

02-20-2024

Good evening,

My name is Gloria Quinn, and I am the Executive Director of Upper Valley Services, the Designated Agency serving individuals with developmental disabilities for Orange County and beyond. Our agency extends services to individuals with developmental disabilities in Washington County, operates 3 statewide crisis beds through the Vermont Crisis Intervention Network, and 2 crisis beds through our collaborative crisis program. Additionally, Upper Valley Services supports adults eligible for long-term nursing home level of care across Vermont through our Adult Family Care program, Vermont Comforts of Home.

Thank you for inviting me to appear before you today to advocate for a 6.5% Medicaid rate increase or \$14.6 million dollars for Designated and Specialized Service Agencies. This support is crucial for sustaining essential community-based services for Vermonters in need.

First, I wish to express gratitude for the legislature's ongoing support of the Designated Agency/Specialized Service Agency system. The funding increases in Fiscal years 23 and 24 have notably helped reduce vacancy rates from 32% in 2021, down to 18% in 2022 and 6.5% in 2023. These improvements, however, contrast with our high staff turnover rates, which despite decreasing from 51% in 2021 to 32% in 2023, remain a significant concern.

Our staff turnover is untenable.

The reasons staff have given for leaving are, higher wages elsewhere, stress due to high acuity, long hours and overtime, and the growing administrative burdens. These reasons underscore the need for continued financial support to retain skilled staff.

Our passion and our work in supporting individuals with heightened acuity (58% have co-occurring mental health diagnoses and 48% have a history of trauma), necessitates a higher level of training, oversight, clinical involvement as well as therapeutic and professional support models. To continue providing quality care, we must adequately compensate our 200 employees, over 100 contracted Shared Living Providers (for individuals with developmental disabilities), their staff, as well as the 100 Shared Living Providers in our Vermont Comforts of Home program.

Moreover, providers need continued investment so that we can maintain stability in the lives of over 200 adults with disabilities that we serve, as well as the 120 elders living in community settings. Across both programs, UVS provides support for over 320 vulnerable Vermonters.

Additionally, our operational costs are rising sharply, with health premiums up 30% this fiscal year alone and general/liability insurance costs up by over 40%. These increases, alongside increasing operating costs and the heightened acuity and medical needs of the people we serve, present alarming ongoing challenges. In addition, housing is an incredible challenge for many Vermonters. However, for the most vulnerable populations, I often feel that we are standing on the edge of a cliff. Over 31% of Vermonters with developmental disabilities are served through the Shared Living model, and at Upper Valley Services, it is over 50% compared to the national average of 5%. This highlights the unique position of Vermonters with developmental disabilities who could be more at risk for homelessness than in any other area of the country. Additionally, many vulnerable individuals are on the waitlist for our crisis services, highlighting how strained our current system is.

Recent system changes are creating additional stress. While agencies are crawling out from the COVID impacts, the division is implementing a new assessment process, rate reform, and conflict of interest changes. It's vital that we maintain stability in our services, relationships, and housing. If we don't adequately compensate and support our staff, Shared Living Providers, and other contracted staff, we risk continuing to lose them.

In the midst of transformative changes to Vermont's service system, it is imperative that we proceed with unwavering commitment to maintaining stability. Any restructuring of rates and support models need to be executed with the utmost care to prevent undermining the critical support and housing infrastructure and support that vulnerable Vermonters depend on. The potential repercussions of destabilization are not merely theoretical but carry real and immediate risks. For instance, just in October, our system identified that 9% (287) of individuals with Intellectual and Developmental Disabilities were either homeless or on the brink of homelessness. Presently, within Upper Valley Services alone, we find ourselves without a permanent home or consistent staffing for three individuals. This is not just a statistic but a clear signal of the fragility of their lifelines.

Transitioning to alternative housing and support models, should our current Shared Living Model be jeopardized by rate restructuring, would not only be a disservice to our community but would also impose prohibitive costs on the state. The expense associated with developing and implementing new models of staffed housing as replacements for our proven Shared Living Model would be staggering. Furthermore, a budget that merely reflects level funding, in reality, functions as a reduction in support. It negates the critical need for increased investment in staffing and support models as well as ongoing operating costs, all are essential to mitigating harm and ensuring the welfare of individuals with developmental disabilities.

At a juncture when our community members most need our support and stability, lack of funding to our system could precipitate a cascade of negative outcomes, thrusting those who rely on these services into untenable situations, potentially exacerbating the risk of homelessness. The consequences of such instability extend beyond immediate distress, setting the stage for long-term societal and financial costs that far exceed the investments required to maintain and enhance our current service system.

It is not just an ethical imperative but a practical necessity to approach changes to our service system with a vision that prioritizes stability, continuity, and the prevention of harm. The cost of repairing the damage from an upended service system, measured in human, social, and economic terms, would be far greater than the cost of thoughtful, careful stewardship of the resources and models we currently employ. As we navigate these changes, we need to commit to safeguarding the support structures that our most vulnerable citizens rely on.

In conclusion, Vermonters with developmental disabilities require unwavering support and sustained investment. Advocating for a 6.5% increase in Medicaid rates is a fundamental call to action to secure the well-being and stability of those most reliant on our system. Such an increase is crucial for ensuring that individuals currently under our care continue to live in environments that are not only safe but also nurturing and supportive. This adjustment in funding is essential for empowering our Designated and Specialized Service Agencies to innovate and evolve, allowing us to enhance and expand the models of care that have proven effective for those coming through our doors today and into the future.

Thank you for your time and consideration,

Gloria Quinn

Executive Director

Upper Valley Services

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