

The Appropriations Committee – HB 5030 An Act Making Adjustments to State expenditures for the Fiscal Year ending June 30, 2015. - DDS

Good evening Senator Bye, Representative Walker, and members of the Committee. My name is Barry Simon and I am the President Oak Hill and a Past president of the CCPA Board. I have been in the field for over 25 years, testifying here for 20 years. Oak Hill has been providing services for 120 years, and is a leader in providing the highest quality community-based programs; through education, assistive technology, programs and advocacy, we support people at every stage of life. Oak Hill, has 11 distinct programs; 113 program sites located in 55 towns. Oak Hill employs over 1,400 professionals to successfully meet the changing needs of close to 40,000 people with disabilities each year. This is very impressive, and what became obvious to me as I was visiting the various programs and meeting participants and staff, is that Oak Hill does set the standard in providing education and lifelong learning opportunities to enhance independence and quality of life for people with disabilities. Yet, as Connecticut's largest POS provider of services for the disabled, it is very difficult to do business and pay a living wage.

I am here today on behalf of those we serve, my incredible staff (part of which are 1199 union staff) and hundreds of thousands of individuals served by the community provider system to ask that you look to strengthening the community provider system as a way of addressing aspects of the growing service crisis. We are a viable alternative to More Costly and Restrictive Levels of Care. I am not here to pit one part of the system against another, as you are aware there is need for all parts to perform certain components, I am here to tell you that we provide excellent care that saves the State money.

Local agencies in all of your districts continue to witness under funding, yet everyday families and individuals across our state turn to their local community provider, at increasing rates, for the support they need to lead more independent, productive, healthy and fulfilling lives. In these difficult times, demand for our supports and services have grown significantly, yet funding has not kept pace. Seven years of no increase or rescissions for any state funded community provider contracts, coupled with decades of inadequate funding, simply does not address our ever increasing operating costs and has forced providers to reduce services.

The true fix is with a long term solution for funding any services state or private; the last time we received an increase gas was \$1.67/gal. Programs have closed in the last few years and will continue to do so – this is not a false alarm. As an agency we have closed programs, made reductions in others, reduced staff, and reduced benefits due to the short sighted approach to state budgeting. As we work on plans for the future of the agency and providing services that meet the needs of those we serve, developing

business strategies to succeed in this environment is next to impossible and, this will ultimately lead to dire consequences for the total community service system.

We recognize and appreciate that the Legislature wants to invest the limited dollars wisely. In order to get the best return on your investment, funds need to be appropriated to address the comprehensive needs of the system and consumers. Given adequate resources that truly fund our costs of services, we have the capacity and willingness to expand services in the private sector; which saves the State money and brings in federal matching funds.

Specifically, cuts to DD Providers of both Residential and Day Services, must be restored.

- The Department of Developmental Services, more than any other agency, was subjected to forced lapses in FYs 2012 and 2013, totaling nearly \$30 million for those years alone, which lapses were passed on to providers.
- Forced closures of smaller group home settings are not in keeping with fiscal responsibility, quality of life, or the accurate definition of community living as defined by the Centers for Medicare and Medicaid Services (CMS).
- There is no plan for day services for individuals with disabilities who do not have the capability to succeed on a time-limited “pre-vocational” track.
- Families, as evidenced by the Family Day Hearing, are incensed and alarmed at what they see as being “completely on their own” in caring for their loved ones. DDS no longer keeps a waiting list, spaces are reserved for emergencies only, such as when a parent dies. However, FOIA requests show there are more than 3,000 Connecticut citizens with disabilities waiting for services.

Now, is a critical moment in time, higher costs and the lack of state support will mean program and service reductions and layoffs at the very moment we should be looking for less costly and more productive alternatives. Non-profit community providers are part of the solution for the future of the service delivery system and preserving the investment made in quality, cost effective, community care is imperative.

The 500,000 Connecticut residents that use community services and their families need you to help fix this systemic problem. There is history and models of system change that have worked, saved the State money, preserved jobs, and produced better outcomes. **The Network of Community Providers across Connecticut has the capacity to meet the needs of All Individuals and Families, if the State is willing to Purchase the Services.** The Administration says it cares for our most vulnerable citizens. But what message does this budget send? Please find the courage to find a way to make it right. I thank you for your time and would be happy to answer any questions.