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Vermont House Human Services Committee - February 4, 2025

H. 13 - An act relating to Medicaid payment rates for home- and community-based service providers and designated and specialized service agencies.

My name is Karen Topper, and I live in Barre, Vermont. I work for Green Mountain Self-Advocates (GMSA), a disability rights organization led by and for people with intellectual and developmental disabilities.

One example of our work is hiring and training 13 people with intellectual disabilities last year to serve as peer mentors. These mentors use their lived experiences and expertise to train and support their peers in understanding their rights when receiving Home and Community-Based Services. To support this effort, Green Mountain Self-Advocates developed plain language resources and activities to explain the Medicaid rules that protect service recipient's rights.

Another example of our work at GMSA is supporting people with intellectual and developmental disabilities to serve on more than 20 state and national committees and boards. For the past few years, we have helped individuals receiving services take part in the DDSD Payment Reform Advisory Committee. This committee is working with the Division of Developmental Services as they create fair payment rates based on actual costs. Our role is to support committee members with intellectual disabilities by meeting with them before and after each session. We make sure they understand the information in

a way that is clear and easy to process, so they can fully participate in decision-making.

Thank you to the members of this committee for your hard work to pass H. 13. This legislation will help Vermont follow the new Medicaid Access Rule. In April 2024, the Centers for Medicare & Medicaid Services (CMS) created a new rule called the Access Rule to make sure people can get the care they need through Home and Community-Based Services (HCBS). This rule makes states set clear rules for how they decide and change Medicaid payment rates for these services. It also requires states to review payment rates regularly and increase them each year to keep up with rising costs. By keeping better track of data and checking payments more often, the rule helps make sure providers get enough money to offer quality care to people who rely on Medicaid. Overall the Access Rule is an important step in making Home and Community-Based Services stronger. It makes sure that Medicaid payment rates are clear, fair, and updated regularly to keep up with the cost of living. This helps people who rely on Medicaid get better care and the services they need.

For many years, Medicaid payments have not kept up with inflation, rising costs, and the needs of workers. Because of this, agencies that provide services have struggled. There is a big shortage of workers because Direct Support Professionals (DSPs) and other staff do not get paid enough. When wages are too low, it is hard to find and keep skilled workers. This leads to frequent staff changes and makes it difficult for people to get the services they need. Many people with disabilities are missing out on support because there are not enough workers to cover all the hours needed.

H. 13 helps fix this problem by making sure Medicaid rates go up each year based on actual costs. It also creates a fair and clear process for deciding payment rates. This means that providers will get paid enough to cover their costs and keep up with rising expenses. Regular reviews of payment rates will help agencies plan for the future. This is not a new idea. It is my understanding that since 2016, rates paid to nursing homes in Vermont have been adjusted annually based on cost and inflation.

A stronger funding system will also help keep workers in their jobs. When wages are fair and stable, agencies can hire and keep skilled staff. This means less turnover and better care for people with disabilities and older adults. When agencies can pay competitive wages, they can keep experienced staff, leading to better and more consistent care. It also saves time and money. Hiring and training new Direct Support Professionals is very expensive. Because many DSPs leave their jobs quickly, agencies have to spend even more money to hire and train new staff. This is why it's important to find ways to keep workers longer and pay them fair wages.

H. 13 also improves fairness and accountability. The bill requires yearly reports to lawmakers so they can understand funding needs and how services are being delivered. This makes sure Medicaid money is used for direct care, not just administrative costs. By collecting better data, Vermont can make smarter decisions about where funding is needed most.

Now, more than ever, Vermont needs a strong home- and community-based service system. There are many people who are able to live on their own with staff calling and stopping by a couple of times a week. These essential services help people live independently, stay employed and avoid an emotional

and/or health crisis. But without fair and steady funding, agencies will struggle, and more people will go without support. If we do nothing, service cuts and worker shortages will get worse, leaving many people without the care they need. Sadly this can often lead to a person needing higher levels of support to recover from facing a crisis.

H. 13 is a smart investment in Vermont's future. It will ensure that Medicaid rates are fair, stable, and keep up with costs of living. This will help strengthen the workforce, improve access to services, and make sure state money is used wisely.

I strongly urge this committee to support H. 13 to keep Vermont's Medicaid-funded services strong and sustainable.
Thank you for your time. I welcome any questions.