beds in South Burlington.

EX. There are 5 Facilities that have between 33 to 52 beds, 2 Facilities with between 52 to 70 beds, etc.

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

## Nursing Homes - NH

In VT a NH is defined as “an institution (or part of an institution) that is primarily engaged in providing to its residents any of the following: • Skilled nursing care and related services for residents who require medical or nursing care; • Rehabilitation services for the rehabilitation of persons who are injured, have a disability, or are sick; • On a 24-hour basis, health-related care and services to individuals who, because of their mental or physical condition, require care, and services which can be made available to them only through institutional care”. Relevant law: 33 V.S.A. § 7102(7)”.



Map 8: NH Facility Geographic Locations

Nursing Homes are distributed throughout the State, with the exceptions being along Central VT Route 100. There are none in Essex and Grand Isle Counties.

The 2030 NH Facility Forecast indicates a demand for growth in existing locations as well as the need for additional/supplemental facilities in areas not presently within commuting distances to existing NH facilities.

The Vermont Veterans Home’s 130 Beds in Bennington are not counted in these totals, as they are not general population accessible.

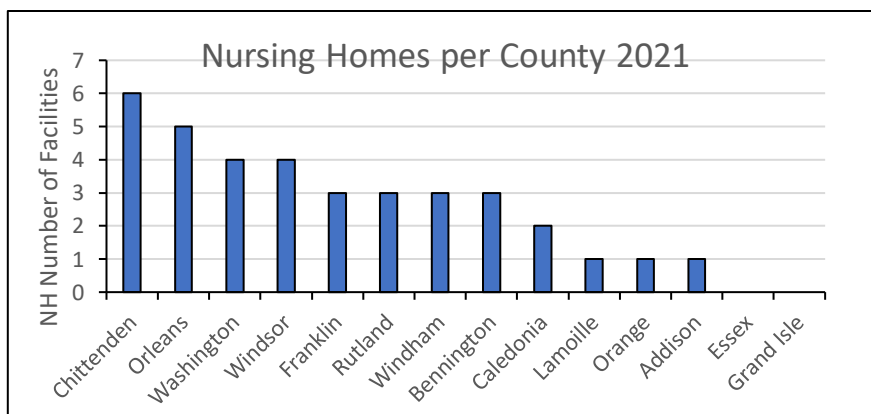


Chart 12: NH Facility Distribution by County

In 2021 there were 36 NH Facilities, located in 12 counties, with 2850 total Beds.

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

## Nursing Homes – NH Cont.

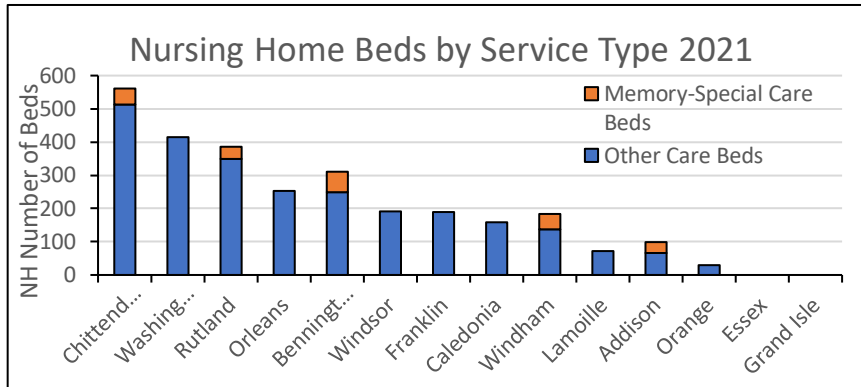
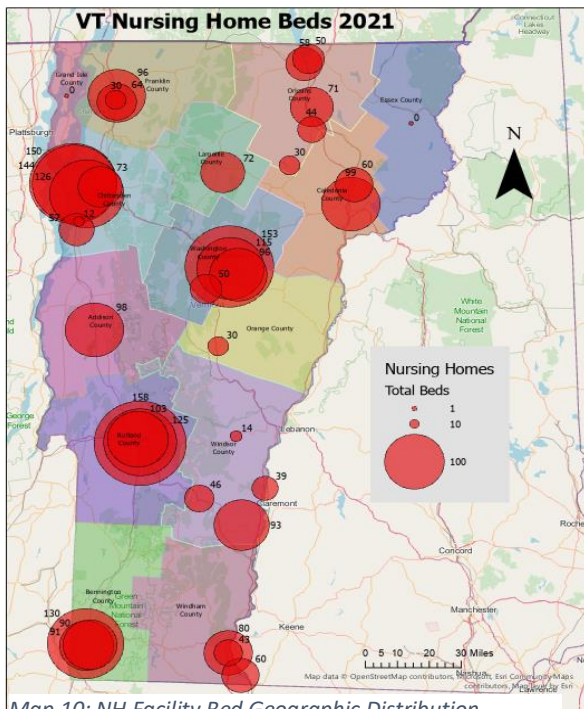


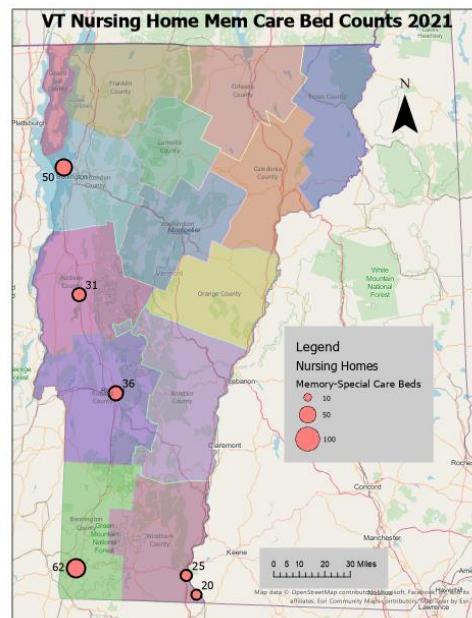
Chart 13: NH Beds by Service Type by County

There are 2626 Other Care Beds with 224 State Designated Memory/ Special Care Beds for a total of 2850 Beds.

Six NH facilities located in 5 Counties are State designated Dementia Memory Care Facilities. NH Facilities in 7 Counties have no Designated Memory Care Beds.



Map 10: NH Facility Bed Geographic Distribution



Map 9: NH Mem Care Bed Counts

Map 9 Indicates the scarcity of Mem Care Beds and lack of geographic distribution in the ALR Facilities.

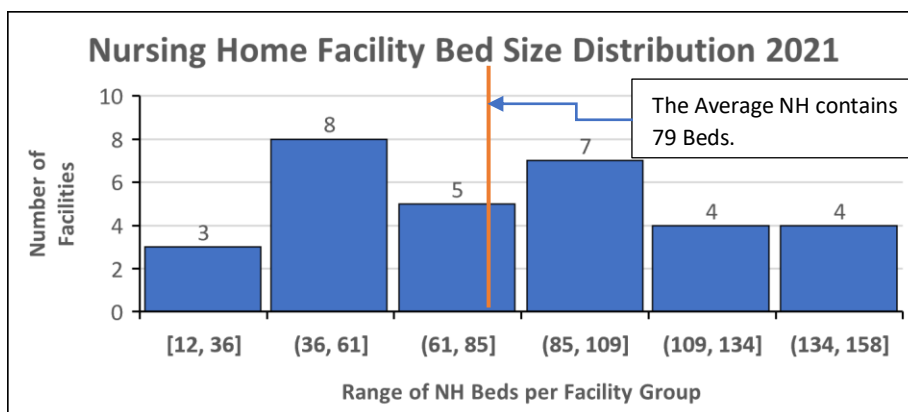


Chart 14: NH Facility Bed Inventory Distribution

Map 10 indicates the geographic distribution of the NH Facility bed counts.

The average size is 79 beds per facility with the smallest one with 12 beds in Shelburne to the largest one of 158 beds in Rutland.

Ex. There are 8 Facilities containing between 36 to 61 beds, there are 5 Facilities containing between 61 to 85 beds, etc.



Demographics

Demographics is the driving force for the need of Long-Term Health Care Facilities. The Baby Boom Generation is a major group of people born between 1946 and 1964. This group in Vermont is much like the same group in most of the Industrialized countries. It is especially strong in its effect on the local economies in the Rural Northern Eastern United States. This analysis projects the State 5-year cohort data by County for ages 65+ from 2019 to 2030 for use as a quantitative driver to determine the exiting number of Beds per 1000 Pop 65+ and project beds needed till 2030 by County.

In 2011 the first of the Baby Boomers cohorts reached the 65+ cohort, this group will last hit 65 in 2029 and with a life expectancy of around 83 will be a predominant driver for Long-Term Facilities until 2047.

The need for Facilities will most probably drop off once this Baby Boom group “moves on” as indicated by the smaller age cohorts following this group. Of note is the small population in the 19 and under cohorts. Without an increase in the birth rate or in-migration, there will be a considerable drop in Vermont working population.

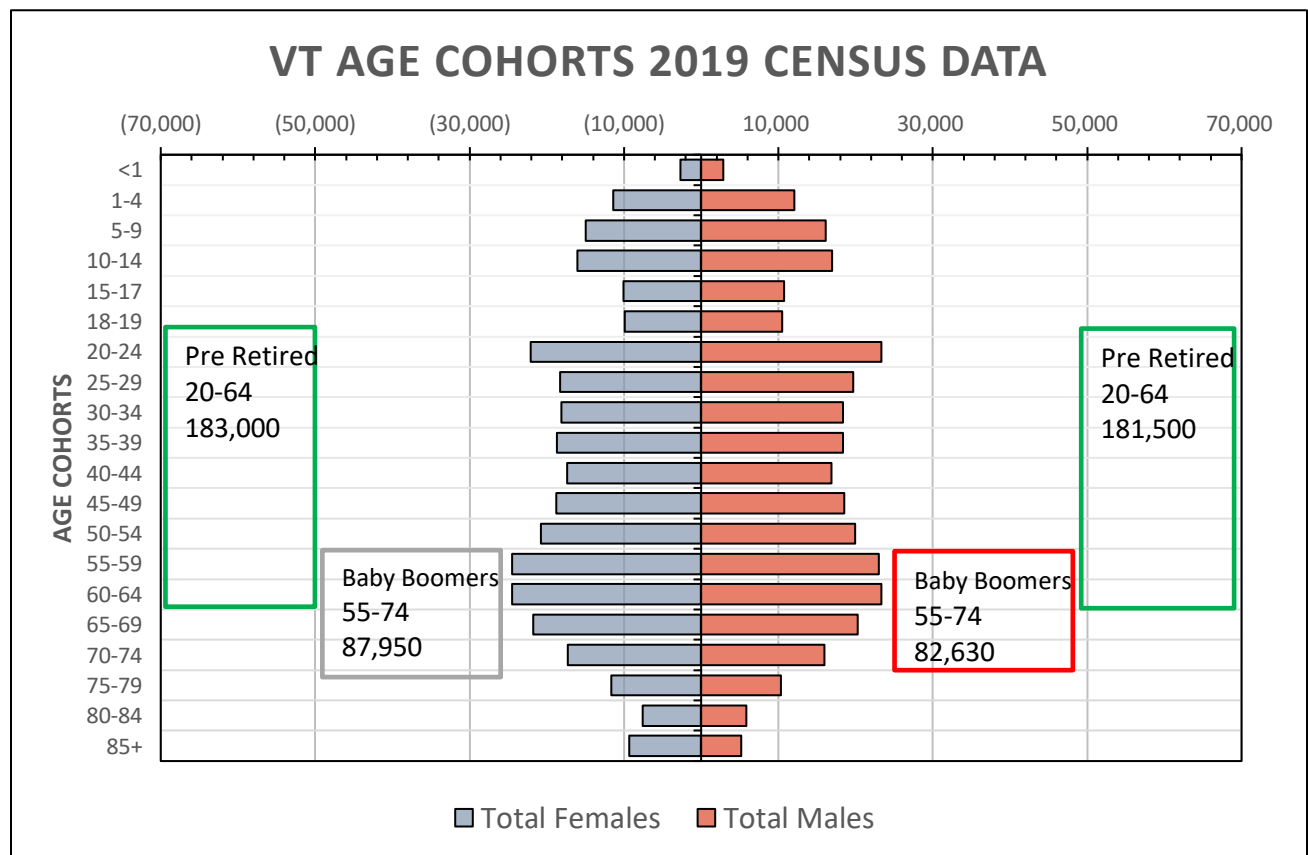


Chart 15: VT Population Age Cohorts 2019



### Demographics Cont.

Chart 16 Indicates the Residential Gains for the 65+ population, the 0 to 64 age Population and the Total Population. Years 2000 to 2019 are derived from US Census tables. This 2000 to 2019 data indicates an arising increase in the 65+ Pop and a reduction (negative Gain) in the 0 to 64 Pop. The Forecast numbers from 2020 to 2030 uses a constant level, middle of the road, forecast to ensure an overcount or undercount does not occur throughout the period of the study. It continues the 65+ cohort growth and increases the total population slightly.

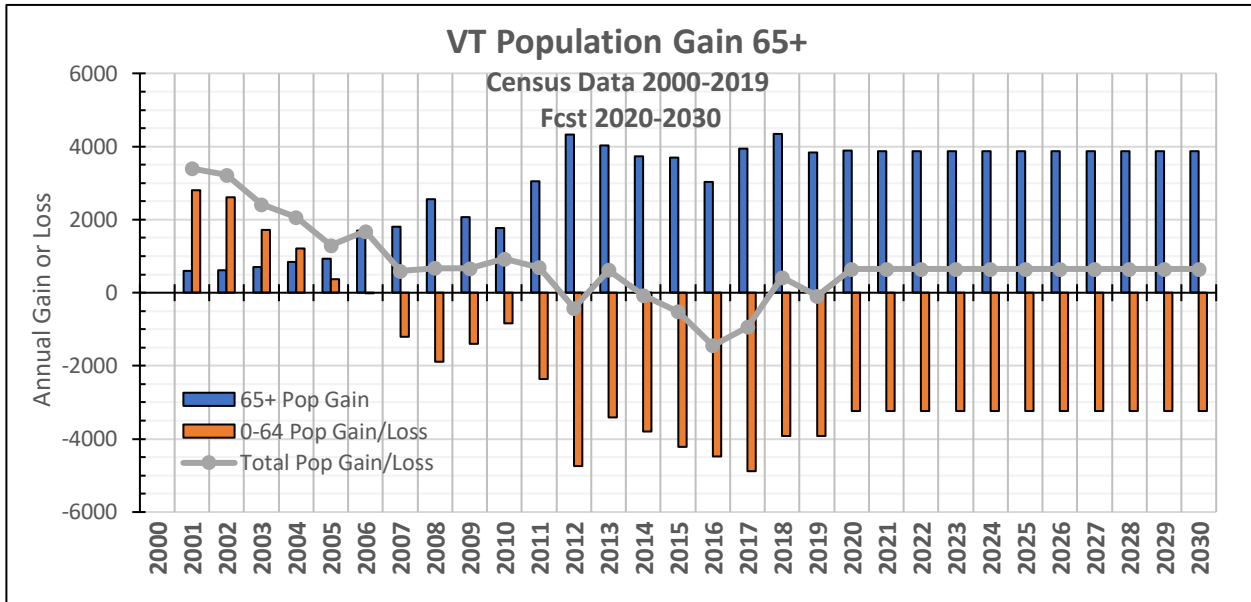


Chart 16 VT Annual Pop Gain 65+

Chart 17 Indicates the Increase in 65+ Pop of 33,379 and a total State 65+ Population of 165,473 by 2030.

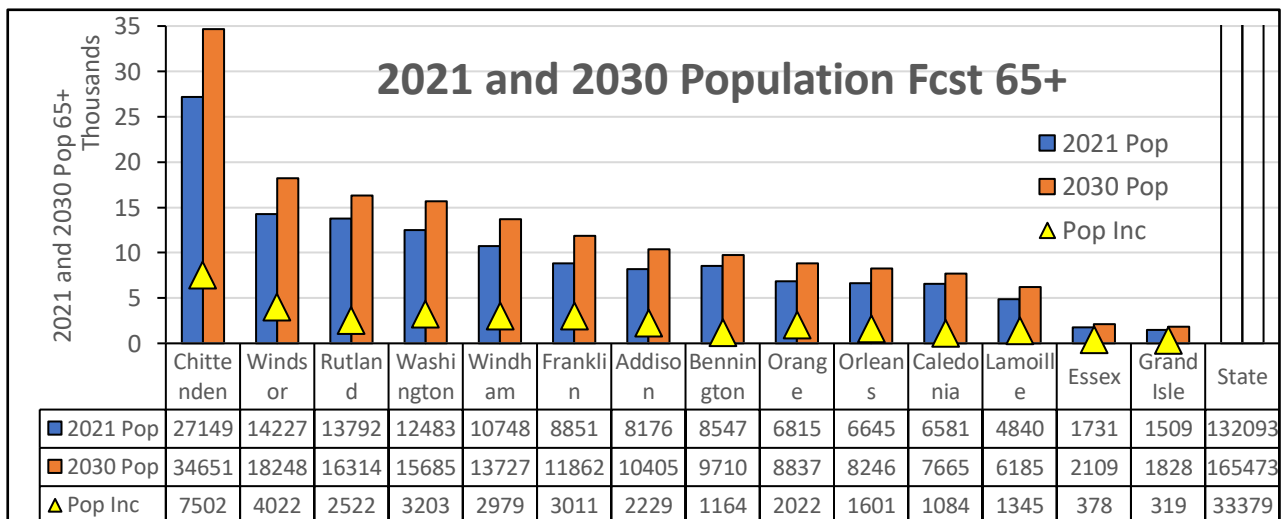
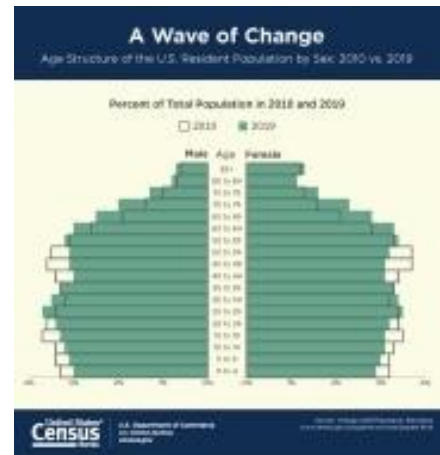


Chart 17: 2021 and 2030 Population Fcst. 65+

## Demographics Cont.

U.S. Census Bureau Releases 2019 Population Estimates by Demographic Characteristics

**JUNE 25, 2020** — The U.S. Census Bureau today released estimates showing the nation’s 65-and-older population has grown rapidly since 2010, driven by the aging of Baby Boomers born between 1946 and 1964. The 65-and-older population grew by over a third (34.2% or 13,787,044) during the past decade, and by 3.2% (1,688,924) from 2018 to 2019. The growth of this population contributed to an increase in the national median age from 37.2 years in 2010 to 38.4 in 2019, according to the Census Bureau’s [2019 Population Estimates](#).



“The first Baby Boomers reached 65 years old in 2011,” said Dr. Luke Rogers, chief of the Census Bureau’s Population Estimates Branch. “Since then, there’s been a rapid increase in the size of the 65-and-older population, which grew by over a third since 2010. No other age group saw such a fast increase. In fact, the under-18 population was smaller in 2019 than it was in 2010, in part due to lower fertility in the United States.”

**In 2019, over half (29) of the states had a median age older than 38.4 years, including all nine states in the Northeast....**

**In 2019, one in five people in Maine, Florida, West Virginia and Vermont were age 65 or older. Maine had the largest share (21.2%) of population in that age group, followed by Florida (20.9%), West Virginia (20.5%) and Vermont (20.0%).**

Bed Forecast

A Forecast of the population 65+ by County and Bed requirement by Facility Type (ALR, RCH, and NH), by Service Type (MC Memory Care, Other Care) by County for the year 2030 was conducted.

Methodology:

The process used the 2021 Facility location addresses, Facility types and Service type inventory information provided by the State of VT DLP<sup>1</sup>. (See Bibliography)

The base Census demographic data was secured from the VT State web site and verified with US Census tables. The State web data was provided at State and County geographies for all 5-year cohorts from <1 to 85+ for each year 2000 to 2019. The 65-69,70-74, 75-79,80-84 and 85+ cohorts were summed to provide the 65+ group used in this analysis. The 65+ group was then projected to 2021 and 2030.

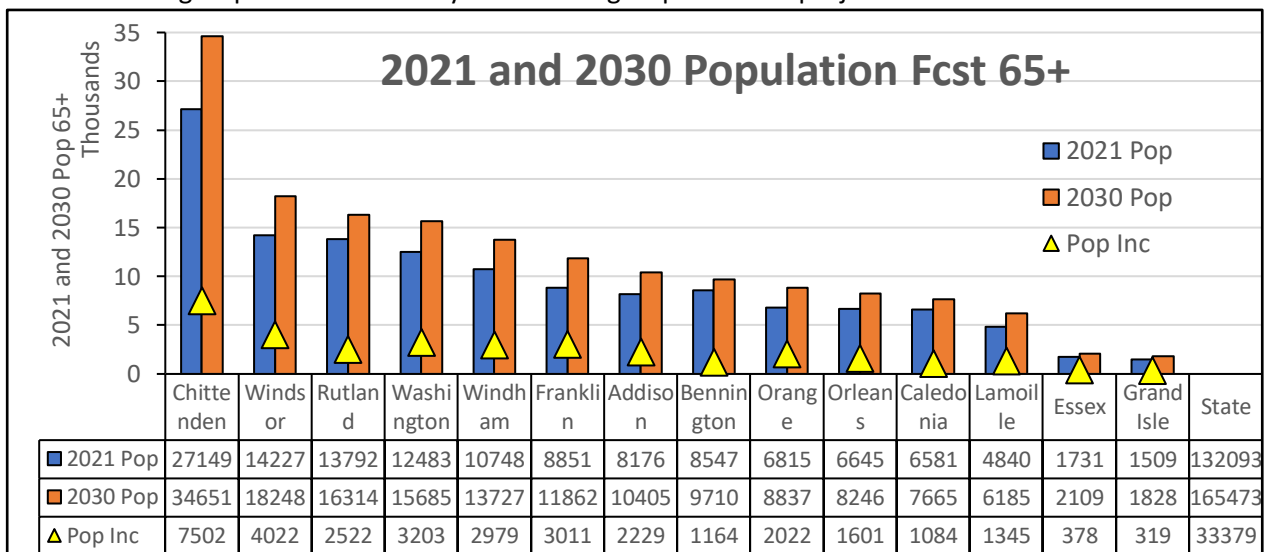


Chart 18: 2021 and 2030 Pop Fcst 65+

Dividing the 2021 Bed inventory numbers by the 2021 65+ group provided the 2021 Beds per 1000 population 65+ at the Facility Type and Service Type at the State and each County Level.

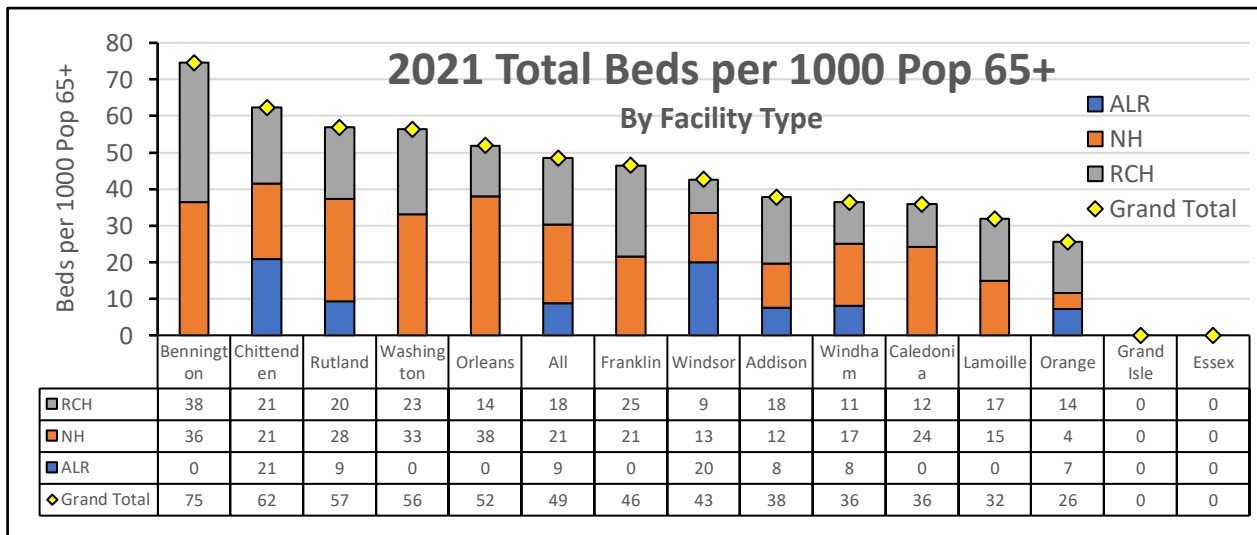


Chart 19: 2021 Tot Beds per 1000 pop 65+

## Bed Forecast Cont.

An essential assumption in the forecast is that Long-Term Care Facilities and Services are needed by and should be available for all Vermonters regardless of where they live. The forecast therefore not only increases facilities where they presently exist but also provides facilities and services in Counties where none presently exist.

Utilizing the Beds per 1000 Pop 65+ at the county level reflects the impact of the many home care/stay at home programs being administered in that county.

A top down (State level data) bottoms up (County data) consensus forecast process was used to derive the 2030 Bed Requirements by Facility and Service Types by County.

### For those Counties that have 2021 Facilities and Services:

- Bottom-Up Forecast -The County Facilities and Service 2021 Bed per 1000 pop is multiplied by the Counties 2030 Population Fcst., the result is divided by 1000 to derive the 2030 Bed Fcst.
- Top-Down Forecast - The State 2021 Bed per 1000 pop is multiplied by the Counties 2030 Pop Fcst. to derive the 2030 Bed Fcst.
- The Final 2030 Bed consensus Fcst. is the higher of the Top Down and Bottom-Up bed Fcst.

### For those Counties without 2021 Facilities or Services:

- The adjoining similar counties Facility and Spec Svc 2021 Bed per 1000 Pop 65+ number is assigned as the Counties missing Facility/Service B/1K number.
- Bottom Up Fcst: The selected Facilities or Service 2021 Bed per 1000 numbers are multiplied by the Counties 2030 Population Fcst. to derive the bottom up 2030 Bed Fcst.
- Top Down Fcst.: The State 2021 Bed per 1000 number is multiplied by the Counties 2030 Pop Fcst. to derive a top down 2030 Bed Fcst.
- The Final 2030 Bed consensus Fcst. is the average of the top down and bottom up Fcst. numbers.

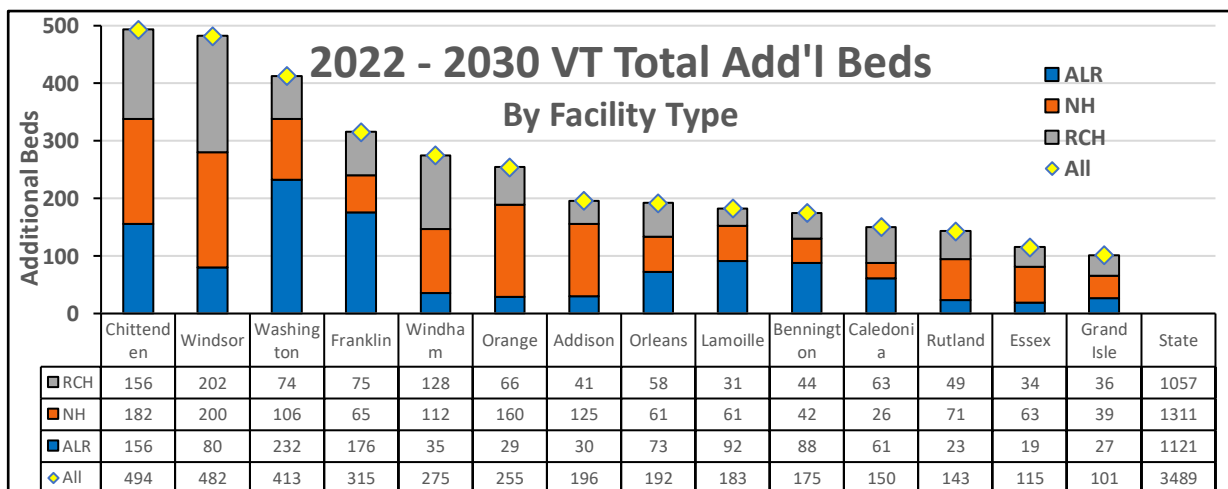


Chart 20: 2022-2030 Total Add'l Beds

Chart 20 indicates the need for 3489 additional beds (total of

Other Care and Mem Care beds)

## Bed Forecast Cont.

**Example- Windsor County** – In 2021 Windsor County has existing ALR, RCH and NH Facilities. There are Memory Care beds in ALR facilities but none in the RCH and NH facilities.

### Process With Existing Facility and Memory Care Beds in County

**-ALR Total Bed Fcst:** In 2021 there was a 65+ Pop of 14,227, with 284 Total ALR beds or 19.96 B/1K Pop 65+.

- The Bottom Up 2030 Total ALR beds required will be the 2012 B/1K (19.96) times the 2030 Pop Fcst of 18,248 to equal the total ALR beds required of 364, or an additional 80 ALR total beds.
- The Top Down Fcst takes the 2021 Total VT total ALR beds of 1173 and divides it by the State 65+ Pop of 132,798 to derive a State ALR total B/1K Pop of 8.83, then multiplies the 8.83 B/1K times the County 2030 65+ Pop Fcst of 18,248 to derive the top down 2030 total beds required of 161, equating to 123 beds less than the existing 284.
- The Final Consensus Forecast is the highest number of additional beds required from the two processes (Bottom up and Top down) i.e., plus 80 or a minus 123, for a final additional total Fcst. of plus 80 ALR beds by 2030, as reflected in Chart 20. The same process was conducted on the RCH, and NH total beds and the ALR Memory Care bed categories, for which there are existing facilities in Windham County.

### Process if No Facility or Memory Care Beds exist in County:

As there are no Memory Care Beds in the RCH and NH existing Facilities in Windsor County the B/1K Pop number from the adjoining Rutland County will be used, i.e., 3.19 B/1K for RCH Mem Care for the Bottom Up Fcst process.

- The Bottom Up 2030 RCH - Memory Care beds required will be the 2012 B/1K (3.19) times the 2030 Pop Fcst of 18,248 divided by 1000 to equal the total RCH Mem Care beds required of 58, or an additional 58 RCH Mem Care beds.
- The Top Down Fcst takes the 2021 Total VT RCH Mem Care beds of 217 and divides it by the State 65+ Pop of 132,798 to derive a State RCH Mem Care B/1K Pop of 1.63, then multiplies the State 1.63 B/1K times the County 2030 65+ Pop Fcst of 18,248 divided by 1000 to derive the top down 2030 total beds required of 30, or an additional 30 beds.
- The Final Consensus Forecast is the average of the Bottom up and Top-down process i.e.,  $58+30=88 / 2=44$  for a final additional total Fcst. of plus 44 RCH Mem Care beds by 2030, as reflected in Chart 22.

## Bed Forecast Cont.

### Memory Care Beds:

In Vermont, the State has a Dementia-Memory Care Bed designation. These beds are specifically to be used by those needing this special care. The need for this type of service is growing at a significant rate.

Per the Alzheimer’s Association - **Vermont is second highest State for % Increase in Alzheimer-dementia population in the USA 2020-2025 at 30.8% Increase, also 1 in 3 seniors dies with Alzheimer’s or another dementia.”**

Additionally, in many cases Facilities with Designated Memory Beds will have buildings designed or retrofitted to restrict passage of the Dementia resident. Special training to handle Memory Care Residentials is also a consideration.

Per the Alzheimer’s Assoc – **“55% of primary care physicians caring for people living with Alzheimer’s report there are not enough dementia care specialists in their communities to meet patient demands.”**

The chart below illustrates the location and absence of Designated Memory Care beds in 2021.

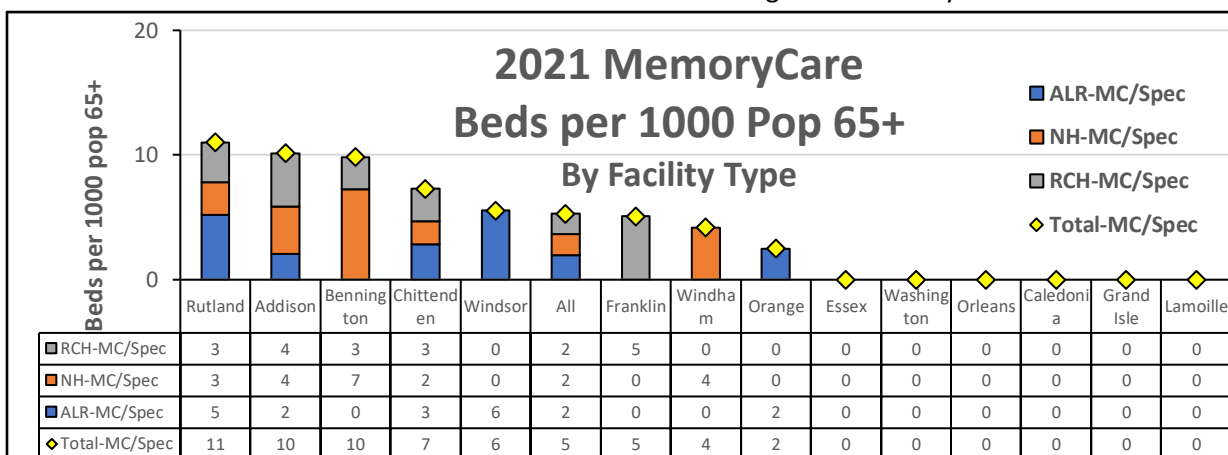


Chart 21: 2021 Beds per 1K pop 65+

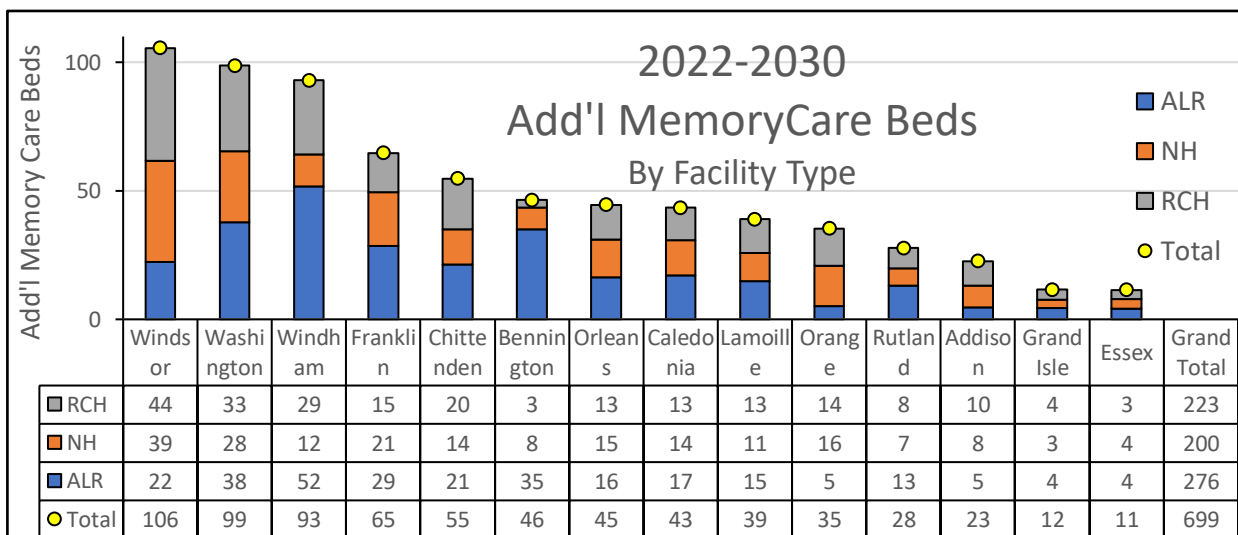


Chart 22: 2022-2030 Add'l Memory Care Beds

The chart above indicates the need for 699 add'l Memory-Special care beds by 2030, by Facility type and County.

Bed Forecast Cont.

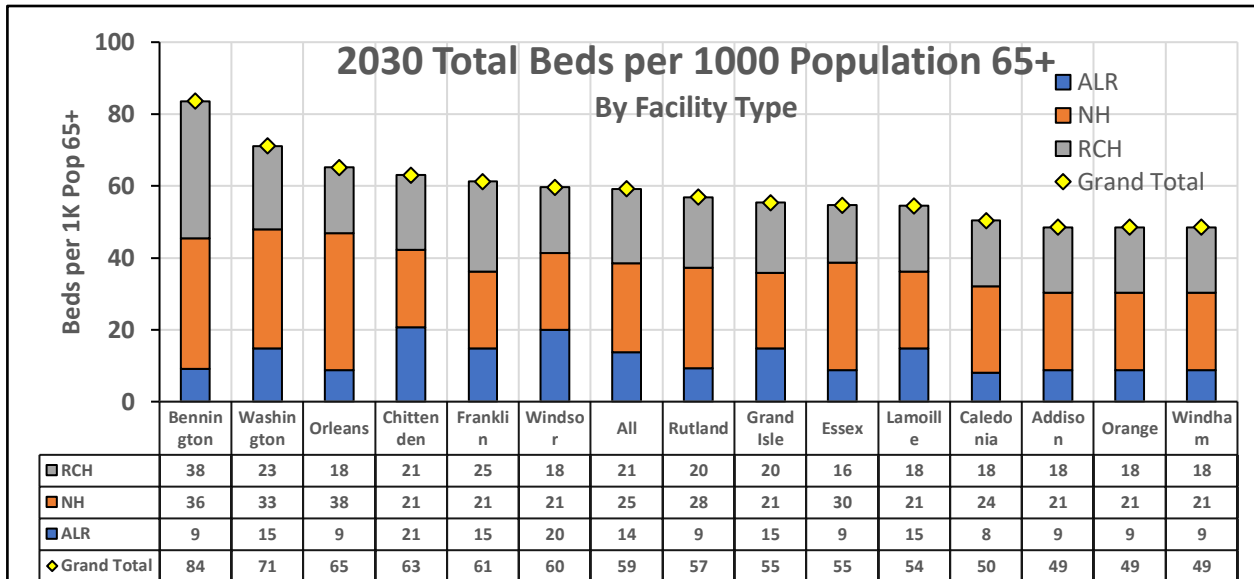


Chart 23: 2030 Total Beds per 1000 Pop 65+

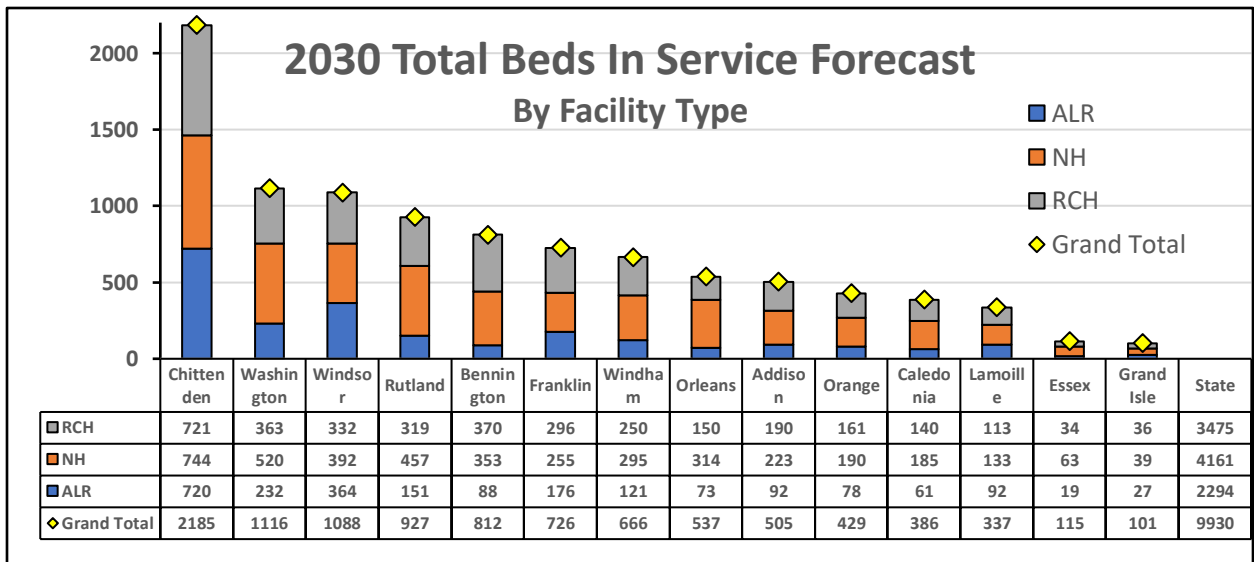


Chart 24: 2030 Total Beds in Service

The Chart above indicates the Total Beds required (9930) in 2030 by Facility Type and County.

The 2030 Forecast brings the availability of all Facility Types (ALR, RCH and NH) and Memory Care Services to citizens in all Counties.



### Key Location Factors

Essentially the LTC Facility provides a geographic-based service area. The location of Long-Term Facilities is as important as the facility beds being available. Keeping the “Community Care Concept” alive is an important ingredient in assisting the Senior population as they progress through the Health Care Facilities hierarchy. A facility near their existing community is essential to their well-being as well as their spouse, siblings, children, relatives, and friends. This concept is one of the main philosophies of the many home health care initiatives.

Viewing the various Facility location service area maps, one can see the gaps in Facility accessibility areas. The demand for the additional 3500 beds by 2030 with expansion of existing facilities alone will not provide the service areas needed to continue the Community Care concept therefore additional more localized Facility locations are needed.

In selecting these areas/communities for the new facilities several location preferences were incorporated.

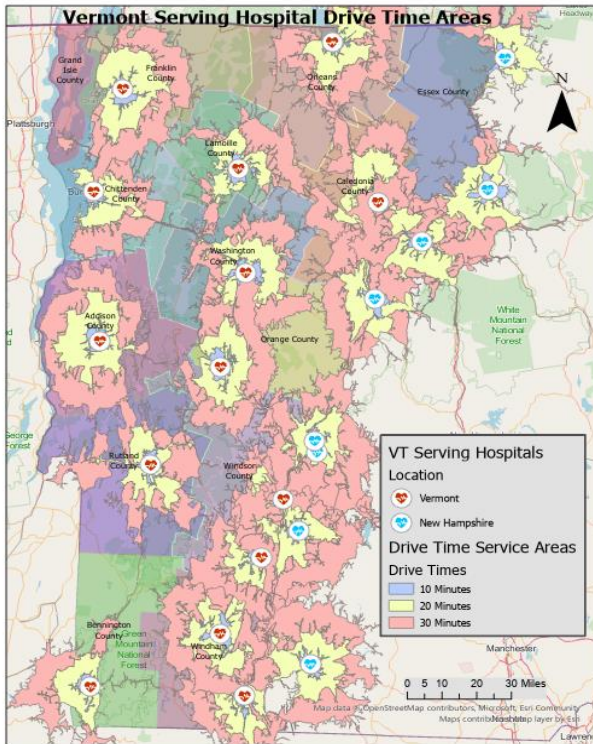
- The commuting times ideally should not exceed 30 Minutes one way between LTC facilities and Hospitals/ medical facilities.
- Facilities on or near a major highway.
- Facilities near a population center (city, town) for services (fire, police, ambulance, medical attention) and availability of facility staff personnel and housing.
- Facilities near or in significant 65+ population census block groups.
- Facilities be located to provide the existing major population/facility centers an alternative location for future bed/personnel demand overflow.

Utilizing GIS (Geographic Information System) mapping software, the following pages show the melding of these location preferences resulting in the suggested area for the various new Facilities.

In many cases the new community location for a Facility is also a demand location for another additional facility and service types. This presents an opportunity to provide a multi-level service facility community complex.

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

## Geographic Visual Analysis:



Map 11: Vt Serving Hospitals - Serving Area

### Hospital Serving Areas.

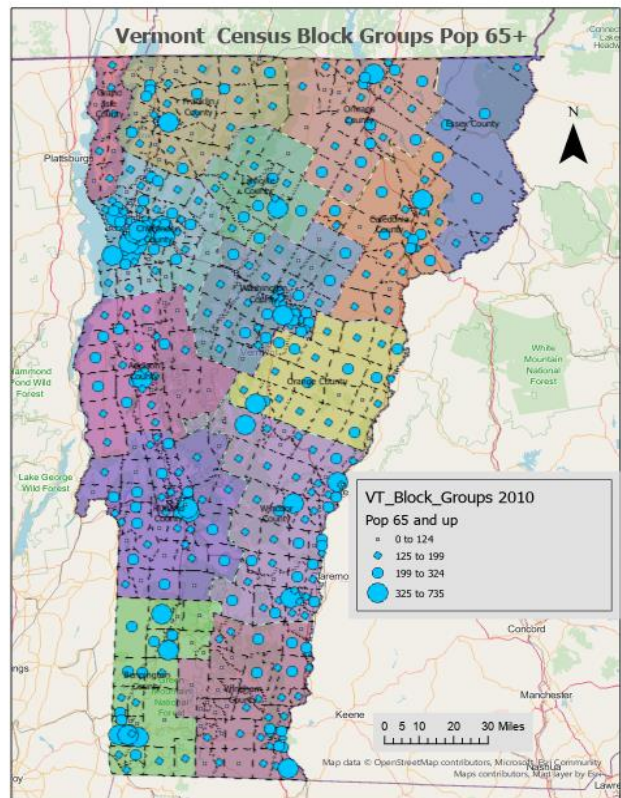
This map indicates the various Hospital in VT and those in New Hampshire within easy driving distance of VT.

Highlighted are GIS created 30-minute drive time serving areas for each of these Hospitals. We can therefore see areas that would be ideal to have a Long-Term Health Care facility located under this criterion.

### 65+ Block Group Demographic Demand

This map indicates the VT Census Block Groups and cohorts of 65+ Population in 2010.

The placement of new facilities near 65+ populated areas would provide a new location with sufficient demand and reduce travel times for Residents. We can therefore visually see the areas that would provide the demand for a Long-Term Health Care facility under this criterion.

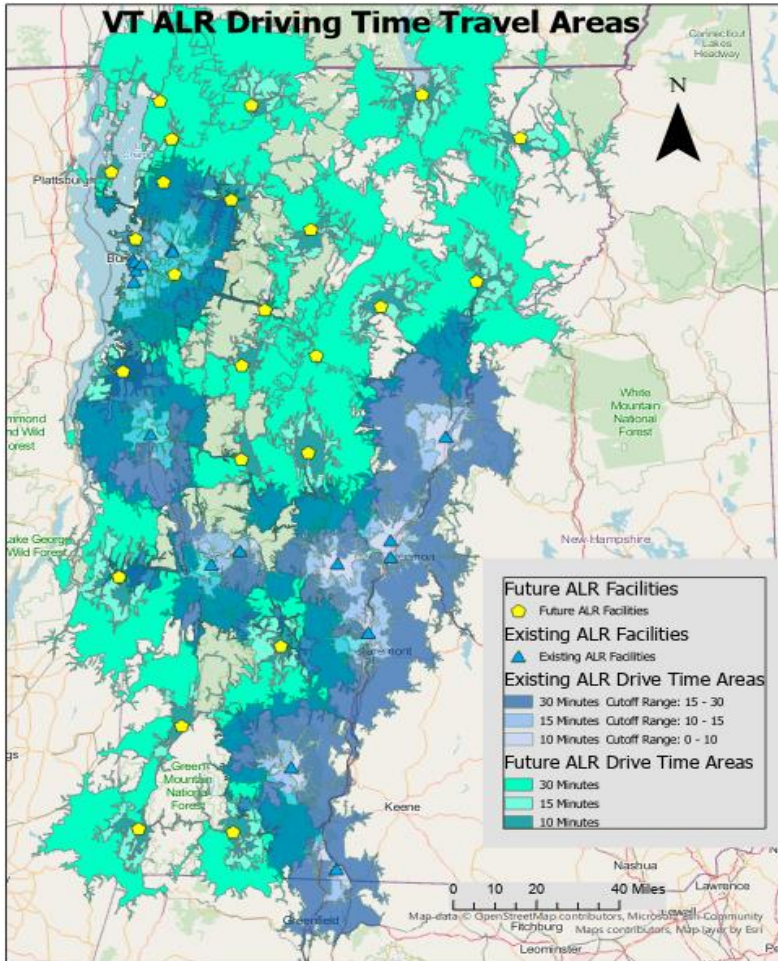


Map 12: VT Census Block Groups pop 65+

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

## Future Assisted Living Residences ALR Location Areas

Meeting the need for an additional 1120 ALR Beds consist of expanding beds in the area around existing facilities and adding new facilities in areas that are within a desirable travel area to hospitals, have 65+ demographic demand, and near major highways. This process offers LTC availability to all VT Residence while keeping them within their own community area.



Map 13: Future ALR Facility Locations

Using GIS, existing and new locations service areas were generated. This map indicates the existing ALR facilities, and their serving areas.

There are 17 Existing ALR Facilities in 13 Distinct Communities in 6 Counties. (In Blue)

Also shown are the general locations deemed best for future ALR Facilities and their serving areas. (In Green)

There are 24 additional communities in 14 Counties considered most desirable to meet the demographic demand for future facilities throughout the State for ALR services.

Below is a chart indicating the number of suggested new facility serving areas by County.

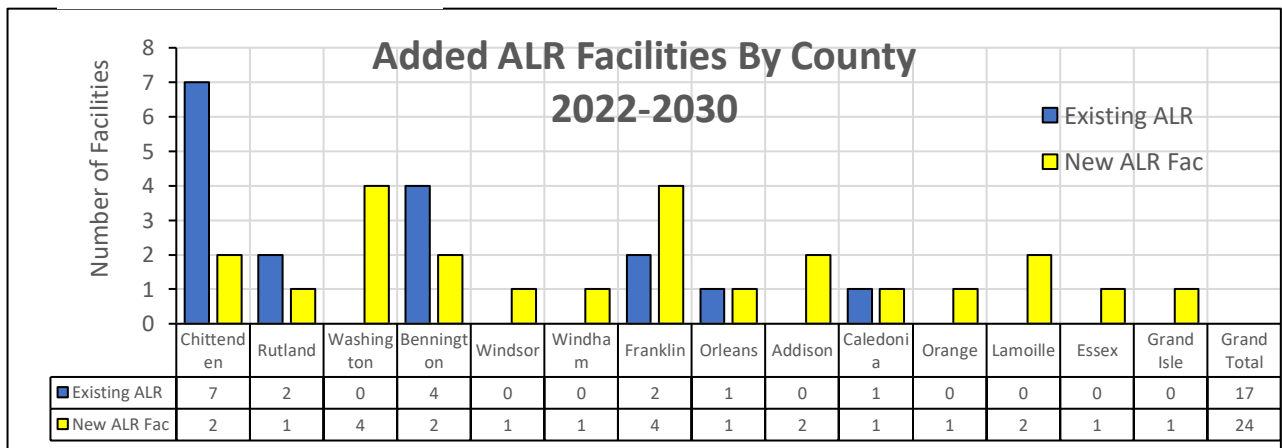


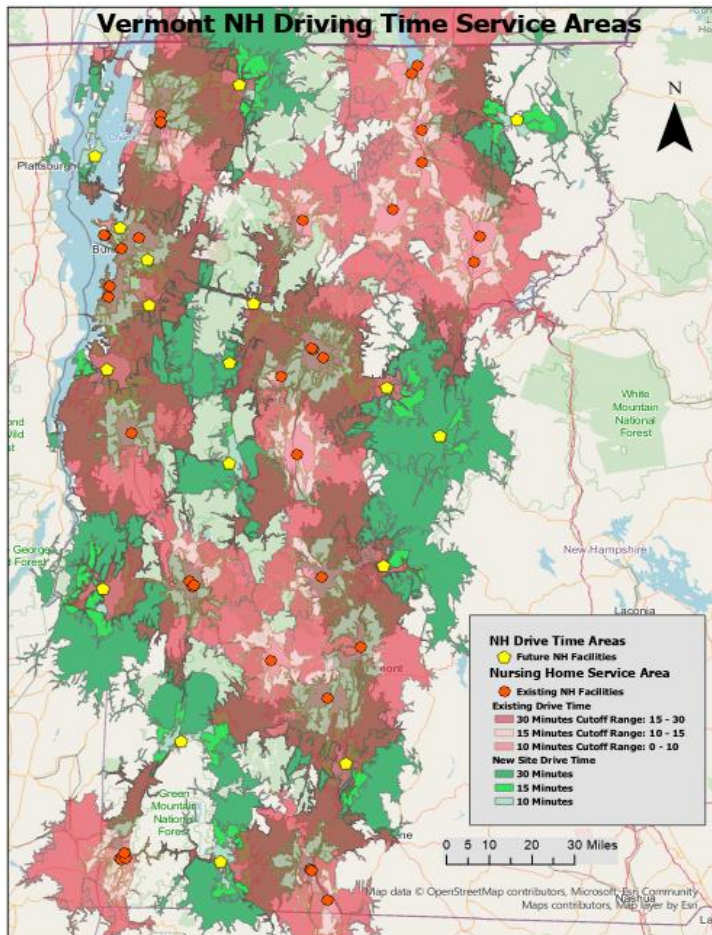
Chart 25: 2022-2030 Added ALR Facilities by County



# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

## Future Nursing Home NH Location Areas

Meeting the need for an additional 1130 NH Beds consist of expanding beds in the area around existing facilities and adding new facilities in areas that are within a desirable travel area to hospitals, have 65+ demographic demand, and near major highways. This process offers LTC availability to all Residentials while keeping them within their own community area.



Map 14: Future NH Facility Locations

This map indicates the 36 existing Nursing Home facilities located in 24 distinct communities in 12 Counties and their serving areas in red.

Also shown are the general locations deemed best for the future NH Facilities in yellow and their serving areas in green.

There are 17 new communities (In Yellow and Green) throughout the State's 14 Counties considered most desirable to meet the demographic demand for future facilities throughout the State for NH services.

Below is a chart indicating the number of suggested new facility serving areas by County.

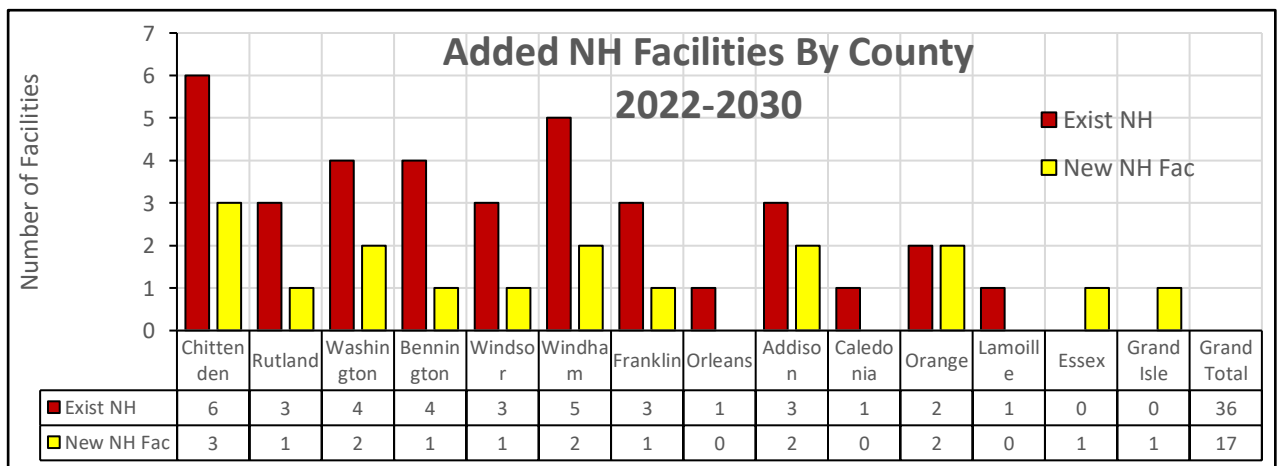
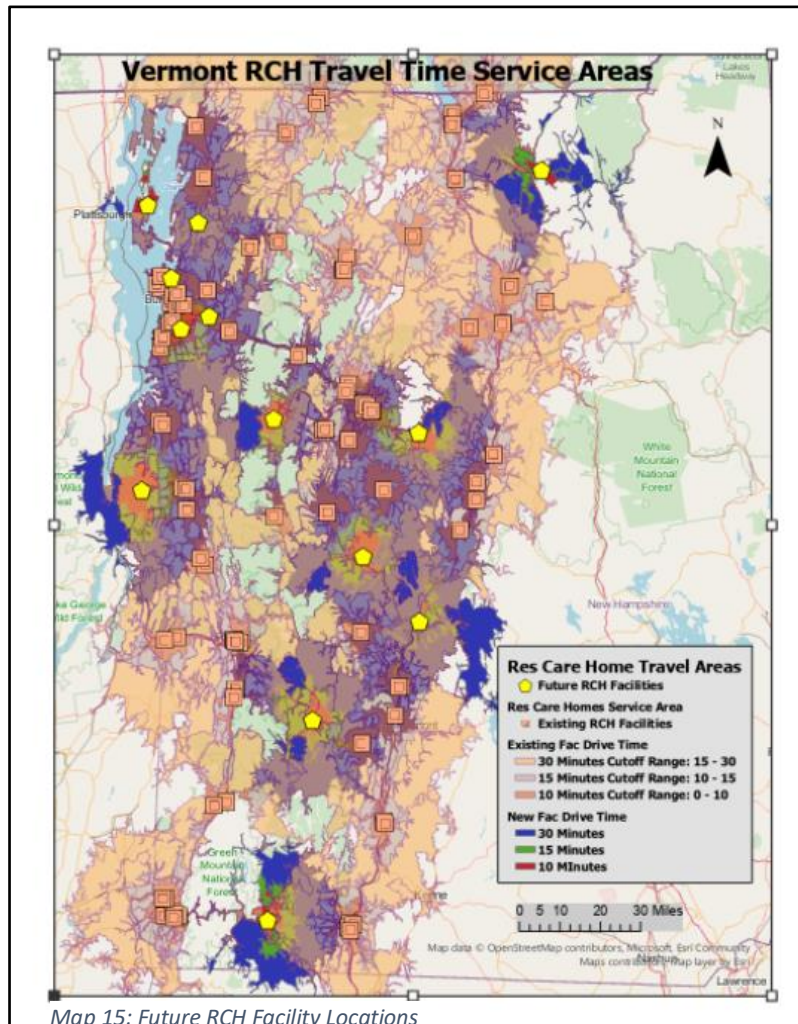


Chart 26: Added NH Facilities by County 2022-2030

# Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

## Future Residential Care Homes RCH Location Areas

Meeting the need for an additional 1060 Beds consist of expanding beds in the area around existing facilities and adding new facilities in areas that are within a desirable travel area to hospitals, have 65+ demographic demand, and near major highways. This process offers LTC availability to all Residentials while keeping them within their own community area.



This map indicates the 103 Existing RCH Facilities in 51 Distinct communities in 12 Counties (in Brown). Using GIS, existing and new RCH locations and their service areas were generated.

Also shown are the general locations deemed best for future RCH Facilities in (In yellow) and their 30 min. drive time serving areas.

There are new RCH facilities in 13 distinct community areas in 8 Counties. These new areas are considered most desirable to meet the demographic demand for future facilities throughout the State for RCH services.

Below is a chart indicating the number of suggested new facility serving areas by County to match the projected bed demand and meet the Keeping People in their Community objective.

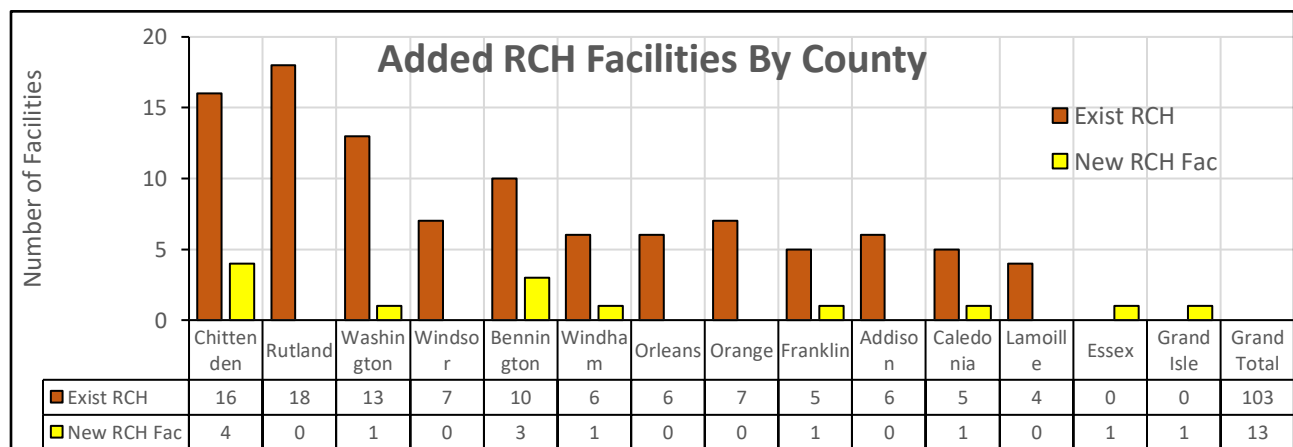


Chart 27: 2022-2030 Added RCH Facilities by County

## Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

### New Facility Locations 2022-2030

Below is a list of the suggested new locations for LTC Facilities These new locations combined with additional beds within the existing facility communities are needed to meet the Locational and bed needs of the 65+ population during the 2022-2030-time frame.

New Facility Locations (2022-2030)						
County	Community Area	ALR	RCH	NH	Community Fac Total	Combined Facility
Addison	Bridport	X	X	X	3	X
Addison	Hancock	X		X	2	X
Bennington	Bennington	X			1	
Bennington	Manchester Center	X		X	2	X
Caledonia	St. Johnsbury	X			1	
Chittenden	Colchester	X	X	X	3	X
Chittenden	Georgia	X	X		2	X
Chittenden	Hinesburg			X	1	
Chittenden	Shelburne		X		1	
Chittenden	Williston	X	X	X	3	X
Essex	Island Pond	X	X	X	3	X
Franklin	Cambridge	X			1	
Franklin	Enosburg Falls	X		X	2	X
Franklin	St. Albans	X			1	
Franklin	Swanton	X			1	
Grand Isle	Grand Isle	X	X	X	3	X
Lamoille	Johnson	X			1	
Orange	Bradford			X	1	
Orange	Randolph Center	X			1	
Orange	W. Thompson		X	X	2	X
Orleans	Newport	X			1	
Rutland	New Haven	X		X	2	X
Washington	Barre	X			1	
Washington	Marshfield	X			1	
Washington	Wakefield	X	X	X	3	X
Washington	Waterbury	X		X	2	X
Windham	Wilmington	X	X	X	3	X
Windsor	Bellows Falls			X	1	
Windsor	Ludlow	X	X		2	X
Windsor	South Royalton		X		1	
Windsor	White River		X	X	2	X
14	31	24	13	17	54	16

Table 1: New Facility Location list

## Add'l Facility Capital Cost

The capital required to build the additional building space for the 3500+- Beds with associated equipment is considerable. Several costs from a 2017 Canadian report (Gibbard, 2017)<sup>3</sup> were collected and converted to US dollars at a 1.35 (2017) exchange rate.

The Chart 28 below indicates the Total 9-year cost to build and equip the building space for the 3489 added beds by 2030. Indicated are the possible cost levels from the study using the median cost of \$239K/Bed, the average cost at \$283K/Bed and the high cost of \$397K/Bed, adjusted at an annual 4.4%<sup>4</sup> construction inflation rate.

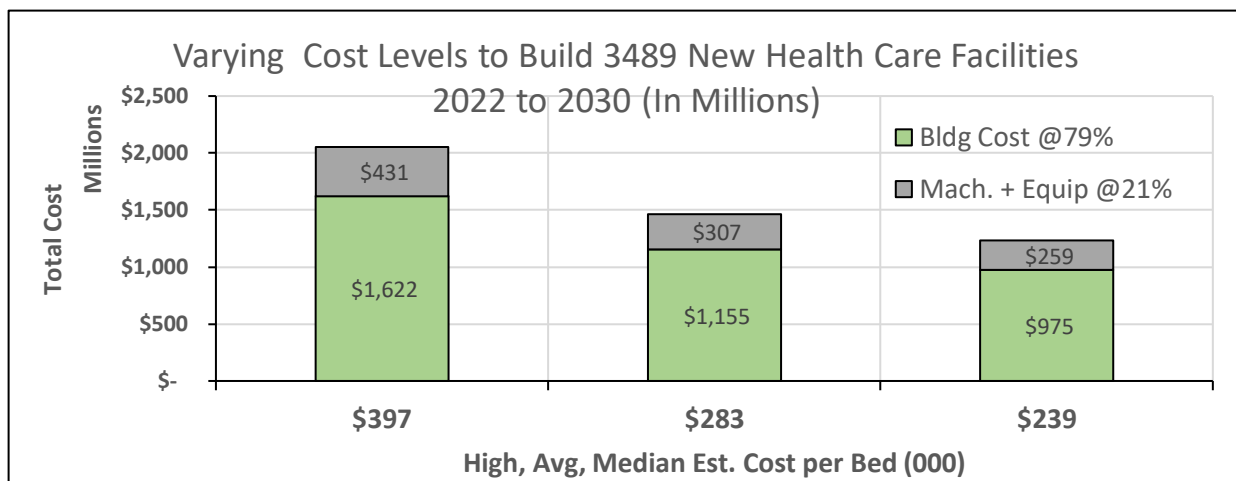


Chart 28: Various Cost to Build New LTC Facilities

Chart 29 Bar Charts left axis represent the Median \$239k/Bed cost and spreads the New Beds construction evenly over the 9-year 2022-2030 construction period. The 2022 \$K/Bed dollars were increased by a 4.4% annual inflation factor to reflect building cost increases during the 9-year 2022-2030 span. The right line axis represents possible low (\$1.23 Billion) and high(\$2.05 Billion) total accumulated cost over the 9-year period.

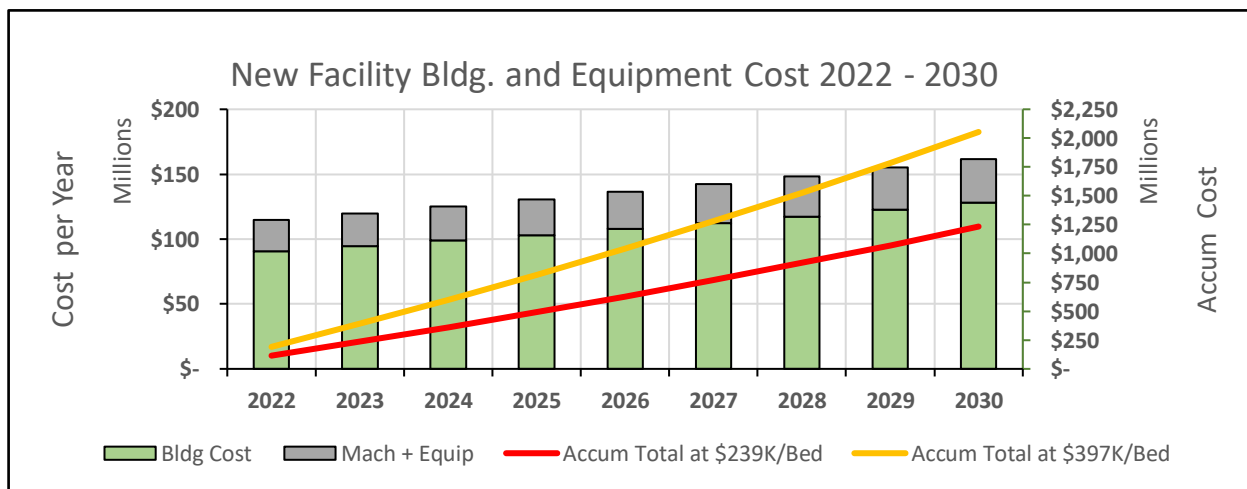


Chart 29: New LTC Facility Construction Cost 2022-2033

The raising of this amount of capital by the Public and Private, For Profit and Not for Profit Facility owners will be a challenge. Coordination on a Federal State between State Officials, Finance Firms and the Facility Owners could facilitate such funding.

3 Conference Board of Canada 2017, 4 Construction Analytics – Construction Inflation 2022 Update 5-3-22



**Add'l Facility Operating Cost**

The Additional Operating Cost (In Millions) for the forecasted 3489 additional beds is indicated in the graph below. Current and historical operating expense data was collected on a Cost per bed basis from several existing Long-Term Facilities and projected for the years 2022 to 2030. The total Add'l Beds were divided evenly over the 9-year forecast period.

The Yearly Operating expense is expected to go from approx. \$16 Million in 2022 to near \$166 Million in 2030. Total Accumulated Expenses are expected to be around \$800 Million over the 9-year period.

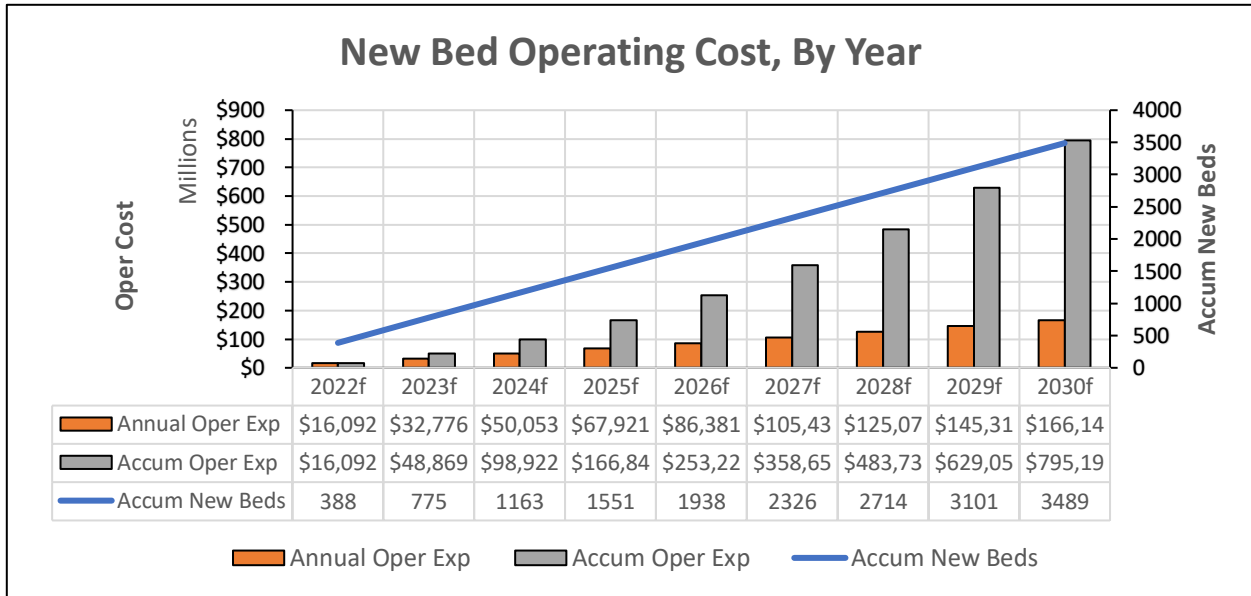


Chart 30: New LTC Facility Operating Cost 2022-2030

## Add'l Facility Personnel

Personnel are an essential element in the success of Long-Term Care Facilities. At the present time, it is a challenge to secure talented and certified nursing and management personnel, especially in this extremely competitive and limited marketplace. Personnel costs are the major component of LTC Operating Cost. Personnel generally mainly consist of Nursing, and Administrative (Admin, Dining, Maintenance).

**Axios (May 24, 2022):** The Biden administration ramped up the urgency around America's health care workforce on Monday, releasing new recommendations for addressing burnout and other factors contributing to shortages.

"If we fail to act to address health worker burnout, we will place our nation's health at increasing risk," U.S. Surgeon General Vivek Murthy said during prepared remarks on Monday.

With the addition of some 3500 new beds, the additional personnel requirements are significant. Below is a chart indicating the projected personnel required for the add'l forecasted beds in VT. These future numbers were developed using data from several existing Long-Term Facilities in VT.

**The forecast indicates a total of 2564 additional personnel will be required by 2030**, consisting of about 987 Administrative staff, and 1577 Nursing staff (RNs, LPNs, LNA, NA, CNA, Med Tech, etc.). The nursing staff requirements are divided into Memory care/ Special care beds requiring 813 add'l Staff and Other Bed Units requiring 764 add'l Staff. These numbers will be affected by any future Federal or State requirements. In some cases, these positions are not 40 hr. per week positions.

Chart 31 Below distributes the total additional new beds evenly over the 9 years of 2022 thru 2030.

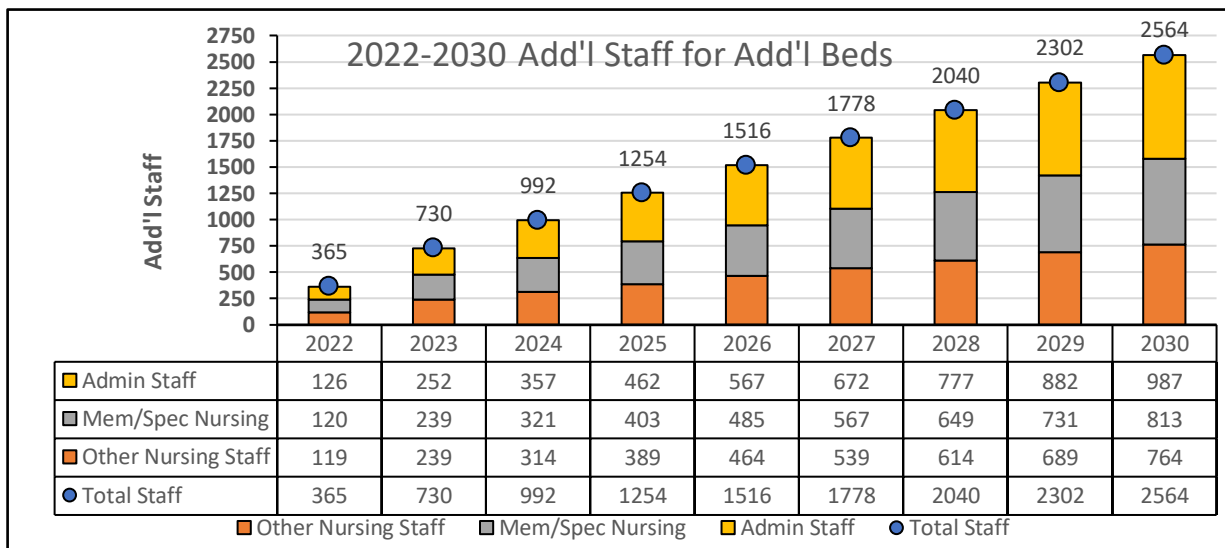


Chart 31: New LTC Facility Personnel Requirements 2022-2030

**Add'l Facility Personnel Cont.**

- “55% of primary care physicians caring for people living with Alzheimer’s report<sup>5</sup> there are not enough dementia care specialists in their communities to meet patient demands.”
- Vermont is the second highest State for % Increase in Alzheimer-Dementia in the USA 2020-2025 at 30.8% Increase.

**Potential actions to attract and keep LTC Personnel include:**

**Offer Student tuition reimbursement** with an associated reciprocal guaranteed work time in the State. i.e. Four-year, two-year, certificate/ license, on the job type programs.

**Consider a Partial Salary Tax exemption**, i.e. no income tax on the first \$50K of Salary.

**Relocation expense reimbursement** for moving to VT or within VT.

**Provide the Living Wage** (as defined by the County specific MIT Living Wage Tables [Living Wage Calculator - Counties and Metropolitan Statistical Areas in Vermont \(mit.edu\)](#)) as their minimum wage.

**Ensure State/ regional educational facilities/programs are available** to meet the increased need for trained Long-Term Health Care Personnel.

5-Alzheimer’s Assoc 2022 Alzheimer’s Disease Facts and Figures Special Report

**ACCS and ERC Rate Setting**

**Phase 1: Establish ACCS and ERC reimbursement rates to be compensatory with current cost.**

As indicated in the *State Provider Rate Study below*, ACCS and ERC reimbursement rates are significantly lower than cost. Bringing reimbursement rates up to today’s operating cost is essential to the continued operation of the LTC facilities. Without adequate funding levels existing facilities may not be able to sustain operational losses as evidenced by the many closures since 2020. Additionally, investors could find it difficult to secure construction funding for new facilities from lending institutions if incomes do not cover debt and operating cost.

**STATUTORY LANGUAGE:**

Act 185 of 2022, Sec. E.334:

**SPECIFIC HOME- AND COMMUNITY-BASED SERVICE PROVIDER RATE STUDY; REPORT**

(a) The Department of Vermont Health Access, in collaboration with the Department of Disabilities, Aging, and Independent Living, shall conduct a rate study of the Medicaid reimbursement rates paid for adult day, adult day rehabilitation, personal care, and homemaker services.

(b) On or before February 15, 2023, the Department of Vermont Health Access shall report the results of its rate study to the House Committees on Human Services and on Appropriations and the Senate Committees on Health and Welfare and on Appropriations.

DVHA engaged a contractor, the Burns & Associates division of Health Management Associates (HMA-Burns), to conduct each rate study. DVHA and DAIL worked together with HMA-Burns.

The Tables below summarize the additional State funding needed to bring the current State reimbursement rates for the various services reviewed to a cost covering level.

**Adult Day and Adult Day Rehabilitation Services**

Service	Current Rate Per Hour	Rate Per Hour from Study	Percent Increase	Estimated Total Required to Fund Increase
Adult Day Health	\$18.60	\$21.33	15%	<b>\$1,060,807</b>

**Vermont, Long-Term Health Care Facilities, Locational Demand Analysis**

**ACCS and ERC Rate Setting Cont.**

**Choices for Care Home Health Services**

Service	Current Rate Per Hour	Rate Per Hour from Study	Percent Increase	Estimated Total Required to Fund Increase
Personal Care Service alone	\$33.32	\$50.40	51%	\$6,055,146
Homemaker Service alone	\$33.32	\$50.40	51%	\$664,342
Respite/Companionship Service alone	\$26.72	\$50.40	89%	\$1,403,158
<b>Total: Choices for Care</b>				<b>\$8,122,646</b>

**Assistive Community Care Services (ACCS) and Enhanced Residential Care Services (ERC)**

Service	Current Per Diem Rate	Per Diem Rate from Study	Percent Increase	Estimated Total Required to Fund Increase
ACCS Only	\$47.25	\$84.66	79%	\$13.0 million
ERC Level 1 (includes ACCS rate above)	\$114.81	\$129.99	13%	\$8.7 million for all three ERC levels combined
ERC Level 2 (includes ACCS rate above)	\$123.24	\$168.43	37%	
ERC Level 3 (includes ACCS rate above)	\$131.71	\$210.81	60%	
<b>Total for ACCS and ERC Services</b>				<b>\$21.7 Million</b>

**Total Increase for all Services**

**\$30,883,453**

The entire report can be found here:

<https://legislature.vermont.gov/assets/Legislative-Reports/Specific-Home-And-Community-Based-Service-Provider-Rate-Study-Report-2023-02-06.pdf>:

Report was presented on 2/15/2023 to: The House Committee on Human Services

The House and Senate Committee on Appropriations, The Senate Committee on Health and Welfare

**ACCS and ERC Rate Setting Cont.:**

**Sustainable ACCS and ERC Annual Support**

**Phase 2:** Bring financial stability to future reimbursement rates.

*State Rate compensation stability is essential i.e., Annual sustainable State compensation rates covering ACCS and ERC Medicaid cost to ensure facility investors can secure construction financing and operators can continue to provide quality services.*

Two possible methods to establish annual compensation rate levels.

- **Method 1: Use of the Consumer Price Index (CPI)** Use of the CPI can be used by State officials to establish a sustainable method of setting the ACCS and ERC yearly reimbursement rates.

The US Bureau of Labor Statistics provides CPI data on a regional basis for certain services. Below is a chart indicating the CPI history of All services and Medical Care Services for the Bureau’s Northeast Region States. Specific Bureau Medical Care Services level data is not available at a VT State level.

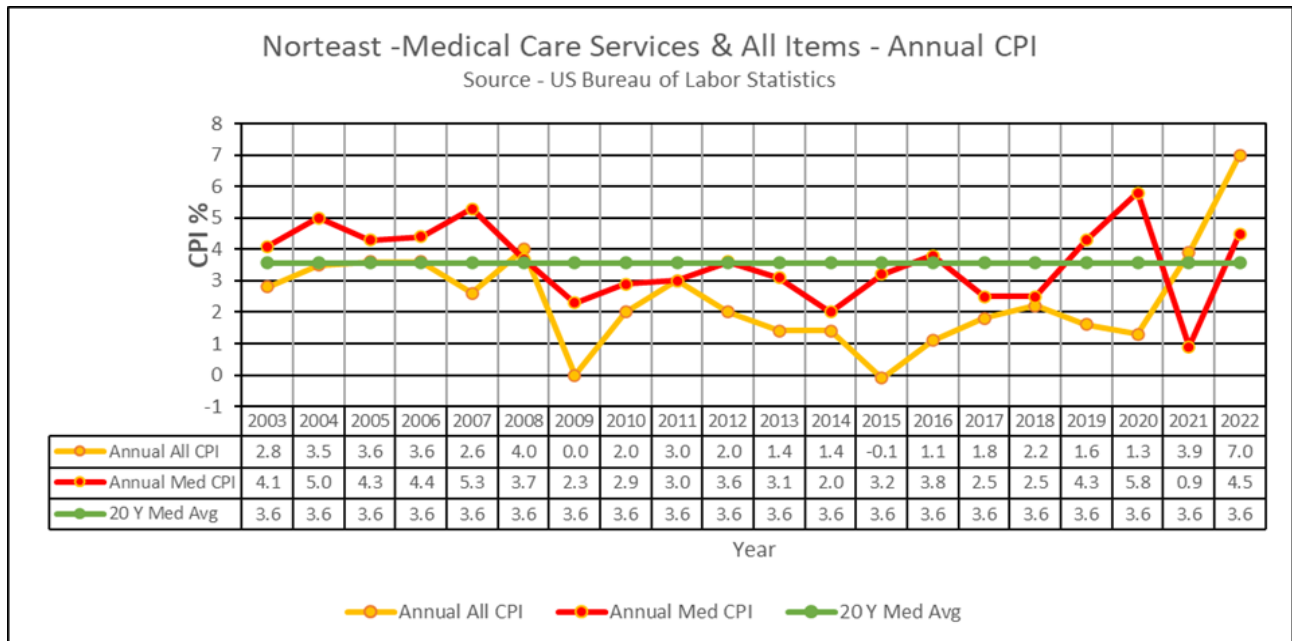


Chart 32, Northeast CPI, All and Med Items

**Sustainable Annual Support Cont.**

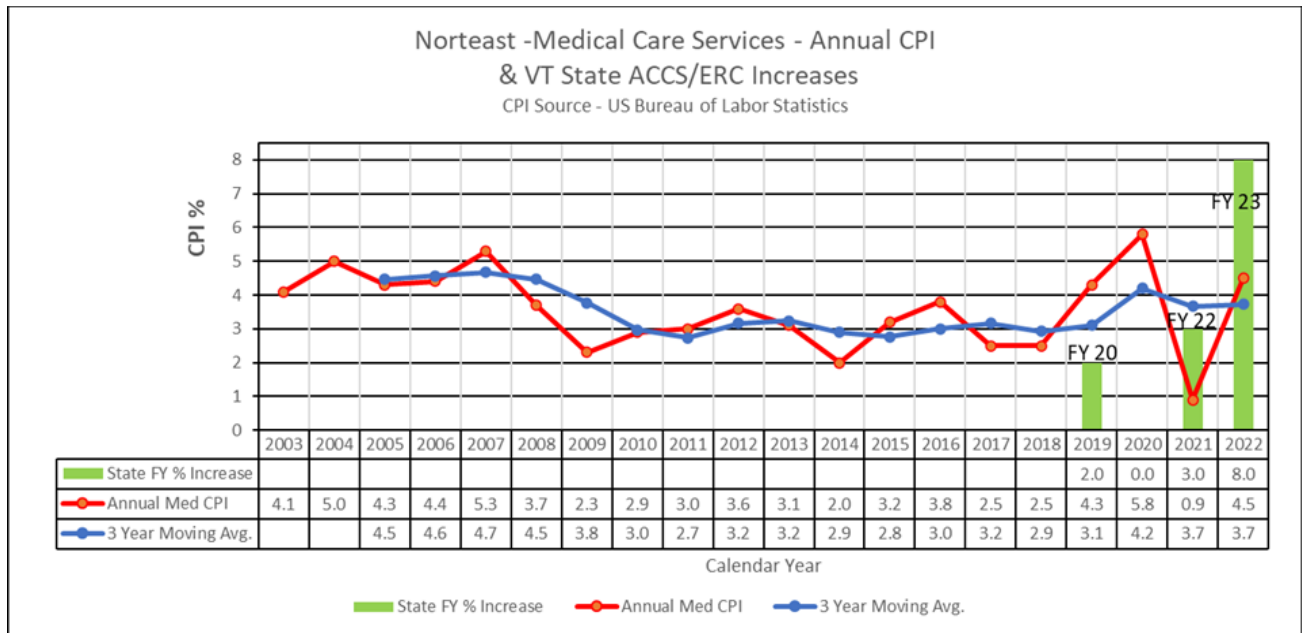


Chart 33, Northeast CPI, 3y moving average and VT State Increases

Using a moving average smooths large swings in the data due to volatile events such as pandemics, recessions hyperinflation, and effects of war while representing the latest data and its direction

**Method 2; Use Annual average % Medicaid rate change used for VT Nursing Homes**

Nursing Home compensation rates are set annually and are established by State and Federal regulations.

Another method of establishing rates for Assisted Living and Residence Care Homes is to apply the average % change in the Nursing Home rates as the change for the other LTC facilities. It would not be prudent to apply the actual Nursing Home compensation rate as their costs are greater than the Assisted Living and Residence Care Homes, especially in administrative and Nursing Staff requirements.

Listed below are the Nursing Home Rates for 2022 and 2023, and on the bottom the existing and proposed ACCS and ERC rates, and a comparison of the NH and ACCS/ERC rates. The NH Rates difference between 2022 and 2023 averaged increase is 8.5%. This increase is more than twice the 3.6% CPI increase for Northeast Medical Care Services.

VT Skilled Nursing Home Medicaid Rates 2022 vs 2023

Vermont Skilled Nursing Facility Medicaid Rates 1/1/2022 to 3/31/22 and 1/1/23 to 3/31/23 Comparison				
Facility	Provider Number	January Medicaid 2022 Rate	January Medicaid, 2023 Rate	% Change from 2022
Barre Gardens	1029609	\$248.05	\$267.73	7.9%
Bel-Aire Center	1016086	\$215.04	\$239.65	11.4%
Bennington	1026887	\$255.65	\$252.52	-1.2%
Berlin	1026890	\$281.34	\$266.66	-5.2%
Birchwood Terrace	1034645	\$238.69	\$263.59	10.4%
Brattleboro Crossings	1015648	\$288.91	\$317.03	9.7%
Burlington	1026891	\$357.76	\$367.23	2.6%
Cedar Hill	475046	\$350.00	\$299.71	-14.4%
Centers for Living & Rehab	6707342	\$326.77	\$328.13	0.4%
Crescent Manor	1026235	\$234.84	\$251.17	7.0%
Elderwood	1034669	\$320.93	\$352.91	10.0%
Franklin County Rehab	475047	\$302.51	\$371.59	22.8%
Gifford	1026110	\$335.76	\$355.02	5.7%
Gill Odd Fellows	475052	\$240.29	\$450.11	87.3%
Green Mountain Nursing and Rehabilitation	1026125	\$290.12	\$309.02	6.5%
Greensboro	475043	\$238.37	\$290.16	21.7%
Helen Porter	475017	\$301.76	\$311.30	3.2%
Maple Lane	475042	\$221.90	\$270.11	21.7%
Mayo	475053	\$327.36	\$365.82	11.7%
Mountain View Center	1016087	\$222.26	\$234.47	5.5%
Newport	475026	\$186.36	\$190.10	2.0%
Pines Rehab and Health Center	475044	\$233.99	\$261.32	11.7%
Rutland Crossings	1015647	\$277.79	\$299.41	7.8%
Rutland Healthcare and Rehab Ctr	1017920	\$217.28	\$226.31	4.2%
Saint Albans Healthcare and Rehab	1017919	\$233.86	\$247.96	6.0%
Springfield	1026889	\$243.79	\$259.97	6.6%
St. Johnsbury	1026888	\$255.51	\$253.31	-0.9%
The Manor	475057	\$272.98	\$329.68	20.8%
The Villa Rehab Center	1026009	\$273.55	\$267.73	-2.1%
Thompson House	475050	\$260.53	\$300.14	15.2%
Union House	475036	\$225.75	\$274.02	21.4%
Vernon Green	475008	\$324.61	\$274.59	-15.4%
VT Veterans Home	475032	\$475.00	\$475.00	0.0%
Woodridge	475045	\$323.17	\$380.67	17.8%

Average Med Rate \$ 276.54 \$ 300.12 8.5%

Comparison of Nuring Home Medicade rates and other LTC Facilities

Existing ERC III	\$ 131.71
Diff from Medicaid Rate	\$ (168.41)
% Diff	-56%
Proposed ERC III	\$ 210.81
Diff from Medicaid Rate	\$ (89.31)
% Diff	-30%
Existing ACCA	\$ 47.25
Diff from Medicaid Rate	\$ (252.87)
% Diff	-84%
Proposed ACCA	\$ 84.66
Diff from Medicaid Rate	\$ (215.46)
% Diff	-72%



## Facility Inventory Data

### **Facility Inventory:**

To Analyze and Locational Forecast by Facility Type and Service type a database needs to be established and maintained monthly. This database could reside with the VT Department of Disabilities, Aging and Independent Living -DAIL. This database should include such information as Facility, Address, Number of Beds by Service Type, Number of beds in use by service type, Residence counts by age, sex, prior facility types and address, and last home Residential city/town.

This data combined with Census data will provide the State with an excellent basis for providing demand forecast by Type, Service, and location. It will also highlight when demand from a particular area could warrant a new Facility in that area.

### **Online Geographic Facility Information Database:**

The moving from one's home to a Care Facility is one of the most traumatic experiences for the person and their loved ones. Keeping Residences close to their existing community is essential to their well-being and that of their spouses, siblings, relatives, and friends. Knowing where to send someone is one of the paramount endeavors in the hierarchy of long-term health care.

This Data system will assist: The Public when looking for Facility type, location, and availability, Hospitals, Doctors, and Social Agencies who are also looking to place people to the various levels of Long-Term Care facilities.

The database should be updated regularly when beds become available.

Additionally, this web page would be most effective if placed as a main selection on the States DAIL home page [Home Page | Disabilities, Aging and Independent Living \(vermont.gov\)](#).

### **(2021) VT LTC DAIL Facility Inventory List:**

The following Attachments is data secured from the State of Vermont DAIL department.

These attachments indicate the Facilities by Type RCH, ALR and NH, and were used as a basis for Geocoding their locations, calculations and forecast in this report. A special thanks to these excellent State employees for answering my many phone calls.

VT Residential Care Homes RCH Facility Inventory by County 2021

VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
Johnson Care Home	Res Care Home	919 VT Route 100	Hancock	VT	05748	Addison	No	Yes	Yes	6	0	6
Eastview at Middlebury	Res Care Home	100 Eastview Terrace	Middlebury	VT	05753	Addison	Yes	No	No	55	18	37
The Residential at Otter Creek	Res Care Home	350 Lodge Road	Middlebury	VT	05753	Addison	Yes	No	No	44	17	27
Shard Villa	Res Care Home	1177 Shard Villa Road	Salisbury	VT	05769	Addison	No	Yes	Yes	17	0	17
Ringer's Home Care	Res Care Home	195 Green Street	Vergennes	VT	05491	Addison	No	Yes	Yes	9	0	9
Vergennes Residential Care Home	Res Care Home	34 North Street	Vergennes	VT	05748	Addison	No	Yes	Yes	18	0	18
Autumn House	Res Care Home	141 South Branch Street	Bennington	VT	05201	Bennington	No	Yes	No	4	0	4
Brookdale Fillmore Pond	Res Care Home	300 Village Lane	Bennington	VT	05201	Bennington	No	Yes	Yes	109	0	109
Gatling House Group Home	Res Care Home	106 John Street	Bennington	VT	05257	Bennington	No	Yes	No	4	0	4
Manes House	Res Care Home	127 Union Street	Bennington	VT	05201	Bennington	No	Yes	Yes	11	0	11
Rivers Edge Community Care Home	Res Care Home	5 Hunt Street	Bennington	VT	05201	Bennington	No	Yes	Yes	25	0	25
Washington Elms	Res Care Home	126 Elm Street	Bennington	VT	05201	Bennington	No	Yes	No	24	0	24
Bromley Manor	Res Care Home	2595 Depot Street	Manchester Center	VT	05255	Bennington	Yes	No	No	33	11	22
Equinox Terrace	Res Care Home	324 Equinox Terrace Road	Manchester Center	VT	05255	Bennington	Yes	Yes	Yes	92	11	81

VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
Fairwinds Residential Care Home	Res Care Home	108 Mechanic Street	North Bennington	VT	05257	Bennington	No	No	No	8	0	8
Watson House	Res Care Home	18 Prospect Street	North Bennington	VT	05267	Bennington	No	Yes	Yes	16	0	16
Cedar Lane Home	Res Care Home	76 Cedar Lane	Danville	VT	05828	Caledonia	No	Yes	No	4	0	4
Pine Knoll Community Care Home	Res Care Home	601 Red Village Road	Lyndonville	VT	05851	Caledonia	No	Yes	Yes	10	0	10
Canterbury Inn	Res Care Home	46 Cherry Street	St. Johnsbury	VT	05819	Caledonia	No	Yes	No	42	0	42
Parkway House	Res Care Home	1111 Main Street	St. Johnsbury	VT	05819	Caledonia	No	Yes	No	5	0	5
Ethan Allen Residential	Res Care Home	1200 North Avenue	Burlington	VT	05408	Chittenden	No	Yes	Yes	39	0	39
Lakeview Community Care Home	Res Care Home	322 St Paul Street	Burlington	VT	05401	Chittenden	No	Yes	No	16	0	16
Pennington House	Res Care Home	1822 North Avenue	Burlington	VT	05403	Chittenden	No	No	No	6	0	6
St Joseph's Residential Care	Res Care Home	243 North Prospect Street	Burlington	VT	05401	Chittenden	No	Yes	Yes	41	0	41
Maple Ridge Memory Care	Res Care Home	6 Freeman Woods	Essex Junction	VT	05452	Chittenden	Yes	No	No	56	56	0
Sterling House at Richmond	Res Care Home	61 Farr Road	Richmond	VT	05477	Chittenden	No	Yes	Yes	21	0	21
Arbors	Res Care Home	687 Harbor Road	Shelburne	VT	05482	Chittenden	No	No	No	52	0	52
Linden Residential Care	Res Care Home	200 Wake Robin Drive	Shelburne	VT	05482	Chittenden	No	No	No	41	0	41
The Residential at Shelburne Bay - West	Res Care Home	185 Pine Haven Shore Road	Shelburne	VT	05482	Chittenden	Yes	No	No	26	15	11
Allen Harbor Senior Living	Res Care Home	90 Allen Road	South Burlington	VT	05403	Chittenden	No	No	No	60	0	60

VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
East Terrace Home	Res Care Home	71 East Terrace	South Burlington	VT	05403	Chittenden	No	No	No	6	0	6
Gazebo Senior Living - Gazebo North	Res Care Home	1530 Williston Road	South Burlington	VT	05403	Chittenden	No	Yes	Yes	40	0	40
Gazebo Senior Living - Gazebo Apartments	Res Care Home	1510 Williston Road	South Burlington	VT	05403	Chittenden	No	Yes	Yes	35	0	35
South Harbor Senior Living	Res Care Home	20 Harbor View Road	South Burlington	VT	05403	Chittenden	No	Yes	No	70	0	70
Second Spring North	Res Care Home	1071 VT Route 15	Underhill	VT	05489	Chittenden	No	Yes	No	8	0	8
Our Lady of Providence	Res Care Home	47 West Spring Street	Winooski	VT	05404	Chittenden	No	Yes	Yes	48	0	48
Loch Lomond	Res Care Home	700 Willison Road	North Concord	VT	05858	Essex	No	Yes	No	16	0	16
	Res Care Home			VT		Essex				0	0	0
Brownway Residential	Res Care Home	328 School Street	Enosburg Falls	VT	05450	Franklin	No	Yes	Yes	56	0	56
Ave Maria Community Care Home	Res Care Home	19 School Street	Richford	VT	05476	Franklin	No	Yes	Yes	17	0	17
Our Lady of the Meadows	Res Care Home	1 Pinnacle Meadows	Richford	VT	05476	Franklin	Yes	Yes	Yes	71	45	26
Homestead Senior Living	Res Care Home	64 Harborview Drive	St. Albans	VT	05478	Franklin	No	Yes	Yes	56	0	56
Giordano Manor	Res Care Home	34 Canada Street	Swanton	VT	05488	Franklin	No	Yes	No	21	0	21
	Res Care Home			VT		Grand Isle				0	0	0
Forest Hill Residential Care Home, Inc.	Res Care Home	213 Clark Road	Hyde Park	VT	05655	Lamoille	No	Yes	Yes	21	0	21
Riverview Life Skills Center	Res Care Home	197 Highlander Drive	Jeffersonville	VT	05446	Lamoille	No	Yes	Yes	11	0	11

VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
Copley House Community Care Home	Res Care Home	379 Washington Highway	Morrisville	VT	05661	Lamoille	No	Yes	No	22	0	22
Residential Care at the Manor	Res Care Home	577 Washington Highway	Morrisville	VT	05661	Lamoille	No	Yes	Yes	28	0	28
Averte - Bradford House	Res Care Home	2122 Lower Plain	Bradford	VT	05033	Orange	No	No	No	12	0	12
Blue Spruce Home for the Retired	Res Care Home	70 Birch Street	Bradford	VT	05033	Orange	No	Yes	Yes	8	0	8
Riverbend Residential Care Home	Res Care Home	307 VT Route 110	Chelsea	VT	05038	Orange	No	Yes	Yes	22	0	22
Valley View Home for The Retired	Res Care Home	69 Oak Hill Lane	Fairlee	VT	05045	Orange	No	Yes	Yes	7	0	7
Frances Atkinson Residential	Res Care Home	4717 Main Street	Newbury	VT	05051	Orange	No			15	0	15
Windover House	Res Care Home	451 VT Route 66	Randolph	VT	05060	Orange	No	Yes	Yes	15	0	15
Second Spring South	Res Care Home	118 Clark Road	Williamstown	VT	05679	Orange	No	Yes	No	16	0	16
Maple Lane Retirement Home	Res Care Home	33 Maple Lane	Barton	VT	05822	Orleans	No	Yes	Yes	16	0	16
Craftsbury Community Care	Res Care Home	1748 East Craftsbury Road	Craftsbury	VT	05826	Orleans	No	Yes	Yes	24	0	24
Michaud Memorial Manor	Res Care Home	47 Herrick Road	Derby Line	VT	05830	Orleans	No	Yes	Yes	34	0	34
Kingdom Way Group Home	Res Care Home	97 Kingdom Way	Newport	VT	05855	Orleans	No	Yes	No	6	0	6
Newport Residential Care Center	Res Care Home	148 Prouty Drive	Newport	VT	05855	Orleans	No	Yes	No	8	0	8
South Bay Home	Res Care Home	121 Kingdom Way	Newport	VT	05855	Orleans	No	Yes	No	4	0	4



VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
Wintergreen Residential Care - North	Res Care Home	360 New Road	Brandon	VT	05733	Rutland	No	Yes	Yes	8	0	8
Wintergreen Residential Care Home	Res Care Home	3 Union Street	Brandon	VT	05733	Rutland	No	Yes	Yes	10	0	10
Saltis Home	Res Care Home	1141 Main Street	Castleton	VT	05735	Rutland	No	Yes	Yes	14	0	14
Misty Healthier Morn Community Care Home	Res Care Home	174 Blissville Road	Hydeville	VT	05750	Rutland	No	Yes	Yes	16	0	16
Vista Residential Living	Res Care Home	5709 US Route 4	Mendon	VT	05701	Rutland	No			23	0	23
7 Royce Street	Res Care Home	7 Royce Street	Rutland	VT	05701	Rutland	No	Yes	No	4	0	4
Barbara's 1840 House, Inc.	Res Care Home	147 Granger Street	Rutland	VT	05701	Rutland	No	Yes	Yes	7	0	7
Loretto Home	Res Care Home	59 Meadow Street	Rutland	VT	05701	Rutland	Yes	Yes	Yes	57	9	48
Maplewood Recovery Residential	Res Care Home	195 Stratton Road	Rutland	VT	05701	Rutland	No	Yes	No	4	0	4
North End Ranch	Res Care Home	2 Westview Court	Rutland	VT	05701	Rutland	No			5	0	5
Our House at Park Terrace	Res Care Home	196 Mussey Street	Rutland	VT	05701	Rutland	No	Yes	Yes	12	0	12
Our House Outback	Res Care Home	196 Mussey Street	Rutland	VT	05701	Rutland	Yes	Yes	Yes	12	12	0
Our House Residential Care Home	Res Care Home	162 Jackson Avenue	Rutland	VT	05701	Rutland	Yes	Yes	Yes	10	10	0
Our House Too Residential Care Home	Res Care Home	196 Mussey Street	Rutland	VT	05701	Rutland	Yes	Yes	Yes	13	13	0
St Joseph Kervick Residential III	Res Care Home	131 Convent Avenue	Rutland	VT	05701	Rutland	No	Yes	Yes	57	0	57

VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
Emma's Place	Res Care Home	212 North Main Street	Wallingford	VT	05773	Rutland	No	Yes	Yes	7	0	7
Klm Enterprises, Inc	Res Care Home	88 A-B River Street	Wallingford	VT	05773	Rutland	No	Yes	Yes	5	0	5
Lenny Burke's Farm, Inc.	Res Care Home	1409 US Route 7 South	Wallingford	VT	05773	Rutland	No	Yes	Yes	6	0	6
Arioli Community Care Home	Res Care Home	15 Arioli Avenue	Barre	VT	05641	Washington	No	Yes	No	6	0	6
Averill Place	Res Care Home	23 Jones Brother Way	Barre	VT	05641	Washington	No	Yes	No	8	0	8
Hill Street	Res Care Home	201 Hill Street	Barre	VT	05641	Washington	No	Yes	No	6	0	6
Lincoln House	Res Care Home	120 Hill Street	Barre	VT	05641	Washington	No	Yes	No	31	0	31
Rivendell	Res Care Home	127 Bailey Street	Barre	VT	05641	Washington	No			10	0	10
Roadhouse	Res Care Home	5 Giudici Street	Barre	VT	05641	Washington	No	Yes	No	3	0	3
Heaton Woods	Res Care Home	10 Heaton Street	Montpelier	VT	05602	Washington	No	Yes	Yes	51	0	51
Single Steps	Res Care Home	62 Barre Street	Montpelier	VT	05602	Washington	No	Yes	No	8	0	8
The Gary Residential	Res Care Home	149 Main Street	Montpelier	VT	05602	Washington	No	Yes	Yes	17	0	17
Westview Meadows at Montpelier	Res Care Home	171 Westview Meadows Road	Montpelier	VT	05602	Washington	No	No	No	25	0	25
Four Seasons Care Home, Inc.	Res Care Home	135 South Main Street	Northfield	VT	05663	Washington	No	Yes	Yes	37	0	37
Mayo Residential Care	Res Care Home	610 Water Street	Northfield	VT	05663	Washington	No	Yes	Yes	44	0	44
Kirby House Inc.	Res Care Home	64 South Main Street	Waterbury	VT	05676	Washington	No	Yes	Yes	43	0	43
Hilltop Recovery Residential	Res Care Home	94 Westminster Terrace	Bellows Falls	VT	05101	Windham	No	Yes	No	8	0	8
Sterling House at Rockingham	Res Care Home	33 Atkinson Street	Bellows Falls	VT	05101	Windham	No	Yes	Yes	20	0	20

VT Residential Care Homes RCH Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical State	Facility Physical Zip	Facility Physical County	Designated Dementia Memory Care	ACCS	ERC	Total Beds	Memory-Special Care Beds	Other Care Beds
Holton Home	Res Care Home	158 Western Avenue	Brattleboro	VT	05301	Windham	No	Yes	Yes	35	0	35
Meadowview Recovery Residential	Res Care Home	330 Linden Street	Brattleboro	VT	05301	Windham	No	Yes	No	6	0	6
The Bradley House	Res Care Home	65 Harris Avenue	Brattleboro	VT	05301	Windham	No	Yes	Yes	36	0	36
Thompson Residential Home	Res Care Home	80 Maple Street	Brattleboro	VT	05301	Windham	No	No	No	17	0	17
Ascutney House	Res Care Home	5157 US Route 5	Ascutney	VT	05030	Windsor	No	Yes	Yes	16	0	16
Brookwood	Res Care Home	2 School Street	North Springfield	VT	05150	Windsor	No	Yes	Yes	17	0	17
Davis Home	Res Care Home	45 State Street	Windsor	VT	05089	Windsor	No	Yes	Yes	18	0	18
Historic Homes of Runnemedede - Evarts House	Res Care Home	40 Maxwell Perkins Lane	Windsor	VT	05089	Windsor	No	Yes	Yes	14	0	14
Historic Homes of Runnemedede - Stoughton House	Res Care Home	40 Maxwell Perkins Lane	Windsor	VT	05089	Windsor	No	Yes	Yes	27	0	27
Willows of Windsor	Res Care Home	121 State Street	Windsor	VT	05089	Windsor	No	Yes	Yes	16	0	16
The Homestead, Inc.	Res Care Home	73 River Street	Woodstock	VT	05091	Windsor	No	Yes	No	22	0	22

VT Assisted Living Residences ALR by County 2021

VT Assisted Living Residences ALR Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical Zip	Facility Physical County	ACCS	ERC	Units	Total Beds	Memory-Special Care Beds	Designated Dementia Memory Care	Other Care Beds
The Residential at Otter Creek	Assisted Living	350 Lodge Road	Middlebury	05753	Addison	No	No	42	62	17	Yes	45
	Assisted Living				Bennington							
	Assisted Living				Caledonia							
Cathedral Square Senior Living	Assisted Living	3 Cathedral Square	Burlington	05401	Chittenden	Yes	Yes	38	41	0	No	41
Converse Home	Assisted Living	272 Church Street	Burlington	05401	Chittenden	Yes	Yes	66	72	16	Yes	56
Mansfield Place	Assisted Living	18 Carmichael Street	Essex Junction	05452	Chittenden	Yes	Yes	100	120	21	Yes	99
Maple Ridge Lodge	Assisted Living	2 Freeman Woods	Essex Junction	05452	Chittenden	No	No	71	81	0	No	81
Memory Care at Allen Brook	Assisted Living	412 Farrell Street	South Burlington	05403	Chittenden	Yes	Yes	14	15	14	Yes	1
The Residential at Quarry Hill	Assisted Living	465 Quarry Hill Road	South Burlington	05403	Chittenden	No	No	102	125	26	Yes	99
The Residential at Shelburne Bay - East	Assisted Living	185 Pine Haven Shore Road	Shelburne	05482	Chittenden	No	No	76	110	0	No	110

VT Assisted Living Residences ALR by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical Zip	Facility Physical County	ACCS	ERC	Units	Total Beds	Memory-Special Care Beds	Designated Dementia Memory Care	Other Care Beds
	Assisted Living				Essex							
	Assisted Living				Franklin							
	Assisted Living				Grand Isle							
	Assisted Living				Lamoille							
Margaret Pratt Community	Assisted Living	210 Plateau Acres	Bradford	05033	Orange	Yes	Yes	33	49	17	Yes	32
	Assisted Living				Orleans							
Meadows at East Mountain	Assisted Living	240 Gables Place	Rutland	05701	Rutland	Yes	Yes	92	92	36	Yes	56
Vista Senior Living	Assisted Living	103 US Route 4	Killington	05751	Rutland			18	36	36	Yes	0
	Assisted Living				Washington							
Vernon Assisted Living Residences	Assisted Living	13 Greenway Drive	Vernon	05354	Windham	Yes	Yes	39	44	0	No	44
West River Valley Assisted Living	Assisted Living	457 Grafton Road	Townshend	05353	Windham	Yes	Yes	40	42	0	No	42



**VT Assisted Living Residences ALR by County 2021**

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical Zip	Facility Physical County	ACCS	ERC	Units	Total Beds	Memory-Special Care Beds	Designated Dementia Memory Care	Other Care Beds
The Village at White River Junction	Assisted Living	101 Currier Street	White River Junction	05001	Windsor	No	No	80	89	30	Yes	59
Valley Terrace	Assisted Living	2820 Christian Street	White River Junction	05001	Windsor	Yes	Yes	61	71	18	Yes	53
Village at Cedar Hill, Inc.	Assisted Living	92 Cedar Hill Drive	Windsor	05089	Windsor	Yes	Yes	57	72	16	Yes	56
Woodstock Terrace	Assisted Living	456 Woodstock Road	Woodstock	05091	Windsor	Yes	Yes	42	52	15	Yes	37

VT Nursing Homes NH by County 2021

VT Nursing Home Facility Inventory by County 2021

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical Zip	Facility Physical County	CMS Certified	Designated Dementia Memory Care	Total Beds	Private Beds	Medicaid Beds	Medicare Beds	Medicaid Medicare Beds	Memory-Special Care Beds	Other Care Beds
Helen Porter Healthcare & Rehabilitation Center	Nursing Home	30 Porter Drive	Middlebury	05753	Addison	Yes	Yes	98	0	0	0	98	31	67
Bennington Health & Rehab Center	Nursing Home	2 Blackberry Lane	Bennington	05201	Bennington	Yes	No	91	0	0	0	91	0	91
Center for Living & Rehabilitation	Nursing Home	160 Hospital Drive	Bennington	05201	Bennington	Yes	No	130	0	0	0	130	0	130
Crescent Manor Rehabilitation	Nursing Home	312 Crescent Boulevard	Bennington	05201	Bennington	Yes	Yes	90	0	0	0	90	62	28
Pines Rehab & Health Center	Nursing Home	601 Red Village Road	Lyndonville	05851	Caledonia	Yes	No	60	0	0	0	60	0	60
St. Johnsbury Health & Rehab Center	Nursing Home	1248 Hospital Drive	St. Johnsbury	05819	Caledonia	Yes	No	99	0	83	0	27	0	99
Birchwood Terrace Rehab & Healthcare	Nursing Home	43 Starr Farm Road	Burlington	05408	Chittenden	Yes	Yes	144	0	0	0	144	50	94
Burlington Health & Rehab Center	Nursing Home	300 Pearl Street	Burlington	05401	Chittenden	Yes	No	126	0	0	0	126	0	126
Elderwood at Burlington	Nursing Home	98 Starr Farm Road	Burlington	05408	Chittenden	Yes	No	150	0	0	0	150	0	150
Green Mountain Nursing & Rehabilitation	Nursing Home	475 Ethan Allen Avenue	Colchester	05446	Chittenden	Yes	No	73	0	0	0	73	0	73
Arbors Nursing Home	Nursing Home	687 Harbor Road	Shelburne	05482	Chittenden	No	Yes	12	12	0	0	0	0	12
Wake Robin - Linden Nursing Center	Nursing Home	200 Wake Robin Drive	Shelburne	05482	Chittenden	Yes	No	57	24	0	33	0	0	57
	Nursing Home				Essex		No	0					0	0

**Vermont, Long-Term Health Care Facilities, Locational Demand Analysis**

**Appendix A**

**VT Nursing Homes NH by County 2021**

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical Zip	Facility Physical County	CMS Certified	Designated Dementia Memory Care	Total Beds	Private Beds	Medicaid Beds	Medicare Beds	Medicaid Medicare Beds	Memory-Special Care Beds	Other Care Beds
Franklin County Rehab Center	Nursing Home	110 Fairfax Road	St. Albans	05478	Franklin	Yes	No	64	0	0	17	47	0	64
St. Albans Healthcare and Rehab Center	Nursing Home	596 Sheldon Road	St. Albans	05478	Franklin	Yes	No	96	0	0	76	26	0	96
The Villa Rehab	Nursing Home	7 Forest Hill Drive	St. Albans	05478	Franklin	Yes	No	30	0	0	0	30	0	30
	Nursing Home				Grand Isle		No	0					0	0
The Manor	Nursing Home	577 Washington Highway	Morrisville	05661	Lamoille	Yes	No	72	0	0	0	72	0	72
Menig Nursing Home	Nursing Home	215 Tom Wicker Lane	Randolph Center	05061	Orange	Yes	No	30	0	0	0	30	0	30
Maple Lane Nursing Home	Nursing Home	60 Maple Lane	Barton	05822	Orleans	Yes	No	71	0	0	0	71	0	71
Union House Nursing Home	Nursing Home	3086 Glover Street	Glover	05839	Orleans	Yes	No	44	0	0	0	44	0	44
Greensboro Nursing Home	Nursing Home	47 Maggie's Pond Road	Greensboro	05841	Orleans	Yes	No	30	0	0	0	30	0	30
Bel-Aire Quality Center	Nursing Home	35 Bel-Aire Drive	Newport	05855	Orleans	Yes	No	58	0	0	0	58	0	58
Newport Health Care Center	Nursing Home	148 Prouty Drive	Newport	05855	Orleans	Yes	No	50	0	0	25	25	0	50
Mountain View Center	Nursing Home	9 Haywood Avenue	Rutland	05701	Rutland	Yes	Yes	158	0	0	0	158	36	122
Rutland Healthcare and Rehab Center	Nursing Home	46 Nichols Street	Rutland	05701	Rutland	Yes	No	103	0	0	0	103	0	103
The Pines at Rutland Center for Nursing and Rehabilitation	Nursing Home	99 Allen Street	Rutland	05701	Rutland	Yes	No	125	0	0	0	125	0	125
Barre Gardens for Nursing and Rehab	Nursing Home	378 Prospect Street	Barre	05641	Washington	Yes	No	96	0	0	0	96	0	96

**VT Nursing Homes NH by County 2021**

Facility Name	Facility Type	Facility Physical Address	Facility Physical Town	Facility Physical Zip	Facility Physical County	CMS Certified	Designated Dementia Memory Care	Total Beds	Private Beds	Medicaid Beds	Medicare Beds	Medicaid Medicare Beds	Memory-Special Care Beds	Other Care Beds
Berlin Health & Rehab Center	Nursing Home	98 Hospitality Drive	Barre	05641	Washington	Yes	No	115	0	0	0	115	0	115
Woodridge Nursing Home	Nursing Home	142 Woodridge Drive	Berlin	05602	Washington	Yes	No	153	0	0	0	153	0	153
Mayo Healthcare, Inc	Nursing Home	71 Richardson Avenue	Northfield	05663	Washington	Yes	No	50	0	0	0	50	0	50
Pine Heights At Brattleboro Center for Nursing and Rehabilitation	Nursing Home	187 Oak Grove Avenue	Brattleboro	05301	Windham	Yes	Yes	80	0	0	0	80	25	55
Thompson House Nursing Home	Nursing Home	80 Maple Street	Brattleboro	05301	Windham	Yes	No	43	0	0	0	43	0	43
Vernon Green Nursing Home	Nursing Home	61 Greenway Drive	Vernon	05354	Windham	Yes	Yes	60	0	0	0	60	20	40
Gill Odd Fellows Home	Nursing Home	8 Gill Terrace	Ludlow	05149	Windsor	Yes	No	46	0	0	0	46	0	46
Springfield Health & Rehab Center	Nursing Home	105 Chester Road	Springfield	05156	Windsor	Yes	No	93	0	0	0	93	0	93
Cedar Hill Healthcare Center	Nursing Home	49 Cedar Hill Drive	Windsor	05089	Windsor	Yes	No	39	0	0	0	39	0	39
Merten's House	Nursing Home	73 River Street	Woodstock	05091	Windsor	No	No	14	14	0	0	0	0	14

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### **Issue Notes:**

Issue 1, June 15, 2022 – Original Analysis

Issue 2, March 6, 2023 – Added comments to Exec Summary, Added CPI data page, Added Service Provider Rate Study Summary Page.

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## Vermont, Long-Term Health Care Facilities, Locational Demand Analysis

**Kieslich Analytics** is a research and analytical group that assists public officials, legislators, and private or public organizations to address many of our nations and global humanitarian challenges such as Elder Health Care and Living Wages.

Its founder, Allen Kieslich, has over 50 years of research, data analysis and forecasting experience starting with his position in Corporate Planning at New England Tel/Verizon, has taught at several international market analysis - forecasting conferences, and has presented to many domestic and foreign telecom companies on market demand analysis and forecasting processes utilizing advance IT systems and software such as Big Data and GIS.

After his AAS at VTC Allen expanded his knowledge with a BS in IT at Northeastern University, and continued education in Finance, Urban Planning, and Project Mgmt. at Boston University, Harvard, and MIT.

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