



formerly Vermont Protection & Advocacy
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141 Main Street, Suite # 7, Montpelier, VT 05602

Date: April 4, 2018
To: Senate Committee on Appropriations
From: Ed Paquin, Executive Director, DRVT
In re.: Participant Directed Attendant Care program

I am Ed Paquin, Director at Disability Rights Vermont, our state's protection & advocacy agency for people with disabilities and the state's Mental Health Care Ombudsman.

I am truly at a lucky man. I have had the opportunity to serve as you do in the legislature. I have a good job, I own a home, I have been able to be a supportive parent to a wonderful child who has made me a grandfather and I have a supportive partner in my life.

I also happen to have a serious disability that sent me in directions I never imagined back when I made my living in construction. I still feel lucky, though, in that I can do what I do with a fair degree of physical independence.

I have peers who have serious disabilities who can achieve as much as I can, but whose physical limitations require that they have help to do some basic activities like bathing, toileting, preparing food and such. Yet with the participant directed attendant care program they have the opportunity to have the same aspirations as I, and YOU, have, and can do so without becoming impoverished.

Please don't eliminate one of the most rational programs for independence that our state runs. Instead, keep the program and let it grow, so that folks more disabled than I am can live lives that are a little more like yours and mine. We spend hundreds of millions of dollars in Medicaid long-term care, we should be able to spend a couple million on this.

Thank you for any help you can give.

Date: April 4, 2018
To: Senate Committee on Appropriations
From: Ed Paquin, Executive Director, DRVT
In re.: FY'19 Budget, Administration & House

DRVT appreciates the opportunity to comment on budget proposals made by the Administration and actions taken by the House of Representatives. We believe that the basic assumption that growth in assistance to Vermonters with serious disabilities must be limited to the rate of growth in current revenue presents challenges. Caseload growth and increases in cost of living, particularly for people with high medical needs, can be managed after a fashion, but not without harming either the health, independence or access to opportunity of these people.

Within the assumed limitations, the House tried hard to mitigate the impact of the Administration's proposal:

- Cuts to Legal Aid's poverty law work and Office of the Health Care Advocate were restored. This is very important to the disability community, because of the unfortunate truth that disability and poverty far too often go hand-in-hand. And clearly, there is value across the population to the expertise that the HCA brings as we face uncertainty in all aspects of paying for health care.
- The Administration budget provided for caseload growth in Developmental Services at the expense of individual service plans on which people with developmental disabilities and their families rely. Fortunately the House restored this cut, though as I understand it was to this year's level without any inflation.
- There was an increase of 2% to Home & Community Based Services providers in the Choices for Care program.
- DRVT also sees value in some of the mental health efforts supported, such as the peer operated warm line and pilots for crisis intervention.

There are some areas that have been left out of the House version that should be considered:

- The requirement for the AHS to make \$2,000,000 in cuts to grants without specifying what is to be cut seems a ceding of control by the legislature.
- Cuts to the Reach Up “infrastructure” were not restored, likely damaging the ability to access help in getting and succeeding at employment, case management, and housing and transportation supports.
- Nothing was added for services for the Blind delivered by VABVI, a need that has been growing, but something that has been frozen for ten years.
- And perhaps the biggest omission was support for the second year of the effort which began in the Senate last year to increase wages in the Designated and Special Service Agencies to levels comparable to those in other social services and state employment. Act 82 also called for publishing an RFI for a Longitudinal Study of the effects of Involuntary Medication and DRVT believes it is time we should respond to the submissions received and fund the actual study.
- Nothing has been done to remediate the “disability tax” levied several years ago which counts \$125 of an adult’s Supplemental Security Income against what the family might be receiving through Reach Up to support their children.

DRVT would ask that you fund the proposed position defined in S.162, that of Deaf, Hard of Hearing, and DeafBlind Services Director. This is the fruit of the Vermont of Deaf, Hard of Hearing, and DeafBlind Advisory Council which has been working to BEGIN to assess the needs of communities which have greatly suffered the loss of the Vermont Center for the Deaf and Hard of Hearing and the Austine School for the Deaf.

The House restored about half of CURRENT funding to the Participant Directed Attendant Care (PDAC). DRVT appreciates that the House did not go along with elimination of the program, but we really believe that this is a model program for independent living and it is a travesty that it has been capped for three years. It is among very few programs in which we assist people with disabilities to access true opportunity without requiring that they spend down to Medicaid.

DRVT understands the difficulty of putting together a budget and that the political forces that play into the process cannot be ignored. These difficulties are not equal to the obvious challenges faced by people with serious disabilities who also deal with public perceptions of diminished worth. This committee is charged with advancing the health and welfare of Vermonters and we appreciate your consideration of our input.

Thank you!

Defending and Advancing the rights of people with disabilities & mental health issues, and of the Deaf.



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To: Senate Committee on Appropriations
From: Ed Paquin, Executive Director, DRVT
In re.: Remarks on the FY'19 Budget

The Vermont Center for the Deaf and Hard of Hearing closed almost four years ago and with it ended the history of the Austine School for the Deaf. Despite rising caseload, funding for rehabilitation services for the blind and visually impaired has not increased in thirteen years. Since about 1999 the System of Care Plan has been narrowing the eligibility for developmental services and those people who do qualify have seen an erosion of the services their waivers would support. People in crisis wait days for mental health treatment in our Emergency Departments. Wages for people who deliver community services to people with developmental disabilities and mental health issues have lost ground against inflation over the last decades. Families relying on Reach Up with an adult on SSI have lost \$125 a month of their already low benefits. And funding for the Participant Directed Attendant Services program has been frozen for three years and is proposed to be cut altogether.

We Vermonters tell ourselves how well we protect those we label as “vulnerable”. This is becoming less and less true every year and your leadership is seriously needed. Please review the other documents DRVT has submitted today as well as those from the Vermont Coalition for Disability Rights and Vermont Legal Aid. We need your help.

Thank you!