



STATE OF VERMONT
SENATE

MEMORANDUM

To: Sen. Jane Kitchel, Chair, Senate Committee on Appropriations
From: Sen. Claire Ayer, Chair, Senate Committee on Health and Welfare
Date: April 23, 2015
Subject: Recommendations on Governor's FY16 budget

As requested, the Senate Committee on Health and Welfare (Committee) has reviewed provisions of the proposed FY16 budget. The Committee thanks the Senate Committee on Appropriations for the opportunity to comment on these provisions. The Committee makes the following comments and recommendations:

Health Care

First, the Committee recommends increasing Medicaid reimbursement rates by 2.5% for providers participating in programs operated by the Blueprint for Health and the Division of Alcohol and Drug Abuse Programs, as well as services offered by providers at the designated agencies for the purpose of ensuring parity. Second, it recommends improving access to dental care through increased provider reimbursement rates. And last, the Committee recommends increasing access to health care through loan repayment for providers in rural areas of the State under the Area Health Education Centers (AHEC) Program.

Services to Children

The Committee first recommends that before the Department for Children and Families (DCF) implements a waitlist for the Child Care Financial Assistance Program, it receive legislative approval to do so. Second, it disagrees with the House proposal to cap enhanced child care subsidies in the Reach Ahead program. Third, the Committee recommends that the General Assembly support child care referral services and maintain children's mental health services. Fourth, the Committee recommends that the House's proposal to add 33 V.S.A. § 1103(c)(9) regarding the calculation of Reach Up benefits be repealed on July 1, 2017. Finally, the Committee supports passage of the Blue Ribbon Commission on Cost and Financing Options for High Quality Affordable Child Care.

Disabilities, Aging, and Independent Living

The Committee recommends that the Department for Disabilities, Aging, and Independent Living (DAIL) maintain services that keep elderly and disabled individuals in their homes rather than receiving costly institutional care. This recommendation applies to LIHEAP assistance, as well as other related services. Second, the Committee recommends that the General Assembly allow DAIL to move savings to Choices for Care's moderate needs group for adult day services. It also recommends that the General Assembly request a joint report from DAIL, DCF, and the Department for Vermont Health Access (DVHA) on how to eliminate delays in eligibility determinations for the Choices for Care program. And last, it recommends that the General Assembly establish the Long-Term Care Task Force that was originally part of S.139 (an act relating to pharmacy benefit managers and hospital observation status).

Housing Assistance

The Committee first recommends the utilization of the Low Income Weatherization Fund to continue weatherization programs, including use of some LIHEAP funds that have previously been diverted. It further recommends that the Office of Economic Opportunity be directed to work with Buildings and General Services and Efficiency Vermont to develop contracts for heat pumps in affordable housing and for Vermonters with low income. Third, the Committee recommends that the General Assembly level fund housing grants (including mental health housing vouchers), subsidies, and family support as detailed in the Governor's recommended budget, as well as the Vermont Housing & Conservation Board. And fourth, it recommends that the Pathways Program for individuals with psychiatric disabilities be maintained through funding within the Departments of Corrections and of Mental Health.

Other

In addition to the recommendations above, the Committee recommends maintaining tobacco control funding. It would also like to see the passage of the Substance Abuse Advisory Council pursuant to the report of the Committee on S.42 (an act relating to the substance abuse system of care), as well as the restoration of the Health Care Oversight Committee.