



Agency of Human Services

**Department of Disabilities,
Aging and Independent Living**

GOVERNOR'S SFY2026 BUDGET TESTIMONY
2025 Legislative Session
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HOUSE APPROPRIATIONS COMMITTEE
SENATE APPROPRIATIONS COMMITTEE
HOUSE HUMAN SERVICES COMMITTEE

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Department Overview

The Department of Disabilities, Aging, and Independent Living (DAIL) is responsible for managing services for older Vermonters and Vermonters of all ages with disabilities. This work is codified at 33 V.S.A. Chapter 5 of Vermont's Human Services Statute.

DAIL's mission, **to make Vermont the best state in which to grow old or live with a disability, with dignity, respect, and independence**, guides the delivery of all services.

Vision

DAIL's vision is to enable older Vermonters and Vermonters with disabilities to receive supports and services in their homes and in their chosen communities, living independently and fully included as participating and contributing members of those communities. Making this possible is the overarching value of self-determination, and safety and protection. This commitment is underlined by state and federal mandates such as the [Age Strong Vermont Plan](#), the [Older Vermonters Act \(OVA\)](#), the [Older Americans Act \(OAA\)](#), the [Americans with Disabilities Act \(ADA\)](#), the [Workforce Innovation and Opportunity Act \(WIOA\)](#), the [Vermont Health Care Administrative Rules \(HCAR\)](#), the [Global Commitment to Health 1115 Waiver](#), the [Federal Home & Community-Based Rules](#), and the [Olmstead Decision](#), which require states to provide services to people in the least restrictive environments possible. Vermont remains a leader in supporting self-determination, choice, expansion of community-based options, the development of robust supported employment, mature worker options and life-saving protective services.

DAIL's work aligns with the Governor's priorities to grow the economy and build the safest and healthiest communities, which is reflected in DAIL's strategic planning. Input from interested parties is continuously sought and always welcome.

DAIL embraces continuous performance improvement approaches in assuring the highest quality services to Vermonters. Throughout this document, DAIL identifies measures related to how much, how well, and how people are better off because of our services and supports. For more information, please visit the [DAIL Performance Budget Scorecard](#) and [DAIL Divisions Scorecard](#).

Number of employees and positions

DAIL consists of the Commissioner's Office and five divisions made up of 321 classified positions.

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DAIL's five divisions are:

1. Adult Services Division (ASD).
2. Division for the Blind and Visually Impaired (DBVI).
3. Developmental Disabilities Services Division (DDSD).
4. Division of Licensing and Protection (DLP).
5. Division of Vocational Rehabilitation (DVR) doing business as HireAbility (HA).

The Commissioner's Office includes the Commissioner; Deputy Commissioner; Operations; Principal Assistant; Legal Unit; Business Office; Director of Deaf/Hard of Hearing/DeafBlind Services; and an Executive Assistant.

DAIL is extremely pleased to welcome Dr. Jill Bowen who joined the department in April 2024 as Commissioner. Dr. Bowen comes to Vermont from Philadelphia where she served as commissioner of the Department of Behavioral Health and Intellectual Disability Services (DBHIDS) for more than three years. During her tenure with DBHIDS, she led a multi-division department focused on health and wellness for those with intellectual disabilities, mental health, and substance use disorders. She also focused on supports for those impacted by healthcare disparities, trauma and those requiring integrated, cross-sector supports. Prior to her work in Philadelphia, Dr. Bowen held positions in New York City, including as senior adviser for mental health with the Office of the Mayor, chief transformation officer for NYC Health + Hospitals, and as associate executive director for organizational innovation and excellence at Kings County Hospital Center.

Department Highlights

In addition to managing the day-to-day operations of several large, impactful programs and provision of life-saving protective services, DAIL has worked hard to grow and improve the systems that support aging and disabled Vermonters. Below are DAIL's recent major accomplishments and SFY26 proposals.

Accomplishments

1. Age Strong VT Plan: DAIL is pleased to report continued forward momentum implementing Vermont's new multi-sector [Age Strong VT Plan](#) that was launched January 2024 with the VT Department of Health. Progress includes work with contractor Professional Data Analysts (PDA) to create an evaluation plan, along with a public-facing [Goal Tracker](#) and just released [Year 1 Progress Report](#).
2. Developmental Disabilities Services (DS) Supported Housing: DAIL is excited to share that in October 2024, Riverflow Inc opened its doors. Riverflow Inc is an intentional supported housing community in Monkton, VT, born out of the Act 186 (2022) pilot grants awarded through DAIL. The Riverflow community is integrated

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within the larger communities of Addison County and Vermont, serving as a housing alternative for four individuals with intellectual and developmental disabilities. This multi-sector housing initiative included partnerships through AHS, Agency of Commerce and Development (Vermont Housing Improvement Program), Efficiency Vermont, and private funding efforts—including a capital campaign. DAIL continues to expand opportunities in collaboration with DS stakeholders, VHIP, Efficiency VT, Housing Trusts, Fundraising, capital campaign, Congressional Directed Spending, and the Vermont Housing and Conservation Board.

3. Developmental Disabilities Services Division (DDSD) Quality Assurance: In January 2024, DDSD implemented an interim quality assurance process to ensure for an onsite quality review for each Designated and Specialized Service Agency, as well as the State's Supportive Intermediary Service Organization (Transition II). [Act 78 of 2023](#) provided DAIL with 5 new DDSD quality positions which made the enhanced process possible. The new process includes a monthly review of individuals engaged in services, affording DDSD quality staff the opportunity to perform standard quality assurance processes, interview individuals and guardians (as appropriate) and connect with staff. Over the first 12 months, 85 individuals across the 16 organizations have received a quality services review. Feedback around this process has been positive and DDSD will continue the interim approach while the Quality Management Unit continues to implement Conflict-Free Case Management and designs a quality services review process that integrates the services provided to an individual from the independent Case Management Entity and Direct Service Organization (DA/SSA).
4. Pathways to Partnership Grant (P2P): The US Department of Education, Rehabilitation Services Administration selected Vermont DAIL/DBVI to be one of 20 Disability Innovation Fund (DIF) grant award recipients nationally. Vermont was awarded \$10 million 10/1/2023 through 9/30/2028. Spring of 2024, DBVI was given State approval to operationalize the grant. The goal of P2P is to create stronger transitional plans for students with disabilities through partnerships between schools and community agencies, enhance the work that is already happening across the state in schools and agencies and to create new opportunities and access to self-advocacy trainings, independent living workshops, peer to peer mentorships, employment and career counseling workshops, and work-based learning experiences for students with disabilities and their families.
5. Direct Care Workforce: To address the workforce shortage across programs and providers, DAIL took a multi-pronged approach with the following initiatives in 2024:
 - a. DAIL was chosen as one of 14 states to participate in a State Peer Learning Collaborative focused on the Direct Care Workforce. The cross-agency Vermont team worked with national experts and other states over 6

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months to discuss strategies and opportunities to address the direct care workforce shortage, better support direct care workers within systems, and strengthen quality and sustainability of care for older Vermonters and adults with disabilities.

- b. DAIL used one-time federal funding to contract for the development of a direct care workforce marketing campaign to increase interest and recruitment. With the focus on 'Careers in Caring,' this multi-channel marketing campaign is projected to launch in February 2025.
 - c. To hear directly from workers, DAIL conducted a direct care worker experience survey in 2024 to understand more about who they are, why they do this work and what might make them leave this field. Results of the survey are helping inform DAIL's continuing efforts to strengthen care for Vermonters.
 - d. DAIL began exploring the feasibility of launching a Direct Care Worker Registry platform, where independent workers seeking jobs in direct care and individuals seeking caregivers could go to search and be 'matched' for potential hiring. This type of registry, along with the ability to offer worker communication and training, has been identified nationally as a strategy to improve access to care.
6. MissionCare at Bennington: In September 2024, DAIL announced the opening of MissionCare at Bennington, a specialized nursing facility for Vermonters with complex care needs. Some Vermonters with mental health/behavioral needs and stigma due to criminal history have been unable to find placement in a typical nursing facility. In 2022, over 100 Vermonters sought placement in a licensed facility and were unable to secure in-state placement because facilities were unable to meet their individual complex needs while meeting the needs of other residents and following federal regulations. In 2022, DAIL launched a request for proposals and contracted with [iCare Health Network](#). iCare purchased Bennington Health & Rehab and successfully admitted its first resident as MissionCare at Bennington on 9/26/24. As of January 2025, 32 referrals were completed and 13 new admissions. All existing residents and staff have chosen to remain at MissionCare under new ownership.
7. Developmental Disabilities Services (DDS) Policy Update: Effective November 15, 2024, the Developmental Disabilities Services Division implemented its policy to pay Legally Responsible Individuals (frequently referred to as "Paying Parents"). This policy, developed with input from individuals, family and guardians, and approved by the Center for Medicare and Medicaid Services (CMS), allows Legally Responsible Individuals (LRIs) to be paid to provide community and/or in-home supports to adults enrolled in Developmental Disabilities Home- and Community-Based Services (DD HCBS) over the age of 21.

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8. HireAbility Opioid Employment Pilot: The opioid epidemic has had a profound impact on the State's workforce because of the very high rate of unemployment (60% plus) among individuals receiving treatment for opioid dependence. That is why, since 2022, DAIL HireAbility has been operating an Opioid Employment Pilot program in Orleans and Chittenden Counties. The HireAbility teams work closely with local partners including recovery centers, community mental health agencies, treatment courts, rehabilitation programs, probation and parole and many others. Participants are offered wraparound services including a Vocational Counselor to assess skills and interests, an Employee Assistance Program Clinician to identify barriers to employment, risks and triggers, and an Employment Consultant who provides direct employment support such as resumes, mock interviews, job shadows, employer outreach and progressive work experiences. As of July 2024, the two pilots have been very successful in engaging community providers, generating 288 referrals of whom 156 applied for services. 45 individuals have been placed in employment, 7 have been placed in other work-based learning opportunities, 15 have enrolled in industry recognized post-secondary training and education programs, and 6 have completed a credentialed program.
9. Adult Day Startup Grant: In September 2024, \$132,000 was granted to Central VT Council on Aging as the fiscal sponsor for Generations Vermont, an organization that is designing a new multi-generational Adult Day Center and childcare center in Central Vermont. Funds were appropriated through Act 113 (2024) and Act 185 (2022) and will be used to support the business plan, community outreach and building site design. It is anticipated that the center will take several years to design and implement. Work is also happening with Vista Senior Living in Rutland who is interested in offering adult day services for the Rutland region. Because a space and infrastructure are already available for this project, it is anticipated that start-up funds will not be needed.
10. Home Delivered Meals Global Commitment (GC) Investment: As a result of the Act 113 (2024) legislative language seeking GC Investment coverage for home delivered meals, AHS obtained approval from the Centers for Medicare and Medicaid Services (CMS) to cover the services starting October 1, 2024. Through this approval, Vermont's Area Agencies on Aging are receiving an additional \$1.3M (on top of \$1M allocated by the state legislature in 2023) to expand home delivered meals to more Vermonters, focusing on the most food insecure community members, offering nutrition education, building provider capacity to offer therapeutic meals, (for diabetic, low sodium diets, etc.) and setting a new minimum reimbursement rate of \$6.50 for these meals.
11. Deaf, Hard of Hearing, DeafBlind Services: In SFY24, DAIL Director of Deaf, hard of Hearing, DeafBlind Services fielded 235 referrals from Vermonters seeking assistance, an 8% increase from the previous year. The top three topics of referrals

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were seeking information about resources (23%), accessibility needs (17%), and interpreter/translation needs (12%). More specifically, Vermont is facing a deficit of American Sign Language interpreters and mental health professionals specialized in serving people who are Deaf, Hard of Hearing or DeafBlind. One challenge Vermont has is the lack of data about Vermonters who are Deaf, Hard of Hearing and DeafBlind, and the types of services they need. This lack of data makes it challenging to create policy and prioritize State resources. To help solve that problem, DAIL is partnering with the UVM Larner School of Medicine public health class to examine “Communication Accessibility Issues in Healthcare”. DAIL is also partnering with the 2024 VT Certified Public Managers (VCPM) cohort on a project that will produce a comprehensive data report, needs assessment and recommendations to address gaps.

12. Developmental Disabilities Payment Reform: After six years, including a pause for COVID-19 pandemic response, the DS payment reform project is now in its implementation phase. DAIL spent SFY24 and SFY25 working with DVHA, contractor Burns & Associates and partners, finalizing the proposed model utilizing the SIS-A standardized assessment tool along with encounter data and a year-end reconciliation. The implementation anticipated 10/1/2025 along with Conflict-Free Case management and includes shifting to a budget-neutral standardized method of payment based on the individual’s intensity of need using the SIS-A standardized assessment tool, a standardized rate methodology and year-end reconciliation. No accompanying bill or statute is required for implementation.
13. Nursing Facility Rates and Recruitment/Retention Grants: July 1, 2024, the Department of Vermont Health Access, in partnership with DAIL, implemented the nursing facility stabilizing rate method changes approved as part of the DAIL SFY25 Choices for Care budget and the new federally required Patient Driven Payment Model (PDPM). Since then, DAIL has seen a decrease in beds offline due to staffing from 127 in June 2024 to 98 in October 2024. Additionally, facilities have reported an increase in bed utilization from 81% in June 2024 to 84% in October 2024. Together with the upcoming SFY26 nursing rebase, these changes are expected to stabilize facilities post-pandemic, preventing future bed closures which are critical to supporting post-acute hospital care and the future needs of Vermont’s aging population. September 2024, DAIL partnered with the VT Health Care Association to distribute \$1M to nursing facilities in SFY25 for the purpose of recruitment and retention of Licensed Nursing Assistants (LNA) and Medical Directors. Funds were appropriated in Act 113 (2024) and will pay for one-time immediate needs, an LNA training platform, development of a marketing plan, and pilot projects to test sustainable ways to address the critical workforce needs of facilities.

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SFY26 DAIL Proposal

Mandatory Federal Conflict-Free Case Management: The Agency of Human Services has come a long way in its multi-year project to comply with mandatory federal regulations requiring conflict-free case management in home and community-based services (HCBS). The project is well-documented and available to the public on a [dedicated agency web page](#). A Request for Proposals was launched in September 2024 and is expected to result in a contract for at least one independent case management vendor for Developmental Disabilities Services and Brain Injury Services by April 1, 2025, with an implementation date of October 1, 2025. Choices for Care case management services are actively transitioning to the local Area Agency on Aging. DAIL expects to complete the transition of more than 4,600 Choices for Care (CFC), Brain Injury Program (BIP) and Developmental Disabilities Services (DDS) participants to an independent case management provider by December 2025. Included in the SFY26 Governor's AHS Budget is a request for \$8.6M Global Commitment to cover case management vendor costs, Developmental Disabilities Services broker services for self-managed services, contract for third party eligibility determinations, two Data Analyst positions, and three Adult Services Division quality management staff.

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Adult Services Division

Adult Services Division Philosophy

The Adult Services Division's (ASD) vision is to create a collaborative and compassionate community where Vermonters of all ages and abilities thrive. Our programs and services, delivered in partnership with community organizations, support older Vermonters and adults with physical disabilities to live as they choose, pursuing their individual goals and preferences within their chosen communities.

ASD Overview

ASD is responsible for managing a full array of Long-Term Services and Supports (LTSS) for older Vermonters and adults with physical disabilities. Vermont Medicaid, the federal Older Americans Act and State General Funds are the primary sources of funds for these services.

ASD Staff and Partners

The ASD team is dedicated to service, integrity and creativity. ASD has approximately 45 employees located within the Central Office in Waterbury and regional district offices. Services are managed within three major units: Long-Term Services & Supports Unit, Quality Management Unit, and the State Unit on Aging.

ASD partners with a variety of organizations in managing services and supports for Vermonters including (listed alphabetically):

- Adult Day Centers
- Area Agencies on Aging
- ARIS Solutions
- Brain Injury Providers
- Designated Agencies and Specialized Services Agencies
- Direct Access
- Facilities: Nursing Homes, Residential Care Homes, Assisted Living Residences and Hospitals
- Home Health Agencies
- HomeShare Vermont
- Long Term Care Ombudsman Project
- Senior Centers
- Supports and Services at Home (SASH)
- Transition II
- UVM Center on Aging
- Vermont Center for Independent Living

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ASD Programs and Services

Medicaid Funded Long-Term Services and Supports Programs include:

- Adult High Technology Nursing Services
- Attendant Services Program
- Brain Injury Program
- Choices for Care (High/Highest Group and Moderate Needs Group)
- Money Follows the Person Project (CMS demonstration grant)
- Adult Day Health Rehabilitation

Older Americans Act (OAA) Services include:

- Supportive services, such as information, assistance and referral, case management, legal assistance, transportation, etc.
- Nutrition services, including congregate meals and home-delivered meals
- Health promotion and disease prevention evidence-based programs
- Family caregiver support
- State Long-Term Care Ombudsman Program

Other ongoing initiatives, programs and services supported by ASD, often funded through federal and/or state funds include:

- Commodity Supplemental Food Program
- Dementia Respite Grants for Unpaid Family Caregivers
- Elder Care Clinician Program
- Employer Payroll Support for Self-Directed and Surrogate-Directed Services
- Health Insurance Counseling & Support (SHIP/MIPPA)
- Home Delivered Meals for People with Disabilities Under Age 60
- SASH (Support and Services at Home)
- Self-Neglect Initiative
- Senior Farmers' Market Nutrition Program
- 3SquaresVT (SNAP) Outreach

ASD Recent Developments and Accomplishments

1. See the DAIL Highlights, pages 4-9, that include a number of initiatives that ASD has led or participated in, including: [Age Strong VT](#) plan progress, [Conflict of Interest in Case Management](#) progress, new Adult Day start-up, additional funding for Home Delivered Meals, Direct Care Worker initiatives, and the opening of [MissionCare](#) at Bennington.
2. In collaboration with AHS, departments and community partners, ASD has implemented strategies outlined in [Vermont's Enhanced FMAP Spending Plan](#) to strengthen the HCBS system. ASD has used this enhanced FMAP funding in the following ways in SFY24:

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- Conflict-of-Interest Provider Grants: ASD has awarded grants to the five Area Agencies on Aging (AAAs) to build case management capacity for the transition of Choices for Care participants from other agencies to the AAAs for case management services. ASD also awarded grants to eight home health agencies to transition case management clients to the AAAs.
 - Accessibility in Shared Living Homes: A contract with [Direct Access](#) for an accessibility pilot to identify and provide recommendations for home modifications to support individuals' mobility and independence needs in shared living homes (Choices for Care, Brain Injury Program, and Developmental Services) has been continued for a third year.
 - Residential Alternatives Study: A contract with Aspire Living and Learning to explore residential alternatives within our programs to serve people in a variety of settings that could meet their needs developed this report released in February 2024. [Link to report](#) for more information.
 - Translated Program Videos: ASD awarded a contract to the Vermont Language Justice Project to develop simple videos for consumers about 1) Choices for Care, and 2) Home Health and Hospice services available in 10 languages, including English, Arabic, American Sign Language, Burmese, French, Kirundi, Nepali, Spanish, Somali and Swahili. The Choices for Care videos are completed and available on the Vermont Language Justice Project YouTube Channel and linked on the ASD website [here](#).
 - I/R/A Assessment Report: To address an Age Strong VT objective to increase accessibility of information and navigation for long-term services and supports, ASD contracted with ADvancing States to conduct an assessment of Vermont's AHS-funded Information, Referral and Assistance (I/R/A) systems, including 211, the Area Agencies on Aging Helpline, and Vermont Helplink. The assessment report, including recommendations for improvement, is located [here](#).
3. Recognizing the workforce shortage and the need for more options for direct care, ASD made the policy decision to open up Choices for Care to [non-medical home care providers](#) to enroll as Medicaid providers and provide personal care, companionship and respite to participants. ASD created provider standards and a certification process for these agencies who are now able to apply and enroll in the program.
 4. CMS approved new performance measures for HCBS quality requirements under Vermont's renewed Global Commitment to Health Waiver. ASD worked with AHS and DVHA to collect data and report to CMS on the new measures and will use this data to improve service quality for participants.
 5. Using \$5 million in [Money Follows the Person](#) funding through a supplemental capacity building grant, ASD continued multiple innovative pilots to address unmet needs such as the caregiver workforce shortage, mental health supports, falls prevention and hospital discharge planning.
 6. ASD continued to work with AHS, DHVA, DDS, provider agencies and ARIS

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Solutions to implement [Electronic Visit Verification](#) (EVV) for Medicaid funded in-home services. Current in scope programs (CFC, BIP, Attendant Services Program and Children's Personal Care) have an adoption rate of more than 99% by independent direct support workers. In 2024, EVV expanded to include the Developmental Services Program and services provided by Home Health Agencies.

7. ASD reviewed and provided support and follow up for 465 critical incident reports for individuals receiving services through supported living services, the Brain Injury Program and Money Follows the Person.
8. ASD supported AHS efforts to address housing for vulnerable Vermonters through participation in the Council on Housing and Homelessness Special Populations Subcommittee, which made recommendations to expand successful models, and by working closely with DCF to track Vermonters on Choices for Care in hotels/motels and support the agencies seeking to help them find permanent housing or long-term care facility placement.
9. ASD completed Year 2 of its [2023-2026 State Plan on Aging](#) which guides the work of the State Unit on Aging and Area Agencies on Aging in service to older Vermonters in greatest need. The Year 2 Progress Report will be submitted to the legislature on January 15, 2025.
10. With a new appropriation from the legislature for SFY24, ASD added a new position to the team called the State Dementia Services Coordinator. This position works closely with ASD staff and community partners and reports to the [Governor's Commission on Alzheimer's Disease and Related Disorder](#) with the goal of improving access and quality of the continuum of services for people living with dementia and their caregivers.
11. ASD continued work on [reframing aging](#) in communications and policies to disrupt ageism and ensure an inclusive, accessible, and age-friendly Vermont for generations to come.

ASD Results

All Medicaid services, including Choices for Care, are managed through the State [Global Commitment to Health 1115 Waiver](#) and the accompanying [Comprehensive Quality Strategy](#). Program specific results are also shared in the DAIL [Scorecard](#).

Together with our community partners, ASD served thousands of Vermonters in SFY24. Some highlights include:

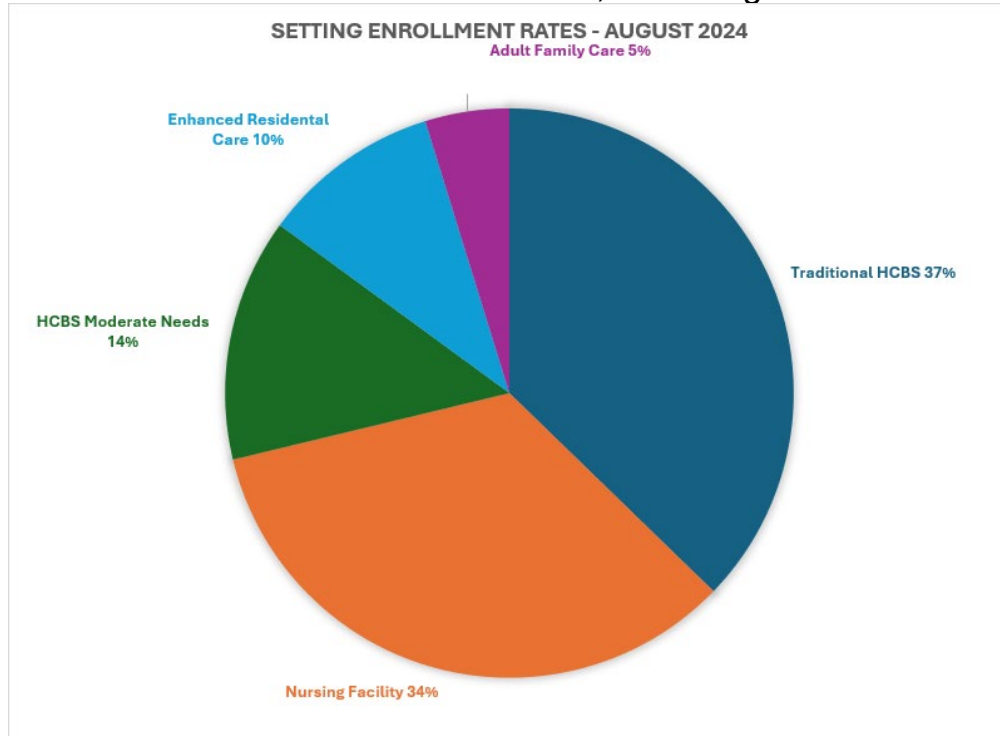
1. **Choices for Care:** In SFY2024, 6,663 people received Choices for Care services across all settings (less than 1% change from SFY23).
 - Applications for Choices for Care increased in CY2024 from an average of 236 applications per month in 2023 to an average of 243 per month in 2024 (3% increase).
 - Of the total who received services:

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- 919 were in the Moderate Needs Group. (16% decrease)
- 5853 were in the High/Highest Needs Groups. (2% increase)
- Of the total in the High/Highest Needs Groups:
 - 4512 were in a home- based setting.
 - 706 were in a Residential Care Home or Assisted Living Facility.
 - 2793 were in a Skilled Nursing Facility.
- Note that some individuals received services in more than one setting above.

Table 1: Choices for Care enrollments, all settings.



2. Adult Day Programs

- 374 were people in SFY2024 with Medicaid funded services (High/Highest Groups, Moderate Needs Group, and Adult Day Health Rehabilitation) (15% increase from SFY23).
- Programs continue the work to rebuild their programs and increase participation following their closures during the pandemic, which is challenged by the workforce shortage.
- In December 2024, Adult Day Programs reported capacity ranging from 50% to 100% capacity.

3. Brain Injury Program

- 81 people were served in SFY2024 with Medicaid funded services.
- 6 people 'graduated' from services, no longer needing this level of support.

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4. Older Americans Act Home Delivered Meals

- 8,695 people were served in FFY2023 (13% decrease from FFY22).
- 1,022,550 meals were served in FFY2023 (3% decrease from FFY22).
- Note that the above data is from the federal fiscal year before the legislature increased funding for home delivered meals by \$1 million.

5. Moderate Needs Group Hub and Spoke Pilot

- In 2024, ASD worked with Age Well to create a Moderate Needs Group Hub and Spoke Model with the goals to address several recommendations in the [Act 167 report](#). The pilot will address:
 - Operational changes to improve allocation procedures
 - Creating a unified waitlist and prioritization process
 - Expanding access to Moderate Needs Flexible Funds
- In SFY 2025, ASD will continue to work with Age Well and other interested parties to implement and evaluate the hub and spoke model.

ASD Future Directions

In 2025 ASD plans to:

1. Implement the [Age Strong VT](#) plan with the support of a new Age Strong VT Project Manager and in partnership with the Department of Health, the Steering Committee and Implementation Working Group.
2. Continue work to meet HCBS conflict-of-interest requirements, including implementation of transitions, support for provider capacity building and training, revision of regulations, standards and manuals, and participant communications.
3. Enroll more non-medical home care providers as Choices for Care Medicaid providers.
4. Implement a marketing campaign across HCBS services to recruit and retain the direct care workforce early 2025.
5. Continue to strengthen quality oversight across all ASD programs and services through data-driven surveys and reviews as well as continuing to report to CMS on the new performance measures.
6. Increase the number of MFP transitions from facility to community. Continue to monitor the MFP contracts for successes, challenges, and potential sustainability.
7. Continue to implement the 2023-2026 State Plan on Aging objectives and strategies.
8. Continue collaboration with AAAs including expansion of therapeutic meals, promotion of services and implementation of [TCARE](#), an evidence-based family caregiver assessment tool.
9. Transition to a new database for the management of client records across ASD LTSS programs, and transition to a new AHS-wide database for the management of critical incident reports across programs.

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Developmental Disabilities Services Division

Developmental Disabilities Services Division (DDSD) Philosophy

The Developmental Disabilities Services Division (DDSD) supports people to live, work and participate as integrated citizens in their local communities, pursuing their own choices, goals, aspirations, and preferences. To be effective and efficient, services must be individualized to address the goals, capacities, needs, and values of each person. With support as needed, individuals can make decisions, live in typical homes, and contribute as community citizens. DDSD services are based on the principle that communities are stronger when everyone is included.

DDSD Overview

DDSD plans, coordinates, administers, monitors, and evaluates state and federally funded services for people with developmental disabilities and their families within Vermont. DDSD provides funding for services, systems planning, technical assistance, training, quality assurance and program monitoring and standards compliance. DDSD provides court-ordered public guardianship to adults with developmental disabilities and older Vermonters aged 60 and over on behalf of the Commissioner.

For more information about developmental disabilities services, please review the [Developmental Disabilities Services Annual Report](#) or visit the [DDSD](#) website.

DDSD Staff and Partners

DDSD work is carried out by twenty (20) program staff members, including the Quality Management Unit, Services Specialists, administrators, and support staff, and thirty-two staff members working within the Office of Public Guardianship, twenty-nine of whom are full-time public guardians.

The Agency of Human Services contracts with fifteen (15) private, non-profit developmental disabilities services agencies to provide or arrange for services to 4,720 people with developmental disabilities and their families through Designated Agency and Specialized Services Agency Provider Agreements. In addition, a Supportive Intermediary Service Organization (SISO) assists individuals and families to manage their services, and a Fiscal/Employer Agent provides the infrastructure and guidance to enable employers to meet their fiscal and reporting responsibilities. DDSD emphasizes the development of community capacities to meet the needs of all individuals, regardless of the severity of their disabilities.

DDSD works with a variety of people and organizations to ensure that the changing needs of people with developmental disabilities and their families are met. This includes people with disabilities, families, guardians, advocates, service providers, the State Program Standing Committee for Developmental Disabilities Services, and State and Federal governments.

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DDSD Programs and Services

Home and Community-Based Services (HCBS): HCBS are provided through Designated Agencies (DA) and Specialized Service Agencies (SSA). These services include Service Coordination, Community Supports, Employment Supports, Home Supports, Respite, Clinical Services, Supportive Services, and Crisis Services. Home Supports including 24-hour Shared Living, Staffed Living, Group Living, and Supervised Living (hourly supports in the person's own home). In-Home Family Supports are hourly supports provided in the home of a family member. Services can be managed by the agency, managed by the person or a family member, or shared-managed (a combination of agency-managed and self/family-managed services).

The Bridge Program provides care coordination to families to help them access and coordinate medical, educational, social, or other services for their children with developmental disabilities.

Family Managed Respite provides respite for families to give them a break from caring for their child with a disability.

Flexible Family Funding provides funding for respite and goods for children and adults who live with their biological or adopted family or legal guardian. These funds are used at the discretion of the family for services and supports that benefit the individual and family.

Office of Public Guardian (OPG), acting under court authority, provides public guardianship where there is no friend or family member to serve as guardian, and the individual needs a public guardian to protect his or her rights or welfare. OPG also provides representative payee services and case management services to a limited number of people.

Specialized Services are provided by service agencies to adults with developmental disabilities who live in nursing facilities to improve their quality of life by providing support to address social and recreational needs.

Targeted Case Management provides assessment, care planning, referral and monitoring to individuals who are not receiving service coordination through HCBS or other funding sources.

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Developmental Disabilities Services Division

DDSD Recent Developments and Accomplishments

The Developmental Disabilities Services Division has had many developments and accomplishments over the last year. A summary can be found on pages 2-9 of this document.

1. **New Payment Model** - A tiered payment model using a standardized, evidence-based Needs Assessment, is expected to start October 2025.
2. **Home and Community-Based Services (HCBS) Conflict of Interest (Conflict-Free Case Management) Implementation** - DDSD has worked in partnership with DVHA and the DAIL Adult Services Division (ASD), to comply with the federal HCBS Conflict of Interest (COI) requirements by October 2025. For more information: [Conflict of Interest: Home- and Community-Based Services | Department of Vermont Health Access](#).
3. **Direct Care Workforce:** DDSD continues to work with a workforce partner group to explore solutions to chronic provider workforce issues. The group identified a variety of short-term and long-term solutions to the ongoing challenge of recruiting and retaining direct support workers. Additionally, DDSD is a core team member of the [Administration for Community Living Direct Care Workforce Strategies Center Peer Learning Collaborative](#).
4. **Payment Reform:** DDSD has worked hard alongside contractors and partners to prepare for a new payment model in 2025. The implementation anticipated 10/1/2025 along with Conflict-Free Case management and includes shifting to a budget-neutral standardized method of payment based on the individual's intensity of need using the SIS-A standardized assessment tool, a standardized rate methodology and year-end reconciliation.
5. **Conflict of Interest:** In close partnership with DVHA and DAIL/ASD, DDSD has created a plan to come into compliance with CMS requirements related to Conflict of Interest related to case management, assessment, and evaluation by October 2025. To determine the least disruptive option for the Developmental Disabilities Service system, an advisory committee as well as workgroups, including key stakeholders and program leads have been created. Like Payment Reform efforts, DDSD will provide information to legislature before implementing changes.
6. **Residential and Housing Options and Alternatives:** Following the passage of Vermont Act 186 of 2022, DAIL has contracted with three housing entities. Riverflow Community opened its doors to its first residents in October 2024 and has begun the processes to expand the Community's infrastructure and units. Upper Valley Services was awarded a Vermont Housing Conservation Board grant that will fully fund their Randolph project, and sponsored a state-wide conference, "Housing for

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All” in October 2024. The third project, led by Champlain Housing Trust, has highlighted innovation related to technology-based support, as well as identifying systemic challenges that must be remediated to support housing options and models in Vermont. Overall, DAIL has supported the development of 31 new units housing units in the past year. Each project is its own model, addressing the various needs found within Vermont. This includes projects such as intentional communities aimed at supporting individuals with complex needs, a traditional group home model for Vermonters to be able to age in place, WheelPad accessible dwellings to support individuals at risk of homelessness.

Additionally, the Division’s Residential Program Developer, in partnership with the Agency of Human Services Medicaid Policy team, has applied for [ACL Housing and Services Partnership Accelerator](#). This opportunity, if awarded, would provide technical assistance to Vermont to increase stable housing options for Vermonters with developmental and physical disabilities, as well as Older Vermonters who are otherwise at risk of homelessness.

14. **Payment to Legally Responsible Individuals (aka Paying Parents):** Effective November 15, 2024, the Developmental Disabilities Services Division implemented its policy to pay Legally Responsible Individuals (frequently referred to as “Paying Parents”). This policy, developed with input from individuals, family and guardians, and approved by the Center for Medicare and Medicaid Services (CMS), allows Legally Responsible Individuals (LRIs) to be paid to provide community and/or in-home supports to adults enrolled in Developmental Disabilities Home- and Community-Based Services (DD HCBS) over the age of 21.
15. **Developmental Disabilities and Brain Injury Ombuds Program (BDAP):** DDSD has partnered with Vermont Legal Aid (VLA) to create an Ombuds pilot project in Franklin and Grand Isle counties, supporting people with developmental disabilities and brain injuries. The program will provide independent response to complaints, review of administrative acts, development of promotional materials and website, creation and implementing a home monitoring plan, a “Know your Rights” workshop and other training for advocates and support staff; and providing feedback mechanisms for pilot area stakeholders. In 2024, VLA conducted a “Know Your Rights” training at the Annual Green Mountain Self-Advocates “Voices and Choices” conference in 2024, reached out to 28 individuals to offer monitoring visits with 9 people accepting.
16. **Quality Assurance:** The DDSD Quality Management Unit has successfully recruited four Quality Services Reviewer positions. An Assistant Director of Quality is also being hired as a liaison between the DDSD Quality Management Unit and the DDSD Policy and Data Team. Additionally, in January 2024, DDSD rolled out a plan that brings the Quality Service Review process from its “current state” to an ideal

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“future state” by SFY26. The plan modernizes processes, streamlines reporting, provides an annual on-site presence, and accounts for initiatives such as Conflict-Free Case Management, Developmental Disabilities Services Payment Reform, Settings Rule requirements, the CMS Measure Set, and other proposed federal requirements.

DDSD Results (how much, how well, better off)

- 3,394 people were served in Home & Community-Based Services (HCBS).
- 1,017 people served by Flexible Family Funding.
- 646 people served by Family Managed Respite.
- 462 people served in Bridge program.
- 755 people received OPG public guardianship services.
- 328 people received OPG representative payee services.

Consumer Survey: Vermont has historically participated in the National Core Indicators (NCI) Adult In-Person Survey. Due to COVID-19 and the significant challenges related to workforce facing direct provider agencies, DAIL has paused participation in the survey since 2018/2019 survey.

However, as an early adopter of the CMS Measure Set, the Agency of Human Services administers the [Consumer Assessment of Healthcare Providers and Systems \(CAHPS\)](#). The CAHPS performed at the Medicaid Plan level, is an experiential assessment of individual interaction and satisfaction. This survey, conducted by the Department of Vermont Health Access through the Blueprint for Health was last performed in [2023](#).

Employment Services: The employment rate for all working age adults with developmental disabilities who receive HCBS continues to be sustained at a high rate of 42% (SFY2022). This compares favorably to the national average of individuals participating in ID/DD employment services. A 2018 Data Brief from National Core Indicators reported nationally that 20% of adults with IDD receiving services were engaged in paid employment in the community, including both individual and/or group supported jobs. Additionally, the US Bureau of Labor Statistics reported a 35% employment rate among all working age adults with disabilities.

Additionally, Vermont has recently received national attention because of its long-standing commitment to integrated and competitive employment opportunities for individuals with I/DD. Vermont discontinued the practice of “sheltered workshops” more than 20-years ago. A recent [data brief](#), published by the University of Vermont in October 2023, recounts the history and trends of Supported Employment in Vermont.

Post-Secondary Education Initiative (PSEI): More Vermonters with disabilities are

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going on to post-secondary education than ever before and Vermont's Think College Vermont, College Steps, and SUCCEED programs assist them in achieving their college goals. Participating colleges include the University of Vermont and the Vermont State University through its Castleton, Johnson, and Lyndon Campuses.

As of June 30, 2023, the total PSEI resulted in 44 students enrolled and 24 students who graduated with a certificate, resulting in an 83% employment rate of graduates. In addition, PSEI helps transition age youth enter the work force. Through supported education and job training services, youth experience successful transitions from school to work or higher levels of education. Services include specialized career training, customized job placement, independent living skills training, and experiential internships. The three programs that contribute to successful youth transitions include Supported Employment, Transitional Living Programs, and Project Search's Business Based Training.

DDSD Future Directions

DDSD will continue working hard to roll out the ongoing efforts highlighted under accomplishments including:

- Conflict-Free Case Management
- Payment Reform
- Housing Alternatives
- Direct Care Workforce
- Quality Assurance Plan

Crisis Services and Public Safety: In addition to the above ongoing efforts, DDSD has identified crisis services and public safety as a high priority. The Developmental Disabilities Services System's crisis services are built around individual, local and state crisis resources. At the local and state levels, these resources include opportunities for training, team support and consultation and crisis beds. Designated Agencies and Specialized Services Agencies offer local crisis resources. Additionally, there is a "Collaborative Crisis" resource, a partnership between Upper Valley Services and DDSD which allows for shared referral between UVS and DDSD for admissions. This resource offers two crisis beds. The Vermont Crisis Intervention Network (VCIN), the Developmental Services system's original crisis resource, offers three levels of support (training, consultation and community crisis beds). VCIN recently expanded to four crisis houses, through a partnership with DAIL and Department for Children and Families (DCF). The initial admission for this home occurred in January of 2025.

This much needed expansion and deepened partnership between DAIL, VCIN, DCF, and the provider network is a major step forward. However, despite a 92.4% occupancy rate, VCIN supported 10 people across 3 beds in SFY2024. In this same year, the system had an average waitlist of 27 individuals for this resource. Based on

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this information, the Developmental Disabilities Services system needs a total of 18 beds to meet the needs of individuals. DAIL will continue to work with partners to strategize how to best serve Vermonters in crisis and will propose options for Enhanced Community Support Services to the legislature via Act 137.

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Division for the Blind and Visually Impaired

Division for the Blind and Visually Impaired (DBVI) Philosophy

DBVI assists individuals who are blind or visually impaired to meet their employment and independence goals. DBVI uses a holistic rehabilitation approach that helps people to meet their goals, build new skills, and improve their circumstances. The goal is for all participants to achieve or sustain economic independence, self-reliance, and social integration consistent with their interests, abilities, and informed choices.

DBVI Overview

DBVI helps working age individuals achieve economic independence by obtaining livable wage jobs and income. This involves training to improve employment skills and higher education that leads to degrees or certificates. DBVI helps transition high school students from school to the world of work. DBVI's statewide approach for younger students helps to ensure that all blind and visually impaired high school students have pre-employment transition skills. DBVI helps individuals of all ages to build adaptive skills related to their visual impairment through assistive technology, low vision, orientation and mobility, and independent living skills.

DBVI Staff and Partners

DBVI services are provided by highly qualified professionals who possess specialized training and understanding of the implications of visual loss. Services are provided by ten staff from four regional field offices. Each office has a Blind Services Rehabilitation Counselor and an Independent Living Case Manager who deliver individualized services. One Blind Services Technology Trainer covers the entire state teaching people how to use assistive technology. The Director of DBVI oversees the statewide program.

DBVI partners with several organizations to accomplish its mission. The major provider of direct instruction for teaching blindness-related skills is the non-profit Vermont Association for the Blind and Visually Impaired (VABVI). Their staff include certified blindness professionals who are highly trained in the areas of Orientation and Mobility, Low Vision, and Rehabilitation Therapy. For other DBVI partners please visit www.dbvi.vermont.gov.

DBVI Programs and Services

Vision Rehabilitation Employment Services

The goal of DBVI's vocational rehabilitation services is to help people with vision loss to retain, return, or secure employment. Individuals meet with a DBVI counselor to identify goals and develop a plan to improve their functional independence.

DBVI counselors provide guidance related to employment and help people explore interests and abilities. On their individual path to employment, most people who work with DBVI:

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- Build and strengthen vocational skills.
- Learn new adaptive skills to remain independent regardless of vision loss.
- Learn to use specialized technology needed to do their jobs.
- Receive services to maximize visual function.
- Help with a job search and provide training in job skills.
- Assist with attending college.
- Provide technology and training that allow people to access printed materials and complete work tasks.

DBVI Services for High School Students

DBVI's transition services provide high school students with opportunities for learning job readiness, self-advocacy, and independent living skills. DBVI collaborates with several partners including DVR HireAbility, VABVI, ReSOURCE, and the Gibney Family Foundation.

The Learn, Earn, and Prosper (LEAP) program provides paid summer employment for youth in a residential setting. LEAP empowers students to take charge of their employment future by gaining early employment success, and helps students make a successful transition from school to work.

Independent Living Services

DBVI helps individuals maintain independence. A DBVI Independent Living Case Manager meets an individual in his or her own home to discuss the individual's goals and develop a plan to achieve the highest possible degree of independence in activities such as traveling, preparing meals, and managing medications. Direct instruction is provided by certified blindness professionals through a contract agreement with the Vermont Association for the Blind and Visually Impaired (VABVI). VABVI also administers the Older Blind Program to provide specialized vision rehabilitation services.

Assistive Technology

Assistive technology is critical for many people with vision loss. DBVI invests significant effort to stay current in new assistive technology to help people find employment, participate in their communities, and eliminate other barriers caused by vision loss.

DBVI Recent Developments and Accomplishments

1. **White Cane Awareness:** This year DBVI held White Cane events in Arlington, Barre, Brattleboro, Burlington, Newport, and Montpelier. Each event included an experiential walk through each town and guest speakers who discussed specialized technology used by people who are blind. Participants included many individuals

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who are blind or visually impaired and several town officials who wanted to learn ways to promote safe travel for people who are blind in their town. The intent was to educate the public about White Cane Safety Awareness. The white cane is a symbol of strength and independence, used by people who are blind as they travel independently.

2. **Transition Core Teams Virtual Conference:** DBVI partnered with the DVR HireAbility Vermont Transition Core Teams Virtual Conference. This statewide event brought together Transition Core Teams from schools and employment service providers to share ideas about how to assist students with disabilities with their employment goals.
3. **DBVI State Plan:** DBVI staff work towards continuous improvement by listening to the voice of customers and using that information and data to improve performance. An updated DBVI State Plan with new goals and strategies was completed and approved by the State Rehabilitation Council in February 2024 and can be found at <https://dbvi.vermont.gov/resources/publications>. The next state plan is due in March 2026. Please also visit the success story link on DBVI's website at www.dbvi.vermont.gov to see examples of people reaching their goals.
4. **Pre-Employment Transition Services (Pre-ETS):** The federal Workforce Innovation and Opportunity Act (WIOA) requires DBVI to use 15% of its federal grant award to provide Pre-ETS creating an opportunity for DBVI to expand Pre-ETS services in the core areas:
 - Job exploration counseling.
 - Work-based learning opportunities.
 - Counseling on post-secondary educational opportunities.
 - Workplace readiness training.
 - Instruction in self-advocacy.

DBVI has been successful in expanding Pre-ETS services for students who are blind or visually impaired by providing work-experiences, internships, and job readiness training to build skills necessary for career development. Learn, Earn, and Prosper (LEAP) is a program developed by DBVI to achieve these goals. Students participate in a slate of different options year-round to learn job readiness and self-advocacy skills, and to engage in work-based learning experiences. LEAP's in-person and residential programming returned in 2022 after Vermont lifted COVID restrictions. LEAP also continued its year-round virtual programs. Virtual programs have become a significant access point for participants and families who are not yet ready for a residential experience. **Check out [DBVI's new LEAP video](#).**

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DBVI Results (how much, how well, better off)

How many DBVI served (SFY2024):

- 287 individuals received services to assist them to maintain or find employment because of their vision loss. 283 received services in SFY2023.

Individuals previously served in the DBVI Homemaker Program are now being served in the DBVI Independent Living and Older Blind program for SFY2024.

- 771 individuals over the age of 55 received specialized vision rehabilitation services.
- 105 individuals were served by the Independent Living Program.
- 4 individuals served in the Business Enterprise Program.
- Total for SFY2024= 1,163 (Includes DBVI VR; DBVI Independent Living; and Older Blind programs).

Total Training Hours, LEAP FFY2024: 2,344

- Work-Based Learning Training hours: **1,812**
- Work Readiness Training & Self-Advocacy Instruction: **433**
- Orientation and Mobility with a COMS: **50**
- Independent Living Skills with a CVRT: **49**
- Assistive Technology Instruction with a CATIS: **34.5**
- The percentage of population served who were under age 22 at entry into DBVI services was 19%.

How well DBVI served people:

Below are the recent Customer Satisfaction results of a 3-year statewide random survey of all participants in the Division for the Blind and Visually Impaired (DBVI) Vision Rehabilitation Employment program (Conducted by Market Decisions):

- 97% of consumers said they are satisfied with the DBVI vocational rehabilitation program.
- 95% of consumers agree that they are better off as a result of the services received from DBVI.
- 97% of consumers said that DBVI staff treated them with dignity and respect.
- 96% of consumers said that DBVI helped or is helping them achieve their vocational rehabilitation goals.
- 93% of consumers said that DBVI services met their expectations.
- 91% of consumers said that DBVI vocational rehabilitation services are helping or will help them become more independent in general.
- 85% of consumers said that DBVI helped them reach their job goals.

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Division for the Blind and Visually Impaired

How people are better off:

- 31 blind or visually impaired individuals closed their DBVI case in SFY2024 with successful employment.
- 68% had a wage above 125% of the minimum wage in SFY2024.
- 57.4% employment rate four quarters post exit in SFY2024, an increase from 52.0% in SFY2022 and 55.4% in SFY2023.
- Median earnings in the two quarters post exit rose by 13% to \$6,950 in SFY2024 from \$6,153 in SFY2023, both above the national average for those years.

To read success stories of DBVI customers and their experiences, visit the DBVI website: www.dbvi.vermont.gov.

Table 1: Table showing VT and National averages for key federal WIOA reporting metrics. Data for VT are combined between DBVI and DVR HireAbility agencies as per federal reporting requirements.

MEASURE	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21	NATIONAL AVERAGE SFY 22	VERMONT RESULTS SFY 22	NATIONAL AVERAGE SFY 23	VERMONT RESULTS SFY 23	NATIONAL AVERAGE SFY 24	VERMONT RESULTS SFY 24
MEASURABLE SKILLS GAINS	43.3%	49.0%	43.0%	57.3%	48.7%	56.7%	52.1%	55.7%
EMPLOYMENT RATE 2 QUARTERS POST EXIT	48.6%	53.3%	52.5%	53.3%	56.2%	56.0%	55.9%	56.9%
EMPLOYMENT RATE 4 QUARTERS POST EXIT	44.0%	48.3%	48.0%	52.0%	52.8%	55.4%	52.6%	57.4%

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DBVI Future Directions

DBVI believes the best path forward for people with visual impairments includes a solid foundation in technology. DBVI staff stay current to help customers achieve their employment and independence goals. For example, artificial intelligence (AI) technology is breaking down traditional barriers that have been in place since the advent of digital content. It is being used by people who are blind to provide detailed descriptions of graphical information. Examples include AI generated descriptions of images found on web pages, power point, charts, graphs, and other visual representations of data. AI is also being used with smart phone apps to scan and read text, scan and read product information from a bar code, describe a scene, find objects, find people, identify money, and detect colors.

DBVI is in its fourth year with the Rural Youth Apprenticeship Development (RYAD) learning collaborative with a focus on creating apprenticeship opportunities in a rural state. DBVI staff attended an in person collaborative meeting in Burlington on September 17th and 18th. VR staff from Maine, Wyoming, Idaho and VT HireAbility attended as well. We shared our journey, practices and resources for creating rural youth apprenticeship opportunities. DBVI continues to work on breaking down barriers in Vermont which prevent youth who are blind or visually impaired from accessing apprenticeship. Some of these barriers include geography, transportation, accessibility and available apprenticeships in the state. With support from the University of Massachusetts, which facilitates RYAD, and collaborating states, DBVI is identifying partners and employers that will support our youth to access apprenticeships successfully.

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Division of Licensing and Protection

Division of Licensing and Protection (DLP) Philosophy

Balanced and assertive regulation of health care organizations ensures that Vermonters receive care with dignity, respect, and independence. When vulnerable Vermonters are maltreated, an effective investigation, appropriate remediation, and protective services should be put in place to prevent additional harm.

DLP Overview

DLP has two branches that work to protect vulnerable adults and individuals receiving care:

- [Survey and Certification](#) (S&C) is the State Survey Agency for the State of Vermont. In this role, S&C licenses and certifies health care organizations to ensure that they meet minimum state and federal regulatory compliance. Details can be found at:
- [Adult Protective Services](#) (APS) investigates allegations of abuse, neglect, and exploitation of vulnerable adults and implements protective services, as necessary, to limit future maltreatment. The APS Annual Report can be found at [APS Statistical Information | Division of Licensing and Protection \(vermont.gov\)](#)

DLP Staff and Partners

S&C currently has 26 employees, 19 of whom are Registered Nurses (RN) who are federally trained and certified to perform investigations and surveys. These RNs are home-based and travel throughout the state to investigate complaints and to perform recurring, scheduled surveys. S&C follows federal and state regulations and procedures developed by the Centers for Medicare and Medicaid Services (CMS).

APS currently has 22 employees, including ten permanent home-based investigators who travel throughout the state to investigate allegations of maltreatment of vulnerable adults. APS frequently partners with law enforcement agencies and human service providers in the performance of their investigations.

Like many State programs, DLP has struggled to meet growing caseloads with level staffing numbers. . This has been especially challenging for APS; reports to APS have more than doubled in the past decade, while permanent staffing levels remain the same.

DLP Programs and Services

Both S&C and APS work to protect and serve vulnerable adults. Vulnerable adults are defined in statute as individuals over 18 years in age who are residents of a facility licensed by S&C, residents of a psychiatric hospital, recipients of home health services, have a diminished capacity to care for themselves, or a diminished capacity to protect themselves from maltreatment.

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1. S&C conducts unannounced, regular surveys at health care facilities, and investigates complaints made about the care received in these facilities. These surveys and investigations can result in fines and other corrective action, including bans on admissions or revocation of operating licenses.
2. APS investigates reports of maltreatment of vulnerable adults. A person who APS determines has maltreated a vulnerable adult may be placed on the Adult Abuse Registry. Organizations that serve children and vulnerable adults use the Registry to check the backgrounds of employees and volunteers prior to hiring.

DLP Recent Developments and Accomplishments

1. **State Licensed Facilities:** State licensed Residential Care Homes and Assisted Living Residences continue to experience increasing challenges that S&C must account for in its survey efforts. Vermont currently has 139 licensed skilled nursing facilities, residential care homes, and assisted living residences, totaling over 6,275 licensed beds, caring for many of the most vulnerable Vermonters. Over the last two years, 13 facilities closed and 2 opened, resulting in a loss of 107 beds. The nature and volume of the work has grown in complexity over the past ten years, requiring additional support and oversight. To address these rising needs, in SFY2023-24, DLP hired 3 additional nurse surveyors dedicated to state licensed facility work, as well as Long Term Care Manager, and an Administrative Coordinator to create our state unit. The unit is fully functional and is closely overseeing Residential Care Homes, Assisted Living Residences, Therapeutic Community Residences, and the Home for the Terminally Ill as planned.

In addition to enhanced oversight, DAIL adopted new Residential Care regulations October 1, 2024. The newly adopted Residential Care Home and Assisted Living Residence Regulations have an effective date of April 1, 2025, for implementation by the applicable homes/facilities and enforcement by DLP.

2. **Nurse Aide Training and Competency Program:** S&C oversees the Nurse Aide Training and Competency Program which approves nurse aide training programs statewide. S&C also holds the vendor contract to assure the availability of testing for licensure for licensed nurse's aide students. S&C negotiated a new contract for testing with Excel, an experienced and trusted testing company from New Hampshire. Excel began providing testing opportunities for nurse aide students in late SFY23, and reports from the training programs have been positive.
3. **Restorative Justice:** APS was awarded a one-million-dollar grant in 2020 by the federal Department of Health and Human Services (HHS), Administration for Community Living (ACL) to provide Restorative Justice services aimed at lowering the re-victimization rates of vulnerable adults, as well as lowering the recidivism

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rates of perpetrators of maltreatment. In SFY2022, the ACL funded the pilot program for one additional year, awarding a supplement of \$204,750 with the option for an additional no-cost extension. In 2023 ACL granted a no-cost extension to carry the pilot through August of 2024. APS also received two other awards from the ACL in SFY2022: \$704,000 through Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) and \$645,000 through the American Rescue Plan Act (ARPA). These awards support APS Service Navigators to help better identify vulnerable adults in Vermont and connect them to needed services, the building of a new data library, purchase of remote work equipment, PPE and training opportunities for staff. In SFY23 ACL awarded a second tranche of ARPA funds totaling \$1,221,345. In addition to continuing the previous ARPA projects, APS has employed these funds to support three limited-service positions; a Program Specialist, an Investigator, and a Policy Analyst. At this point the CRRSA funds have been fully expended, and these limited-service positions have been terminated. The ARPA funds continue to support the purposes above with a projected end date of April 1, 2025.

DLP Results (how much, how well, better off)

S&C:

- S&C conducted 266 onsite investigations looking at 492 combined complaints and self-reports across all state and federal provider groups. This represents an increase of 4.5% from the previous year.
- 14.7% of Nursing Homes had no deficiencies, isolated deficiency with substantial compliance, or no onsite survey performed during this period. This represents a decrease of 24.6% from the previous year.
- 58.8% of Nursing Homes had a deficiency reflecting the potential for more than minimum harm. This has not changed from the previous year.
- 26.4% of Nursing Homes had a deficiency reflecting actual harm or immediate jeopardy of residents. This represents a small (0.1%) decrease from the previous year.
- Since 2018, S&C has processed 12 applications for SNF transfer of ownership for an average of two per year. In calendar year 2021 and 2022, eight applications were received, indicating more than double the number of transfers of ownership applications that occurred between 2018-2019. In SFY24, one application was received.

APS:

- APS received 3,947 reports alleging abuse, neglect, or exploitation of vulnerable adults, a decrease of 1% from the previous year.
- APS initiated 870 field cases from these reports, a decrease of 2.7% from the previous year.
- APS completed 402 investigations and 424 assessments. This is the first-

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year assessments have been conducted which were added in the APS statute revision effective July 1, 2023. Though investigations decreased by 19.9% from the previous the combination of investigations and assessments exceeds last year's investigations alone by 65%.

- APS placed 44 individuals on the Adult Abuse Registry, an increase of 15.8% from the previous year and a decrease of 19.5% from two years prior.

Reports to APS have increased 115% over the last decade. The last time APS staffing levels were adjusted for caseloads was over a decade ago. As caseloads have increased over time, substantiation numbers have also declined. Over the last few years, Vermont APS has identified and made use of Federal limited-service grant funds to help maintain acceptable operational levels with a focus on victim safety, though this source of Federal funding is anticipated to end in SFY25 without expectation for new Federal funding options beyond a significantly smaller allotment (less than the equivalent of one full-time employee).

DLP Future Directions

In May of 2024, the federal Administration for Community Living (ACL) implemented new APS regulations giving states until 2028 to fully comply. The good news is that DAIL's new APS statute implemented July 1, 2023, brought Vermont close to full compliance with the new federal rules. APS will continue to work with interested parties to prepare a future statute amendment that is fully compliant.

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Division of Vocational Rehabilitation

DVR Division Philosophy

The Division of Vocational Rehabilitation's (DVR's) mission is to help Vermonters with disabilities prepare for, obtain, and maintain meaningful careers and to help employers recruit, train, and retain employees with disabilities. Participant choice and self-direction are core values that drive DVR's approach to providing services and developing new programs. DVR's ability to help jobseekers succeed also depends on clearly understanding the needs of other customers: employers. To improve outreach to both participants and employers, DVR rebranded as HireAbility Vermont in SFY 2022 and launched a marketing campaign to promote services for both audiences. The HireAbility rebrand reinforces its commitment to helping participants access high-wage and high-quality careers through training and education. It also conveys the goal of being a source of motivated and trained employees for Vermont employers.

DVR Division Overview

HireAbility serves people with disabilities in Vermont who face barriers to employment and helps participants figure out what types of career pathways will work for them, through assessment, counseling, and guidance. HireAbility uses extensive networks in the employer community to create job opportunities, match employer needs with jobseeker skills, and help employers retain staff with disabilities. HireAbility also invest heavily in post-secondary training and education to help participants gain credentials that will lead to high wage and high-quality employment.

DVR Staff and Partners

HireAbility has about 150 staff located in 12 district offices around the state. HireAbility collaborates with other service providers to reach people with disabilities facing challenges to employment. HireAbility has created partnerships with multiple organizations to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support.

DVR Programs and Services

HireAbility Core Services: Services for jobseekers are tailored to the person and driven by his or her own interests, job goals, and needs. Each person meets regularly with their counselor, who helps develop an Individualized Plan for Employment (IPE) and manages the services and supports needed to realize the person's career goals. The core services of vocational assessment, counseling and guidance, job training, and job placement provided by HireAbility staff and partners, are enhanced with a range of purchased services and supports.

HireAbility Placement Services: HireAbility has an ongoing partnership with the Vermont Association of Business, Industry, and Rehabilitation (VABIR) to provide employment services. HireAbility customers and counselors benefit from dedicated employment consultants who provide job development, job placement, and workplace supports to help people find and keep jobs.

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Division of Vocational Rehabilitation

HireAbility Employment Teams: HireAbility manages 12 Business Account Managers (BAMs) who have active relationships with 2,500 employers statewide. The BAMs convene local teams of Agency of Human Services (AHS) providers who deliver employment services across multiple populations. These employment teams coordinate local employer outreach across programs to better serve employers.

Jump on Board for Success (JOBS): The JOBS program is a HireAbility partnership with the Department of Mental Health. JOBS provides employment and mental health case management services for youth with severe emotional/behavioral disabilities.

Work Incentives Counseling Program: HireAbility certified work incentives counselors provide information and expertise to Social Security disability program beneficiaries about the impact employment will have on their benefits.

Employee Assistance Program (EAP): EAP has offered comprehensive Employee Assistance Program (EAP) services since 1986. EAP provides short-term counseling and referral, management consultation, wellness workshops, and resource information.

Rehabilitation Counselor for the Deaf (RCD): RCDs provide a wide range of services for Vermonters who are Deaf, hard of hearing, or late deafened.

Assistive Technology Program (ATP): The AT program helps individuals of all ages find accessible solutions to overcome disability and aging related barriers at home, work, and in the community.

DVR Recent Developments and Accomplishments

1. **Improving Participant Outcomes Across Measures:** In SFY24, HireAbility introduced several new measures that raise the standard by which progress is measured, including wages of 150% of minimum wage at closure, credential attainment, and engagement in work-based learning opportunities

SFY 2024, HireAbility's Dashboard data indicates the Careers Initiative has had a positive impact on practices, services, and outcomes:

- A 24 percentage-point increase in the number of HireAbility participants engaging in Career Assessment within 180 days of application, and 1 percentage point increase over SFY 2023. Assessment is also an important tool throughout the life of the case, not just at the start of a new case. In SFY 2023, 33% of the cases served had had an assessment done during the life of their case, in SFY 2024, that had risen to 42%, a 9 percentage-point increase.
- A 13 percentage-point increase in HireAbility participants with higher wage employment plan goals since inception. The ratio stayed steady over the past SFY while the population served has grown by 6%.

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- A 29 percentage-point increase in HireAbility participants earning over 125% of minimum wage at program exit since inception and a 1 percentage-point increase during SFY 2024. In SFY 2024, 64% of successful closures had wages above 125% of minimum wage. HireAbility introduced a new measure at 150% of minimum wage: In SFY 24 38% of successful closures exceeded that measure.
- A post-pandemic rebound in services, with a 95% increase in applicants and 98% increase in plans initiated, resulting in an overall 22% increase in the caseload.

HireAbility is also seeing a positive impact on the Common Performance Measures themselves with gains across 4 measures in SFY 24 and a minimal drop in the Measurable Skill Gain rate.

2. **The Opioid Employment Pilot:** The opioid epidemic has had a profound impact on the State's workforce because of the very high rate of unemployment (60% plus) among individuals receiving treatment for opioid dependence. Opioid dependence disproportionately affects adults ages 20 to 40 and in Vermont the epidemic has had the effect of taking younger workers out of the workforce, just when they should be building careers and credentials. Also, if a person with an opioid use disorder is employed, they are more likely to have:
- A lower rate of recurrence
 - Less criminal activity
 - A higher rate of treatment completion
 - A lower risk of overdose

In the summer of 2022, the legislature provided the Division of Vocational Rehabilitation (recently rebranded as HireAbility (HA) Vermont) with dedicated funds to pilot specialized employment services in Burlington and Newport for individuals with opioid use disorders. The pilots use a team staffing model that has proven successful with other high needs populations needing an intensive and holistic approach. The teams include:

- A HA vocational counselor at each site (Jacob Grayck, Burlington, Misty Poitras Newport)
- A contracted VABIR job placement specialist at each site (Morgan Sanville Burlington, Vanessa Thomas Newport)
- A part time Employee Assistance Program staff person (Patricia Marshall Burlington, Tony Strange, Newport)

The two pilots have been very successful in engaging community providers and the recovery community, generating 307 referrals of whom 165 applied for services. The pilot sites have also showed promising early outcome data. As of September 2024:

- Over twenty community-based organizations have made 307 referrals to the two sites

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- 165 individuals have engaged in services. This is a very high rate of uptake for an especially hard to engage population.
- 46 individuals have been placed in employment
- 5 have been placed in other work-based learning opportunities
- 23 have enrolled in industry recognized post-secondary training and education programs
- 3 have completed a credentialed program

4. **A Fourth Successful Year of the Summer Career Exploration Program (SCEP):** In 2024, HireAbility completed the fourth year of the Summer Career Exploration Program (SCEP). The SCEP was designed to provide high school students with disabilities paid summer work experiences combined with career exploration curriculum. Local HireAbility district teams partnered with local employers to provide meaningful real life work experiences for students with disabilities. Lessons learned from years one and two were documented in a SCEP Manual to improve implementation across the state. In the last four years, the HireAbility Summer Career Exploration Program (SCEP) has supported 481 Vermont youth to engage in summer classroom instruction and paid work experiences in 371 businesses around the state. In summer 2024 HireAbility saw its largest SCEP enrollment yet. HireAbility had 115 youth successfully complete the program in nine cohorts around the state. Those youth were placed in 97 different employment sites covering a wide variety of jobs across the Vermont economy.

Because of the loss of federal funds, HireAbility will not be running a SCEP program in the summer of 2025. This is a big loss for students with disabilities in Vermont and the employers who provided work sites.

5. **Farm First:** Farm First provides Vermont's farmers and their families with support, resources, and information to reduce stress and improve emotional well-being. HireAbility does this by having a Resource Coordinator to respond to outreach and establish a plan for each farmer – the plan may include up to 12 counseling sessions with an Employee Assistance Program counselor or an affiliate, a referral for Hire Ability services and/or other supports such as business advising, agricultural mediation, etc. The program was initially started to serve dairy farmers but at this time HireAbility is serving all farmers with approximately 50% of these farmers being primarily focused in dairy.
6. **Diversity, Equity, Inclusion and Access (DEIA):** Working with a contractor and partners HireAbility developed the following DEIA vision statement for the program: **HireAbility will become an organization where; All staff and participants have a sense of belonging & feel welcomed here at HireAbility. Our diverse staff reflect the communities that we serve. Our strong connections with multicultural communities and community partners ensure engagement, successful outcomes, and career pathway opportunities for participants from diverse backgrounds.**

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To make this vision a reality, HireAbility worked with the consultant to conduct a needs assessment and identify opportunities for growth. Based on the needs assessment, HireAbility identified four areas of focus for work in SFY25 and formed four charter groups made up of a diverse cross section of staff to do this work. The goals for each charter group are as follows:

- Develop a workforce that reflects the diverse populations served by HireAbility.
- Effectively reach all populations that are eligible for HireAbility services.
- Ensure staff have access to the tools and knowledge and feel competent to serve all participants in a culturally appropriate way.
- Strengthen existing communication loops to ensure staff are informed and can contribute.

The charter groups will be charged with developing strategies to move the agency forward in these areas. They will also identify metrics for success that are meaningful and measurable.

7. **The Vermont Career Advancement Project (VCAP):** HireAbility was awarded a \$6.5 million grant from the US Department of Education to support the Vermont Career Advancement Project (VCAP) in 2021. VCAP has established a robust partnership between HireAbility, the Vermont Department of Labor (VDOL), the Community College of Vermont (CCV), Vermont State University (VTSU), and secondary Career and Technical Education Centers (CTEs), to build on-ramps enabling individuals with disabilities to pursue high quality, high paying careers. The project has embedded dedicated Career Pathways Student Advisors in these post-secondary programs to provide intensive support for VCAP participants. VCAP has also partnered with other workforce development organizations to expand paid and credentialed occupational training programs in response to employer needs.

With an addition in 2023 of the VCAP Employer Advisory Group, VCAP uses feedback from the employer advisors to strengthen HireAbility's extensive network of employer contacts through its Business Account Managers. CCV and VTSU, which have program development experience and expertise, provide the required Related Instruction for apprenticeships and other credentialed programs, as well as stackable credentials and nested programming. These programs are linked directly to secondary and adult programs offered through Vermont's Career and Technical Education (CTE) centers. The project goals include enrollment of 500 participants, with 375 earning Industry Recognized Credentials and 75 enrolling in Registered Apprenticeships. 75% of participants will exit their training programs employed and earn at least 150% of the state's minimum wage.

HireAbility started enrollment in VCAP in August 2022. To date 484 individuals have been enrolled in the program. There have been 230 educational goals completed including 23 college degrees and 58 industry recognized credentials such as vocational and technical licenses or certificates. There have been 25 individuals who have completed their career

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pathway goal and gained competitive employment with the average wage of \$22/hour. The most common career goals among VCAP participants include nurses, bookkeeping and accounting, social services workers, medical records specialists, and heavy vehicle and tractor-trailer truck

8. **The Career Training Offset (CTO):** HireAbility has long recognized that many of its participants cannot engage in industry recognized credential training programs because they cannot afford to stop working. As a result, they remain in entry level employment without the training and skills to move up the career ladder. To address this issue, HireAbility implemented the Career Training Offset (CTO). Participants enrolled in training that leads to an industry recognized credential, are paid minimum wage for classroom and unpaid instruction time. For example, an HVAC (Heating, Ventilation, and Air Conditioning) program has approximately 144 hours of unpaid training time. HireAbility will pay the participant minimum wage for these hours to ensure they have a steady source of income while they get trained.

Between July 2023 and June 2024, 125 participants started training programs with support from the CTO and 69 successfully completed a CTO supported training program. Forty participants who participated in a CTO during SFY24 are currently employed in their intended field or were at the time their cases closed. CTO participants engage in a wide range of training programs, with medical billing and coding, CDL training, cosmetology, LNA, and massage therapy programs being the most common.

Unfortunately, because of the loss of federal funding HireAbility will have to end this program in SFY 25. HireAbility is very concerned that some participants may not be able to afford to enroll in credentialed programs without it.

DVR Results (How much, how well, better off)

Number of People Served:

- A total of individuals 6,734 were served in SFY 2024. 6,324 were served in SFY 2023.
- 6,172 people were served in the core HireAbility program in SFY 2024. 5,762 were served in SFY 2023.
- 1,598 high school students were served through the Pre-Employment Transition Services program in SFY 2024. 1,479 were served in SFY 2023.

How Well We Served Them: The HireAbility Participant Experience Survey is conducted every two years to determine participants' overall satisfaction with the program. The survey is conducted by a third-party research firm, Market Decisions Research (MDR), who has an extensive background working with Vocational Rehabilitation agencies nationwide. 646 participants were contacted for HireAbility's 2022 survey. This was the first survey conducted post-COVID and has provided HireAbility with valuable information regarding participants' reactions to remote and hybrid services.

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The following are highlights from the 2022 results:

- 81% of participants reported they were satisfied or very satisfied with HireAbility.
- 93% said they would recommend that their friends or family members seek help from HireAbility.
- 90% of participants responded they are satisfied with their experience working with HireAbility staff and counselors. This is a two percent increase from the 2019 survey.
- 97% felt they were treated by staff with dignity and respect.
- 77% of participants reported that it was very easy or somewhat easy to connect with their counselor, even during the times when services were being delivered entirely remotely.
- 63% of participants reported that they would like to continue to receive services remotely.

HireAbility will conduct the next survey in spring of 2025

Employer Satisfaction with HireAbility: In 2022 HireAbility contracted with MDR to develop a survey that would determine employer satisfaction with services. Between February and May 2022, MDR surveyed 72 employers that had contact with a HireAbility team member(s) within the last 18 months. The survey found that 93% of employers were satisfied with services, up from 77% in 2019, and 100% of employers would be open to working with HireAbility again in the future, up from 94% in 2019. One area of improvement that was identified is that employers would like to be contacted more frequently.

The survey results provided invaluable information that will help us continue to improve services to employers, develop more connections, and better serve HireAbility customers.

How People are Better Off: The most apparent measure of successful participant outcomes is their employment status when they leave the program. In SFY 2024, 517 individuals closed their cases with successful employment. This means they met their individual employment goals and were stably employed for at least 90 days. In addition, 314 of these individuals (62%), earned above 125% of minimum wage.

HireAbility also received data for the third time on all five WIOA Common Performance Measures. The SFY 2024 results show Vermont participants are achieving outcomes at a higher rate than the national average on all five performance measures. Additionally, Vermont's programs improved on four of the five performance measures in SFY 2024 compared to SFY 2023 outcomes.

The employment rate four quarters post-exit continues to improve, starting at 49.7% in SFY 2020 and increasing to 57.4% in SFY 2024. *It is important to note the employment*

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rate is calculated based on all participants served not just job retention for participants who exited the program employed. Vermont’s median earnings for two quarters post exit jumped from \$3,901 in SFY 2020, which was below the national average, to \$6,950 in SFY 2024, and has been above the national average for past four years.

This table shows VT and National averages for key federal WIOA reporting metrics. Data for VT combines the Division of the Blind and Visually Impaired (DBVI) and HireAbility agencies per federal reporting requirements.

Measure	SFY 2021		SFY 2022		SFY 2023		SFY 2024	
	VT	Nation	VT	Nation	VT	Nation	VT	Nation
Empl Rate 2nd Qtr	53.3	48.6	53.3	52.5	56.0	56.2	56.9	55.9
Empl Rate 4th Qtr	48.3	44.0	52.0	48.0	55.4	52.8	57.4	52.6
Median Earnings								
2nd Qtr	4,630	4,280	5,213	4,776	6,153	5,130	6,950	5,513
Credential Rate	42.5	23.2	42.5	30.8	53.2	37.6	53.4	40.7
MSG Rate	49.0	43.3	57.3	43.0	56.7	48.7	55.7	52.1

DVR Future Directions

In addition to its commitment to providing excellent employment support services to Vermonters and businesses, HireAbility will continue to prioritize performance improvement efforts, support of direct care workforce efforts, Diversity, Equity and Inclusion, and expansion of the Opioid Employment Pilot.

SFY2026 Budget Testimony Fact Sheet

SFY2026 TOTAL DAIL PROPOSED BUDGET - \$783,521,821

- General Fund – 4.6%.
- Global Commitment – 88.8%.
- Federal Fund – 6.2%.
- Special and Interdepartmental Funds-less than 1%

SFY2026 DAIL PROPOSED BUDGET BY DIVISION					
DIVISION	Proposed Budget Total	% Of Total Budget	Fund Split		
			GF	GC	Federal /Other
Developmental Disabilities Services Division	\$353,407,236	45%	2%	97%	1%
(Includes DS Waiver)					
Adult Services Division	\$378,590,741	48%	3%	93%	4%
(Includes AAA, Attendant Services Programs, Adult Day)					
Vocational Rehabilitation	\$ 31,761,678	4%	23%	0%	77%
Blind and Visually Impaired	\$ 5,755,177	Approx. 1%	18%	5%	77%
Licensing and Protection	\$ 7,086,263	Approx. 1%	51%	0%	49%
Commissioner's Office	\$ 6,920,726	Approx. 1%	78%	2%	20%
Totals	\$783,521,821	100%			

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Summary of Changes from SFY2025 Base Budget to SFY2026 Proposed Budget

Total Change SFY2025 to SFY2026 Recommended Budget	\$65,443,883
(All Gross Dollars)	
DAIL Administration & Support – Sec. B329	
Total SFY2025 Base Appropriation	\$51,690,535
Proposed Changes:	
1) SFY2026 net increase (Salary & Fringe and Internal Service Funds)	\$ 2,538,257
2) Conflict-Free Case Mgmt.: 1) 5 new positions, 3 ASD Quality and Program Participant Specialists and 2 DS Data Analysts 2) estimated Eligibility Determination Contractor costs	\$ 1,289,000
Total Changes	\$ 3,827,257
SFY2026 Recommend	\$55,517,792
Positions: 321 positions and 324 employees as 3 positions are shared	
Adult Services Division Grants - Sec. B.330	
Total SFY2025 Base Appropriation	\$24,571,060
Proposed Changes:	
1) AFSCME Collective Bargaining Agreement	\$ 169,294
SFY2026 Recommend	\$24,740,354
Blind and Visually Impaired Grants – Sec. B.331	
SFY2025 Base Appropriation	\$ 1,907,604
Proposed Changes:	
1) VT Pathways to Partnership Grant	\$ 1,500,000
SFY2026 Recommend	\$ 3,407,604
Vocational Rehabilitation Division - Sec. B.332	
SFY2025 Base Appropriation	\$ 10,179,845
1) budget neutral fund transfer between VR Grants and VR Administration. Net zero budget change in VR Grants	\$ 0
Recommend	\$ 10,179,845

Developmental Services Grants Appropriation - Sec. B.333	
SFY2025 Base Appropriation	\$329,299,344
Proposed Changes	
1) Federal mandate – Conflict-Free Case Management	\$ 5,842,315
2) DS Caseload (including High School Graduates)	\$ 5,390,045
3) DS Public Safety/Act 248 Caseload	\$ 4,032,182
4) Budget to Actuals alignment	\$ (2,773,234)
5) Commercial Policy Workers Comp premium decrease	\$ (66,095)
6) AFSCME Collective Bargaining Agreement	\$ 1,868,296
Total changes	\$ 14,293,509
SFY2026 Recommend	\$343,592,853
Brain Injury (TBI) Program - Sec. B.334	
SFY2025 Base Appropriation	\$ 6,845,005
1) Utilization increase	\$ 350,000
2) Federal mandate – Conflict-Free Case Management	\$ 183,466
3) AFSCME Collective Bargaining Agreement	\$ 20,469
Total changes	\$ 553,935
SFY2026 Recommend	\$ 7,398,940
Choices for Care (CFC) – Sec. B 334.1	
This includes estimated expenditures for nursing homes, home and community-based services and other Medicaid acute/primary care costs for Choices for Care participants.	
SFY2025 Base Appropriation	\$293,584,545
1) Statutory Nursing Home (NH) inflationary increase \$3,457,442 and Nursing rebase \$11,905,981	\$ 15,363,423
2) NH bed day utilization adjustment/pressure	\$ 24,492,883
3) Federal mandate – Conflict-Free Case Management	\$ 1,329,101
4) VT Veteran’s Home projected cost settlement	\$ 3,914,481
Total Changes	\$ 45,099,888
SFY2026 Recommend	\$338,684,433

**DEPARTMENT OF DISABILITIES, AGING, & INDEPENDENT LIVING
ADMINISTRATION BUDGET BY DIVISIONS SFY26**

	TOTAL	VR	DBVI	DD&D	ASD	L & P	Com office	TOTAL
PERSONAL SERVICES DETAIL								
Classified Salary	25,443,417	10,523,899	1,215,448	4,529,745	3,750,657	3,922,928	1,500,740	25,443,417
Exempt Salary Total	741,146	-	-	-	-	0	741,146	741,146
Salary Total	26,184,563	10,523,899	1,215,448	4,529,745	3,750,657	3,922,928	2,241,886	26,184,563
FICA	2,002,060	805,077	92,982	345,467	286,926	300,104	171,504	2,002,060
HEALTH	7,706,735	3,280,556	430,101	1,286,033	921,148	1,200,036	588,861	7,706,735
RETIREMENT	7,527,314	3,030,879	350,049	1,304,567	1,080,191	1,129,805	631,823	7,527,314
DENTAL	276,372	122,113	13,484	46,171	35,347	35,511	23,746	276,372
LIFE	112,574	45,233	5,226	19,478	16,128	16,869	9,640	112,574
LTD	5,371	1,961	198	524	403	458	1,827	5,371
EAP	11,988	5,365	629	2,035	1,480	1,628	851	11,988
FMLI	93,525	39,131	4,511	16,622	11,861	13,080	8,320	93,525
CCC	110,889	46,397	5,348	19,708	14,063	15,509	9,864	110,889
Fringe Benefits Total	17,846,828	7,376,712	902,528	3,040,605	2,367,547	2,713,000	1,446,436	17,846,828
Unemployment	135,418	11,151	696	66,630	53,467	1,925	1,549	135,418
WC/ Other Ins	231,134	-	-	-	0	0	231,134	231,134
Emp room allowance	15,470	-	-	8,583	6,887	0	0	15,470
Tuition	40,000	36,000	4,000	-	0	0	0	40,000
Overtime	50,000	21,000	2,080	6,965	9,583	5,754	4,618	50,000
ETS - formally Contractual on Payroll	200,000	200,000	-	-	-	-	-	200,000
Temp Employee	268,310	243,918	0	8,125	6,520	9,747	0	268,310
Contracts	4,397,748	1,501,091	30,483	1,535,596	1,016,749	168,686	145,143	4,397,748
Other Personal Services	627,225	-	-	257,972	369,253	-	-	627,225
Vacancy Savings	(823,242)	(420,895)	(25,303)	(129,223)	(94,982)	(106,151)	(46,688)	(823,242)
Sub-Total Misc Personal Services	4,942,063	1,392,265	11,956	1,754,648	1,367,477	79,961	335,756	4,942,063
TOTAL PERSONAL SERVICES	48,973,454	19,292,876	2,129,932	9,324,998	7,485,681	6,715,889	4,024,078	48,973,454
Number employees by Division								
	324	145	17	55	40	44	23	324
OPERATING DETAIL								
	TOTAL	VR	DBVI	DD&D	ASD	L & P	Com office	TOTAL
Repair & Maint - Buildings	27,000	15,172	1,458	1,798	1,442	2,000	5,130	27,000
RENTALS	1,624,046	1,356,396	103,845	113,518	-	-	50,287	1,624,046
Rentals - Auto & Other	35,036	12,992	1,414	1,744	1,399	3,667	13,820	35,036
Fee for Space	756,344	187,007	30,510	76,086	115,079	108,494	239,168	756,344
Insurance other than Empl Bene	0	0	0	-	-	0	0	0
Insurance	151,616	0	0	-	-	0	151,616	151,616
Dues	44,000	2,984	2,376	2,929	2,351	25,000	8,360	44,000
Advertising	50,000	27,800	2,700	3,329	2,671	4,000	9,500	50,000
Communications	221,528	88,475	6,963	54,158	30,842	4,000	37,090	221,528
data circuits, internet	43,000	23,348	2,322	2,863	2,297	4,000	8,170	43,000
ADS App Support SOV Emp Exp	327,006	0	0	-	-	0	327,006	327,006
DII Assesment/SLA Charges	554,440	-	-	-	-	-	554,440	554,440
ADS Allocation Exp	452,280	-	-	-	-	-	452,280	452,280
Printing and Binding	200,000	102,200	10,800	16,089	12,911	20,000	38,000	200,000
Registration for Meetings&Conf	60,000	29,760	3,240	3,994	3,206	8,400	11,400	60,000
Postage	79,641	26,397	5,705	7,033	5,644	14,790	20,072	79,641
Travel	578,127	198,987	15,006	161,008	65,227	117,033	20,866	578,127
Other Purchased Services	89,421	21,491	12,650	12,902	12,638	14,370	15,370	89,421
Evaluations	20,000	9,920	1,080	1,332	1,068	2,800	3,800	20,000
Office Supplies	120,000	58,520	6,480	10,763	8,637	12,800	22,800	120,000
Other General Supplies	16,000	7,936	864	1,065	855	2,240	3,040	16,000
Food	5,000	2,480	270	333	267	700	950	5,000
Educational Supplies	18,000	8,928	972	1,198	962	2,520	3,420	18,000
Subscriptions	14,500	7,192	783	965	775	2,030	2,755	14,500
Data Processing Supplies	8,000	3,968	432	533	427	1,120	1,520	8,000
Electricity	6,500	3,224	351	433	347	910	1,235	6,500
Furniture & Fixtures	33,000	16,368	1,782	2,197	1,763	4,620	6,270	33,000
Other Equipment	20,000	4,920	1,080	1,332	1,068	2,800	8,800	20,000
Information Technology Equip	81,000	33,780	670	6,990	5,610	5,000	28,950	81,000
Inf Tech Purchases-Software	63,000	37,720	3,780	4,660	3,740	6,800	6,300	63,000
Vision Assesment	544,029	-	-	-	-	-	544,029	544,029
HR Services	299,824	-	-	-	-	0	299,824	299,824
Other Operating	2,000	992	108	133	107	280	380	2,000
TOTAL	6,544,338	2,288,957	217,641	489,385	281,333	370,374	2,896,648	6,544,338
TOTAL ADMINISTRATION	55,517,792	21,581,833	2,347,573	9,814,383	7,767,014	7,086,263	6,920,726	55,517,792

ADMINISTRATION - RECEIPTS								
	Total	VR	DBVI	DDSD	ASD	L & P	COMM	TOTAL
FEDERAL FUNDS								
TITLE 18 SURVEY & CERT; 93.777	1,795,687					1,795,687		1,795,687
TITLE 19 SURVEY & CERT; 93.796	925,000					925,000		925,000
CLIA; 93.777	5,000					5,000		5,000
ARPA Elder Abuse; 93.747	600,000					600,000		600,000
Hospice Impact; 93.777	38,000					38,000		38,000
IND LIVING PART B; 93.369	100,000	100,000						100,000
TITLE III E; 93.052	433,000				433,000		0	433,000
SECTION 110; 84.126A	11,071,939	11,071,939						11,071,939
CMS-EVV; 93.778	25,000			8,333	8,333		8,334	25,000
SECTION 110 DBVI; 84.126	1,075,858		1,075,858					1,075,858
Senior Employment; 17.235	20,447			20,447				20,447
ASSISTIVE TECH. GRANT; 93.464	298,000	298,000						298,000
SHIP; 93.324	4,000				4,000			4,000
Money Follows the Person; 93.971	993,409				993,409			993,409
Social Services Block Grant; 93.667	380,107			380,107				380,107
VT Career Advancement Project (VCAP); 84.421C	1,000,000	1,000,000						1,000,000
Title VI-B (Stafford VR); 84.187A	6,200	6,200						6,200
Medicaid 93.778	7,636,292	0	0	2,517,279	3,729,577	25,000	1,364,436	7,636,292
PADS MMIS; 93.778	125,000			41,667	41,667		41,666	125,000
CHIP; 93.767	700			700				700
VT Pathways to Partnership 84.421E	725,000		725,000					725,000
Total Federal	27,258,639	12,476,139	1,800,858	2,968,533	5,209,986	3,388,687	1,414,436	27,258,639
Special Funds								
VR FEES (EAP & AT)	1,318,889	1,318,889	0					1,318,889
VENDING	24,568	0	24,568					24,568
CONFERENCE FEES	47,000	3,000	0	24,411	19,589			47,000
Total Special	1,390,457	1,321,889	24,568	24,411	19,589	0	0	1,390,457
Interdepartmental Transfers								
SNAP; 03440	946,284	946,284						946,284
Welfare to Work; 03440	20,000	20,000						20,000
DOH Hospital Surveyor; 03420	100,000					100,000		100,000
Total IntraUnit	1,066,284	966,284	0	0	0	100,000	0	1,066,284
GC MCO Indirects	110,000						110,000	110,000
General Fund	25,692,412	6,817,521	522,147	6,821,439	2,537,439	3,597,576	5,396,290	25,692,412
TOTAL RECEIPTS	55,517,792	21,581,833	2,347,573	9,814,383	7,767,014	7,086,263	6,920,726	55,517,792

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

Whom We Serve	Program Description	Performance Measures	SFY2026 Proposed
Division for the Blind and Visually Impaired			
People who are blind or visually impaired.	<p>DBVI Vocational Vision Rehabilitation Program: Federal law - 29 United States Code (U. S. C), chapter 16.</p> <p>The DBVI Vocational Rehabilitation Program offers free, flexible services to people who are blind or visually impaired with assistance to build adaptive blindness skills and secure or maintain employment. DBVI partners with employers across Vermont to help people who are blind or visually impaired realize their full potential.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 287 people served. • 31 individuals successfully achieved their employment goals. Individuals who did not achieve their goals will continue to receive services in SFY 25. • 68% had a wage above 125% of the minimum wage. <p>Statewide Survey--Statewide Survey Results (Conducted by Market Decisions:</p> <ul style="list-style-type: none"> • 97% of DBVI consumers are satisfied with the DBVI vocational rehabilitation program. • 95% of DBVI consumers feel they are better off as a result of the services received from DBVI. 	<p>\$1,234,759 Gross</p>
People who are blind or visually impaired	<p>Independent Living Services helps people who are blind or visually impaired learn skills to remain independent in their homes and communities.</p>	<p>Performance (FFY2024): 105 people were served.</p>	<p>\$74,395 Federal Funds</p>
People who are blind or visually impaired and over age 55.	<p>Older Blind Program helps people who are blind or visually impaired and over the age of 55 learn skills to remain independent</p>	<p>Performance (FFY2024): 771 people were served.</p>	<p>\$225,000 Federal Funds</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	in their home and communities. Services are provided through a grant with the Vermont Association for the Blind and Visually impaired.		
People with the most significant visual impairments.	Randolph/Sheppard Program assists blind business owners to successfully run cafeterias and vending programs on state and federal property. 21 V. S. A. § 501 et seq.; federal law (20 U. S. C. § 107 et seq.)	Performance (FFY2024): <ul style="list-style-type: none"> • 4 individuals who operate small café and vending businesses on state and federal property. • Gross earnings for blind business owners increased 1%. 	\$223,450 Gross
VT Pathways to Partnership Grant	VT Pathways to Partnership Project Goals- 1) Establish Partnerships and High Performing Systems of Support 2) Center Leadership, Advocacy, and Engagement of People with Disabilities and Their Families. 3) Improve Career and Post-secondary Outcomes for Youth with Disabilities.	This grant is at the beginning stages of implementation and is for \$10M over approximately 5 years+.	1,500,000 Federal Funds
People with disabilities.	IL Part B is a grant to the Vermont Center for Independent Living to provide independent living services to people with disabilities through their Peer Advocacy Counseling Program and assistive technology through the Sue Williams Freedom Fund.	Performance (FFY2024): <ul style="list-style-type: none"> • Peer Advocacy Counseling Program (overall, including federal funds): 144 individuals served. • Sue Williams Freedom Fund: 52 individuals served. 	\$150,000 Gross

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

Adult Services Division

<p>People with disabilities.</p>	<p>Home Access Program (HAP): DAIL transfers \$100,000 to the Vermont Housing and Conservation Board (VHCB) to support VCIL’s HAP Program. The HAP program provides information, assistance, and referral services to help people with physical disabilities locate and secure funding for home modifications.</p>	<p>Performance (SFY2024): VHCB manages the Home Access Program grant and performance measures.</p>	<p style="text-align: right;">\$100,000 General Funds</p>
<p>People age 60 and over.</p>	<p>Older Americans Act funds services for people age 60+ to help them live as independently as possible and to support family caregivers. Services include nutrition programs, information/referral/ assistance, family caregiver support, case management, health promotion & disease prevention, volunteer outreach and legal services. Federal law-42 U.S.C 3001, et. seq.</p>	<p>Performance (FFY2023): (NOTE: FFY2024 data will not be final/confirmed until early 2025.)</p> <ul style="list-style-type: none"> • Overall, 48,502 people served (14% increase). • Home delivered Meals: <ul style="list-style-type: none"> ○ 8,695 people served (13% decrease). ○ 1,022,550 meals served (3% decrease). ○ 98% of meals served were provided to OAA eligible Vermonters. • Congregate Meals: <ul style="list-style-type: none"> ○ 8,448 people served (35% increase). ○ 161,377 meals served (42% increase). <p>Note: Most congregate meal sites closed during the pandemic, reopening fully in</p>	<p style="text-align: right;">Approx. \$12,000,000 Total approx. \$5,000,000 General Funds</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		2022. <ul style="list-style-type: none"> • Case Management: <ul style="list-style-type: none"> ○ 6,008 people served (22% decrease). 	
People 60 and over and adults with disabilities.	Support and Services at Home (SASH): Statewide Residential-based coordination of health and other services for older Vermonters and/or people with disabilities. Services include case management, health care coordination, nutrition assistance, and disease and falls prevention activities.	Performance (SFY2024): SASH operates 57 active 'panels' in affordable housing communities, with the capacity to serve up to 5,400 participants. Performance: 4,755 people were served. <u>Improve Identification of Social Isolation:</u> 80% screened (10% increase) <u>Improve Identification of Suicide Risk:</u> 78% screened (4% increase) <u>Substance Use Screening:</u> 72% screened (3% increase)	\$974,023 GC/MCO
People age 60 and over and adults with disabilities.	Homesharing: DAIL supports an innovative Homeshare Program in Vermont: HomeShare Vermont is active in Addison, Chittenden, Franklin, Grand Isle, Washington, Lamoille, Orange, Caledonia and Windsor Counties. "Homesharing" arranges live-in 'matches' between Vermonters who have a living space to share and others who need a place to live. The Homeshare Program have been successful in helping people stay in their own homes, as well	Performance (SFY2024): <ul style="list-style-type: none"> • 274 Vermonters in "matches," providing for affordable housing (138 Hosts, 136 Guests) (22% increase). • 97% of people matched reported perceived benefits in at least one quality of life measure such as sleeping better, feeling safer, eating better, happier, get out more and call family for help less often. • 47% of matched home providers reported they would 	\$480,000 GF/GC-MCO

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	as in helping people find affordable housing.	be unable to remain safely and comfortably at home without a home sharer.	
Family caregivers of people with Alzheimer’s Disease and Related Disorders.	<p>Dementia Respite The Dementia Respite Grant is managed by Vermont’s five Area Agencies on Aging. The goal is to help family caregivers by reducing stress, maintaining their health, and maintaining their caregiving roles. Grants may be used to pay for a range of services including in-home care, respite care, homemaker services, and Adult Day services.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 132 people served (6% increase). • Caregiver uses of funds: 108 used funds for Respite Care. 91 used funds for Supplemental Services. <p>61 used funds for self-directed care.</p>	<p>\$250,000 General Funds</p>
Adults under age 60 with disabilities.	<p>Home Delivered Meals – VCIL The VT Center for Independent Living (VCIL) contracts with home delivered meals partners to provide nutritious meals for people under age 60 who are at nutritional risk.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 476 people served (16% increase). • 64% of respondents to a consumer survey reported that meals helped maintain their health (25% decrease). • 86% of respondents to a consumer survey reported that staff were easy to reach when help was needed (10% decrease). 	<p>Approx. \$480,000 General Funds</p>
People age 60 and older.	<p>Self-Neglect The Self-Neglect Initiative is for the ongoing effort to help and coordinate support for individuals age 60 years and older who are self-neglecting. The focus of this effort is to enhance a coordinated</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 110 people served. • 71% of people served had complete assessments (11% increase). • 68% of people served had goals (7% decrease). 	<p>\$265,000 GC</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	<p>community response through a combination of training and education, outreach, assessment, service provision and community engagement. Service provision includes information and assistance/referral and case management (including assessment, identifying goals, working towards those goals, and engaging with additional community providers for other relevant services such as clinical therapy, meals, housecleaning, money management, etc.). Funds are distributed to the five (5) Area Agencies on Aging (AAAs) designated through the Older Americans Act to serve those age 60 and older in greatest economic and social need.</p>	<ul style="list-style-type: none"> 66% of people had goals with provider engagement (no change). 	
<p>Adults living in congregate housing and Vermont farms.</p>	<p>Senior Farmers Market The Northeast Organic Farmer’s Association (NOFA) recruits congregate housing sites and farms to participate in Community Supported Agriculture (CSA). The goal is to support local farms while bringing fresh local food to seniors residing in congregate housing. DAIL also partners with DCF on ‘Farm to Family’ farmers’ market coupons for older adults.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> 1,925 people served (3% increase). 873 received farmers’ market coupons, 1,052 received CSA shares. 177 farms participated (14% decrease). 78 housing sites participated (7% increase). 	<p style="text-align: right;">Approx. \$46,000 Federal Funds</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

<p>Adults living in licensed long-term care facilities and all Choices for Care participants.</p>	<p>The Vermont Long Term Care Ombudsman Project of Vermont Legal Aid protects the safety, welfare and rights of older Vermonters who receive services in licensed nursing facilities, residential care homes, assisted living residences and to CFC participants of any age receiving services in any of the settings above as well as in home- and community-based settings. 33 V. S. A. § 7501 et. Seq.</p>	<p>Performance (FFY2024): Changes below were impacted by the suspension of visits to LTC facilities for half the FFY.</p> <ul style="list-style-type: none"> • 410 complaints were opened (5% decrease). • 96% of closed complaints were verified. • 406 complaints were closed. • 350 complaints were resolved. • Provided 328 consultations to individuals in long-term care facilities. • Provided 42 consultations to people receiving HCBS. • Provided 146 consultations to long term care facility providers. • Provided 26 consultations to HCBS providers. • Approximately 86% of complaints were fully or partially resolved to the satisfaction of the individual receiving services which is well above the 75% target and national average. • 96% of all long-term care facilities were visited. • Made 385 non-complaint related visits to maintain a presence in facilities. 	<p style="text-align: right;">Approx. \$700,000 Total</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

<p>People age 60 and over, adults with physical disabilities, and their families.</p>	<p>Choices for Care provides a range of services to support people living at home, in an Enhanced Residential Care Home, Adult Family Care or in a nursing facility. Vermont Global Commitment (GC) Medicaid Regulations & Vermont Choices for Care regulations.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 6,663 people received services in all settings (High/Highest/Moderate). • 5,853 people served in High/Highest: <ul style="list-style-type: none"> ○ 4,512 were served in home-based settings. ○ 706 were served in Enhanced Residential Care. ○ 2,793 were served in skilled nursing facilities. ○ Some people were served in multiple settings above. • 80% of clinical determinations (high/highest) were completed within 30 days or less (target 95%). The clinical team experienced increased applications, more complex applications, and more fluctuations in the workload for clinical determinations. • 919 people received Moderate Needs Group (MNG) services. 	<p style="text-align: right;">Over \$338,000,000</p>
<p>People transitioning from nursing homes to the community.</p>	<p>Money Follows the Person (MFP) Grant is a special program supplementing the CFC program who choose to transition: \$2,500 per person to help overcome barriers for returning to the community (rent, mortgage, etc.),</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 50 people transitioned from institutions to community-based settings. • 7 people were readmitted to a nursing facility. 	<p style="text-align: right;">\$2,450,000 Federal Funds in Choices for Care program \$993,409 Federal Funds in Admin</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	and enhanced FMAP on all HCBS for each person enrolled and transitioned to approved housing. The period of enrollment is 365 days.		
Adults with physical and/or cognitive impairments.	Adult Day Services is a community-based non-residential service that assists individuals to remain active in their communities by maximizing health, independence and optimal functioning. Vermont Global Commitment to Health regulations; Vermont Choices for Care regulations.	Performance (SFY2024): <ul style="list-style-type: none"> • 374 people were served in Adult Day Centers (15% increase). • 185 were served through High/Highest. • 95 were served through Moderate Needs Group. • 94 served through Day Health Rehabilitation Services. 	Approx. \$4,000,000 Gross Choices for Care, and Day Health Rehab Services
Adults with disabilities.	Attendant Services Program (ASP) provides physical assistance with activities of daily living to adults with severe and permanent disabilities, allowing people to remain in their own homes and communities. General Funds option has been frozen since July 2014. 33 V. S. A. § 6321; Vermont program regulations.	Performance (SFY2024): Unduplicated served throughout the entire year: <ul style="list-style-type: none"> • 108 people served (17% increase). <u>Medicaid Option</u> - Serves people eligible under State Plan Medicaid and are able to self-direct: <ul style="list-style-type: none"> • 78 people served (34% increase). <u>General Fund Option</u> : Serves people who are not Medicaid eligible and are able to self-direct. This option has been frozen since July 1, 2014. <ul style="list-style-type: none"> • 28 people served (10% decrease). 	Approx. \$2,500,000

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		<p><u>Personal Services (SSBG):</u> Serves people who are Medicaid eligible but are not able to self-direct and use an agent to manage caregivers.</p> <ul style="list-style-type: none"> • 2 people served (down from 3). 	
<p>Adults who rely on medical technology</p>	<p>High Technology Home Care provides skilled nursing care to adults 21 and older who are Medicaid eligible and depend on technology. Services include RN oversight, treatment coordination, medical supplies, and sophisticated medical equipment. (High Technology services for people under the age of 21 are managed by the VT Department of Health.) Benefits are covered within the Medicaid State Plan.</p>	<p>Performance (SFY2024): 15 people were served.</p>	<p style="text-align: right;">DVHA appropriation Approx. \$4,000,000 GC</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

<p>People with moderate to severe traumatic brain injuries.</p>	<p>Brain Injury Program diverts and/or returns individuals from hospitals and facilities to community-based settings. Services are rehabilitation-based and driven by participants goals and choices, intended to help people achieve their optimum independence and return to work.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 81 people served (9% decrease). • 43% of people receiving rehabilitation services were employed through the 3rd quarter of CY2023. • 6 people graduated from the rehabilitation program to independence. <p>DAIL works with providers to shift long-term participants to the Choices for Care program when possible, reducing the need to fund their services with BIP program dollars.</p>	<p style="text-align: right;">Over \$6,000,000 GC</p>
Developmental Disabilities Services Division			
<p>People with developmental disabilities and their families.</p>	<p>Home and Community-Based Services (HCBS) consist of a range of services to support individuals with developmental disabilities and their families, increasing independence and supporting participation in their local communities. Priorities are to prevent imminent risk to the individual's personal health or safety; prevent an adult who poses a risk to public safety from endangering others; prevent or end institutionalization; maintain employment upon</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 3,334 people served. • 223 people served who were considered to pose a risk to public safety; of whom 26 were on Act 248. • 3 individuals were served in Psychiatric Inpatient Treatment (Level 1 beds). • 40 people with I/DD lived in nursing facilities; of whom 26 received Specialized Services. • In SFY2021 (most current data), 40% of working age 	<p style="text-align: right;">Approx. \$300,000,000 GC</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	<p>graduation from high school; and provide training in parenting skills for a parent with developmental disabilities to help keep a child under the age of 18 at home. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations; Vermont Global Commitment to Health regulations.</p>	<p>people (age 18 – 64) were employed.</p>	
<p>People with developmental disabilities and their families.</p>	<p>Flexible Family Funding (FFF) provides funds to be used flexibly, at the discretion of the family, to purchase goods, services and supports that benefit the individual and family. 67% (619) of the people served were children under the age of 18. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 929 people served. • The number of family members reporting that they anticipated using funds for: <ul style="list-style-type: none"> ○ Respite: 251. ○ Assistive Technology: 207. ○ Individual needs: 778. ○ Household needs: 664. ○ Recreation: 492. ○ Other: 221. • The number of families reporting that funds would address the following outcomes: <ul style="list-style-type: none"> ○ Enhance family stability: 576. ○ Improve quality of life: 541. ○ Increase independent living: 477. ○ Maintain housing stability: 446. 	<p style="text-align: right;">Approx \$1,100,000 GC</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		<ul style="list-style-type: none"> ○ Health and safety: 368. ○ Increase communication skills: 333. ○ Avert crisis placement: 77. 	
Children and youth with a mental health or developmental disability and their families.	Family Managed Respite (FMR) provides respite for children and youth up to age 22 with a mental health or developmental disability diagnosis who do not receive home and community-based services funding. Respite can be used as needed, either planned or in response to a crisis.	Performance (SFY2022): <ul style="list-style-type: none"> ● 325 children and youth with a diagnosis of developmental disability received FMR. This does not include children with only a mental health diagnosis, or children receiving integrated services with bundled payments. 	Approx. \$1,600,000 GC
Children and youth with a developmental disability and their families.	The Bridge Program provides care coordination to families to help them access and/or coordinate medical, educational, social and other services for children and youth up to age 22.	Performance (SFY2022): <ul style="list-style-type: none"> ● 404 children and youth served. This does not include children receiving integrated services with bundled payments. ● 91% of goals were being met (based on agencies reporting service goals and the service goal outcomes achieved). 	Approx. \$800,000 GC
Adults with developmental disabilities and older Vermonters who have been found to lack decision making abilities concerning basic life decisions.	Office of Public Guardian (OPG) provide public guardians to assist and empower people under guardianship in making decisions and taking actions in critical life areas. Courts assign a public guardian when an individual needs a guardian to protect his or her rights or welfare, no friend or family member is available to serve as	Performance (SFY2022): <ul style="list-style-type: none"> ● 759 adults received guardianship services including: <ul style="list-style-type: none"> ○ 613 adults with developmental disabilities. ○ 144 adults over age 60. ○ 2 adults received case management only. ● 287 adults received 	Approx. \$3,800,000

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	<p>guardian, and the individual needs a public guardian. OPG facilitates guardianship evaluations for new private and public guardianship applicants. OPG also provides representative payee services and case management services to a limited number of people. 18 VSA 9301-9317; 14 VSA 3093.</p>	<p>representative payee services.</p>	
Division of Licensing and Protection			
<p>People receiving services from Vermont health care facilities and agencies.</p>	<p>Survey and Certification (S&C) provides regulatory oversight of health care facilities and agencies under state and federal regulations. 33 V. S. A. § 7101 et seq.; state regulations for each type of Long-Term Care facility; federal regulations for nursing homes.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • S&C conducted 266 onsite investigations across all state and federal provider groups. • S&C was on time for 80.4% of Federal Surveys (a decrease of 19.6% from last year) and 83.8% of State Surveys (an increase of 459% from last year). • Nursing facility surveys: 14.7% of nursing homes had no deficiencies or isolated deficiency with substantial compliance. • 58.8% of nursing homes had deficiencies reflecting no actual harm but potential for more than minimum harm. • 26.4% of nursing homes had deficiencies reflecting actual 	<p>Approx. \$3,100,000 Gross</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		harm or immediate jeopardy of residents.	
Vulnerable adults.	<p>Adult Protective Services (APS) investigates allegations of abuse, neglect and/or exploitation, raises awareness of adult maltreatment in all of its forms, and provides information about alternatives and services for vulnerable adults who are the victims of maltreatment. APS has been level-funded for nearly a decade despite rising reports of maltreatment.</p> <p>Chapter 69 of Title 33 of the Vermont Statutes Annotated.</p>	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • APS received 3,947 reports alleging abuse, neglect, or exploitation of vulnerable adults, a decrease of 1% from the previous year. • APS initiated 870 field cases from these reports, a decrease of 2.7%% from the previous year. • APS completed 402 investigations, a decrease of 19.9% from the previous year. • APS placed 44 individuals on the Adult Abuse Registry, an increase of 15.8% from the previous year, and a decrease of 19.5% from two years ago. 	<p>Approx. \$1,600,000 General Funds</p>
Division of Vocational Rehabilitation/HireAbility			
People with disabilities	<p>General Vocational Rehabilitation (VR) offers free, flexible services to any person or employer dealing with a disability that affects employment. Partner with human service providers and employers across Vermont to help people with disabilities realize their full potential.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • A total of individuals 6,734 were served in SFY 2024. 6,324 were served in SFY 2023. • 6,172 people were served in the core HireAbility program in SFY 2024. 5,762 were served in SFY 2023. • 1,598 high school 	<p>\$6,669,368 Gross</p>

DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		<p>students were served through the Pre-Employment Transition Services program in SFY 2024. 1,479 were served in SFY 2023.</p> <ul style="list-style-type: none">• In SFY 24 there was a 13 percentage-point increase in HireAbility participants with higher wage employment plan goals since inception. The ratio stayed steady over the past SFY while the population served has grown by 6%.• A 29 percentage-point increase in HireAbility participants earning over 125% of minimum wage at program exit since inception and a 1 percentage-point increase during SFY 2024.• In SFY 2024, 64% of our successful closures had wages above 125% of minimum wage. We introduced a new measure at 150% of	
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DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		<p>minimum wage: In SFY 24 38% of our successful closures exceeded that measure.</p> <ul style="list-style-type: none">• A post-pandemic rebound in services, with a 95% increase in applicants and 98% increase in plans initiated, resulting in an overall 22% increase in the caseload. <p>Results from the most recent customer survey (2022):</p> <ul style="list-style-type: none">• 97% of customers felt they were treated with dignity and respect.• 93% of customers would tell their friends with disabilities to go to DVR for help with employment.• 90% of consumers reporting that they are satisfied with their experience working with DVR staff and DVR Counselors provided by DVR.• 77% of participants reported it was easy to contact their counselor even when services	
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DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

		were 100% remote during COVID	
People who are deaf or hard of hearing.	Vermont Interpreter Referral Service (VIRS) operated by VANCRO enables organizations and individuals to hire qualified interpreters.	<p>Performance (SFY2024) State of Vermont agencies – 3,554 requests 8484 hours of interpreting</p> <p>Vermont Community requesters (any non-state agency)- 5,319 requests 15,769 hours of interpreting</p>	\$55,000 Gross
People with disabilities.	Assistive Technology Program helps people of all ages and abilities to achieve greater independence, efficiency and control over their environment using assistive technology. Required by federal statute: Federal Assistive Technology Act.	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 728 people were provided information and assistance about AT and how it might help them. • 46 people were provided assistance in securing funding for AT equipment. • The AT program conducted 236 device demonstrations for individuals and caregivers/families who might benefit from AT. • The AT program made 799 device loans for 456 individuals to allow them to try out an AT tool before making a purchase. 	Approx. \$300,000 Gross
Farmers and their families.	Farm First Program provides Vermont's farmers and their families with support, resources, and information to reduce stress	<p>Performance (SFY2024):</p> <ul style="list-style-type: none"> • 102 farmers were served. 	

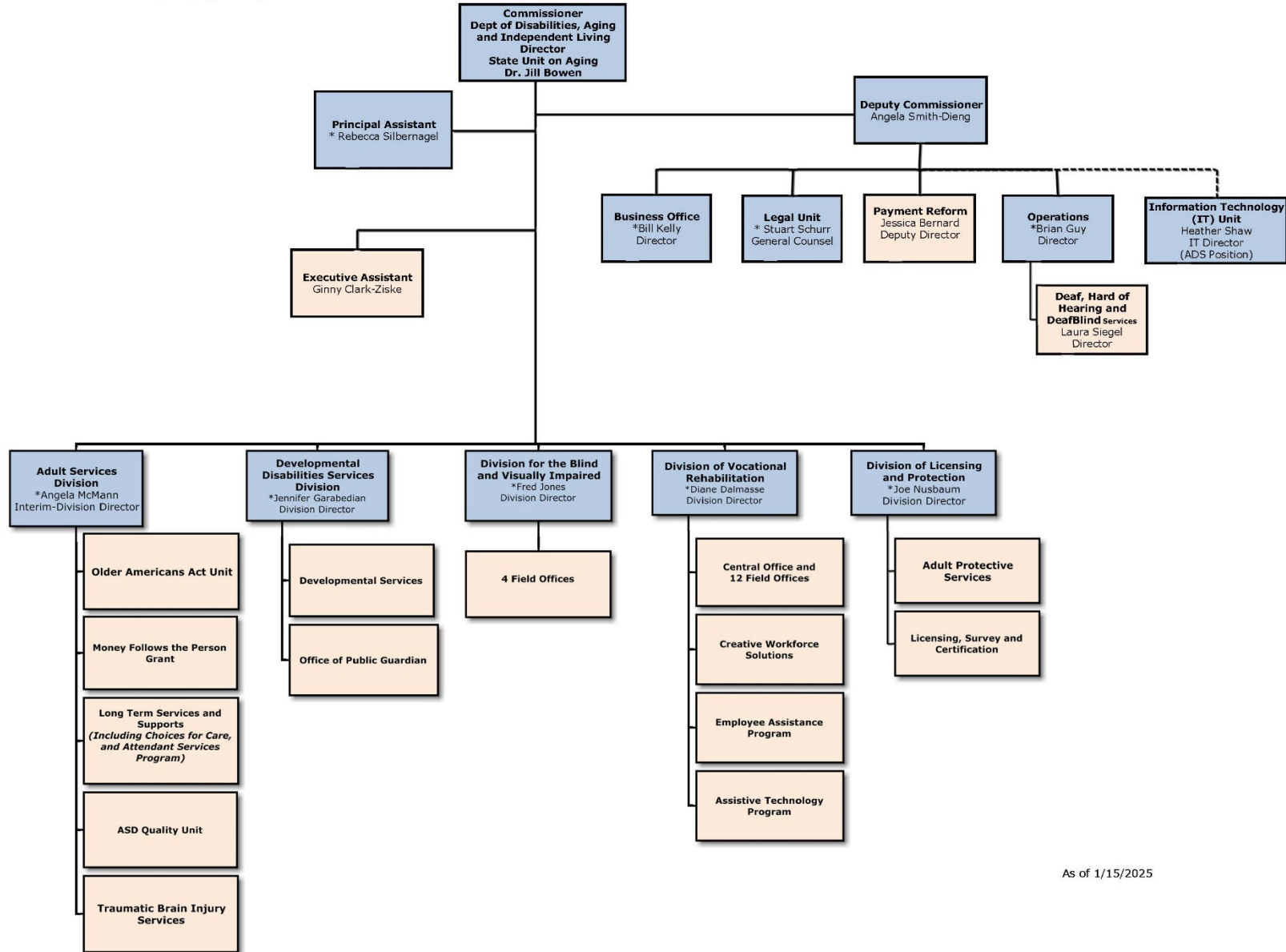
DAIL Program Summary

***All data is for SFY2024 unless otherwise noted**

	<p>and improve emotional well-being. Resource Coordinators perform outreach and establish a plan for each farmer. The plan may include up to 12 counseling sessions with an Employee Assistance Program counselor or an affiliate, a referral for HireAbility services, and/or other supports such as business advising, agricultural mediation, etc.</p>		
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DAIL Organizational Chart

Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart State Unit on Aging (SUA)



As of 1/15/2025

* = Identifies contacts for DAIL Senior Leadership