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Date: April 8, 2019
From: Ed Paquin, DRVT Executive Director
To: Senate Committee on Health and Welfare
In Re: SSI recipients in Reach-Up families and Participant Directed Attendant Care

Disability Rights Vermont and the Vermont Coalition for Disability Rights thank the committee for the time to give some thoughts on two issues of impact on people with disabilities in Vermont.

In the **Reach-Up program** the benefit is calculated based on what was considered to be a bare-boned determination of a family's basic needs "ratably-reduced" by about half, as of several years ago. What that means is that it currently covers roughly 35% of a family's basic needs.

An article in VT Digger, quoting the DCF Deputy Commissioner characterized the benefit levels in this way "The range for Reach Up benefits varies, but tends to average between a low of about \$434 monthly for a household outside of Chittenden County in which only one child is eligible for the benefit, up to a high of \$841 for a family of five in Chittenden County."

An adult receiving Supplemental Security Income from the Social Security Administration because they have no work history and are determined to be unable to work gets around \$800 a month to live on. If a family on Reach Up has an adult member receiving SSI, that person is not counted when the Reach Up benefit is calculated, because the SSI benefit is supposed to support that individual and their needs that might be unique to their disability.

In 2015 Vermont changed the Reach Up benefits for families with an adult receiving SSI. Essentially, if that family of five mentioned above had a sixth adult member receiving SSI, their family benefit would be reduced by \$115 per month or \$1,380 per year.

This policy makes no consideration of the fact that an individual's disability very likely increases their need for uncovered assistance or equipment and it seemed based on the premise that the state should balance its budget by essentially bringing the family down to a lowest common denominator of poverty regardless of what it actually costs to live and provide for dependent children.

It should not be surprising that some have characterized this policy as a "disability tax". It is hard to imagine that we think that a family living in poverty can afford \$1,380 a year to raise the \$1.6 million that this was estimated to save, when we are so careful about not raising revenue from people like me, who make a good living, by even a few dollars a year.

The **Participant Directed Attendant Care program** provides assistance with activities of daily living and instrumental activities of daily living for people with serious physical disabilities, allowing them to use the assistance of family members and without requiring that they meet Medicaid income and assets standards. This has been a general funded program for around thirty years and has meant that individuals with serious disabilities have an opportunity to live something other than a life of abject poverty. Some people on the program have been able to make careers for themselves, own a home, raise families and live at a decent standard of living. Even in cases where the individual may not be able to work, the program may allow them to get assistance without their family spending down to Medicaid levels of poverty.

For several years, in order to qualify for the PDAC program an individual was required to apply for Medicaid assistance to make sure that the cost of their service couldn't be shared by the federal government. Then, to save money, the program was "frozen", disallowing any new people to enter the program. Attrition, either by people spending down to qualify for Medicaid or dying, has brought the number of recipients down to about 40.

DRVT and VCDR feel as though people with disabilities ought to have access to the same opportunities as other members of society, and PDAC has been a successful way to make this a possibility. To us it seems a shame that a young person today, who might not come from a wealthy household, has to look forward to a life of limiting their work activities to those that won't threaten their qualifying for Medicaid – in other words, a life of bare subsistence.

Thank you for the opportunity to address the Committee and we appreciate any help you can give in advancing the potential of people with disabilities.