



**End Homelessness Vermont**

Bill Section	Language	Comments
<b>Section 2: Legislative Intent</b>	<ol style="list-style-type: none"> <li>1. Unsheltered Homelessness be rare, brief and non recurring</li> </ol>	<p>We fully agree with the CAPS on this. I think that the aspiration is critical to the bill. Just want to note the need for significant resources and housing to achieve these goals.</p>
	<ol style="list-style-type: none"> <li>2. Vermont reduce reliance on the inefficient use of hotel and motel 20 rooms for emergency housing;</li> <li>3. Utilization of an emergency housing benefit to access hotels and motels through the General Assistance program end and be replaced by a continuum of services;</li> </ol>	<p>This tool should be used as a part of the continuum and not separate from it. If we are changing the program to be one continuum, then our view of this tool has to change with it. Creating more unsheltered homelessness will not increase access to permanent housing. Properly funding services and keeping people sheltered until they are permanently housed will.</p>
<b>2201 Definitions</b>	<ol style="list-style-type: none"> <li>7. "Disability" means a physical, sensory, cognitive, developmental, or mental health condition or substance use disorder that substantially limits one or more major life activities, or that requires ongoing support, accommodation, or treatment to maintain an individual's health, safety, or independence. The term includes chronic or episodic conditions that significantly impact daily functioning, regardless of whether the individual is receiving, or is eligible to receive, federal disability benefits.</li> </ol>	<p>This definition is critically important to the people that we serve. We strongly support it. It is the closest to the intent of the ADA. The administration's proposal to redefine this would have catastrophic outcomes. Outcomes that we have seen over and over again, they are not theory. People living with disabilities have many reasons why they must be sheltered, why they need access that this committee can not contemplate all of those reasons. Without this definition, we would strongly oppose the bill. See my written testimony for more information.</p>
	<ol style="list-style-type: none"> <li>12. Highly structured shelter" means a shelter that provides programming that emphasizes case management, housing stability, employment, education, or treatment services, as well as other services as appropriate, in a manner that accommodates an eligible household's disability.</li> </ol>	<p>The disability language in this section is critically important to the population that we serve. Often their needs for accommodation leaves them out of the systems of care. This and all disability language should stay.</p>

	<p><b>18. Permanent Supportive Housing</b></p>	<p>This definition limits the structure permanent supportive housing includes:</p> <ul style="list-style-type: none"> <li>a. Medicaid permanent supportive housing.</li> <li>b. On site permanent supportive housing services.</li> <li>c. Scattered site model. This is what we do at EHVT, provide permanent and robust support no matter where people are living and that is flexible with the changing needs of the person we are working with.</li> </ul> <p>Permanent Supportive Housing is a housing model in which services are robustly available, but not required. We think that all models of permanent supportive housing, have to be included in this definition or the definition has to be broadened. We can provide some language.</p>
<p><b>2203 Program Components</b></p>	<p><b>C.</b> Upon assessing a household’s needs, the Office or community partners shall place the household in the appropriate level of care to address the household’s specific needs.</p>	<p>Concerned that the language “shall place” could be misinterpreted to mean that someone who is assessed to need treatment, either with mental health or substance use, could be involuntarily placed in that setting. Or could be not offered other options. Both would be a violation of the Olmstead decision and would not have the intended outcomes. People do best when trust is built, they are listened to and heard about their needs and a relationship is built to get to the point of treatment IF that is the right course. Our clients have been incredibly successful with this model.</p>
<p><b>2204 Prevention and Diversion Services</b></p>	<p><b>1.</b> Prevention and diversion services shall function as the primary entry point to the Vermont Homelessness Response Continuum for all households, although connection may be made at any level. The Office shall ensure that prevention and diversion services are provided through an agreement with one or more community partners in each region of the State in a manner that accommodates an eligible household’s disability, if any. All households, upon request for assistance, shall receive a brief, standardized initial prevention and diversion assessment to identify safe alternatives to homelessness and resolve immediate housing barriers.</p>	<p>This disability language is critically important and should remain in the bill. Often times people are offered services in a way that does not accommodate their disability and then what we hear and what the legislature hears is that they “refused services”. When they come on our case load, we are able to support them and resolve the challenge, leading the individual or household to stabilization and in many cases, housing. This bill appropriately supports access in a way that has been systemically absent.</p>
	<p><b>2.</b> Highly structured shelters shall provide programming that emphasizes case management, housing stability, employment,</p>	<p>This language around disability is critically important to leave exactly as is.</p>

<p><b>2205 Shelter Services</b></p>	<p>education, or treatment services, as well as other services as appropriate, in a manner that accommodates an eligible household's disability, if any. Eligible households receiving highly structured shelter services shall participate in case management and other services to the extent of the eligible household's ability.</p>	<p>While you may have heard that “we have to follow the ADA anyways”. The ADA is not followed frequently throughout the homelessness service system and it leads to an inaccessible network of services. Ensuring that access is written into the bill is one of the strongest parts of this legislation.</p> <p>The words “and other services” should be removed.</p>
	<p><b>B2.</b> Low-barrier shelters shall minimize barriers to entry by reducing the rules and programmatic requirements found in highly structured shelters, while still providing case management and other housing support services in a manner that accommodates an eligible household's disability, if any. Stays in low-barrier shelters shall be time limited, and eligible households shall be transitioned to highly structured shelter services or permanent housing as soon as feasible.</p>	<p>The language around disability is critically important to leave exactly as.</p> <p>Separately, we do have a concern that stays “shall be time limited”. There are many people who stay in a low barrier shelter due to psychiatric disability, mental illness, or trauma. This may be the appropriate placement for them and the best one that leads them to finding permanent housing.</p>
	<p>Levels</p>	<p>While we very much agree with having a multi structured system that allows there to be many options to find the right fit for an individual or household. We do have concerns about it happening in a linear manner. We recommend having all the same structures, now titled “levels” and in a linear manner just re naming them or structuring them as options within the continuum.</p>
<p><b>2206 Specialized Shelters</b></p>	<p>Overall language and Olmstead Decision</p>	<p>To comply with the Olmstead Decision, this section needs a provision that makes clear that people can not be forced or given false choice (i.e. outside or treatment) into a treatment or service setting. In other words, they must be able to choose from other shelter options. Also, it must be clear that people living with complex needs shall not be isolated from other populations.</p>

	<p>2. Specialized service shelters shall provide services delivered in a highly structured shelter as well as additional specialty services, such as services for substance use disorder and mental and physical health conditions. Eligible households receiving specialized shelter services shall participate in case management and other services to the extent of the eligible household's ability.</p>	<p>"And other services" should be removed to avoid forced or coerced and ineffective service delivery. Services are the most successful when robustly available but not required according to the data.</p>
<b>2207 Permanent Supportive Housing</b>		<p>Permanent Supportive Housing should remain in the bill. This is a critically important tool to be able to use and moves people toward or into permanent housing.</p>
	<p>2. Eligible households receiving permanent supportive housing services shall participate in case management, planning for housing stability, and other services to the extent of the eligible household's ability.</p>	<p>Permanent Supportive Housing does not require mandatory case management. We agree with the administration on this point. For this model, services have to be voluntary. We love that PSH can be used instead of shelter.</p> <p>The disability language here however is critical.</p> <p>One other note, PSH would be stable housing. There are people who live in housing with permanent supports through their life.</p>
<b>2208 Hotels &amp; Motels</b>	<p>3. If hotel or motel is utilized pursuant to this section, the eligible household shall participate in case management services, planning for housing stability, and other services to the extent of the eligible household's ability.</p>	<p>We would recommend removing "and other services"</p> <p>The disability language here is critically important and should remain present.</p>
	<p>5(a)i Between April 1 and November 30 of each year, the utilization 11 of hotel and motel rooms pursuant to this section shall be capped at 700 rooms 12 per night; and</p>	<p>Very concerned about this cap. Right now the hotel utilization is almost at cap which is 1100 rooms. When there is unsheltered homelessness, our costs go up ultimately and homelessness last longer for those experiencing unsheltered homelessness.</p>

	<p><b>5a</b>ii. Between December 1 and March 31 of each year, the utilization of hotel and motel rooms pursuant to this section shall be capped at 1,000 rooms per night.</p>	<p>This is especially concerning. This past winter we saw more exposure deaths than we have in a very long time. There were at least 3 in the news. Our primary goal in winter should be to ensure that people are sheltered.</p>
	<p>Suggestion of language</p>	<p>Hotels used as specialized shelters shall not count toward room caps. In other words, if a community provider is contracted to run a shelter style program using hotels and motels, those would be treated separately to the hotel cap provisions.</p>
<p><b>2209 Other Emergency Housing Services</b></p>		<p>We support this section. We do suggest adding language that while not required, services should be robustly available.</p>
	<p>Alternative Agency of Human Services housing solutions. The Agency of Human Services, through its various departments, provides households with other time-limited or permanent housing. Such services include recovery housing, various residential supports for individuals with intellectual or developmental disabilities, home care services for older Vermonters and individuals with physical disabilities, transitional housing for individuals exiting correctional custody, and residential options for individuals with mental health challenges.</p>	<p>There should be some language added that makes clear that offering of alternative solutions, can not be in violation of the Olmstead decision. People with disabilities can not be forced into a treatment or an institutional setting or given a false choice. I.e. live outside or go to an institution.</p>
<p><b>2210 Household Responsibilities</b></p>	<p>Mandatory services</p>	<p>Mandatory services are not people centered. This language should be</p>
	<p>1. is physically present and intends to reside in Vermont as evidenced by active participation in a housing, employment, or other Agency of Human Services–recognized plan;</p>	<p>We are concerned that this language will cause major barriers. We also would not support the administrations proposed change. The experience of homelessness should be the qualifying factor to receiving support.</p>
	<p>2. agrees to a coordinated entry assessment that prioritizes the household for permanent housing, unless explicitly exempt under this chapter;</p>	<p>Does this mean that people are not eligible until they agree to this? I think most people entering homelessness do not even know what this is. This should allow placement for a period of time to become stable before asking this of them. Often folks come in sick.</p>

	<p>3. Engages with a lead case management entity, such as a department of the Agency of Human Services or a community partner, to develop a housing plan and participate in employment, treatment, or other activities as appropriate, unless explicitly exempt from case management requirements under this chapter or by federal law; and</p>	<p>We saw that Department wants to use the words “state funded” before community partner. This is how people willing to do the work that the department won’t or can’t fund are left out of the equation, this causes a lot of harm and we recommend leaving community partner in the language.</p>
	<p>(4) abides by program rules and refrains from misconduct. (b)(1) The Office or a community partner shall provide clear written notice to all applicants regarding penalties for fraud at the time of application. (2) The Office or a community partner shall not impose a penalty upon a household for a good faith, immaterial error that was corrected upon notice within a reasonable period of time. (3) A household that knowingly provides false, misleading, or incomplete information regarding residency, disability status, household composition, or other eligibility criteria shall be subject to termination of services within 30 days after receiving written notice from the Department or a community partner. (4) Pending the outcome of a relevant Human Services Board hearing, the Office may refer cases of suspected fraud to the Office of the Attorney General or a State’s Attorney for investigation and prosecution under applicable State law. (c) A household may be terminated from the Program for repeatedly refusing suitable placements following documented suitability assessments and reasonable accommodations. V</p>	<p>This entire section is extremely concerning. People experiencing homelessness have not committed a crime for not having a home or being in poverty. They did not create the housing crisis. We would not treat a more affluent population who needs support or help with this kind of heavy hand or presumption.</p> <p>Also there is already Fraud process that is already extremely challenging for people on benefits, there is not a need for this aggressive fraud section. There is also no evidence that there is extreme fraud in this program. This is going to create frivolous fraud claims that are really for the crime of being in poverty.</p> <p><b>Please see detailed comments in my written testimony</b></p>
<p><b>MISCONDUCT &amp; FRAUD. Please follow comments in written testimony.</b></p>	<p>member or members of an eligible household may be subject to immediate termination of services as necessary for the safety of others if the member or members are engaged in: (1) criminal activity; or (2) misconduct that is not related to a disability or to victimization related to abuse, sexual assault, or stalking. (e) As used in this section, “misconduct” means documented behaviors that materially endanger the safety of others, involve the intentional destruction of property, or constitute illegal activity.</p>	<p>This section is highly concerning. It provides no clarity about how long people lose this benefit for. It also has no clear definition of what misconduct is. There also is a risk of people who are not risking health or safety but live with substance use disorder. <b>Comments in written testimony</b></p> <p>The disability language in this section should remain or be included in whatever this language ends up on.</p>

	<p><b>(b) (2)</b> The Office or a community partner shall not impose a penalty upon a household for a good faith, immaterial error that was corrected upon notice within a reasonable period of time. (3) A household that knowingly provides false, misleading, or incomplete information regarding residency, disability status, household composition, or other eligibility criteria shall be subject to termination of services within 30 days after receiving written notice from the Department or a community partner. (4) Pending the outcome of a relevant Human Services Board hearing, the Office may refer cases of suspected fraud to the Office of the Attorney General or a State's Attorney for investigation and prosecution under applicable State law.</p>	<p>This section will be used improperly. My clients have experienced accusations of fraud without any investigation. There is already a fraud process and this entire section should be struck and referenced to the current policies on fraud. There is no need for a more significant process.</p>
	<p><b>(c)</b> A household may be terminated from the Program for repeatedly refusing suitable placements following documented suitability assessments and reasonable accommodations.</p>	<p>If this is going to be in the bill, it needs to be clear that people can not be forced into treatment, institutional placements or forced to move from their home community.</p>
	<p><b>(D)</b> A member or members of an eligible household may be subject to immediate termination of services as necessary for the safety of others if the member or members are engaged in: (1) criminal activity; or (2) misconduct that is not related to a disability or to victimization 5 related to abuse, sexual assault, or stalking.</p>	<p>This is not clear enough. It is not a definition. And this alludes to permanent termination and that is very concerning. That does not support the community or the household. People need to have the ability to reset, find different or more appropriate support and remain sheltered.</p>
	<p><b>(e)</b> As used in this section, "misconduct" means documented behaviors that materially endanger the safety of others, involve the intentional destruction of property, or constitute illegal activity.</p>	<p>This is far too broad of a definition. It has the risk for discrimination of historically marginalized groups. The definition has to be much more specific.</p>
<p><b>§ 2211. PRIORITIZATION</b></p>		<p>We disagree fundamentally with prioritization. We would also disagree with changing it to eligibility, the idea is to make GA use more like shelters, not shelters more like GA and to make it one system.</p>
	<p><b>(b)(1)</b> Proof of an eligible household's disability shall be verified by: (A) a health care provider licensed or certified and practicing in Vermont; (B) a determination or certification from a State- or federally recognized agency or program that</p>	<p>This section is incredibly important. Without this section, the protection for people living with disabilities would not be present. The only think that we would add is that this absolutely should not be up to rule making. I recommend</p>

	<p>provides services to individuals with disabilities; or (C) self-attestation by the eligible household, subject to verification by the State or community partner within 30 days when other documentation is not reasonably available at the time of application. (2) The presence of an eligible household member’s disability shall be verified by the Office or a community partner during the household’s initial application process and shall be redetermined annually if the household is still receiving services. An eligible household with a member who has a lifelong disability, such as an intellectual or developmental disability, shall not be required to have the disability redetermined. (</p>	<p>acceptance of the 201g-vr or a letter from a medical professional should suffice as evidence that the households meets the definition of disability</p>
	<p>c) The Office and community partners shall comply with the Americans with Disabilities Act, 42 U.S.C. § 12101–12213, and section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794, for the purposes of providing reasonable modifications, effective communication, and accessible placements. VT LEG #388448 v.1 AS PASSED BY HOUSE 2026 1 H.938 Page 23 of 39 Program rules and case management requirements shall be reasonably modified, including the use of plain language, as necessary to avoid discrimination against eligible households with a member who has a disability</p>	<p>This section is excellent</p>
<p><b>§ 2212. TIME LIMITS FOR PROGRAM PARTICIPATION</b></p>		<p>Time limits should be based on support needed and providers should be empowered to make that determination. Every time someone is sheltered and then unsheltered, they have to start at square 1 recovering their health and well being. To limit time limits based on level means that someone who has a more significant challenge is constantly being bounced in and out of shelter making stabilization almost impossible. Instead each level should say <b>“for as long as the eligible household’s plan indicates it is necessary”</b></p> <p>Additionally, this should not be done as levels, but, rather see above comment on levels. We recommend having all the same structures, now titled “levels” and in a linear manner just re naming them or structuring them as options within the</p>

		continuum.
	<b>level 1:</b> any temporary housing that is not provided in the form of temporary rental assistance through the Program's prevention and diversion services shall not exceed 30 days per rolling 12-month period;	30 days is barely enough time to stabilize someone and reset toward working for permanent housing. Instead it should say <b>“for as long as the eligible household's plan indicates it is necessary”</b>
	<b>level 2:</b> the Office, in collaboration with shelter providers, shall establish the maximum length of stay in highly structured shelters and low barrier shelters in rule or shelter standards;	Shelter Providers are fairly good at assessing needs of people they serve and making this individual determinations that will work best. The idea is to make GA closer to how shelters operate, not make shelters closer to GA. This would bring shelters closer to GA. This should be determined by individual needs. Instead it should say <b>“for as long as the eligible household's plan indicates it is necessary”</b>
	<b>level 3:</b> the Department, in collaboration with other relevant Agency of Human Services' departments, shall establish the maximum length of stay in specialized shelters in rule or shelter standards;	Same as above. Providers are skilled at making appropriate determinations on this for their clientel. Any arbitrary time limit would almost ensure that people with high needs, or families with children would spend time living outside. Empower providers to make these decisions according to the needs of their clients. Instead it should say <b>“for as long as the eligible household's plan indicates it is necessary”</b>
	<b>level 4:</b> permanent supportive housing services may be utilized by an eligible household for as long as the eligible household's plan indicates it is necessary; and	This is how it SHOULD be written in each of level 1 through 3 as well. It should always be according to an individuals plan.  Additionally, we saw the the administration wants to remove this option. I have no idea why, this is a permanent housing option that exits someone from homelessness, it should absolutely stay.
	<b>level 5: hotels and motels:</b>	While we understand this is a political hotbed, if we are really trying to move this now “benefit” toward the way that shelter system operates, it should also be determined by the individuals plan with their provider. Also, reduction in number of days is going to cause more loss of life and that should be clear to all as this decision is being made.

	<p><b>(A)</b> between April 1 and November 30 of each year, eligible households may receive housing at hotels and motels with supportive services for not more than 70 days per rolling 12-month period; and</p>	<p>Again, the times should be according to the individuals housing plan made with their skilled provider. Also, to go from 80 to 70 days seems like an arbitrary reduction with real life consequences, if there is a time limit.</p> <p>Also, it is critical that the rolling 12 month period for this very new and very complex legislation begin for this year on July 1 of 2026. Otherwise, 10 of those rolling days, will have been used when you were allowed 80 days in fy 26. So, the rolling calendar clock for this bill that is no longer in session law, should be 7/1/2026</p>
	<p><b>(B)</b> between December 1 and March 31 of each year, eligible households may receive continual services in cold-weather-use hotels and motels, which shall not be applied toward the time limit established in subdivision (A) of this subdivision (5).</p>	<p>We support this.</p>
	<p><b>(b)</b> The Department may grant extensions to the time limits established in subsection (a) of this section pursuant to criteria adopted in rule, including for: (1) an eligible household actively awaiting a placement in housing, treatment, or other services; (2) medical necessity; (3) lack of reasonable alternative accessible placements for a member of the eligible household with a disability; and (4) imminent risk to the health or safety of one or more of the eligible household's members.</p>	<p>This is an excellent section that should remain in the bill. Currently much of the loss of life that happens is because the department does not see this need to make a reasonable accommodation on time limits as allowed under the bill. This is important clarity. We saw that the dept wants to remove this along with many other disability protections. This is a really critical part of the bill.</p> <p><b>HOWEVER. This should not be subject to rule making for criteria, this should be treated in the same manor as an accommodation or part of an individuals housing plan.</b></p> <p>This criteria either needs to be laid out or individuals should be able to request based on the what is already written in the bill. Under the ADA an accommodation request can be made however a person needs to make it and this should follow that same principle. If still is in rule making then the statute should explicitly add language that a person can not be denied for making this accommodation request in a different manor. Again, the ADA states there is no wrong way and that needs to be clear in the law.</p>

<b>§ 2213. CASE MANAGEMENT SERVICES</b>		
	<b>From the Dept.'s comments which asked to add "state funded" before community partner</b>	This is currently being used even though it is not within the law and it is causing extreme harm to our clients, confusion to the continuum and duplication of services. Whether or not an org is state funded is NOT determined by the validity of their org. Instead meeting appropriate case management standards should be all that is required. When there are not enough dollars and there are not enough case managers, it is absolutely absurd to limit how people access services and instead leave them on wait lists.
	<b>Each eligible household shall be assigned a lead case manager</b> , except where specifically exempted for certain services, which may be from any Agency of Human Services department or a community partner. management services provided pursuant to this chapter shall be informed by the acuity level of the eligible household and include individualized supports that connect an eligible household to public assistance, health care, employment, permanent housing, and other services. A household may request a specific case manager or a change in case manager.	LEAVE AS IS. We saw the admins comments that people should not be able to request a case manager. Many people in this program may already be working with someone. Also, there may be times when someone has not developed trust with a case manager or feels uncomfortable or has trauma. They may be comfortable with someone else. This language was very intentional. It would not be appropriate to add "state funded" or to take away the dignity of choice for people.  Already mandatory services according to the data are less successful than robustly available voluntary ones. If you remove the dignity of choice in who one works with, then you are creating a recipe for disaster.
<b>§ 2215. NOTICE; APPEALS; RIGHT TO FAIR HEARING</b>		This section is one of the best sections in the entire bill. It addresses a lot of what went wrong. We strongly support this section.
	<b>B(3)</b> the household believes that benefits have not been provided in accordance with applicable rules or policies.	There needs to be the word 'laws' added to read "applicable rules, laws or policies"
<b>§ 2216. RULEMAKING</b>		This section should be narrowed. It is far too broad. Where clarity is needed in the statute, it should be added it is leaving much to much open to rulemaking. Rule making can cause harm and has a likelihood to veer from intent whether intentional or unintentional.

	3. documentation requirements for household eligibility, including disability;	Based on the last few years, we highly recommend this being taken out of rule making and the legislature determining that documentation. The dept. Does not like their own 201g-vr form, but, it is a medical provider that fills it out and makes sense within the disability definition in this law.
	(5) the creation of a brief, standardized initial assessment form that may be completed by hand, electronically, or by telephone;	I think the initial assessment form that may be completed by hand, electronically or by telephone is good. But, it should be created by community partners who have the on the ground experience.
	(6) applicant and household appeal procedures;	<b>We recommend removing this from rulemaking and referring to current rules and procedures.</b>
	(9) time limits for Program participation, including procedures for extensions;	It is important when talking about disability that there not be overly cumbersome processes. It needs to remain true that there is no wrong way to ask for an accommodation, which this essentially is. As is required in the ada. So, this should be explicitly named in the bill.
	(11) other subjects as deemed necessary.	<b>STRIKE.</b> This is incredibly broad and gives carte blanche rule making authority.
<b>§ 2218. GRANT REQUIREMENTS</b>		
	(1) participate in the local housing coalition or other group established to assist eligible households who are homeless;	It is hard for a statewide org to be engaged in every housing coalition all the time without a grant large enough to cover a staff to ONLY do that. I would recommend “or COC” as it pertains to statewide organizations. If we participate in local housing coalitions in every meeting, we do nothing but meetings.
<b>11. VERMONT RENTAL ASSISTANCE BRIDGE PROGRAM</b>		
		There standards should be more flexible than ones that bar many people from accessing rental assistance and all that is outlined should be proposed by VSHA in conjunction with community partners.

	<p><b>(b)</b> The Program shall be available to a household for not more than 24 months and shall not provide the full amount of the household's rental payment. Program payments shall be made directly from the Vermont State Housing Authority to a household's landlord.</p>	<p>This is too restrictive. People have different levels of barriers. This should be determined between the provider and household based on their individual needs.</p>
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