

January 18, 2024

The Honorable Emilie Kornheiser  
Chair, House Committee on Ways and Means  
115 State Street Montpelier, VT 05633

**Re: H.610- An act relating to making home modifications for safety and livability**

Dear Chair Kornheiser, Vice Chair Canfield, and members of the House Committee on Ways and Means,

I write to urge your swift support of H. 610 wearing many hats - resident of Vermont, Care Services Manager for Vermont for the ALS Association, friend and caregiver to a Vermonter who died of ALS, and former Residential Alternatives Supervisor for the Vermont Department of Aging & Disabilities who managed DAIL grant funds and program work for home modifications and related housing initiatives.

ALS is a fatal, progressive, high cost and high burden neurodegenerative disease with no known cures. ALS affects multiple functions - the ability to walk, talk, eat, and finally breathe. Change can affect functions so rapidly that individuals have difficulty getting services in time. Average life span is 2-5 years from diagnosis. ALS can strike anyone at any time. People with ALS need significant medical care, which can easily exceed \$250,000 a year. In addition, the cost of making a home more accessible for someone living with ALS is difficult to bear, costing tens of thousands of dollars depending on the needs of the home and person. Much of the work to plan and execute home modifications often falls to family caregivers whose extraordinary burdens have only increased due to workforce shortages and the unpredictable availability of supplies and services throughout the health and long-term care systems. Paid respite is limited and costly when available at all. Families with children, families where earners must take unpaid medical leave, and individuals and families just beginning to save for retirement and long-term care are burdened further still. Finally, everyone with ALS has been affected by the increased costs and limited availability of building supplies, contractors and labor since COVID. Dozens of home modifications have been curtailed due to costs that nearly doubled the cost of many projects **before** the catastrophic 2023 floods.

H.610 would allow an individual to receive a tax credit of up to \$15,000 of qualified expenses in their lifetime with the purpose of helping individuals live more safely in their homes. Qualifying expenses would include unreimbursed and uncovered expenses relating to modifications of a homestead to enhance safety and livability, such as: ramps, lifts, widened doorways and hallways, bathroom renovation, and other modifications specifically made to improve accessibility or safety. The cost of making a home more accessible can be incredibly burdensome, costing thousands of dollars depending on the needs of the home and person.

As former Residential Alternatives Supervisor for DAIL, I co-chaired an interagency work group that studied Vermont home modification funding gaps in the early years of the 2000-2010 decade that resulted in the legislative and executive branches allocating a million dollars of state waterfall funds to catch up the wait list at VCIL's Home Access Program. Many issues identified at that time remain. The overall cost of housing, lack of housing that is accessible to wheelchair users, and Vermont's continued stock of older dwellings mean that most Vermonters with ALS face significant needs and the same barriers that



**OUR VISION** Create a world without ALS

**OUR MISSION** To discover treatments and a cure for ALS, and to serve, advocate for, and empower people affected by ALS to live their lives to the fullest.

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Existed then. Too many people cannot wait 1-3 years to get VCIL HAP help and panic at the thought of taking loans if they can qualify for or realistically repay loans. They need home modifications before they may qualify financially for long-term care Medicaid if they can qualify at all. People often share with me that standard retirement financial planning advice provides for some of the needs and costs of ALS, but few planners have strategies that meet the broad, deep and nearly simultaneous costs that come with an ALS diagnosis unless the person or family is wealthy.

The reality is that too many people I work with do not complete their projects at all, or complete as much as they can after they or a family caregiver experiences injury or emotional distress related to the lack of timely home modifications. Without timely modifications, fall risks – and falls – increase. Caregivers may help in ways that increase the likelihood of a care injury. Caregivers also experience decreased health when care is harder to perform or takes longer because they are working against their environment. Mental health of grown-ups is adversely affected when it is difficult to complete personal care and basic activities with dignity and safety. I talk to at least one person a month who is curtailing care that can prevent harms and costs of ALS due to the difficulty of performing these activities in a suboptimal environment. Finally, children observe these difficulties and wonder what kind of world we live in that builds dis-abling environments, and they wonder what their future will look like as they age or if they face a disability or illness.

Finally I write as someone affected by a motor vehicle accident myself, and as a spouse of a Vermonter who survived a devastating car accident caused by an uninsured drunk truck driver . We didn't expect that I would have energy and function needs in addition to my husband's. The historic spike costs, decrease in available housing stock that is readily modifiable, and increased cost to buy level building sites close to village services combine to complicate planning for our last aging in place home. A dream project is more of a gamble and more nerve-wracking than we expected. Even with Larry's experience as an aging in place architect technician who has worked on residential and facility projects, we are having to get very creative and to assume more risk at an unpredictable time. If it is difficult for us, it must be more so for other Vermonters. We appreciate it is worth taking a risk. A tax credit is a practical help and a public message that home modifications are worthwhile.

If enacted, Vermont would join 8 other states, including 2 of Vermont's neighbors, who provide tax credits for home modifications: Colorado, Kansas, Louisiana, Maine, Maryland, Missouri, New Hampshire, and Virginia. The reach of this legislation can have long-term positive impacts on Vermont's overall housing market and speaks to goals of access, visit-ability, and aging in place that have long been in Vermont policy at citizen behest since the *Shift the Balance* movement began.

For these reasons, I ask for the committee's attention and support on H.610 and hope to see a favorable report.

Sincerely,



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