VERMONT

Agency of Human Services

Department of Disabilities, Aging and Independent Living

GOVERNOR'S SFY 2020 BUDGET TESTIMONY

FEBRUARY 2019

HOUSE APPROPRIATIONS COMMITTEE

SENATE APPROPRIATIONS COMMITTEE

HOUSE HUMAN SERVICES COMMITTEE

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Department of Disabilities, Aging and Independent Living
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Department of Disabilities, Aging and Independent Living
Budget Testimony
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The Department of Disabilities, Aging and Independent Living (DAIL) is responsible for services to older Vermonters and Vermonters of all ages with disabilities.

Our mission is to make Vermont the best state in which to grow old or live with a disability, with dignity, respect and independence.

DAIL consists of five divisions:

- Division for the Blind and Visually Impaired (DBVI)
- Developmental Disabilities Services Division (DDSD)
- Division of Licensing and Protection (DLP)
- Division of Vocational Rehabilitation (DVR)
- Adult Services Division (ASD)

The Commissioner's Office includes the Commissioner, Deputy Commissioner; Operations; Policy, Planning and Analysis; Legal Unit; Business Office and an Executive Assistant.

DAIL's primary role in Vermont is to fulfill the commitment that we have made to individuals with disabilities and to older Vermonters, enabling them to receive supports and services in their homes and in their communities, living independently and fully included as participating and contributing members of those communities. This commitment is underlined by state and federal mandates like the Older Americas Act, the Americans with Disabilities Act, and the Olmstead Decision, which require states to provide services to people in the least restrictive environments possible. Vermont remains a leader in the nation in terms of our work in closing institutions, supporting choice and community-based settings, and the development of robust supported employment and mature worker options for all.

As we embrace the intent and spirit behind the federal Home and Community Based Services (HCBS) rules, we ensure that Vermonters value the inclusion and contributions of individuals with disabilities and older Vermonters and strive to enhance and promote those contributions. DDSD is working on compliance with the HCBS rules 'settings' requirements in shared living and group homes, while ASD is working on compliance with these rules in Adult Family Care homes. We see this as a value both to those individuals receiving supports and services and to the larger Vermont community.

Globally, DAIL's work across all five divisions is most directly related to two outcomes in Act 186: *Vermont's seniors live with dignity and in settings they prefer* and *Vermonters with disabilities live with dignity and in settings they prefer*. At a population level, these outcomes embody the concept of choice, a cornerstone for our role in state government and across Vermont. Along with a robust provider system, DAIL strives to ensure that individuals not only choose the settings in which they live but choose and direct how they live their lives, empowering independence, inclusion in their own communities and contributions to Vermont. For these outcomes, we measure employment rates and rates of abuse and neglect. For more information about how DAIL contributes to Act 186, you can access the DAIL scorecard here: https://app.resultsscorecard.com/Scorecard/Embed/27950

DAIL's work contributes to Act 186 outcomes and the Governor's priorities including "Vermont has a Prosperous Economy" by supporting employment, "Vermont children and young people achieve their potential" through early supports and career development, and "Live with dignity and independence and in settings they prefer" by supporting people with disabilities and older people to make choices about where they live and how they receive supports. The Act 186 scorecard with outcomes and population indicators can be accessed here: https://app.resultsscorecard.com/Scorecard/Embed/17845

The Governor's priorities are:
• Grow the economy;
• Make Vermont more affordable; and
• Protect the most vulnerable.
https://governor.vermont.gov/content/governor-scotts-priority-initiatives

Examples of DAIL contributions include: reduce fall related injuries; reduce high-risk substance use and prevent suicide among older Vermonters; prevent abuse, neglect and exploitation of vulnerable adults; improve career paths for youths transitioning into adulthood; support employment of older adults and adults with disabilities; ensure that nursing facilities and residential facilities follow federal and state licensing regulations.

DAIL has embraced Results Based Accountability (RBA) and continues to focus on program performance measures and performance improvement. Throughout this document, we identify measures related to how much, how well and how people are better off because of our services and supports. Three DAIL programs are included in the Vermont 'Programmatic Performance Budget Project': The Traumatic Brain Injury program, the Division for the Blind and Visually Impaired, and Project SEARCH, but all of our divisions and core programs are considering their work under the rubric of RBA, as reflected in this document. This document represents our continued effort to integrate results and performance measures within budget testimony. We have also begun to develop strategies to utilize Scorecards to assess programmatic

performance and we review division scorecards and performance measures regularly as part of our Management Team meetings. For more details on DAIL's programs and performance measures, please visit the DAIL Performance Budget Scorecard here: https://app.resultsscorecard.com/Scorecard/Embed/27950

For more comprehensive information about DAIL see the DAIL Annual Reports: http://dail.vermont.gov/resources/documents-reports/annual-reports

Divisions and Major Programs and Performance Outcomes

I. <u>The Division for the Blind and Visually Impaired (DBVI)</u> provides and oversees specialized services for people who are visually impaired using a rehabilitation model that starts when the person experiences vision loss. DBVI offers an array of services specifically designed for people who have lost visual function and independence.

DBVI's mission is to support the efforts of Vermonters who are blind or visually impaired to achieve or sustain their economic independence, self-reliance, and social integration at a level consistent with their interests, abilities, and informed choices. Those who participate in DBVI services learn or re-learn skills and become successful and active members of their communities. Given appropriate adaptive skills training, and assistive technology instruction, many limitations due to blindness can be overcome. Quality of life, dignity, and full integration are the focus of DBVI.

The goal of DBVI's vocational vision rehabilitation services is to help people with vision loss to retain, return, or secure employment. DBVI transition services provide youth with opportunities for learning independent living, job skills, or support for higher education. When independence is the primary goal, DBVI helps people build adaptive skills through DBVI Independent Living blindness programs.

DBVI Performance Measures

Our performance measures are intended to measure our success in achieving the goals of our division:

- Assist individuals in pursuing career pathways to higher wage employment.
- Build adaptive blindness skills that improve individual independence and safety.
- Assist youth who are blind to achieve careers and independence.

Since the passage of WIOA legislation in 2014, DBVI has experienced a series of changes and disruptions that continue to reverberate:

- In 2015 the RSA's WIOA requirement that we allocate 15% of funds to serve youth in school required a major change to our Transition program. Funds that helped young adults achieve employment after leaving high school were redirected to serve only youth in school ages 14 and up with Pre-Employment Transition Services.
- As a result, our capacity to serve out-of-school eligible individuals who can achieve employment outcomes was reduced, with a concomitant drop in our numbers served.
- In September 2017, DBVI went live with our new Aware case management system, moving from a simple 30-year old system into a comprehensive modern web-based system that included nearly 200 new data elements related to new

WIOA reporting requirements. The significant work that went into implementation, learning the new system, and backfilling data now required by WIOA resulted in a predictable time-limited dip in productivity for our staff.

In 2014, the US Congress reauthorized the Rehabilitation Act which is now referred to as the Workforce Innovation and Opportunity Act (WIOA). WIOA substantially changed federal reporting requirements and performance measures, and this has disrupted our ability to report performance measures for our services:

- WIOA was passed in 2014, but final regulations (including performance measures) were not published until the summer of 2016.
- RSA's revised reporting instructions did not come into effect until July 2017 and are still undergoing changes. Hence, WIOA data collection for the VR program did not begin until SFY 2018.
- 5 of 6 new performance measures are based on data collected in the 4 quarters **after** case closure (when services are ended). Hence, the earliest period in which we can begin to calculate measures for cases closed in SFY 2018 will be after October 2019.
- Under WIOA we no longer collect the data that would allow us to continue to produce our past measures, and our new WIOA measures are not reportable until SFY 2020 due to their time delay or 'lag'. Due to this gap we are developing additional measures that relate to WIOA, use the data now available to us, and have less lag time. We plan to report on these additional measures in Budget Testimony next year. In the meantime, we can report on our success in maintaining and adjusting our services during this time of transition.

The new WIOA Common Performance Measures (CPM) that will measure the performance of DBVI in the future are:

- Job retention six months post program exit
- Job retention twelve months post program exit
- Median earnings six months post program exit
- Credential attainment
- Measurable skills gains
- Employer satisfaction

<u>How many people we serve</u> (FFY 2018):

- 259 individuals received services to assist them to maintain or find employment as a result of their vision loss.

<u>How well we serve them</u>:

Customer Satisfaction: Results of a statewide random survey of all participants in the DBVI Vocational Vision Rehabilitation program in 2017 (conducted by Market Decisions—next statewide survey scheduled for 2020).

- 93% of respondents said they are satisfied with the DBVI vocational rehabilitation program.
- 93% of respondents said overall, they are better off as a result of the services they received from DBVI.
- 95% of respondents said that DBVI staff treated them with dignity and respect.
- 94% of respondents said that DBVI helped them achieve their vocational rehabilitation goals.
- 92% of respondents said that DBVI services met their expectations.
- 89% of respondents said that DBVI vocational rehabilitation services helped them become more independent.
- 84% of respondents said that DBVI helped them reach their job goals.

Our approach in assisting individuals who are blind or visually impaired on their path to employment and independence begins with the belief that each person can achieve their goals. We know that the "voice of the customer" is important and our strategies are geared to meeting those needs. Each staff member is committed to delivering services well and to making a difference in the lives of the people we serve.

How are people better off:

- 48 blind or visually impaired individuals closed their DBVI case in SFY 2018 with successful employment.
- 59% had a wage above 125% of the minimum wage.

In annual closure surveys DBVI participants shared examples of how their new skills have helped them adapt to vision loss, maintain employment, and improve their quality of life. They reported being better off because they can now:

- Obtain their employment goals.
- Access printed material with the use of specialized blindness technology.
- Travel independently on the job and in the community with the use of the white cane.
- Use special magnification and lighting to access information on the job and at home.

WIOA requires DBVI to use 15% of the federal grant award to provide Pre-Employment Transition Services (Pre-ETS). This new federal requirement created an opportunity for DBVI to expand Pre-ETS services in the core areas:

- Job exploration counseling
- Work based learning opportunities
- Counselling on post-secondary educational opportunities
- Workplace readiness training
- Instruction in self-advocacy

DBVI has been very 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. Most students participate by living and working in the Burlington area in the summer. Other students participate to build job readiness skills during school year retreat and work experiences in their local communities. Our efforts to include more students led to a higher increase in the number of participants than the number of training hours:

- The number of participants increased from 18 in 2014 to 82 in 2018.
- The number of work-based learning and job readiness training hours increased from 15,000 in 2014 to 23,000 in 2018.

The LEAP summer work experiences and school year retreats have resulted in significant skill gains for students developing employment and independent living skills that are essential for future employment. Each student receives a report of their progress which is shared with school teams, teachers of the visually impaired, and DBVI counselors. Students learn to identify their strengths and areas of vocational interest. They also learn specific job readiness skills including: respect in the workplace, assistive technology, transportation strategies, workplace relationships, personal finance, interview practice, building a strong resume, networking, and more.

Students also received specialized services necessary to develop adaptive skills related to their blindness including Orientation and Mobility (O&M), Vision Rehabilitation Therapy, and Instruction in Assistive Technology. This resulted in a significant positive impact in their mobility skills in the community and at the work site. LEAP students received over 200 hours of O&M Instruction this summer.

DBVI has also successfully expanded our services overall to youth. The percentage of population served who were under age 22 at entry into DBVI services has grown from 17% of people served in SFY 2014 to 29% of people served in SFY 2018.

Providing real work-based learning experiences in actual employment settings is one of the most effective ways to prepare youth for long term success. Therefore, DBVI has invested more resources in providing real-world internship opportunities. Internship placements at Vermont businesses include: The Sarah Holbrook Center, The Flynn Theatre, Sangha Yoga Studio, ReSOURCE, The Burlington Free Press, The Farm at VYCC, Burlington City Arts, The ReStore, Salvation Farms, Habitat for Humanity, Maple Wind Farm, King St. Youth Center, Mt. Mansfield Media, and more.

- In 2018, 80% of the interns had enrolled in college programs, and the remaining 20% were working with their DBVI counselors to match their skills to a career path.

A DBVI intern at the Burlington Free Press stated: “Without LEAP, I wouldn’t have been able to have this experience. I am more prepared for my dream. Someday, I hope you will

be listening to my words and reading what I've written – about sports, news or anything else that matters to people here in Vermont." This student is now enrolled in college and studying broadcasting in Vermont.

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 December 2017 and can be found at https://dbvi.vermont.gov/resources/publications. (Appropriations 3460010000, 3460030000)

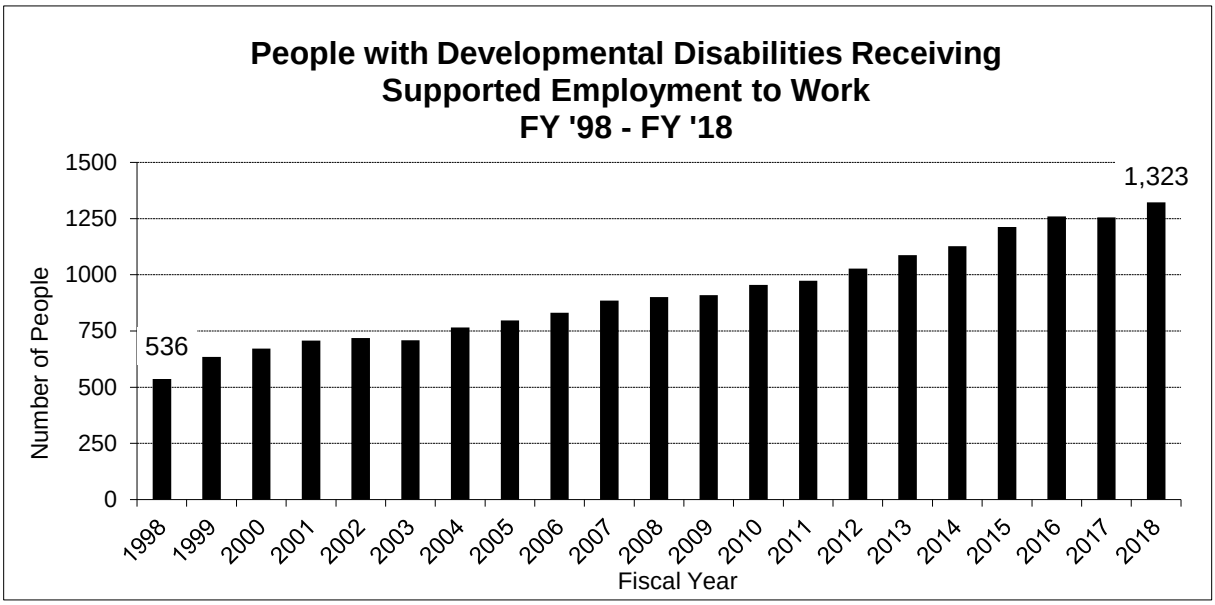
II. Developmental Disabilities Services Division (DDSD) is responsible for services to people with developmental disabilities and guardianship services to adults with developmental disabilities and older Vermonters. The DDSD works with private non- profit organizations to provide a broad array of long-term services and supports, including: service coordination, family supports, community supports, employment supports, residential support, crisis support, clinical interventions and respite. The DDSD supports Vermonters with developmental disabilities to make choices about how and where they live, pursuing their individual goals and preferences within their chosen communities. In partnership with our community provider system, the DDSD seeks to ensure basic human and civil rights, health, and well-being and safety for individuals with developmental disabilities. The DDSD provides leadership for disability policy and services in Vermont and meets federal and state mandates by developing and managing public resources. (Appropriations 3460010000, 3460050000)

Developmental Disabilities Services: Through a Master Grant Agreement with the Agency of Human Services, Developmental Disabilities Services (DDS) are provided by 15 Designated Agencies and Specialized Services Agencies with the goal of cost-effective, integrated community living. In SFY 2018, 3,166 Vermonters received comprehensive home and community-based services. Other services include Flexible Family Funding, Family Managed Respite, Bridge Program: Care Coordination, Targeted Case Management, grants supporting employment, transition to adulthood and post-secondary education and one 6-person Intermediate Care Facility. In SFY 2018, 1,323 people with developmental disabilities received supported employment services to work, 67 more people than the previous year.

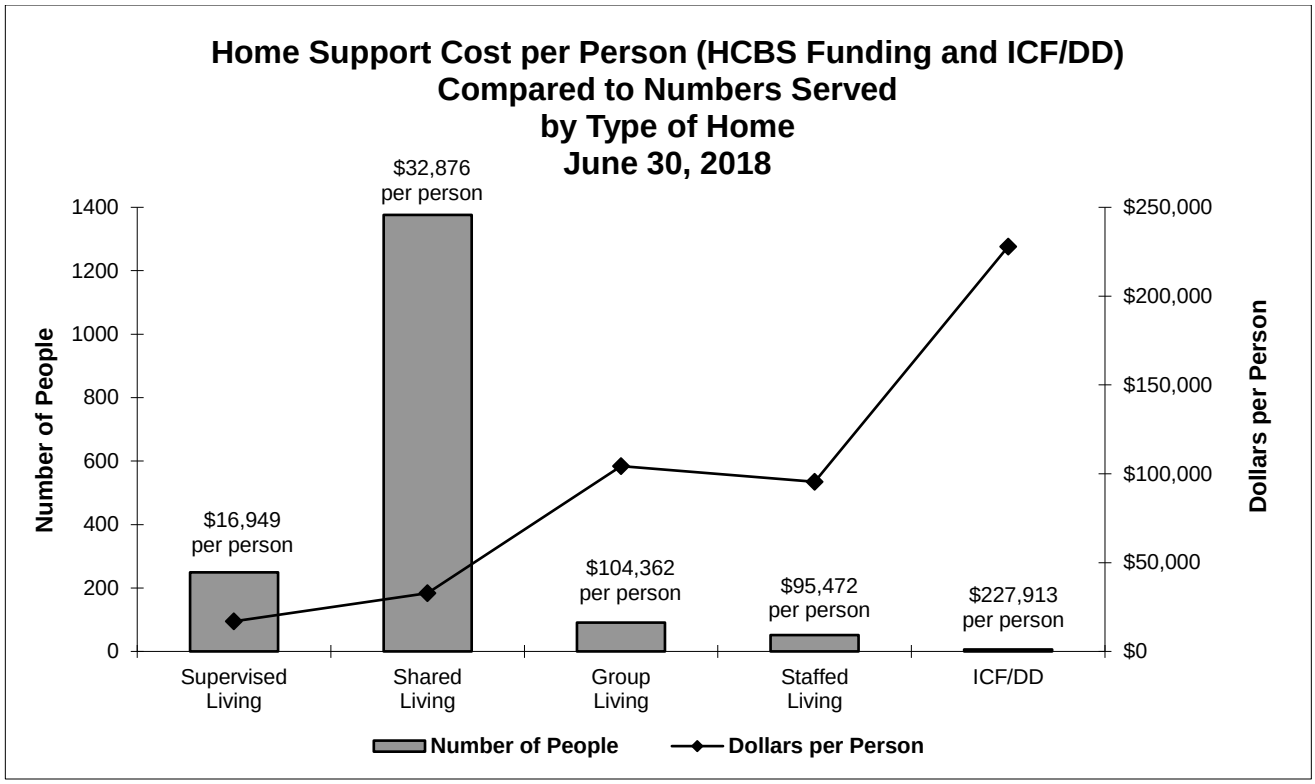
DDSD Performance Measures

How many people we serve: 4,612 individuals across all programs (unduplicated) in SFY 2018.

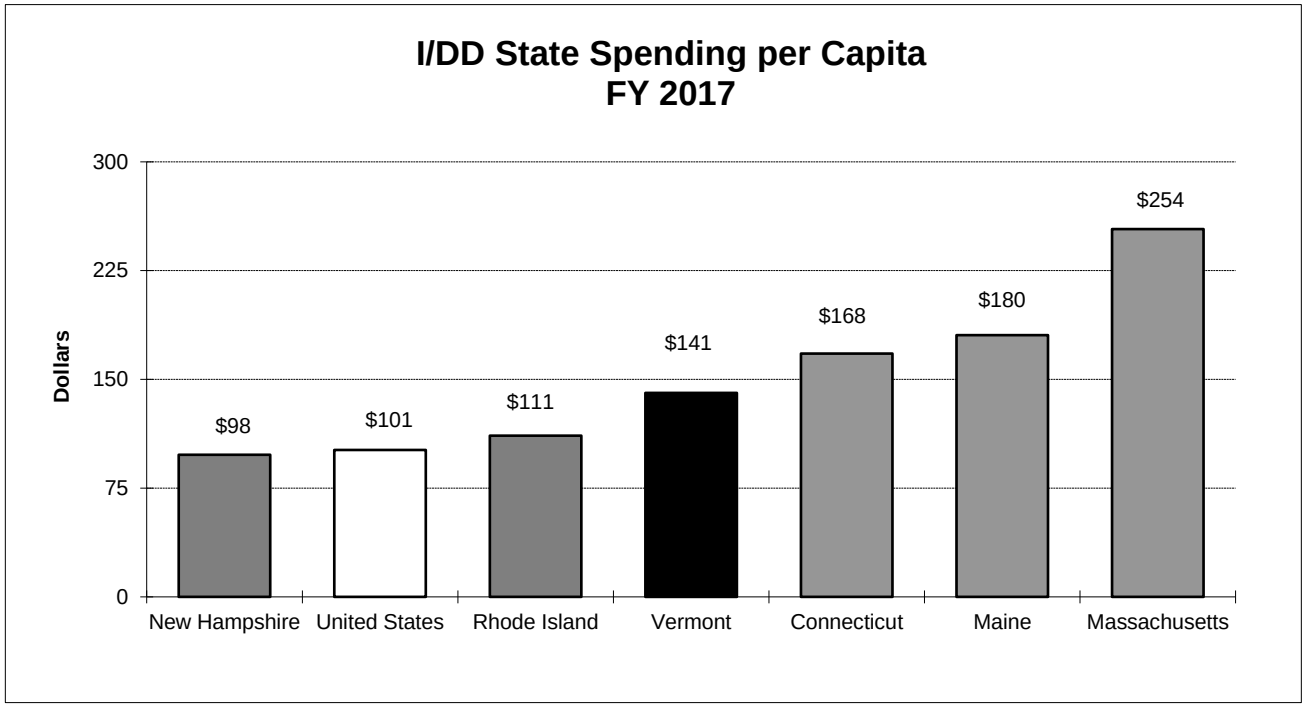
How well we serve them: Our employment services have been recognized as a national model with a 47% employment rate (SFY 2017). Vermonters served in developmental disability services are earning total wages of over $4.5 million a year.



- Vermont's home supports are individualized, based on an assessment that addresses goals, strengths and needs. Of the people receiving paid home supports, a high percentage (78%) live with a shared living provider. This model uses contracted home providers, offers personalized supports, and is generally more economical than other home support options. Staffed Living and Group Living arrangements have much higher per person costs because they are based on a 24-hour staffed model (see chart below). By developing and demonstrating success in the shared living model, Vermont has invested in personalized services at low cost. However, given the lack of affordable housing and the fact that Shared Living provides an affordable place for a person to live, this has contributed to an over-reliance on the Shared Living model and some limitations in options for more independent living.



- Vermont ranks in the middle of the New England states in spending of state dollars (including Medicaid match) per state resident for I/DD services – and is higher than the national average. Vermont is ranked 10th nationally in state spending per capita.



How people are better off*:*

- Vermont participates in the National Core Indicators (NCI) initiative. This is a voluntary effort by public developmental disabilities agencies to measure and track their own performance. The core indicators are standard measures used across states to assess the outcomes of services provided to individuals and families. Indicators address key areas of concern including employment, rights, service planning, community inclusion, choice, and health and safety. With 39 states participating in the Adult Consumer Survey, we can both track our own progress and compare our work with other states. The 2017 NCI survey results show adults (age 18 and over) receiving home and community-based services expressed the following:
    - 84% – Proportion of people who regularly participate in integrated activities in their communities [community inclusion: went shopping, on errands, for entertainment, out to eat].
    - 89% – Proportion of people who make choices about their everyday lives [residence, work, day activity, staff, roommates].
    - 66% – Proportion of people who make decisions about their everyday lives [daily schedule, how to spend money, free time activities].
    - 50% – Proportion of people who do not have a job in the community but would like to have one.
    - 5% – Proportion of people who were reported to be in poor health.

- Individual Service Plans are the cornerstone to personalized services and a self-determined life. Our NCI survey results for 2017 reported that 63% of the people in service said they were able to choose services they get as part of their service plans and 76% said their service coordinator asked them what they want. This is a critical area for improvement going forward.

- More Vermonters with disabilities are going on to post-secondary education than ever before and our "Think College Vermont", "College Steps" and "SUCCEED" programs are helping them get there. Of the 42 students enrolled in May 2018, 62% were employed while attending college. Last year five colleges and universities issued two-year certificates to 13 graduates, resulting in a 100% employment rate upon graduation. Two graduates matriculated into degree programs at Community College of Vermont and the University of Vermont.

Office of Public Guardian*:* The Office of Public Guardian (OPG) provides guardianship and other court-ordered supervision to people age 18 and older with developmental disabilities and to Vermonters age 60 and older. DDSD and OPG actively participate in the 'supported decision making' initiative to help people learn to make decisions about their own lives, promoting increased autonomy and self-determination and decreasing the need for guardianship.

- In SFY 2018, 755 adults received public guardianship services. This included 647 people with developmental disabilities and 108 adults over age 60. Six people received case management only. In addition, the program provides representative payee services to 344 people. (Appropriation 3460016210)

Current Initiative: DDSD, in collaboration with the Department of Vermont Health Access, is working with consumers, family members, the provider network and other stakeholders in a major initiative to develop a new payment model. The goals of this initiative are to streamline payment, increase person-centered flexibility, support achievement of meaningful outcomes and enhance transparency and accountability for service delivery and funding. This initiative will also help align DDSD payment and service delivery with broader health care reform activities and the All Payer Model.

III. Division of Licensing and Protection (DLP) includes two units that work to protect vulnerable adults and individuals receiving care in licensed and certified facilities. Survey and Certification (S&C) is the State Survey Agency for the State of Vermont. In this role, S&C surveys licenses or certifies health care providers to assess compliance with state and federal regulations and investigates complaints about these facilities. Adult Protective Services (APS) investigates allegations of abuse, neglect, and/or exploitation of vulnerable adults, and, where applicable, implements protective services. Appropriation (3460010000)

DLP Performance Measures

How many people we serve:

- In addition to regularly scheduled surveys, S&C conducted 307 onsite complaint and self-report investigations at health care facilities. In SFY 2017 we conducted 315 of these investigations.
- APS received 3,783 reports alleging the abuse, neglect, or exploitation of vulnerable adults, an increase of 15%.
- APS initiated 1,112 investigations from these reports, an increase of 31%.
- APS completed 792 investigations, an increase of 16%.
- APS placed 88 individuals on the Adult Abuse Registry, an increase of 11%.

How well we serve them:

- S&C completed 100% of their required federally regulated surveys on time.
- APS formalized the role of the APS Committee of the DAIL Advisory Board to ensure there is an ongoing avenue of information to APS from internal and external partners and advocacy organizations. The body advises APS on changes to the APS Policy Manual and monitors APS performance indicators.
- APS is holding annual public hearings to solicit feedback on performance and opportunities for improvement.

How people are better off*:*

- 8% of nursing homes had no deficiencies.
- 56% of nursing homes had deficiencies reflecting no actual harm but potential for harm.
- 36% of nursing homes had deficiencies reflecting actual harm or immediate jeopardy of residents.
- 88 individuals were placed on the Adult Abuse Registry in SFY 2018, compared to 79 in SFY 2017. These individuals, with substantiations of abuse, neglect or exploitation, will no longer be able to work in Vermont with vulnerable adults.

IV. Division of Vocational Rehabilitation (DVR) assists Vermonters with a disability to enter or re-enter the workforce through a wide variety of programs and individual support services. The core program (VR Section 110) enables Vermonters with a disability to assess their skills and abilities, identify a vocational goal, develop an Individualized Plan for Employment and receive services leading to meaningful employment. Historically DVR has invested in supported employment services for adults with developmental disabilities and youth with severe emotional disturbance. The Division operates a statewide Benefits Counseling Program to support Social Security beneficiaries to find work, and the Assistive Technology (AT) Project provides Vermonters with information and training on AT devices and services. (Appropriations 3460010000, 3460040000)

In 2014 the US Congress reauthorized the Rehabilitation Act via the Workforce Innovation and Opportunity Act (WIOA). WIOA is the first legislative reform of the public workforce system in more than 15 years. It strengthens and improves our nation's public workforce system and increases economic opportunities for individuals in the United States, especially youth and individuals with significant barriers to employment. In addition to increasing services to youth with disabilities, WIOA supports employer engagement, emphasizes competitive integrated employment, enhances accountability, and promotes collaboration between the Agency of Human Services, the Agency of Education, and the Vermont Department of Labor. In short, WIOA represents the most significant change in VR structure and practice in a generation.

The biggest impact of the WIOA legislation is the new requirement that VR agencies across the country devote 15% of DVR 110 federal grant funding to provide Pre-Employment Transition Services (Pre-ETS) for students still in high school, starting services as early as the freshman year. The goal of Pre-ETS is to engage students with disabilities earlier to improve their long-term employment and post-secondary educational outcomes. DVR has fully implemented Pre-ETS statewide to serve all of Vermont's 59 supervisory unions. In SFY 2018, DVR served 1,555 high school students statewide, approximately 20% of the eligible student population.

WIOA also introduced new Common Performance Measures (CPM) that core partners including DVR will be measured on. The measures are:

- Job retention six months post program exit
- Job retention twelve months post program exit
- Median earnings six months post program exit
- Credential attainment
- Measurable skills gains
- Employer satisfaction

Prior to WIOA, DVR had been primarily measured on how many people the program assisted to get a job. This significant shift from quantitative to qualitative measures requires a major paradigm shift in our service delivery system.

To respond to the paradigm shift, DVR launched a major Careers Initiative in 2017. Staff are focused on how to assist our customers to have not just a job, but a career. Components include a realignment of how we allocate our resources, modifications to the rehabilitation process, increased use of vocational assessment as a career counseling tool, the creation of a new dashboard to measure leading and lagging indicators and implementing Progressive Education. Progressive Education is a continuum of education and training experiences that overcome customers' barriers to employment and engage them in credential attainment and skills gains.

As an organization we have focused on our career paradigm shift with managers, supervisors and line staff. All staff have contributed to the revision to our mission, vision and guiding principles and supporting the shift from jobs to careers. Each of our 12 district offices has chosen a project to pilot that will support the Careers Initiative. Front line staff have ownership of their projects. Staff are excited and motivated to see their projects to successful completion. We expect to obtain rich and diverse information on what works in helping people to develop their own career pathways.

The DVR Implementation Team has several work groups on a variety of topics, including revamping our orientation program for new referrals. All district leadership teams have taken the White Belt Training on performance and process improvement and an Implementation Team work group is leading an effort to process-map all steps in the DVR rehabilitation process to identify ways to be more efficient and effective. Another group is focused on how to support a customer to have a short-term and a long-term vocational goal - the 'right now' job to pay the bills, and a career goal for the future.

As our new dashboard is created, we will develop scorecards that tell the story about our new performance measures. We are very hopeful that our new approach to serving customers will yield increased job retention and higher wages because consumers are

obtaining new skills, credentials and industry-recognized certifications. We are convinced our new way of working will assist people to have jobs that better match their goals, skills and values.

Linking Learning to Careers (LLC) is a 5-year statewide research project awarded to DVR by the U.S. Department of Education. This grant is an opportunity to improve career outcomes for Vermont students with disabilities by offering a menu of enhanced services on top of the core services already available through DVR Transition Counselors. LLC is a timely and direct complement to recent WIOA regulatory changes with Pre-Employment Transition Services and will provide valuable, real-world-tested insight into the most effective DVR practices for working with students. Throughout Vermont, 800 students will participate in the project with coordination and support from key LLC partners including the Community College of Vermont (CCV), Agency of Education, local schools, Mathematica Policy Research, TransCen, and others. As of November 2018, 673 students have enrolled in LLC.

In 2016, DVR entered into a contract to purchase the AWARE Case Management System, a customizable off-the-shelf IT solution used by over 30 VR agencies across the country. AWARE went live in September 2017. After a full year since 'go live', the system has proven very successful. DVR would not have been able to meet stringent new federal reporting requirements without AWARE. More importantly, staff and managers are very happy with the system and how it supports their work.

DVR Performance Measures

Since the passage of WIOA legislation in 2014, DVR has experienced a series of changes and disruptions that continue to reverberate through our systems and services:

- In 2015 the RSA's WIOA requirement that we allocate 15% of funds to serve youth in school required a major change to our Transition program. Fourteen counselor FTEs who helped youth achieve employment after leaving high school were redirected to serve only youth in school ages 14 and up with Pre-Employment Transition Services.
- In August 2016 VR experienced a $4.5 million budget cut (a 20% drop in our total budget), due to a drastic reduction in RSA re-allotment funds. This resulted in another loss in VR counseling capacity as 3 counselor positions were eliminated, and 6 counselor positions were moved to the LLC project.
- As a result, our counseling capacity to serve out-of-school eligible individuals who can achieve employment outcomes was reduced by 23 FTEs (of about 70 total FTEs, a one-third reduction) with a concomitant drop in our numbers served.
- In September 2017, VR went live with our new Aware case management system, moving our staff from a simple 30-year old system into a comprehensive modern web-based system that included the nearly 200 new data elements related to new WIOA reporting requirements. The significant work that went into implementation, learning the new system, and backfilling data now required by WIOA resulted in a predictable time-limited dip in productivity for our staff.

WIOA substantially changed federal reporting requirements and performance measures, and this has disrupted our ability to report performance measures for our services in the short term:

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- RSA's revised reporting instructions did not come into effect until July 2017 and are still undergoing changes. Hence, WIOA data collection for the VR program did not begin until SFY 2018.
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How many people we serve:

- 8,393 individuals were served in SFY 2018. 9,077 were served in SFY 2017.
- 7,120 people served in the core VR program. 8,177 were served in SFY 2017.
- 1,555 high school students served through Pre-Employment Transition Services only. 900 were served in SFY 2017.

How well we serve them*:*

Consumer surveys are conducted approximately every three years. Results from the 2016 survey show that:

- 97% of customers felt welcome when they went to DVR for services.
- 95% of customers would tell their friends with disabilities to go to DVR for help with employment.

DVR will be conducting a new consumer satisfaction survey in January 2019. The new survey will be the first to be conducted under the new focus on careers.

How people are better off:

- 901 individuals closed their VR case in SFY 2018 with successful employment. This means they:
    - Had met their individual employment goal
    - Had been employed for at least 90 days and were stable
- 33% had a wage above 125% of the minimum wage.

As noted, 901 cases out of 2415 cases 'closed' in SFY 2018 with successful employment. This rehabilitation rate of 37.3 % is far below our rehabilitation before WIOA (about 59%). This reflects the challenges that WIOA has presented to our system and our staff. A major contributor to this decrease in rehabilitation was our lost capacity to serve adults as we were obliged under WIOA to shift some counselor capacity from adults to youth, which required that we close cases for some adults before employment could be achieved. This was exacerbated by the loss of $4.5 million in federal VR re-allotment funds in SFY 17 that reduced overall capacity.

The WIOA legislation mandated that VR agencies significantly shift their priorities to providing "Pre-Employment Transition Services" (Pre-ETS) to students with disabilities in school, even prior to their applying officially for VR services. It also required that VR agencies reserve 15% of their grant awards for these Pre-ETS services. This new emphasis on introducing high school students to VR's career counseling, work-based learning, training, and support services should yield better career outcomes in the future. In the meantime, our primary task has been to reorient our staff and services to ensure we are meeting this new federal mandate.

Many States have struggled to meet the new federal Pre-ETS expenditure requirements and expand services for students. As a result, they are at risk of being out of compliance with the federal mandate and could potential lose funding. Vermont has met the 15% Pre-ETS funding reserve required by RSA in every year since the requirement was added:

- In 2015, only 25 out of 78 VR agencies nationwide did
- In 2016 and 2017, only 32 out of 78 VR agencies did

As mandated under WIOA, DVR has also dramatically expanded services to youth overall, and the percentage of population served who were under age 22 at entry into VR services has grown:

- In SFY 2014 (the last pre-WIOA year) 26% of all people served by DVR were youth under age 22.
- In SFY 2018 42% of all people served by DVR were youth under age 22, a 14% increase.

Providing real work-based learning experiences in real employment settings is one of the most effective ways to prepare students and youth for long term success. Therefore, DVR has invested more resources in providing these opportunities for students and youth. The percent of students and youth served by DVR who engaged in work-based learning experiences with real employers before age 22 has increased:

- SFY 2011-2014 (pre-WIOA) 15% of all VR youth served received a work-based

learning experience
- SFY 2015-2018 (post-WIOA) 23% of all VR youth served received a work-based learning experience
- In SFY 2018, 857 students and youth under age 22 had work-based learning experiences as part of their VR services.

V. <u>The Adult Services Division (ASD)</u> is responsible for managing a full array of long-term services and supports (LTSS) for older Vermonters and adults with physical disabilities. The primary source of funding for these services is Vermont Medicaid, the federal Older American's Act and State General Funds.

Medicaid Funded Long-Term Services & Supports Programs include:
- Adult Day Health Rehabilitation
- Adult High Technology Program
- Attendant Services Program
- Choices for Care
- Traumatic Brain Injury Program

Older American's Act (OAA) Services through Area Agencies on Aging include:
- Case management
- Nutrition Services and Programs
- Flex Funds (State funded only)
- Health Promotion and Disease Prevention
- Information, Referral and Assistance
- Legal Assistance
- Family Caregiver Support and
- Volunteer Outreach (State funded only)

Federal & State funded grants & contracts include:
- Commodity Supplemental Food Program
- Dementia Respite
- Employer Payroll Support for Self-Directed Services
- Health Insurance Counseling & Support (SHIP/MIPPA)
- Home Delivered Meals for People with Disabilities Under Age 60
- Long-Term Care Ombudsman Program
- Nursing Facility Quality
- Online Worker Registry
- Self-Neglect Initiative
- Senior Farmer's Market Nutrition Program

Choices for Care (CFC) is the largest Medicaid funded program managed by ASD, serving over 5,300 Vermonters. CFC is designed to support adult Vermonters living with a physical disability or condition related to aging, in the settings of their choice. Within CFC, there are three eligibility groups: Highest, High and Moderate Needs. Vermonters who are enrolled in the Highest or High Needs Groups meet nursing home level of care and can choose to receive services at home, in a nursing facility, Enhanced Residential Care (ERC) homes, or Adult Family Care (AFC) homes. Vermonters who are enrolled in the Moderate Needs Group live at home, do not meet nursing home level of care and have a choice of limited home and community-based services.

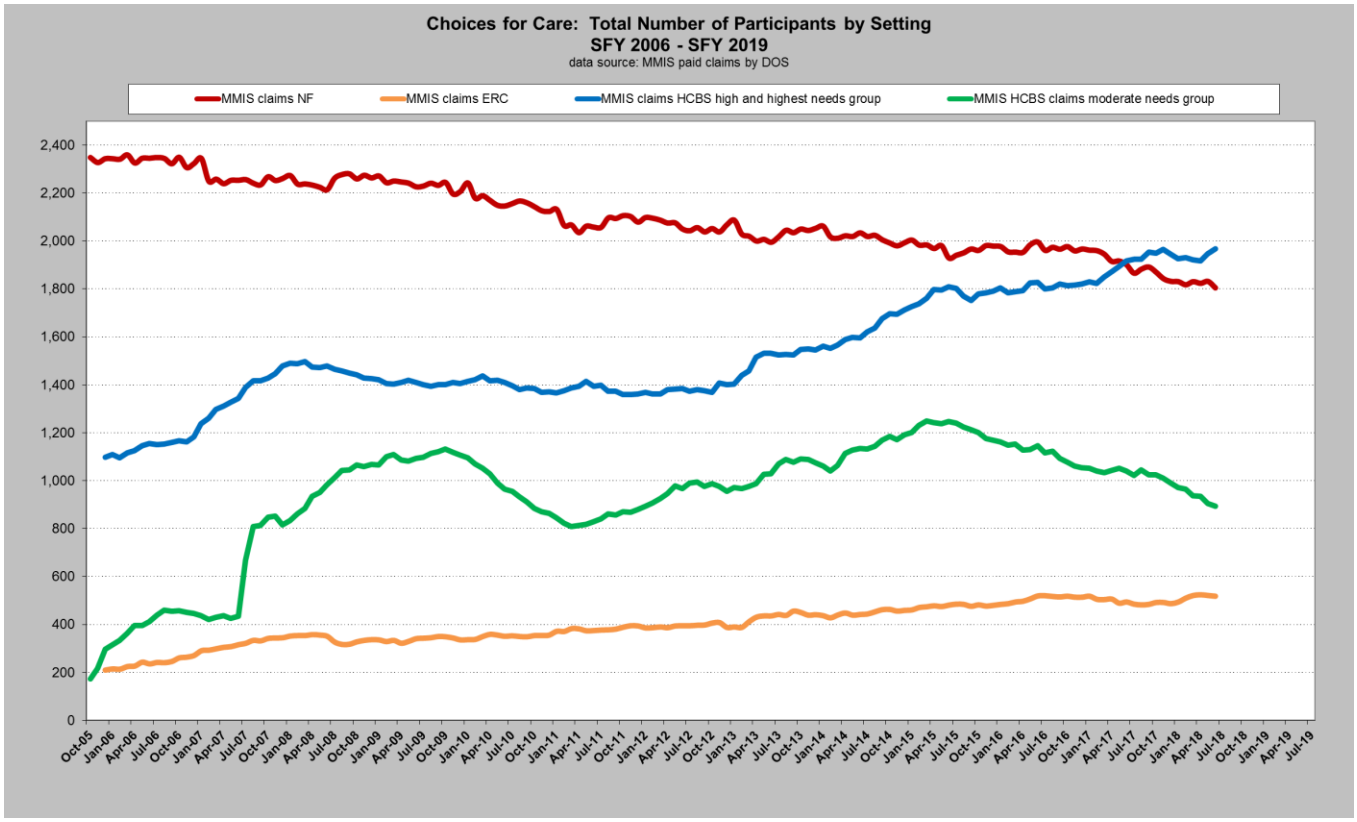
The success of Choices for Care is measured against several core objectives. Initially, reflecting the goal of supporting individual choice, the goal was to achieve a 60:40 balance between people receiving services in nursing facilities and people living in home-based and Enhanced Residential Care settings. Having achieved this goal, a new target of 50:50 was established, and this target was surpassed in January 2014. In SFY 2018, 45% of all people in the High/Highest Needs Groups were served in nursing facilities while 55% were served in home-based and Enhanced Residential Care settings.

How many people we serve:
As of June 2018, the total number of people enrolled in Choices for Care (High/Highest/Moderate) was 5,306, a 2% decrease from the total number of people enrolled in SFY17, primarily in the Moderate Needs Group. Anecdotal feedback regarding the decline in Moderate Needs enrollment suggests the primary cause is unmet workforce demands for homemaker services.

As of June 2018 (SAMS Enrollment Data)	SFY18	SFY17 - SFY18 % change
Total CFC Enrollments (high/highest/moderate)	5,306	-2%
Home-Based (HB) High/Highest Only	1,783	4%
Enhanced Residential Care (ERC) High/Highest only	501	2%
Nursing Facility High/Highest only	1,860	-2%
Total High/highest Group only	4,144	1%
Total Moderate Needs Group only	1,275	-5%
HB & ERC % combined total of High/Highest	55%	1%
NF % total of High/Highest	45%	-1%
% of CFC Clinical Eligibility Determinations <30 days	96%	3%
Moderate Needs Group Wait List end of SFY2018	880	6%

The table above shows point-in-time program enrollment from the SAMS database.

The graph below shows the actual numbers of people served (from paid Medicaid claims), which is slightly different.



How well we serve them*:*

- In SFY 2018, CFC managed spending within the limits of available funding, spending all but .6% of the budget resulting in a $1,178,535 carry forward.
- With limited funds, Moderate Needs providers continue to maintain regional wait lists, however, utilization of homemaker services has declined, primarily due to unmet workforce demands.
- As of July 2018, 96% of clinical eligibility decisions for high/highest applicants were made within 30 days of receiving an application. This performance met the 95% target.

How people are better off*:*

- Consistent with individual choice, in SFY 2018 the percentage of Choices for Care high/highest participants residing in a home-based setting increased by 4% since SFY 2017.
- In SFY 2018, the total combined home-based and ERC enrollments increased by 1% to 55% with nursing facility enrollments at 45%.

In 2018 ASD started using the National Core Indicators for Aging and Disabilities (NCI-AD) to survey participants of the Choices for Care and Traumatic Brain Injury programs. The resulting quality and consumer experience data will be available January 2019. As a

part of the State's Comprehensive Quality Strategy (CQS), DAIL plans to focus on:

% of people who report they get to do the things they want to do outside the home as often as they want to
% of people who report they can choose or change any of the services they receive
% of people who are not currently employed, who report they would like a paid job in the community
% of people who report they have a paid job in the community

Choices for Care (CFC) staff focus on ways to improve consumer experience, how services are delivered and paid for, and to integrate with healthcare reform efforts in Vermont. Work in SFY 2019 is expected to include:

- Assuring that all home-based settings meet requirements under the federal Home and Community-Based Services (HCBS) rules.
- Analyzing the first NCI-AD consumer survey data set and identifying, with stakeholder input, opportunities for program improvement.
- Implementing improved Adult Family Care (AFC) quality management activities.
- Continuing to engage with the Accountable Care Organization to improve integration of long-term services and supports (LTSS) with broader healthcare reform efforts.
- Exploring opportunities for a Moderate Needs payment and delivery reform pilot with the Department of Vermont Health Access (DVHA) and the Northeastern VT Regional Hospital community team.
- Updating the Choices for Care regulations within the DVHA Medicaid Health Care Administrative Rules framework.
- Improving payroll and claims processing procedures for self-directed participants.
- Implementing Electronic Visit Verification (EVV) for home-based services, as required by the federal CURES Act.

Choices for Care Summary - Expenses and # of People Served by Date of Service
Department of Disabilities Aging and Independent Living

Source: HP Claims Analysis View Universe; DLB 1/4/2015

Expenditures	QE 9-30-14	QE-12-31-14	QE 3-31-15	QE 6-30-15	QE 9-30-15	QE 12-31-15	QE 3-31-16	QE 6-30-16
Highest & High (includes all Case Management & Nursing Home)	$47,064,058	$45,778,687	$45,900,564	$44,841,245	$44,867,805	$46,182,642	$46,345,822	$44,852,138
Moderate	$1,099,365	$1,116,373	$1,146,029	$1,184,931	$1,149,410	$1,068,295	$1,103,624	$1,095,034
Total	$48,163,423	$46,895,060	$47,046,593	$46,026,176	$46,017,215	$47,250,937	$47,449,446	$45,947,172
Expenditures By Service Category								
Nursing Home	$31,397,458	$30,854,845	$29,824,521	$29,495,996	$29,574,032	$30,234,872	$29,314,604	$29,004,614
Adult Day (Moderate, High&Highest)	$1,276,089	$1,156,374	$1,056,233	$1,125,850	$1,140,543	$1,073,505	$1,108,544	$1,164,683
Case Management (HHA & AAA)	$1,059,132	$1,009,235	$1,122,176	$1,103,623	$964,932	$1,004,239	$1,143,711	$1,132,800
Homemaker	$650,016	$678,840	$721,193	$763,794	$724,134	$665,866	$664,420	$652,698
Respite/Companion	$2,481,391	$2,301,855	$2,877,740	$2,283,482	$2,200,414	$2,441,004	$2,908,262	$2,216,448
Enhanced Residential Care	$2,469,590	$2,542,302	$2,514,338	$2,627,485	$2,662,581	$2,714,692	$2,731,643	$2,823,567
Personal Care (by Agency)	$4,186,280	$4,235,083	$4,209,400	$4,327,998	$4,415,740	$4,404,009	$4,536,566	$4,448,593
Personal Care (Self Directed)	$3,329,016	$2,865,347	$3,227,779	$2,795,047	$2,987,478	$3,249,938	$3,437,464	$2,821,046
Flexible Choices	$1,080,820	$1,008,774	$1,259,249	$1,255,481	$1,114,557	$1,206,100	$1,359,168	$1,425,593
Misc (Assistive Devices, Emergency Response Systems, ISO)	$233,631	$242,405	$233,964	$247,420	$232,804	$256,712	$245,064	$257,130
Total	$48,163,423	$46,895,060	$47,046,593	$46,026,176	$46,017,215	$47,250,937	$47,449,446	$45,947,172
People Served								
* Highest & High (includes all Case Management)	5,452	5,512	5,729	5,648	5,483	5,502	5,590	5,561
**Moderate	1,249	1,301	1,333	1,353	1,292	1,263	1,225	1,199
Total	5,651	5,720	5,857	5,799	5,669	5,685	5,687	5,678

*includes all Case Management for Highest, High, and Moderate needs This duplicates people who are counted in Moderate needs.
** People in Moderate needs are also counted in Highest/High due to universal case management code.

People Served by Service Category								
Nursing Home	2,292	2,257	2,302	2,232	2,167	2,187	2,176	2,194
Adult Day (Moderate, High&Highest)	415	419	384	377	384	381	382	381
Case Management (HHA & AAA)	3,202	3,243	3,420	3,394	2,816	2,748	2,874	2,828
Homemaker	1,133	1,175	1,212	1,237	1,182	1,144	1,094	1,067
Respite/Companion	1,127	1,054	1,133	1,108	1,100	1,025	1,115	1,092
Enhanced Residential Care	493	503	509	516	501	507	517	542
Personal Care (by Agency)	783	792	788	792	791	776	790	784
Personal Care (Self Directed)	847	821	815	812	842	848	828	836
Flexible Choices	217	294	379	448	381	388	394	383
Misc (Assistive Devices, Emergency Response Systems, ISO)	1,283	1,290	1,250	1,243	1,251	1,279	1,281	1,261
Total	5,651	5,720	5,857	5,799	5,669	5,685	5,687	5,678

Choices for Care Summary - Expenses and # of People Served by Date of Service
Department of Disabilities Aging and Independent Living

Source: DXC Claims Analysis View Universe; DLB 12/10/2018

Expenditures	QE 9-30-16	QE 12-31-16	QE 3-31-17	QE 6-30-17	QE 9-30-17	QE 12-31-17	QE 3-31-18	QE 6-30-18
Highest & High (includes all Case Management & Nursing Home)	$48,518,962	$47,840,968	$47,928,283	$47,276,130	$49,689,430	$48,991,483	$47,969,860	$48,298,067
Moderate	$1,439,482	$1,347,613	$1,006,578	$1,025,861	$1,072,041	$1,066,896	$1,014,524	$1,001,554
Total	$49,958,444	$49,188,580	$48,934,862	$48,301,991	$50,761,472	$50,058,379	$48,984,384	$49,299,621
Expenditures By Service Category								
Nursing Home	$31,508,876	$31,733,086	$30,645,706	$30,422,133	$31,791,765	$31,064,245	$29,856,151	$30,208,298
Adult Day (Moderate, High&Highest)	$1,327,502	$1,225,627	$1,072,806	$1,205,817	$1,277,721	$1,257,507	$1,168,202	$1,244,929
Case Management (HHA & AAA)	$1,150,087	$1,120,241	$1,228,607	$1,260,911	$1,248,437	$1,269,799	$1,319,192	$1,271,317
Homemaker	$854,753	$815,589	$609,145	$611,294	$595,875	$571,178	$538,583	$529,560
Respite/Companion	$2,484,521	$2,240,772	$2,820,053	$2,293,591	$2,446,961	$2,301,653	$2,974,277	$2,362,134
Enhanced Residential Care	$2,958,994	$2,989,397	$2,928,363	$2,943,470	$2,943,240	$2,966,227	$3,080,385	$3,223,931
Personal Care (by Agency)	$4,617,023	$4,690,763	$4,619,208	$4,852,403	$5,168,736	$5,197,979	$5,236,749	$5,450,144
Personal Care (Self Directed)	$3,352,555	$2,814,626	$3,224,109	$2,844,677	$3,363,425	$3,457,414	$3,017,726	$3,033,949
Flexible Choices	$1,436,167	$1,268,663	$1,476,309	$1,525,072	$1,593,976	$1,583,573	$1,438,054	$1,605,376
Misc (Assistive Devices, Emergency Response Systems, ISO)	$267,967	$289,816	$310,556	$342,623	$331,335	$388,805	$355,065	$369,983
Total	$49,958,444	$49,188,580	$48,934,862	$48,301,991	$50,761,472	$50,058,379	$48,984,384	$49,299,621
People Served								
* Highest & High (includes all Case Management)	5,631	5,609	5,649	5,641	5,549	5,558	5,491	5,478
**Moderate	1,181	1,138	1,114	1,120	1,090	1,067	1,012	959
Total	5,760	5,720	5,727	5,712	5,635	5,629	5,561	5,564

*includes all Case Management for Highest, High, and Moderate needs This duplicates people who are counted in Moderate needs.

** People in Moderate needs are also counted in Highest/High due to universal case management code.

People Served by Service Category								
Nursing Home	2,270	2,249	2,261	2,235	2,169	2,148	2,122	2,114
Adult Day (Moderate, High&Highest)	377	365	358	371	393	404	378	376
Case Management (HHA & AAA)	2,832	2,834	2,859	2,864	2,875	2,867	2,805	2,783
Homemaker	1,060	1,019	999	1,000	961	924	878	832
Respite/Companion	1,091	995	1,064	1,054	1,053	1,006	1,114	1,087
Enhanced Residential Care	559	552	554	552	526	531	556	558
Personal Care (by Agency)	812	811	828	854	850	851	835	860
Personal Care (Self Directed)	859	828	825	811	843	875	873	873
Flexible Choices	372	364	384	455	442	441	410	424
Misc (Assistive Devices, Emergency Response Systems, ISO)	1,276	1,295	1,296	1,310	1,302	1,357	1,356	1,376
Total	5,760	5,720	5,727	5,712	5,635	5,629	5,561	5,564

Choices for Care Summary - Expenses and # of People Served by Date of Service	
Department of Disabilities Aging and Independent Living	
Source: DXC Claims Analysis View Universe; DLB 12/10/2018	
Expenditures	QE 9-30-18
Highest & High (includes all Case Management & Nursing Home)	$50,045,481
Moderate	$913,132
Total	$50,958,612
Expenditures By Service Category	
Nursing Home	$31,474,071
Adult Day (Moderate, High&Highest)	$1,234,170
Case Management (HHA & AAA)	$1,071,063
Homemaker	$498,192
Respite/Companion	$2,418,176
Enhanced Residential Care	$3,206,639
Personal Care (by Agency)	$5,655,771
Personal Care (Self Directed)	$3,459,317
Flexible Choices	$1,581,724
Misc (Assistive Devices, Emergency Response Systems, ISO)	$359,490
Total	$50,958,612
People Served	
* Highest & High (includes all Case Management)	5,292
**Moderate	911
Total	5,447
*includes all Case Management for Highest, High, and Moderate needs This duplicates	
** People in Moderate needs are also counted in Highest/High due to universal case ma	
People Served by Service Category	
Nursing Home	2,044
Adult Day (Moderate, High&Highest)	369
Case Management (HHA & AAA)	2,539
Homemaker	799
Respite/Companion	1,070
Enhanced Residential Care	531
Personal Care (by Agency)	871
Personal Care (Self Directed)	880
Flexible Choices	418
Misc (Assistive Devices, Emergency Response Systems, ISO)	1,394
Total	5,447

The Traumatic Brain Injury (TBI) Program serves Vermonters with moderate to severe brain injuries, diverting or returning them from hospitals and facilities to community-based settings. The TBI Program focuses on independent living, with increased emphasis on rehabilitation culminating in graduation from the TBI Program. In SFY 2015 the program was selected to participate in the Department of Finance and Management's Performance Measurement Pilot Project. As part of this pilot, the program began measuring performance related to: employment; transitioning people who reach their maximum rehabilitation potential to independent living; and transitioning people who have reached their maximum rehabilitation potential, but who have a continued need for services.

How many people we serve:
In SFY 2018 the TBI program served 91 people.

How well we serve them*:*
One goal of the TBI program is to prevent the need for a person to go to a specialized out of state facility. In SFY 2018, the average cost per person receiving TBI services in Vermont was approximately $188/day. Out-of-state specialty facilities cost from $350-$650 per day. It's estimated that for each person that is successfully diverted from a specialized out-of-state facility the state saves at least $59,000 per person per year.

How people are better off:
- 27% of people served in TBI home and community-based services rehabilitation services were employed in SFY 2018, which met the 25% target (2% increase from SFY 2017).
- 5 people served in the rehabilitation program met their rehabilitation goals and graduated to independent living in SFY 2018. This number remained the same as in SFY 2017.

DAIL was also chosen by the federal Administration for Community Living (ACL) as one of 24 recipients of a three-year cooperative agreement under two new funding opportunities for ACL's TBI State Partnership Program. The goal of this grant is to create and strengthen a system of services and supports that maximizes the independence, well-being, and health of people with traumatic brain injuries across the lifespan, their family members, and their support networks. Vermont will receive approximately $150,000 per year for three years (2018-2022).

In 2018, the TBI program joined the National Core Indicators (NCI) for Aging & Disabilities which will provide national comparison of consumer experience data by January 2019.

Older Americans Act (OAA) Services support Vermonters age 60 and older and are

designed to help older Vermonters remain as independent as possible and to experience a high quality of life. Services are provided through Vermont's five AAAs, Aging & Disabilities Resource Connections, Vermont Legal Aid. Vermont enhances the federally funded OAA work by funding services through the Area Agencies on Aging (AAAs) to support caregiver respite for people with dementia, support for people who self- neglect, and senior nutrition services through the Vermont Food Bank and Northeast Organic Farming Association of Vermont. Services include:

- Aging & Disabilities Resource Connections (ADRC)
- Information, Referral & Assistance
- Options Counseling
- Case Management
- Dementia Respite and Family Caregiver Support
- Health and Wellness
- Health Insurance Counseling
- Home Delivered and Community Meals
- Legal assistance
- Nutrition Services
- State Long-Term Care Ombudsman

How many people we serve (FFY 2017)*: NOTE: FFY 2018 OAA data will not be final/confirmed until early 2019.*

- 58,956 Vermonters over the age of 60 received services in FFY 2017 (1% decrease).
- 5,845 seniors received home delivered meals in FFY 2017 (4% increase).
- 13,668 Vermonters participated in congregate meals in FFY 17 (2% increase).
- 316,726 community meals were served in FFY 2016 (10% decrease).
- 963 Vermonters were served in SFY 2018 in the Senior Farmer's Market Nutrition Program (5% increase), while 15 farms and 62 housing sites participated.
- 325 family caregivers received Dementia Respite Grant funding in SFY 2018 (27% increase), while a new caregiver assessment tool was developed to guide identification of caregiver needs and to improve/target caregiver supports.

How well we serve them**:**

The AAAs implemented new statewide measures for home delivered meals:

- In SFY 2018 95% of people receiving home delivered meals reported that they have enough to eat.
- In SFY 2018 86 % of people receiving home delivered meals reported that meals help manage or improve their medical condition.

The AAAs also collaborated on new case management performance measures and data collection. 10% of people receiving OAA case management across all agencies will be surveyed in SFY 2019 on these measures:

- % of case management clients who are living in the setting of their choice
- % of case management clients who report that their unmet needs were addressed

New State Plan on Aging:

In SFY 2018 the State Unit on Aging team facilitated a statewide needs assessment and worked closely with the Area Agencies on Aging and stakeholders to create and launch the new Vermont State Plan on Aging (FFY 2019 - 2022). The new plan includes the following goals and objectives:

GOAL 1: SUPPORT HEALTHY AGING FOR ALL

- Objective 1.1: Increase older Vermonter participation in evidence-based falls prevention interventions and programs.
- Objective 1.2: Increase behavioral health prevention, treatment and recovery for older Vermonters.
- Objective 1.3: Increase engagement to reduce impacts of isolation and loneliness on health and wellbeing of older Vermonters.
- Objective 1.4: Increase meaningful employment opportunities for older Vermonters to support health and financial security of individuals and a prosperous economy.

GOAL 2: STRENGTHEN CORE OLDER AMERICANS ACT SERVICES THAT SUPPORT OLDER VERMONTERS IN GREATEST ECONOMIC AND SOCIAL NEED

- Objective 2.1: Information and Referral/Assistance (I&R/A): Improve I&R/A statewide so that all older Vermonters and people with disabilities who seek I&R/A through the Senior Helpline will have a consistent and high-quality experience.
- Objective 2.2: Nutrition: Increase food security of older Vermonters through the Home Delivered Meal program.
- Objective 2.3: Case Management: Support older Vermonters to live in settings they prefer through high quality case management (both OAA and Choices for Care), including person-centered planning.
- Objective 2.4: Family Caregiver Support: Ensure family caregivers of older adults are well supported through access to assessment, education, training and respite.

GOAL 3: BOLSTER THE SYSTEM OF PROTECTION AND JUSTICE FOR OLDER VERMONTERS

- Objective 3.1: Improve prevention efforts to protect vulnerable older adults against abuse, neglect and exploitation while maximizing their autonomy, with a focus on financial exploitation.
- Objective 3.2: Increase awareness of Vermont’s programs that protect vulnerable older adults, including Adult Protective Services, Office of Public Guardian, the Long-Term Care Ombudsman Program, and Legal Services.

Budget Testimony – Additional Information

- **Crosswalk Spreadsheet (UPS and DOWNS) -** The requested SFY 2020 Budget Development Form provides the information requested by the Appropriation Committees. This was previously sent by the Agency of Human Services central office.

- Additional Requested Information (VANTAGE REPORTS) - The requested forms, which were not included in the AHS Budget Books, are included in the attached packet of information.

- Budget Fact Sheet

  - SFY 2020 TOTAL DAIL PROPOSED BUDGET - $514,226,407
    - General Fund – 5.1%
    - Global Commitment – 87.9%
    - Federal Fund – 6.1%
    - Special and Interdepartmental Funds – less than 1%

SFY 2020 DAIL PROPOSED BUDGET BY DIVISION

	DIVISION	TOTAL	% of	Fund Split		
				GF	GC	Federal/Other
1)	**Developmental Disabilities Services Division**	$ 236,218,146	46%	1.8%	97.1%	1.1%
	(includes DS Waiver)					
2)	**Adult Services Division**	$ 242,292,323	47.2%	3.9%	91.7%	4.4%
	(includes AAA, Attendant Services Programs, Day Health Rehab Services and Choices for Care)					
3)	**Vocational Rehabilitation**	$ 22,854,295	4.4%	19.5%	0.00%	80.5%
4)	**Blind and Visually Impaired**	$ 2,791,932	0.5%	23.2%	8.8%	68%
5)	**Licensing and Protection**	$ 4,933,739	0.9%	50.2%	0%	49.8%
6)	**Commissioner's Office**	$ 5,135,972	1%	97.8%	0%	2.2%
	Totals	**$ 514,226,407**	**100**			

Summary of Changes from SFY 19 Base Budget to SFY 20 Proposed Budget

Total Change SFY 19 to SFY 20 Recommended Budget	**$16,850,256**
(All Gross Dollars)	
DAIL SFY 20 Ups & Downs	$9,477,642
DVHA SFY 20 Ups & Downs (Long Term Care - Choices for Care)	$7,372,614
DAIL Administration & Support Section	
Total SFY 19 Base Appropriation	$37,063,297
SFY 20 net increase in Administration & Support	$1,258,093
SFY20 Recommend	**$38,321,390**
Positions: Current positions = 277 (*281 employees as 4 positions are shared*)	
Disabilities, Aging, and Independent Living – Aging and Adult Services Grants	
Total SFY 19 Base Appropriation	$20,067,904
Proposed Changes:	
1) Utilization adjustment Attendant Services Program Medicaid	($150,000)
2) BAA Item - ASFCME Collective Bargaining Agreement Year 1	65,300
3) ASFCME Collective Bargaining Agreement Year 2	68,203
4) Reduction to GC Investment – SASH Grant	($541,947)
5) Internal Service Fund reduction – Workers Compensation Policy reduction (plan changes are allocated to DAIL)	($6,378)
SFY20 Recommend	**$19,503,082**
Blind and Visually Impaired Division	
SFY 19 Base Appropriation	$1,451,457
Proposed Changes:	
1) BAA Item – Budget Neutral GC MCO increase to Vermont Association for the Blind and Visually Impaired. (from GC MCO Severely Functionally Impaired (SFI) Funds.)	$60,000
2) BAA Item – budget neutral – moving Independent Living Part B to DBVI from VR	$150,000
SFY20 Recommend	**$1,661,457**

Vocational Rehabilitation Division	
SFY 19 Base Appropriation	$7,174,368
1) BAA Item – budget neutral, moving Independent Living Part B to DBVI from VR	($150,000)
SFY20 Recommend	**$7,024,368**

Developmental Services Appropriation	
SFY 19 Base Appropriation	$221,097,985
Proposed Changes	
1) BAA Item – budget neutral GC MCO Decrease to Severely Functionally Impaired (SFI) budget that resided for DAIL in the DS appropriation. Corresponding increase in DBVI Grants for Vermont Association for the Blind and Visually Impaired	($60,000)
2) DS Caseload – 373 individuals @37,588 =$14,020,324 less Equity Fund ($6,398,899) = $7,621,425	$7,621,425
3) DS Public Safety/Act 248 Caseload 18@$74,122=$1,334,196	$1,334,196
4) DS Caseload utilization trend adjustment	($541,947)
5) Internal Service Fund reduction – Workers Compensation Policy reduction (plan changes are allocated to DAIL)	($218,842)
6) BAA Item – ASFCME Collective Bargaining Agreement Year 1	$793,688
7) ASFCME Collective Bargaining Agreement Year 2	$828,964
8) BAA Item – Allocation of AHS-wide Grants reduction plan (AHS-net neutral)	($707,945)
Total changes	$9,049,539
SFY 20 Recommend	**$230,147,524**
Traumatic Brain Injury (TBI) Program	
SFY 19 Base Appropriation	$6,005,225
1) Utilization trend decrease	($325,168)
SFY 20 Recommend	**$ 5,680,057**

Choices for Care (CFC) 1115 Demonstration Waiver	
(appears in DVHA's budget)	
CFC Spending Plan - Each year, DAIL creates a spending plan year using the amount appropriated to the long-term care budget. This includes estimated expenditures for nursing homes, home and community-based services and other Medicaid acute/primary care costs for Choices for Care participants. Once we have our final SFY 20 budget, we will develop a plan for that fiscal year.	
SFY 19 Base Appropriation	$204,515,915
1) Statutory Nursing Home rate increases (net of reduction due to decrease in utilization)	$841,791
2) Home and Community Based caseload pressure 56 x $31,958	$1,789,648
3) BAA Item – ASFCME Year 1	$533,145
4) ASFCME – Collective Bargaining Agreement Year 2	$556,841
5) Vermont Vets Home SFY18 Cost Settlement	$3,779,395
6) Internal Service Fund reduction – Workers Compensation Policy reduction (plan changes are allocated to DAIL)	($128,206)
Total Changes	$7,372,614
SFY 20 Recommend	**$211,888,529**

DEPARTMENT OF DISABILITIES, AGING, & INDEPENDENT LIVING
ADMINISTRATION BUDGET BY DIVISIONS SFY20

	TOTAL	VR	DBVI	DDSD	ASD	L & P	Com office	TOTAL
PERSONAL SERVICES DETAIL								
SFY20 Classified Salary	19,021,313	7,940,710	608,837	3,184,488	2,824,428	3,075,864	1,386,986	19,021,313
Exempt Salary Total	596,873	-	-	-	78,912	-	517,961	596,873
Salary Total	**19,618,186**	**7,940,710**	**608,837**	**3,184,488**	**2,903,340**	**3,075,864**	**1,904,947**	**19,618,186**
FICA	1,500,791	607,463	46,576	243,613	222,106	235,304	145,729	1,500,791
HEALTH	3,901,150	1,817,636	109,589	627,340	512,006	478,949	355,630	3,901,150
RETIREMENT	3,969,096	1,610,372	123,470	645,812	588,797	623,784	376,861	3,969,096
DENTAL	239,693	111,978	7,894	34,255	33,169	29,730	22,667	239,693
LIFE	82,789	33,510	2,569	13,439	12,252	12,980	8,039	82,789
LTD	5,720	2,037	210	431	396	495	2,151	5,720
EAP	8,711	3,999	310	1,395	1,085	1,178	744	8,711
Fringe Benefits Total	**9,707,950**	**4,186,995**	**290,618**	**1,566,285**	**1,369,811**	**1,382,420**	**911,821**	**9,707,950**
Unemployment	135,418	11,151	696	66,630	53,467	1,925	1,549	135,418
WC/ Other Ins	227,400	-	-	-	-	-	227,400	227,400
Emp room allowance	15,470	-	-	8,583	6,887	-	-	15,470
Tuition	40,000	36,000	4,000	-	-	-	-	40,000
Overtime	50,000	20,999	2,080	6,965	9,583	5,754	4,618	50,000
Temp Employee	268,310	243,918	0	8,125	6,520	9,747	0	268,310
Contracts	3,385,973	1,501,091	30,483	854,708	685,862	168,686	145,143	3,385,973
Vacancy Savings	(851,118)	(409,031)	(22,702)	(113,398)	(85,020)	(94,020)	(126,947)	(851,118)
Sub-Total Misc Personal Services	3,271,453	1,404,128	14,556	831,613	677,300	92,092	251,763	3,271,453
TOTAL PERSONAL SERVICES	**32,597,589**	**13,531,833**	**914,011**	**5,582,386**	**4,950,451**	**4,550,376**	**3,068,531**	**32,597,589**
Number of employees by Division	**281**	**129**	**10**	**45**	**35**	**38**	**24**	**281**

OPERATING DETAIL	TOTAL	VR	DBVI	DDSD	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	1,356,395	103,845	113,519	-	-	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	643,202	159,339	25,272	64,373	97,889	92,303	204,026	643,202
Insurance other than Empl Bene	34,200	1,548	2,355	2,882	2,314	18,177	6,924	34,200
Insurance	39,317	0	0	-	-	0	39,317	39,317
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 cicuuits, 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						327,006	327,006
DII Assesment	278,831	-	-	-	-	-	278,831	278,831
ADS Allocation Exp	350,116						350,116	350,116
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	105,642	52,398	5,705	7,033	5,644	14,790	20,072	105,642
Travel - Total	614,941	208,243	16,712	168,690	68,974	128,036	24,287	614,941
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	349,720	-	-	-	-	-	349,720	349,720
HR Services	179,795	-	-	-	-	-	179,795	179,795
Other Operating	2,000	992	108	133	107	280	380	2,000
TOTAL	5,723,801	2,298,094	216,463	488,236	270,204	383,363	2,067,441	5,723,801
TOTAL ADMINISTRATION	**38,321,390**	**15,829,927**	**1,130,475**	**6,070,622**	**5,220,655**	**4,933,739**	**5,135,972**	**38,321,390**

ADMINISTRATION - RECEIPTS	Total	VR	DBVI	DDSD	ASD	L & P	COMM	TOTAL
FEDERAL FUNDS								
TITLE 18 SURVEY & CERT; 93.777	1,476,899					1,476,899		1,476,899
TITLE 19 SURVEY & CERT; 93.777	845,652					845,652		845,652
IND LIVING PART B; 84.169	120,000	120,000						120,000
TITLE III E; 93.052	433,000				433,000		0	433,000
SECTION 110; 84.126	8,294,143	8,294,143						8,294,143
SSA - Promoting Opportunity Demonstration	60,000	60,000						60,000
SECTION 110 DBVI; 84.126	781,858		781,858					781,858
Senior Employment; 17.235	20,447			20,447				20,447
ASSISTIVE TECH. GRANT; 84.224	178,000	178,000						178,000
SHIP; 93.779	17,000				17,000			17,000
Money Follows the Person; 93.971	700,000				700,000			700,000
Social Services Block Grant; 93.667	380,107			380,107				380,107
SIMS Grant; 93.624	35,594						35,594	35,594
WIPA; 96.008	110,000	110,000						110,000
Medicaid 93.778	3,719,464	0	64,976	1,471,421	1,964,879	138,615	79,573	3,719,464
Linked to Learning Careers 84.421	1,684,162	1,684,162						1,684,162
Total Federal	18,856,326	10,446,305	846,834	1,871,975	3,114,879	2,461,166	115,167	18,856,326
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	-	-	1,390,457
								0
Interdepartmental Transfers								0
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	-	-	-	100,000	-	1,066,284
General Fund	17,008,323	3,095,449	259,073	4,174,236	2,086,187	2,372,573	5,020,805	17,008,323
TOTAL RECEIPTS	**38,321,390**	**15,829,927**	**1,130,475**	**6,070,622**	**5,220,655**	**4,933,739**	**5,135,972**	**38,321,390**

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
Commissioner's Office			
People age 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 (SFY2018): SASH operates 54.5 active 'panels' in affordable housing communities, with the capacity to serve over 5,400 participants. Performance: Improve Identification of Social Isolation: 5/2017: 41% 5/2018: 51.7% Improve Identification of Suicide Risk: 5/2017: 22.1% 5/2018: 25.6% Substance Use Screening: 5/2017: N/A 5/2018: 25% (baseline)	$432,076 GC/MCO All inclusive
People with disabilities	***Home Access Program (HAP):*** DAIL transfers $100,000, to the Vermont Housing and Conservation Board (VHCB) to support VCIL's HAP Program which provides information, assistance, and referral services to help people with physical disabilities locate and secure funding for home modifications.	Performance (SFY2018): VHCB manages the Home Access Program grant and performance measures.	$100,000 GF
People age 60 and over and adults with disabilities	***Homesharing***: DAIL supports two innovative Homeshare Programs in Vermont: HomeShare Vermont is active in Addison, Chittenden, Franklin and Grand Isle Counties; HomeShare Now is active in 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 Programs have been successful in helping people stay in their own homes, as well as in helping people find affordable housing.	Performance (SFY2018): • 318 Vermonters in "matches." • 149 Vermonters provided affordable housing. • 100% 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. • 55% of matched home providers reported they would be unable to remain safely and comfortably at home without a home sharer.	$327,163 GC/MCO

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
Division for the Blind and Visually Impaired			
People who are blind or visually impaired	***DBVI Vocational Vision Rehabilitation Program*** Federal law - 29 United States Code (U. S. C), chapter 16 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.	Performance (FFY2018): • 259 people served. • 48 individuals successfully achieved their employment goals. Individuals who did not achieve their goals will continue to receive services in FFY 19. **Statewide Survey**--Statewide Survey Results FFY 2017 (Conducted by Market Decisions; next statewide survey scheduled for FFY 2020): • 93% of DBVI consumers are satisfied with the DBVI vocational rehabilitation program. • 93% of DBVI consumers feel they are better off as a result of the services I received from DBVI.	$928,612 Gross
People who are blind or visually impaired	***Independent Living Services*** helps people who are blind or visually impaired learn skills to remain independent in their homes and communities.	Performance (FFY2018): • 86 people were served.	$74,395 Federal
People who are blind or visually impaired and over age 55	***Older Blind Program*** helps people who are blind or visually impaired and over the age of 55 learn skills to remain independent in their home and communities. Services are provided through a grant with the Vermont Association for the Blind and Visually impaired.	Performance (FFY2018): • 862 people were served.	$225,000 Federal
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 (FFY2018): • 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

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
People with disabilities	***IL Part B*** is a grant to the Vermont Center for Independent 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 (SFY2018): • Peer Advocacy Counseling Program (overall, including federal funds)- 476 individuals served • Sue Williams Freedom Fund: 47 individuals served	$150,000 Gross
Adult Services Division			

People age 60 and over	***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**.**	Performance (FFY2017): *NOTE: FFY2018 data will not be final/confirmed until early 2019:*
		• Overall, 58,956 people served (1% increase).
		• Home delivered Meals:
		  ○ 5,845 people served (4% increase).
		  ○ 786,756 meals served (3% decrease).
		• Congregate Meals:
		  ○ 13,668 people served (2% increase).
		  ○ 316,726 meals served (10% decrease).
		New State RBA performance measures began in FFY2017:
		• 95% of home delivered meals consumers reported they had enough to eat.
		• 84% of home delivered meals consumers reported that meals help manage or improve their medical condition.
			Approx. $12M Total
			Approx. $5M GF

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
Family caregivers of people with Alzheimer's Disease and Related Disorders	***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.	Performance (SFY2017): • 325 people served (27% increase). • Caregivers used funds for: time off for preventative health efforts, socialization with peers, financial assistance for supplemental services, and support so caregiver can continue working. • A new caregiver assessment tool was developed to guide identification of caregiver needs and to improve/target caregiver supports.	$250,000 GF
Adults under age 60 with disabilities	***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.	Performance (SFY2018): • 523 people served (2% decrease). • 98% of respondents to a consumer survey reported that meals helped maintain their health. • 99% of respondents to a consumer survey reported that staff were easy to reach when help was needed.	Approx. $475,463 GF
People age 60 and older	***Self-Neglect*** Vermont's five Area Agencies on Aging (AAA) work with people identified with "self-neglect" behaviors with the goal of improving their quality of life by reducing possible risk and harm to self, others and the environment.	Performance (SFY2018): • 81 people were served statewide in self-neglect services by the five AAAs. New performance measures were implemented mid-year that focus on individual and provider engagement with the person, which is the biggest challenge with people who are considered self-neglect. Data represents approximately half of the fiscal year. • 68 % of people served had complete assessments. • 69% of people served had goals. • 47% of people with goals had goals with provider engagement.	$265,000 GC

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
Adults living in congregate housing and Vermont farms	***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.	Performance (SFY2018): • 963 people served (5% increase). • 15 farms participated (7% increase). • 62 housing sites participated (2% increase).	Approx. $46,000 FF
Adults living in licensed long-term care facilities and all Choices for Care participants.	***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.	Performance (FFY2018): • Closed 372 cases that included 555 complaints. 523 (94.2%) of the closed complaints were verified. • Provided 440 consultations to individuals in long-term care facilities (10% increase). • Provided 136 consultations to people receiving HCBS (11% increase). • Provided 158 consultations to long term care facility providers (13% increase). • Provided 61 consultations to HCBS agencies/providers (33% decrease). • Approximately 86% of complaints were fully or partially resolved to the satisfaction of the individuals receiving services which is well above the 75% target and national average. • 100% of all long-term care facilities were visited each quarter, exceeding the 95% target. • Made 788 non-complaint related visits to maintain a presence in facilities (22% decrease).	$700K approx Total

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
People age 60 and over, adults with physical disabilities, and their families	***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.	Performance (SFY2018): High/Highest as of July 2018: • 5,306 people enrolled all settings (2% decrease). • 55% of all high/highest enrollments in home-based and ERC settings combined (1% increase). • 45% of all high/highest in nursing facilities (1% decrease). • 96% of clinical determinations (high/highest) were completed within 30 days or less (target 95%). Moderate Needs as of July 2018: • 1,275 people enrolled (5% decrease). • Reduction in enrollments primarily in Homemaker Services, likely due to workforce demands. (Note: NCI data will be available in CY2019.) *Source: SAMS enrollments*	DVHA appropriation (LTC component) $211,888,529 Gross
People transitioning from nursing homes to the community	***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.), and enhanced FMAP on all HCBS for each person enrolled and transitioned to approved housing. The period of enrollment is 365 days.	Performance (CY2018): • CY2018: projected to reach 367 cumulative transitions, surpassing the target of 332 by 11%. • CY2018: as of 9/30/18, 2% reduction in readmissions from CY2017. • In SFY2018, the MFP program created a required phase-down plan which began with the discontinuation of new MFP enrollments as of January 2018.	MFP expenses in the DVHA budget. Administrative expenses in DAIL (100% Federal Funds)
Adults with physical and/or cognitive	***Adult Day Services*** is a community-based non-residential service that assists individuals to	Performance (SFY2018): • 489 people per month average were	*Approx.: $4M Gross*

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
impairments	remain active in their communities by maximizing health, independence and optimal functioning. Vermont Global Commitment to Health regulations; Vermont Choices for Care regulations.	served, a 3% increase from SFY17. • 30% of people served were CFC Moderate Needs (7% increase). • 41% of people served were CFC Highest/High needs, (6% increase). • 29% of people served were Day Health Rehabilitation Services (4% decrease).	*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 (SFY2018): • 135 people served (3% less than SFY17). Medicaid Option - Serves people eligible under State Plan Medicaid and are able to self-direct: • 79 people served (1% decrease). General Fund Option: Serves people who are not Medicaid eligible and are able to self-direct. • 50 people served (14% decrease). Personal Services (SSBG): Serves people who are Medicaid eligible but are not able to self-direct and use an agent to manage caregivers. • 6 people served (14% decrease).	$2.7M approx
Adults who rely on medical technology	***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.	Performance (SFY2018): • 24 unduplicated people were enrolled (8% decrease). Source: SAMS enrollments	DVHA appropriation Approx. $4M GC
People with moderate to severe traumatic brain injuries	***Traumatic Brain Injury Program*** diverts and/or returns individuals from hospitals and facilities to community-based settings. Services are	Performance (SFY2018): • 91 people served (5% decrease). • 27% of people receiving	$5,680,057 GC

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
	rehabilitation-based and driven by participants goals and choices, intended to help people achieve their optimum independence and return to work.	rehabilitation services were employed through the 3rd quarter of CY2018 (target was 25%). • 5 people graduated from the rehabilitation program to independence (target was 7). (Note: NCI data will be available in CY2019.)	
Developmental Disabilities Services Division			
People with developmental disabilities and their families	***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 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.	Performance (SFY2018): • 3,166 people served. • In SFY 2017, 47% of working age people were employed. National Core Indicators In-Person Survey FY 2017 results of adults receiving home and community-based services show the following: • Proportion of people who regularly participate in integrated activities in their communities [community inclusion: went shopping, on errands, for entertainment, out to eat]: 84% • Proportion of people who make choices about their everyday lives [residence, work, day activity, staff, roommates]: 89% • Proportion of people who make decisions about their everyday lives [daily schedule, how to spend money, free time activities]: 66% • Proportion of people who do not have a job in the community but would like to have one: 50% • Proportion of people who were reported to be in poor health: 5%	$220M approx GC

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
People with developmental disabilities and their families	***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. 69% (729) of the people served were children under the age of 18. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations	Performance (SFY2018): • 1,073 people served. • The number of family members reporting that they anticipated using funds for: o Respite: 227 o Assistive Technology: 197 o Individual needs: 841 o Household needs: 701 o Recreation: 498 o Other: 389 • The number of families reporting that funds would address the following outcomes: o Health and safety: 471 o Improve quality of life: 632 o Avert crisis placement: 93 o Increase communication skills: 341 o Increase independent living: 472 o Enhance family stability: 675 o Maintain housing stability: 567	$1,153,596 GC
Children and youth with a mental health or developmental disability and their families	***Family Managed Respite (FMR)*** provides respite for children 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 (SFY2018): • 234 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.: $1.6M GC

DAIL State Fiscal Year 2020 Program Summary

All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
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 up to age 22.	Performance (SFY2018): • 391 children served (This does not include children receiving integrated services with bundled payments). • 79% of goals were being met (based on agencies reporting service goals and the service goal outcomes achieved).	$881,074 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 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
		Performance (SFY2018):
		• 755 adults received guardianship services including:
		  ○ 647 people with developmental disabilities.
		  ○ 108 adults over age 60.
		• 344 people received representative payee services.
		• 6 people received case management services.
			Approx. $3.8M

Division of Licensing and Protection			
People receiving services from Vermont health care facilities and agencies	***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.	Performance (SFY2018): • Conducted 307 onsite investigations. • Met target for completing 100% of required surveys of federally regulated healthcare entities. Nursing facility surveys: • 8% had no deficiencies. • 56% had deficiencies reflecting no actual harm but potential for more than minimum harm. • 36% had deficiencies reflecting actual harm or immediate jeopardy of residents.	$3.1M Gross approx.

DAIL State Fiscal Year 2020 Program Summary

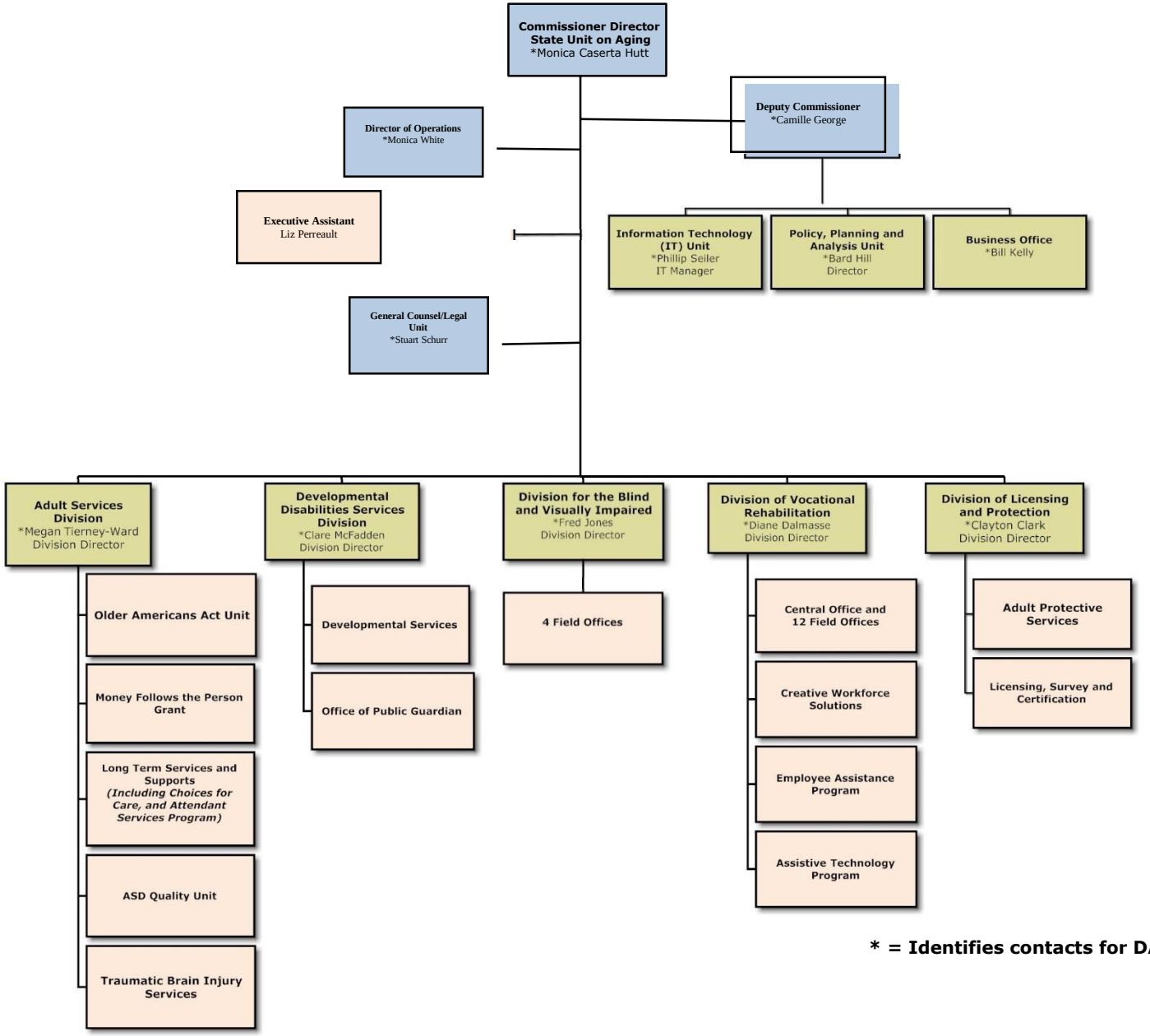
All data is for SFY 18 unless otherwise noted

Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
Vulnerable adults	***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. Chapter 69 of Title 33 of the Vermont Statutes Annotated.	Performance (SFY2018): • Received 3,783 reports alleging abuse, neglect, or exploitation of a vulnerable adult. • Completed 792 investigations. • 88 individuals were placed on the Adult Abuse Registry.	$1.6M approx. GF
Division of Vocational Rehabilitation			
People with disabilities	***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.	Performance (SFY2018): • 8,393 total number of people served. • 7,120 people served in the core VR program. • 1,555 high school students served through Pre-Employment Transition Services only. • 901 individuals closed their VR case in SFY 2018 with successful employment. This means they had met their individual employment goal and had been employed for at least 90 days and were stable. • 33% had a wage above 125% of the minimum wage. • 857 youth under age 22 had work-based learning experiences as part of their VR services. Results from the most recent customer survey (2016): • 97% of customers felt welcome when they went to DVR for services. • 95% of customers would tell their friends with disabilities to go to DVR for help with employment. • 88% of customers are very satisfied or satisfied with the services provided by DVR.	$6,669,368 Gross

DAIL State Fiscal Year 2020 Program Summary *All data is for SFY 18 unless otherwise noted*			
Whom We Serve	Program Description	Performance Measures	SFY 20 Proposed
People who are deaf or hard of hearing	***Vermont Interpreter Referral Service (VIRS)*** operated by the Vermont Center for Independent Living enables organizations and individuals to hire qualified interpreters.	Performance (SFY2018): • VIRS filled 836 requests for interpreters.	$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.	Performance (SFY2018): • 685 people were provided information and assistance about AT and how it might help them. • 125 people were provided assistance securing funding for AT equipment. • The AT program conducted 820 device demonstrations for individuals who might benefit from AT. • The AT program made 736 device loans for individuals to allow them to try out an AT tool before making a purchase.	$300K approx. Gross

Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart

State Unit on Aging (SUA)



*** = Identifies contacts for DAIL Senior Leadership**

As of 1/17/2019