

SFY26 BUDGET – HOUSE HUMAN SERVICES RECOMMENDATIONS

Department for Children and Families – Child Development Division				
Section	Governor's Recommendation	Budget Description/ Other Notes	HHS Recommendation	Priority
B.318	(\$3,501,972)	<ul style="list-style-type: none"> • CCFAP payments to providers on behalf of families • Consensus forecast of expected utilization • Due to entitlement nature of services, all families will be served 	<ul style="list-style-type: none"> • HHS concurs 	<ul style="list-style-type: none"> • N/A
B.318	(\$19,000,000)	<ul style="list-style-type: none"> • Reduction of GF based on revenue projections for childcare payroll contribution • Significant gaps remain for infant/toddler care due to expense driven by staff to child ratio • DCF cost modeling report shows differential needed to address issue • Current statutory language permits reimbursement rate increase by up to 1.5 times the most recent annual increase in the NAICS code 611, Education Services. 	<ul style="list-style-type: none"> • Increase infant/toddler rates by 5.5% within statute limitation • \$5,872,612 GF/SF • Impacts care for 1,789 infants and 1,400 toddlers 	<ul style="list-style-type: none"> • Highest
B.318		<ul style="list-style-type: none"> • Workforce investment via youth apprenticeships • CCV credit-bearing coursework with experiential learning directly in childcare programs 	<ul style="list-style-type: none"> • Expand to 35 youth with summer programming • \$156,000 GF/SF 	<ul style="list-style-type: none"> • Highest

		<ul style="list-style-type: none"> • Current program capacity is 25 students • Successful program with wait list 		
B.318		<ul style="list-style-type: none"> • Compliance with 2024 federal childcare rules • 7% maximum family co-pay 	<ul style="list-style-type: none"> • Unknown at this time; DCF contracting for estimate 	<ul style="list-style-type: none"> • Highest
		<p>Given the current unknown cost of compliance with federal rule, the continuing need for workforce development, the need to address gaps in service, HHS recommends that it is premature to move any of the \$19 million out of the childcare appropriation.</p>		
B.318	\$0	<ul style="list-style-type: none"> • Children’s Integrated Services • Current per member/per month rate is \$650 • 2024 cost study determined cost of providing services is \$738 per member/per month 	<ul style="list-style-type: none"> • Increase per member/per month rate to \$675 • \$450,000 total • \$67,500 GF • \$382,500 GC 	<ul style="list-style-type: none"> • High
B.318	\$0	<ul style="list-style-type: none"> • Building Bright Futures -- public/private partnership for monitoring and statewide advice on all services for early education and intervention • Despite all of BBF’s work being set by statute, the state’s investment supports less than 50% of their operation • After several years of level funding, in 2021, BBF’s base allocation increased from \$244,000 to \$505,000 • In 2023, it increased to \$771,707 as a result of additional requirements to monitor and evaluate impacts of Act 76 (child care) 	<ul style="list-style-type: none"> • \$322,444 GF • With this increase, state support remains below 50% of BBF operating costs 	<ul style="list-style-type: none"> • High

Department for Children and Families – Family Services Division

Section	Governor's Recommendation	Budget Description/ Other Notes	HHS Recommendation	Priority
N/A	\$0	<ul style="list-style-type: none"> Supervised visitation program under court or DCF conditions Center for Crime Victims Services no longer able to fund coordination 	<ul style="list-style-type: none"> \$30,640 for 1 year from Judiciary CHINS funds See language 	<ul style="list-style-type: none"> Highest
B.317	\$2,340,000	<ul style="list-style-type: none"> Increased cost of transportation contracts due to reduced number of providers Future language may be needed re: use of restraints in transport; awaiting data from DCF 	<ul style="list-style-type: none"> HHS concurs 	<ul style="list-style-type: none"> N/A
B.317	\$1,000,278	<ul style="list-style-type: none"> PNMI inflation adjustment Other community-based direct services received no COLA increase and we recommend 4% in order to maintain level services consistent with other community-based services 	<ul style="list-style-type: none"> HHS concurs See language 	<ul style="list-style-type: none"> N/A
N/A	\$0	<ul style="list-style-type: none"> Youth mentoring services via Mentor Vermont No increase between 2007 and 2024 Increased in FY 25 from \$170,000 to \$650,000 Requested \$1,000,000 	<ul style="list-style-type: none"> \$200,000 SF (see VDH) Fund from prevention resources at VDH 	<ul style="list-style-type: none"> Highest
B.327	\$0	<ul style="list-style-type: none"> Operating carryover from Woodside funds used for capital costs and new operating costs Increase in operating costs since FY 24 from \$3.3 to \$9.6 million 	<ul style="list-style-type: none"> Significant concern with lack of investment in lower levels of care 	<ul style="list-style-type: none"> N/A

		<ul style="list-style-type: none"> Continuing contract with TLC for \$1,050,000 	<ul style="list-style-type: none"> Budget leaves deficit due to use of 1 time funds for operations May need BAA in FY 26 and increase in base in FY 27 of approximately \$4.5 million See language 	
Department for Children and Families – Economic Services Division				
B.321	\$30,500,000 one time	<ul style="list-style-type: none"> Funds what is known as “GA Hotel/Motel Program” With base funding of \$8.1 million, totals \$38.6 million for FY 26 FY 25 funding is \$44.6 million 	<ul style="list-style-type: none"> \$6,000,000 GF to restore to FY 25 levels Need stable year to transition to new program being established in H.91 See language 	<ul style="list-style-type: none"> Highest
DCF Admin	\$0	<ul style="list-style-type: none"> 211 program \$322,000 in FY 25 from one time Needs to be 24/7 operations; handles all emergency housing calls nights and weekends Critical in climate emergencies 	<ul style="list-style-type: none"> 322,000 GF in base, not one-time 	<ul style="list-style-type: none"> Highest
B.321	(\$638,473)	<ul style="list-style-type: none"> Reduction in general assistance (burials, short term personal needs, etc.) DCF confirms that there is no outreach regarding these services; needs exists but due to staffing changes, people are unaware (\$339,184) of reduction is to bring security appropriation to legislatively authorized maximum of \$500,000 	<ul style="list-style-type: none"> \$299,289 GF Retain funds for general assistance 	<ul style="list-style-type: none"> Medium

B.322	\$5,400,000 \$1,300,000	<ul style="list-style-type: none"> • Summer EBT • 3 Squares caseload increase 	<ul style="list-style-type: none"> • HHS concurs 	<ul style="list-style-type: none"> • N/A
N/A	\$0	<ul style="list-style-type: none"> • Vermont Food Bank • FY 25 funding = \$1.3 million • FY 26 request = \$2 million to base And \$3 million for one-time 	<ul style="list-style-type: none"> • HHS concurs with the recommendation from the Committee on Agriculture, Forestry and Food Resilience 	<ul style="list-style-type: none"> • Medium
B.323	(\$697,625)	<ul style="list-style-type: none"> • Reach-up reduction based on caseload estimates 	<ul style="list-style-type: none"> • Estimated \$536,251 to change the ratable percentage by 1%, from 49.6 to 50.6 	<ul style="list-style-type: none"> • Medium

Department for Children and Families – Office of Economic Opportunity

B.325	\$3,699,073 Base \$2,000,000 One time	<ul style="list-style-type: none"> • Housing Opportunity Program (HOP) • Total base funding = \$29,798,061; base increase to fund new shelter operations • One time increase to expand shelters 	<ul style="list-style-type: none"> • HHS concurs 	<ul style="list-style-type: none"> • N/A
B.325	\$0	<ul style="list-style-type: none"> • 4% COLA increase for community-based providers in HOP 	<ul style="list-style-type: none"> • \$1,043,959 GF 	<ul style="list-style-type: none"> • Highest
B.325	\$0	<ul style="list-style-type: none"> • ERAP funding ends June 30, 2025 • 33 critical case management positions will be lost 	<ul style="list-style-type: none"> • \$3,750,000 to maintain positions that will be necessary for redesign of temporary shelter program in H.9 	<ul style="list-style-type: none"> • Highest
B.325	\$0	<ul style="list-style-type: none"> • Community Action Agencies Microbusiness Development Program • Enables all 5 CAP to have 1.0 FTE • Current base = \$493,339 	<ul style="list-style-type: none"> • \$87,661 GF 	<ul style="list-style-type: none"> • Medium

B.325	\$0	<ul style="list-style-type: none"> Community Action Agencies Financial Coaching Program Enables all 5 CAP to have 1.0 FTE Current base = \$170,301 	<ul style="list-style-type: none"> \$357,699 GF 	<ul style="list-style-type: none"> Medium
HOME Family Voucher	\$0	<ul style="list-style-type: none"> HOME program ends June 30, 2025 Served 155 to date; currently has 92 families enrolled Rental and security deposit assistance for up to 24 months Funding would support additional 50 families and extend current families to 36 months 	<ul style="list-style-type: none"> \$2,400,000 GF 	<ul style="list-style-type: none"> High

Department of Disabilities, Aging and Independent Living

Section	Governor's Recommendation	Budget Description/ Other Notes	HHS Recommendation	Priority
B.334	\$0	<ul style="list-style-type: none"> Home and community-based long term care services initial phase of rate study funded in FY 24 final implementation of 2023 rate study for ERC, personal care, homemaker, respite, ACCS in current dollars 	<ul style="list-style-type: none"> \$4,387,817 million GF \$10,650,041 million GC 	<ul style="list-style-type: none"> Highest
B.334	\$0	<ul style="list-style-type: none"> Expand Home Share to NEK Homelessness prevention Assists older Vermonters, individuals with disabilities and/or low income people to remain housed Expecting 100+ applications 	<ul style="list-style-type: none"> \$235,000 GF Not eligible for GC 	<ul style="list-style-type: none"> Highest

B.330	\$0	<ul style="list-style-type: none"> • 986,622 Meals on Wheels delivered • average cost of \$13.43/meal • With this investment and current federal/state funding via OAA and GC reimbursement would be \$10.65/meal 	<ul style="list-style-type: none"> • \$2 million GF • \$4.85 million GC 	<ul style="list-style-type: none"> • High
B.333 & B.334	\$0	<ul style="list-style-type: none"> • 4% home and community-based services COLA • includes ERC, DA, SSA, CFC, Adult Family Care, ACCS 	<ul style="list-style-type: none"> • \$11,094,698 GF • \$26,277,652 GC • See language 	<ul style="list-style-type: none"> • Highest
B.333	\$5,842,315	<ul style="list-style-type: none"> • required federal compliance for conflict-free case management • Administration budgeted for full year • Developmental services implementation delayed by 4 months 	<ul style="list-style-type: none"> • (\$794,320) GF • (\$1,927,963) GC • One time savings; full amount needed in FY '27 	<ul style="list-style-type: none"> • N/A
B.334	\$15,363,424	<ul style="list-style-type: none"> • Statutory nursing home increase • \$3,457,442 inflation • \$11,905,981 rebase 	<ul style="list-style-type: none"> • HHS concurs; however, is concerned about ongoing need for emergency financial relief and need for industry to make changes • See language 	<ul style="list-style-type: none"> • N/A
B.334	\$24,492,883	<ul style="list-style-type: none"> • Adjustment to nursing home utilization consistent with FY 25 BAA • Should decrease need for BAA in FY 26 	<ul style="list-style-type: none"> • HHS concurs; however, is concerned about the lack of support for home and community-based services and only funding highest cost service 	<ul style="list-style-type: none"> • N/A
B.333	\$5,390,045	<ul style="list-style-type: none"> • Represents increase in developmental disabilities services caseload consistent with previous year calculations 	<ul style="list-style-type: none"> • HHS concurs; however, is concerned about the impact on the system of multiple changes occurring at the same time • See language 	<ul style="list-style-type: none"> • N/A

B.330	\$0	<ul style="list-style-type: none"> • Adult Day Services provided to older Vermonters • Funding partially addresses loss due to absences; • 34,267 hours of absence for 6 months • H.13 addresses need for payment mechanism that addresses absences 	<ul style="list-style-type: none"> • \$800,000 GF one-time 	<ul style="list-style-type: none"> • Medium
Department of Health				
B.312	(\$1,050,000)	<ul style="list-style-type: none"> • Moving to Opioid Abatement Special Fund via H.218 	<ul style="list-style-type: none"> • HHS concurs 	<ul style="list-style-type: none"> • N/A
B.313	(\$3,000,000) \$6,750,000	<ul style="list-style-type: none"> • Moves GF out • Moves revenue from cannabis excise tax • Brings total appropriation for prevention to \$11,198,722 	<ul style="list-style-type: none"> • HHS concurs with fund transfer however has questions regarding use of funds • Transfer \$200,000 to DCF for purpose of funding increase to Mentor Vermont 	<ul style="list-style-type: none"> • N/A
B.313	(\$1,200,000)	<ul style="list-style-type: none"> • Moving to Opioid Abatement Special Fund via H.218 	<ul style="list-style-type: none"> • HHS concurs 	<ul style="list-style-type: none"> • N/A
B.313	\$320,000	<ul style="list-style-type: none"> • Funds 3 Aftercare Coordinators for substance use treatment/recovery for DOC involved individuals 	<ul style="list-style-type: none"> • HHS concurs 	<ul style="list-style-type: none"> • N/A
B.313	\$1,500,000 Base \$500,000 One-time	<ul style="list-style-type: none"> • 15 bed Pilot Recovery Campus • Step down from residential treatment • RFI has been issued • One-time funds for fit up and renovation 	<ul style="list-style-type: none"> • HHS concurs; however notes that this proposal should be part of ongoing decision-making process with Opioid Abatement Special Fund Advisory Committee 	<ul style="list-style-type: none"> • N/A

	\$0	<ul style="list-style-type: none"> • 4% COLA increase for preferred SUD providers; recovery centers and recovery residences 	<ul style="list-style-type: none"> • \$1,340,300 GC Preferred Providers • \$34,356 GF; \$155,612 GC for Recovery Centers and Recovery Residences 	<ul style="list-style-type: none"> • Highest
B.313	\$0	<ul style="list-style-type: none"> • Recovery centers have not received the same level of attention in SUD funding • Peer and professional support statewide through 14 centers • Extends hours of operation • Prevention work/addressses relapse • Recovery centers requested \$1.6 million increase 	<ul style="list-style-type: none"> • \$800,000 SF • Fund from prevention funds at VDH 	<ul style="list-style-type: none"> • Highest
	\$0	<ul style="list-style-type: none"> • Empty Arms – provides peer support for individuals and families whose babies have died 	<ul style="list-style-type: none"> • \$40,000 GF 	<ul style="list-style-type: none"> • Highest