

Esteemed Members of the Appropriations Committee,

My name is Joyce Lewis, Vice President of Key Human Services, a private non profit providing an array of services to individuals with disabilities or developmental delays since 1989. Tonight, I am speaking regarding the DDS budget; specifically the Birth to Three budget.

I would like to thank you all for your support of Birth to Three throughout the years and especially this year. It is a clear statement of your commitment to the wellbeing and success of Connecticut's young children and their families. Thank you in advance for your support of the annualized 9 million dollar increase targeted for past growth in the program.

The increase in parent cost participation fees is a barrier for our families. Every day this barrier becomes more formidable. Increasing demands and costs are chipping away at the families from every direction. In these most difficult times, they must weigh their impression that their child is making progress against the money that is needed to cover other essentials, home, heat, food, gas. A 60% increase is forcing children with significant developmental delays out of the Birth to Three program. The impact of this withdrawal will be felt by these children and families as well as the local school system for years to come. Many families are choosing to remain in the system

receiving only service coordination at no cost. Unfortunately, their children's needs merit direct services and full participation in services and supports. Deplorably, these services have been priced out of the families' reach, increasing by up to \$114 per month and capping at \$272 per month. The median income in Connecticut is \$93,000 annually. For a family in this income bracket, family cost participation increased from \$65/month to \$104/month. This is a dramatic increase in an ongoing household expense at a time when every dollar is already stretched to its' very limits.

In this era of responsible stewardship, our actions cannot be completely altruistic, we must see the cost benefit. One area where revenue can be maximized is insurance billing. Improvement could come under two different scenarios. Centralizing insurance billing utilizing a contractor would focus the expertise in one location and increase revenue. Another option would be to use the insurance incentive as a true incentive tying the percentage of retention to insurance collections at the average and allowing for a greater incentive with a higher return. Either option is preferable to removing the 10% retention while expecting increased collection.

Thank you for your attention to the needs of our children and families. Please contact me to discuss this at 860 409 7350 x 133. I appreciate your ongoing support and commitment to Birth to Three.