

# VERMONT LEGAL AID, INC.

## VERMONT OMBUDSMAN PROJECT

### DISABILITY LAW PROJECT

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February 5, 2025

To: Rep. Theresa Wood, Chair, and Members of the  
House Committee on Human Services

From: Vermont Legal Aid

Kaili Kuiper, State Long Term Care Ombudsman<sup>1</sup>

Susan Garcia Nofi, Staff Attorney, Disability Law Project

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

Thank you for this opportunity to provide feedback on H.13. We strongly support the bill and its goal to identify appropriate Medicaid payment rates for home-and-community-based services and designated and specialized service agencies. Vermonters do not have adequate access to long-term services and supports. As advocates for individuals who receive home-and-community-based services, we hear from Vermonters every day who are not receiving the services they desperately need, because they cannot find workers. Vermont must ensure that we are providing adequate pay to attract workers into this field.

Most older Americans prefer to remain at home as long as possible.<sup>2</sup> Yet, in-home care is extremely difficult to secure in Vermont due to staffing shortages. According to a national survey conducted by AARP, Vermont is in the bottom-half of the country in terms of access to long-term care services at home and in nursing facilities.<sup>3</sup> The long-term care shortage is especially

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<sup>1</sup> Vermont Long Term Care Ombudsman Program's Annual Report to the Legislature:

<https://legislature.vermont.gov/assets/Legislative-Reports/Final-Jan-2025-Vermont-Long-Term-Care-Ombudsman-Program-Report-to-General-Assembly.pdf>

<sup>2</sup> See e.g. "Where We Live, Where We Age: Trends in Home and Community Preferences, November 19, 2021, AARP, .

<sup>3</sup> AARP, 2023 LTSS Choices Scorecard Report, Vermont: <https://ltsschoices.aarp.org/scorecard-report/2023/states/vermont>.

pronounced for individuals whose payment source is Long-Term Care Medicaid and individuals with significant physical or mental health needs.

Many Vermonters remain in hospitals or are sent to nursing homes out of state because they don't have sufficient in-home services, and they cannot find a nursing home bed in Vermont. These living situations significantly reduce their quality of life and weaken their support system.

Vermonters with developmental and other disabilities are similarly harmed by staffing shortages. We are routinely contacted by people with disabilities and their families because they are not receiving needed services for which they are eligible and approved to receive. Without staff to provide services, many people with disabilities struggle to function at home and are isolated because they cannot get out into the community. Adequate and consistent staffing is critical for Vermont's most vulnerable citizens to access the support services they need, without which their quality of life suffers.

We note that the proposed definition of "home- and community-based services" in H. 13 (page 2, lines 12-20) references Choices for Care and other waiver programs, but does not name Developmental Disabilities Services. H. 13 is meant to include developmental disabilities services, as the bill requires the Secretary to adopt rules with a methodology for determining payment rates for services to "individuals with developmental or intellectual disabilities." (page 5, lines 8-12) For clarity and consistency, we respectfully ask the committee to revise the definition of home- and community-based services so that it also explicitly names developmental disabilities services.

Ensuring adequate payment helps ensure that designated and specialized services agencies will be able to hire and retain staff who perform these critical services. We support H. 13 because it creates a framework to determine reasonable and adequate Medicaid payment rates for home- and community-based services.

Thank you again for this opportunity to advocate on behalf of Vermonters who need long term care.