

I am Ruby Baker, Executive Director of the Community of Vermont Elders (COVE). COVE has advocated on behalf of older adults for over 40 years. We support individuals who want to have a voice in the legislature, and we also work to be that voice for the broader elder population. As you know, the population of adults over the age of 60 is expanding, and Vermont will soon be the oldest state in the nation. COVE does not receive state funds. I am not here to advocate for my own organization. I am instead here to ask you to invest in the 175,000 Vermonters over the age of 65 and the additional tens of thousands of family members and caregivers who are part of the system of aging in Vermont. While there are many ways you can and do accomplish that, these are the ones that rise to the top of our list and those of Vermonters statewide.

**First, we oppose the Governor's \$2M cut to long-term care and instead want to see investments to close the gap in funding for these services: \$13M base increase.**

Long-term care services support our family members, friends, and neighbors who are unable to perform basic activities of daily living such as dressing or bathing. Long-term care can be provided at home, in the community, in assisted living, and in nursing homes. COVE facilitates the Long Term Care Crisis Coalition, which represents more than 200 providers of assisted living, adult day services, area agencies on aging, home health agencies, residential care homes, nursing homes, and other organizations who care for Vermonters who need these services. We came together 2 years ago to call for greater action and unite as a sector responsible for caring for some of Vermont's sickest and most vulnerable. A rate study published by DVHA states that these services receive significantly less than the cost of delivering the services. For example, Residential care providers receive \$47.25/day and the actual cost of delivering these services is actually \$84.66/day. These services are underfunded by almost 80%. To close the gap would cost an additional \$31M in funding across the long-term care spectrum which would help ensure access for those who depend on it. This translates to \$13M of state funds. Low Medicaid reimbursement rate, severe workforce shortages and chronic underfunding have led many care facilities to shut down. We must protect this system for all of our futures.

**Second, we want to support Adult Days at the Medicaid Reimbursement Rate of \$25/hour.**

Since the beginning of the pandemic, 6 programs permanently closed. A great majority of VAADS participants are dependent on Medicaid. The Medicaid reimbursement rate right now is \$18.60/hour. This past fall, Adult Day Services underwent a very rushed rate setting review, and many of the recommendations were based on a lack of

understanding of its services. We strongly disagree with the results of the rate study that was released last week. The recommendation from the report is a 15% Medicaid reimbursement rate increase, which equates to \$21.33/hour. ***This will not sustain Adult Day services.***

**Finally, we ask that the state continues its support of SASH**, through DAIL and DVHA. Right now this statewide program serves approximately 5000 older adults and those with disabilities. SASH provides home based supports to help people age in their homes. This program is true prevention and is one of the few programs proven to bend the curve on Medicare spending. SASH helps reduce ED visits, help control chronic diseases, and improve quality of life for low income older adults.