

To the Vermont Legislature,

My name is Erin Roelke, and I currently serve as the Director of Care and Service Coordination at Age Well, one of Vermont's 5 Area Agencies on Aging. In addition to my current role, I have served in several different roles and settings within Vermont's Long Term Care system over the past 12 years. In that time, I've witnessed the severe impacts that chronic underfunding of home and community-based services have had on the older adults we serve. As a case management provider, one of our roles within this system is to assess older adults' level of functioning and impairment and to coordinate the services that will meet their needs to ensure that they can continue to live and age at home safely and with dignity. In my time here, access to the direct care services, including assistance with basic human needs like bathing, dressing, eating, toileting, and ambulation, among others, has become increasingly scarce. Many clients go without any services at all for months on end, most others have access to care that is insufficient to maintain their wellbeing and prevent hospitalizations, never mind maintain dignity and quality of life. Families are increasingly faced with impossible decisions, like whether to send their family member to an out of state facility for long term care, because they are unable to receive even minimal amounts of care at home. Case managers face this reality daily, as monthly visits with clients to coordinate services instead become visits to assess decreased functioning as their clients' needs go unmet for months on end and their health conditions worsen.

The rates of pay for this workforce have not kept pace with the need. As a result, Vermont's system of long-term care, both home-based and facility based, is in jeopardy due to chronic underfunding.

I am writing today to support the Long-Term Care Crisis Coalition's request to:

- fully implement the increases for home-based Choices for Care services and Enhanced Residential Care (ERC) described in the February 15, 2023 DVHA rate study (approximately \$14.3 million total, \$6.3 million General Fund); and
- apply an adjustment to long-term care reimbursement rates in the SFY25 budget that includes an inflation factor that is reasonable and adequately reflects economic conditions, and accounts for changing market pressures, elevated staffing costs from Vermont's workforce crisis, and increases in costs of care.
- review and update rates on an annual basis to reflect the actual cost of care.

As you consider the importance of funding these services and weigh them against many other competing priorities, I would urge you to ask yourself the following question: "If I, or a loved one, were to find myself in a position of needing these services tomorrow, do I feel confident that Vermont's current long term care system would be able to meet my needs?"

As someone who has worked in this system for over a decade, I do not. I would urge you to think not only about your neighbors, but also of yourselves and your own families as you weigh the importance of these issues. Vermont has a long history of valuing self-determination and independence, values that were at the foundation of the inception of the Long-Term Care Medicaid Home and Community Based Service Program in Vermont. We find ourselves now at a pivotal moment, where we can either fund these programs adequately or allow the status quo to be enabled, driving a push towards out of state institutional care for aging and disabled Vermonters.

Thank you for the opportunity to address this critical issue for long-term care workforce.

**Erin Roelke**