

# The Vermont Coalition for Disability Rights presents our legislative priorities for the 2017 legislative session.

#### Preserving a Legacy of Disability Rights and Services

Over the last four decades Vermont has established laws ensuring rights and services that support self-determination, inclusion, and equality of opportunity for individuals with disabilities and their families. These decisions have helped make Vermont a better place for individuals with disabilities and their families to live, work and contribute to our shared communities. Together we can preserve the civil rights and social services that have made this possible.

This year Vermont - like every state in the nation - is experiencing unprecedented change and uncertainty. Our 2017 Platform reflects this reality. Sweeping changes in civil rights, education, health care, workforce issues, and community development are being considered in every state and in our nation's capital. As we consider change, we must find ways to preserve the gains of the past. Disability programs and policies that placed Vermont ahead of most of the nation are at risk. The community services and safeguards that Vermonters with disabilities depend on are underfunded and community nonprofits that provide essential services are unable to provide adequate wages and benefits to a workforce providing essential services.

We have the opportunity to build on what works well and to change things for the better by adopting fiscal strategies that support livable wages and adequately fund the programs that make it possible for people with disabilities and other Vermonters to succeed, thrive and contribute to Vermont.

We thank each of our Senators and Representatives for their service and look forward to working with you to secure Vermont's legacy of laws and services that make disability rights and equality of opportunity a living reality in our state.



# The Vermont Coalition for Disability Rights thanks you for your service to ALL Vermonters!

VCDR hopes that we can assist you throughout the session as you consider issues that affect the lives of your constituents with disabilities.

Please contact us for input and education on disability issues. Learn about our member organizations and the many services they provide at our website: <u>www.VCDR.org</u>

Inside the Statehouse contact our legislative liaison, Karen Lafayette, at 802-373-3366 or at <u>kmlafayette@aol.com</u> or contact VCDR President Ed Paquin at 802-229-1355, x.102 or at <u>ed@disabilityrightsvt.org</u>

VCDR thanks the Vermont Developmental Disabilities Council, VCDR members and friends for their contributions and support of our work. For more information about particular bills and other VCDR advocacy activities, or to share your recommendations and concerns, contact us:

VCDR

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## VCDR's 2017 Legislative Platform

#### **Budget and Policy Priorities**

#### **Health Care**

**Health Care Reform:** Vermont's health care reform efforts, annual budget, advisory committees and stakeholder activities need to address the interests and needs of people with disabilities, chronic health conditions, and/or long term service and support needs.-VCDR will continue to monitor state and federal health care reform with the goal of ensuring that:

- Vermont's financing, service delivery and administrative practices promote improved access, improved quality of care and improved health and social outcomes for individuals with disabilities and their families;
- Program policies and procedures provide equal access and necessary rights protection for Vermonters with disabilities and their families. To that end additional funding should be provided to Vermont's Legal Aid Disability Law Project;

• Vermont's current and proposed health reform and financing initiatives preserve and strengthen person centered and directed services and the sustainability of Vermont's community-based disability and long term care services. Vermont's "safety net" of essential services, including Medicaid, must not be eroded by state efforts to finance general health care reform;

• The implementation of Vermont's new All Payer Waiver, the updated Global Commitment waiver, and the proposed Medicaid Pathways initiative must be informed by the interests and needs of individuals with disabilities and their families; and that these Vermonters participate in the design, implementation, and evaluation of Vermont's health care reform activities;

• The enabling legislation for the Medicaid and Exchange Advisory Board should be amended to clarify that the board is advisory to the Secretary of the Agency of Human Services and all AHS departments and other policy makers, not just to the Commissioner of DVHA. The legislation should be further strengthened to ensure a proactive role for the committee; and

• AHS resources and planning for health care reform and specifically for "population based approaches" to health care reform must include and effectively respond to the needs of Vermonters with disabilities and chronic conditions and requires more internal agency expertise on the needs of the citizens served.

#### **MEDICAID** and **BUDGET**

**Budget Gap**: VCDR believes that the perennial imbalance between state revenues and the programs needed to meet very basic needs may well be "structural". We do not believe that this can be addressed by simply denying needs and cutting programs which ultimately help people live independently. Adapting our tax structure to current economic realities may well be the best way to avoid greater future expenditures.

Livable wage for direct support workers. There is growing recognition that we need an increase wages for individuals providing support to people with disabilities to a reasonable level. Throughout Vermont's disability and long term support system stagnant wages have made it increasingly difficult for people with serious needs and the agencies that assist them to recruit and maintain a skilled and dependable workforce. This has caused agencies to move toward congregate programs to be able to provide coverage. VCDR supports the proposal of the State Developmental Services Standing Committee that a base wage of \$15 an hour be created, something closer to a livable wage.

**Rehabilitation Services for the Blind and Visually Impaired:** Funding for services for rehabilitation services for the blind and visually impaired delivered through the Vermont Association of the Blind & Visually Impaired have not been increased in seven years despite rising caseload and needs. VCDR supports and increase of \$50,000 (\$230,000 total-Global Commitment) in order to reduce level of subsidization by VABVI, hire more teachers, and address need for technology training for the visually impaired. VABVI services help Vermonters stay independent and active in their communities, saving State money. Without these services a visually impaired person is 15 times more likely to end up in assisted living or a nursing home.

**Children's Integrated Services (CSI) - Increase and Diversify Funding:** CIS offers approximately 5,800 participants per year early intervention, family support, and prevention services that help ensure the healthy development and well-being of children, pre-natal through the age of 5. Services are family-centered, child-focused, and are delivered state-wide through a network of 12 regional contracts. Since CIS began in 2009, however, both population and workforce needs have changed and intensified while funding has remained flat. VCDR believes that an increase in Medicaid Global Commitment funding and the addition of General Fund dollars would ensure continued progress on family safety and stability and optimal, healthy child development making a positive social and economic difference as today's children become tomorrow's parents, professionals, volunteers and active citizens.

**Integrating Family Services (IFS):** Implementation of the IFS initiative should be monitored to ensure that Vermont's actual budget and policy actions are measured against the goals of the IFS initiative to ensure those actions are consistent with desired outcomes so that IFS realizes its potential for family directed services that effectively and responsively meet children and families' needs. This laudable initiative is running in parallel with program and budget actions that appear to be undermining the "safety net" of services and family supports. Visible, authentic family and youth engagement is still needed in the design, implementation, and evaluation of the changes.

**Early Periodic Screening Diagnosis and Treatment (EPSDT):** The federal government requires that states that provide Medicaid to children must offer full EPSDT benefits. These are very comprehensive services and benefits and including all medically necessary services that a child (under 21 years) might need to screen, diagnose, and "correct or ameliorate" his or her condition. Children with special needs, however, are often unable to access all necessary services. Problems have been reported in screening, primary care, developmental and mental health services, dental care, therapies, supplies and durable medical equipment, transportation, and more. VCDR requests review of funding levels and program management to ensure access to EPSDT mandated services (including primary care, therapies, case management, medical supplies and equipment, and transportation) for Vermont's Medicaid eligible children.

**Medicaid for Working People with Disabilities (MWPD):** VCDR has long supported eliminating state policies that present barriers to employment for people with disabilities. MWPD enables work by preventing the loss of Medicaid eligibility despite employment. Progress has been made in working towards favorable rule changes, but it appears that CMS may not approve the spousal disregard of the MWPD beneficiary for purposes of figuring eligibility of the non-MWPD spouse for traditional Medicaid. VCDR advocates for this and hopes to work with DVHA to persuade the federal government to support this policy change.

**Repeal the "tax" on low-income families with children:** A new law counting \$125 of adult Supplemental Security Income (SSI) income against a household's temporary cash assistance (or "Reach Up") benefits every single month is driving adults with disabilities and their children deeper into poverty—as much as 10 percent farther below the federal poverty level in some cases. The reduction targets Vermont parents who, by definition, are unable to work as a result of their unique disabilities. These parents need their SSI income to meet their needs related to disability, yet they are being "taxed" in order to reduce the Reach Up benefits designed to support other members of their household. At least 860 Vermont families are affected by the reduction.

#### EDUCATION

**Legal Assistance for Families with Education Needs.** VCDR recognizes the scarcity and expense of legal assistance to families of children with disabilities who are eligible for or on a Section 504 plan or an Individualized Education Program (IEP) at school. Funding should be provided for a qualified, full-time, special education attorney or towards sustaining a bank of pro bono attorneys trained by the Disability Law Project in special education law.

**Special Education in Private and Independent Schools:** The State Board of Education is promulgating rules that would require open admission to students with disabilities in schools receiving state funding. Currently, many such schools won't admit students that they don't feel they can serve, an option that public schools don't have. VCDR believes that all students with disabilities are entitled to a free and appropriate education and that all schools that receive state funding should follow the rules on including and serving students with disabilities.

### **CIVIL RIGHTS**

**Safeguarding Civil Rights and Protections:** VCDR will monitor and oppose legislative proposals that may diminish the civil rights of people with Disabilities and mental health issues. Vermont has created the country's least institutional system of care but issues of access, accommodations, and involuntary treatment are still important in an era of budget constraints and misplaced fear of people who seem "other".

**People with Disabilities in Prison.** VCDR advocates for change in the way people with serious disability and mental health issues are treated in Vermont's prisons.

- People ordered by courts to a hospital for psychiatric evaluation should in-fact be admitted to psychiatric units where they can receive appropriate care, not to prison.
- Segregation is not treatment. Vermont should reduce or eliminate the holding of people with mental health issues or serious functional impairments in settings so restrictive that they exacerbate individuals' mental health conditions.

• Individuals who have served their minimum sentences without incident are generally released from our prisons. Prisoners with disabilities should be supported to attain safe, supported, community placements so that timely release is an equal option.

Alternative to Emergency Departments for "Evaluation" of Adults and Children in crisis. Other jurisdictions have created an alternative model for assisting individuals held against their will for psychiatric evaluation. VCDR believes that setting up a facility, largely staffed with peers, whose primary function would be to de-escalate and attend to an individual's human needs would reduce the pressure on Vermont hospitals and reinforce the community basis of our mental health system. A change to allow this in our statutes could make a pilot program a possibility.

**"Duty to Warn":** A recent Vermont Supreme Court ruling in a very tragic case has led to great uncertainty in the provider and advocacy communities. For years mental health professionals have been thought to have a right to break client confidentiality when they believe that a risk of serious harm exists to an identifiable victim. The individual involved brutally injured a victim long after release to family from an inpatient facility. VCDR fears that the court reaction has created a new "duty to warn" that is so broad that providers will be apt to overuse involuntary treatment and hold people inpatient for inordinate lengths of time, something that has already been occurring according to the Department of Mental Health. Advocates have come together with providers the DMH and legislators to craft a reasonable standard.

### **SERVICES & NEW INITIATIVES**

**Traumatic Brain Injury Trust Fund with a dedicated funding source:** A TBI Fund was set up at the end of the 2008 legislative session dedicated to filling the gaps in services and support for people with brain injuries and to develop programs designed to reduce the incidence of brain injury in Vermont. The Brain Injury Association of Vermont (BIA-VT) proved the success of this approach by piloting a Neuro-Resource Facilitation Program for injured veterans, but one-time funds were used and ongoing sustainable funding has not been addressed. Twenty other states have established funds for similar purposes and have created sources of revenue appropriate to the challenges faced by individuals with Traumatic Brain Injury, many of whom have been injured in motor vehicle accidents. VCDR advocates either adding a \$1 surcharge on motor vehicle registrations or dedicating a portion of penalties for violation of motor vehicle safety statutes, including DUI to support the Trust Fund.

**Home Modification:** For Vermont seniors and individuals of any age with disabling health conditions, everyday living environments can interfere with mobility, safety and productivity. Home modification investments can make living independently at home possible, avoiding or delaying costly institutionalization. VCDR proposes to create a State income tax credit to mitigate the expense of home modifications required by a disability or physical hardship. The credit would be for a percentage of the expense or \$9,000.00, whichever is less. The percentage of the credit that may be taken varies depending on the income of the person claiming the credit.

**Home Access Program (HAP):** Currently the HAP serves over 60 individuals with disabilities by providing bathroom and entrance modifications at an average cost of \$10,000. Applicants are low-income people with disabilities often living on disability benefits. Without assistance, these individuals would not have access to their entrance and/or bathroom. VCDR supports full funding of the Vermont Housing and Conservation Board (VHCB) which funds the HAP to provide home modifications to very low-income Vermonters with physical disabilities.

**ABLE ACT Fee Mitigation:** Congress enacted the Achieving a Better Life Experience (ABLE) Savings Program to allow people with disabilities the opportunity to save for future needs without losing Social Security Supplemental Security Income and other critical benefits that are subject to very low asset limits. This will help to eliminate a barrier to employment and encourage responsible financial planning. VCDR supports the State Treasurer's budget proposal to mitigate fees for Vermonters enrolling in an ABLE savings account so that people with disabilities can open and maintain accounts and enjoy their benefits without losing their investment earnings to fees. Even modest fees can have a disproportionate impact as many earners start small in saving for their futures.

**Meals on Wheels**: The Vermont Center for Independent Living has long administered a Meals on Wheels program which serves individuals with disabilities under the age of sixty by providing one a hot meal a day to those who cannot prepare their own meals. VCIL serves over 500 individuals annually through this program. Over the past three months there has been a significant increase in applicants to the program, as is true of the Senior Meal program, and a waiting list is currently growing. VCDR advocates for an FY'17 budget adjustment in the amount of \$20,000 to meet this very basic need. Nutrition is key to living healthy and maintaining independence.

**Support for Peer Initiatives:** The state should continue and expand support for Peer initiatives and organizations "of, by and for" people with disabilities. VCDR supports advocacy within the budget process for adequate funding of organizations and projects like: Vermont Psychiatric Survivors, the Green Mountain Self-Advocates, Another Way Drop-in Center, Alyssum, Soteria VT, Pathways VT, Deaf Peer Services, Vermont Family Network, Vermont Federation of Families for Children's Mental Health, the Wellness Workforce Coalition, and other developing peer-run services. This is particularly important as the state budget "tightens" with the pressure of developing expensive residential and inpatient services.

**Insurance Coverage for Dentures and Hearing Aids:** Private insurance and Medicaid should be required to provide some reasonable level of coverage for dentures and hearing aids. Dentures make adequate nutrition possible and are important for the overall health of individuals who have a disability. Appropriate Hearing Aids are needed for better communication, good health, and personal safety. Neither are adequately covered by the Affordable Care Act and other insurance providers, including Medicaid.

**Peer Navigation for Families with Complex Needs:** Vermont should reinstate this program in which people with the lived experience of complex needs in their OWN families assisted other families to find their way through the complex system of social, economic and health programs. Formerly federally funded for 6 years (Family Support 360 Project), peer navigation has a documented record of success in supporting more informed choices and positive outcomes for families with children and/or parents with disabilities.

Vermont Family and Medical Leave Insurance Program: VCDR supports the development an insurance program to assist families through paid leave at the time of emergencies and major life events. Just as workers comp insurance meets the needs of employers and workers injured on the job, a new system could help stabilize the workforce and assist families. VCDR would support a small tax to support this as long as other, current supports are not negatively impacted.

VCDR thanks the Vermont Developmental Disabilities Council, VCDR members and friends for their contributions and support of our work. For more information about particular bills and other VCDR advocacy activities, or to share your recommendations and concerns, contact us:

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Date:February 16, 2017To:Vermont Senate and House Committees on AppropriationsFrom:Ed Paquin, President, Vermont Coalition for Disability RightsRegarding:FY '18 Proposed Budget

VCDR is a coalition of non-profit organizations dedicated to promoting the civil rights of people with disabilities and policies that allow individuals to live independent lives. This often involves state supports that help people live to their full potential and so I appreciate the chance to come and let you know about several needs and issues that will profoundly affect the lives of your constituents.

In several key areas the proposed budget acknowledges an increase in need by accounting for caseload increases in long-term developmental and mental health services. It does not however, address the inflation of the cost to deliver these services and our designated and special service agencies often fail to deliver services with appropriate continuity because of the turnover of frontline workers. This has been a long-time problem that is hollowing out a system that is otherwise well-structured to help people live independently rather than in institutional settings.

In some cases, however, we have failed even to address caseload needs. An example of this is in the services for people with visual impairments who are served by the non-profit Vermont Association for the Blind and Visually Impaired. Eleven years without state increases to address the need for teachers, ride coordination and technology training has left a weakened system. Older Vermonters losing their sight might very well need to consider nursing home care for want of the inexpensive rehabilitative training that could keep them independent. (I am including information from the VABVI.) People with disabilities should be able to work towards independence and a decent life. Cuts in re-allotments of federal Vocational Rehabilitation funds are forcing DVR to cut staff at a time when the job market is hopefully making more opportunities available. I believe that some of the cuts had been held off through the use of Global Commitment funds and would ask if this is perhaps a viable way to prevent further erosion of our highly regarded VR system.

VCDR would point out that the meals-on-wheels program for people with disabilities under 60 has seen increasing demand despite our improving economy; a relatively small increase of \$10,000 would help mitigate a waiting list in the basic meal program administered by the Vermont Center for Independent Living.

Once again we see a budget that proposes cuts to legal services and health care advocacy delivered through Vermont Legal Aid. VCDR asks that these cuts not be enacted. Too many people with disabilities live in poverty, are victims of exploitation, have housing issues and other civil challenges that can only be equitable resolved with legal assistance. And who among us will predict that LESS assistance will be needed to navigate our unpredictable and changing healthcare marketplace?

VCDR would also ask that you again consider repealing what we would call the "disability tax" that was implemented to save state dollars by counting against the Supplemental Security Income of a disabled adult in a family with children that otherwise gets about half of what their basic needs are through the ReachUp program. It is stunning to hear rhetoric about Vermont's "affordability" when we believe that people living right around the poverty level can afford to kick in about \$1,500 a year to help balance the state budget.

These are not the only needs that should be addressed for low-income people with disabilities, I am providing the committees with the VCDR platform that has a number of issues to consider. Not all of them, by the way, are budget related. We appreciate your consideration of your neighbors' situations and of the opportunities that should avail to all Vermonters. We hope that we can work towards one Vermont in which our prosperity is shared. Thank you!

The mission of VCDR is to advance the human and civil rights of people with disabilities to ensure full and equal participation in all aspects of community life and the political process.



Dear members of the Legislature,

The Vermont Association for the Blind and Visually Impaired (VABVI) has served Vermonters since 1926. We are the only non-profit in the State to offer rehabilitation services to the blind and visually impaired. Our mission is to enable Vermonters with vision problems to achieve and maintain their independence. Towards that end, we have provided independent living skills training, orientation and mobility, adaptive equipment and materials, volunteer drivers, low vision evaluations, and produced written materials in braille, audiotape and large print format. Enclosed is our latest fact sheet, and other information that tells you more about VABVI and the services we provide.

Unfortunately we need additional funding to increase our support services, and to hire additional staff. Since the last time we received additional funding (11 years ago), we have seen an increase of about 60% in the number of clients that we serve. We could be serving even more as the need is there; but our existing staff cannot handle more clients. There are an estimated 10,500 Vermonters who are currently blind or visually impaired. As the "Baby Boomer" generation ages however; this number is expected to increase to 18,000 or higher by 2030. As a result, our neighbors, parents, family and friends are among those who may be coping with a vision loss.

If you spoke to our clients, they would tell you how important our services are to them. Approximately 20% of our clients, (one in six) express concerns when they first contact us that they fear that they might have to move into a nursing home. If anything, that percentage is low as many do not want to admit to that fear. For the number of elderly adults that we currently serve, 20% is about 170 people. For those clients whom VABVI has completed providing services, about 98% of those who had expressed that concern are now confident that they could live independently in their current living situation and continue to lead fulfilling lives regardless of their vision loss.

For the fiscal year just ended, we served over 1,150 adults. VABVI provides these supports to the visually impaired for less than \$1000 per client annually. Compared to the cost of a nursing home, (which is 15 times more likely when a senior citizen becomes visually impaired) this program is very cost effective, and we are actually saving the State money. If we are unable to increase the number of our rehabilitation teachers, we won't be able to provide the services to these people in a timely manner, and many could end up in a nursing home. Early diagnosis and adaptive training can make all the difference in allowing those affected to continue to live an active and independent lifestyle in their community.

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On behalf of our clients, both current and future, I ask that you increase our funding by an additional \$200,000 to meet the existing needs. What this would mean to the State is about \$43,000 while the balance would be paid by matching Federal Global Commitment Funds. While vision loss could be seen in a negative light, the stories of success and accomplishment from VABVI's clients highlight the "can-do" attitude and joy of life that is present regardless of their vision levels. From skiing to artwork, a walk in their neighborhood or cooking a meal at home, our clients demonstrate that the only limiting factor to what can be done is their imagination.

Please join us in keeping our clients independent and contributing members of our society. I appreciate your consideration in this critical area of need.

Sincerely,

Steven P. Pouliot Executive Director



HELPING ACHIEVE INDEPENDENCE IN A VISUAL WORLD SINCE 1926

#### VERMONT ASSOCIATION FOR THE BLIND AND VISUALLY IMPAIRED NEEDS STATEMENT

The Vermont Association for the Blind and Visually Impaired has served Vermonters since 1926. Our mission is to enable Vermonters with vision problems to achieve and maintain independence. Towards that end; we have provided skills training, adaptive equipment and materials, volunteer drivers, low vision evaluations, and have produced written materials in braille, audiotape and large print format.

Providing these supports to the visually impaired costs less than \$1000 per client annually. Compared to the cost of a nursing home, (which is 15 times more likely when a senior citizen becomes visually impaired) this program is very cost effective, and we actually save the State money by keeping them independent and in their homes. As our population ages, their need of our services has also increased. For those who are 75 and older, one in four will experience some form of vision impairment. For FY17 we are asking the State to help us in three key areas.

- Our first need is to increase the number of teachers that we employ and to reduce the amount we • subsidize the programs. For the fiscal year just ended, we served about 1150 adults, an increase of 60% from 10 years ago. It has been 11 years since we have received as increase in funding. We currently subsidize adult services by \$300,000. The need is there; and the number of our senior citizens continues to increase, but we cannot further subsidize the program and our staff is maxed out for what they can handle.
- The second need is to increase funding for our volunteer ride coordinators. We receive funding for mileage reimbursement, but the time needed to organize and line up the volunteers with the clients' needs, etc. is not completely covered. We have gone from about 300 ride requests a year when we started in 1986 to over 2600 rides in FY15. The funding to cover these costs has not kept pace with the demand. Transportation for visually impaired people is very high on their list of needs. Being able to get to a doctor, getting the groceries or occasionally going out for a social event is important to them so that they do not feel isolated. As a ride of last resort, these rides help to keep them independent and active in their community.
- ٠ The third need is for technology training of the visually impaired. Adults with disabilities spend twice as much time online, on the average, as adults without disabilities; and these adults are much more likely to report that the Internet, smartphones, and IPads has significantly improved the quality of their lives. These facts are particularly true for the blind and visually impaired because of the nature of that disability. There are many apps in the marketplace that can help the visually impaired. We hope to provide Assistive Technology Services to help train clients on these devises. These assistive devices will include I Phone and Pads, screen print enlargers as well as speech and Braille input and output devices. Currently, there is no one available to provide this training.

We ask therefore, for the State to increase our appropriation by \$200,000 for the continuation and expansion of our services and the addition of technology assistance. This is still less than \$1000 per client per year. We will continue to subsidize our services, but need your help to reduce the amount that we subsidize. Please join us in keeping our clients independent and contributing members of our society.

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#### **TALKING POINTS**

- 1. The Vermont Association for the Blind and Visually Impaired (VABVI) helps Vermonters with a vision problem to stay independent and remain in their community. National statistics for our type of services says that without them,
  - a. They are 15 times more likely than other seniors to end up in a nursing home.
  - b. They are 17 times more likely to fall and break a leg than other seniors.
  - c. That timely service is needed to prevent these things from happening.
- 2. We actually save the State money. Our services cost less than \$1000 a year per client. A nursing home costs \$70,000 a year. Many of our clients express their concerns that they will end up in a nursing home due to their vision loss. But by the end of our services, 98% of those who had those concerns say they no longer have that fear.
- 3. We serve 60% more clients yearly than we did 11 years ago. Our Staff is maxed out. I am requesting \$200,000 in additional funding. We currently subsidize the program by \$300,000 a year and can't afford to increase that.
- 4. The proposed budget increase of \$200,000 would cost the State about \$43,000. The balance would be paid by matching Federal Global Commitment Funds. The effects of this increase would:
  - a. Allow us to hire additional staff to handle the increase in clients that we are serving. Our staff cannot take on more than their current workload.
  - b. Prevent a backlog which would likely result in clients getting discouraged and having to leave their home and/or hurting themselves due to their vision loss and not being able to receive timely services.
  - c. Offer technology training to our clients as the apps and features on smartphones and IPads can greatly improve the quality of their lives as well as helping them to remain independent.
- 5. We cannot fundraise the additional money. There is a lot of competition for funding due to cuts made to many non-profits over the last few years. We already fundraise as much as we can in trying to reduce the current \$300,000 subsidy.
- 6. Due to the Global Commitment matching funds, remember that every \$50,000 increase the State gives us would only really cost the State a little less than \$11,000.

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