

ADEQUATE FUNDING FOR SERVICES FOR THE OLDER BLIND

PPORPOSAL SUMMARY

State services for older blind adults are inappropriately funded by the state of Wisconsin. As a result many people who are older and blind or visually impaired will not maintain their independence but become dependent upon their families for basic needs and the state for funding of costly long-term living arrangements. More funding should be allocated to services that increase independence and the likelihood of the client remaining in their own home rather than costly nursing homes or assisted living placements.

The fifteen FTE rehabilitation teachers are funded 50% GPR and 50% Federal Vocational Rehabilitation dollars. The VR dollars are in jeopardy for long term funding. **The total transpiration money for the rehabilitation teachers this SFY was NOTE:?? AND THE TOTAL MONEY FOR EQUIPMENT FOR THEIR CLIENTS WAS note:??.** These rehab teachers serve approximately 1000 people each year with these limited funds. 1000 people that sustained independence and saved the state costly long-term funding obligations. The state has not appreciably added to this service program in over fifteen years and the population continues to grow.

Beginning on July 1, 1998 the rehabilitation teaching program lost approximately \$80,000 of funding from the Division of Vocational Rehabilitation, DVR. (This program used to be in DVR but was relocated to the Division of Supportive Living in July 1996). With this change, funding losses are accumulating.

LEGISLATIVE ACTION

The Wisconsin State Legislature needs to restore this lost revenue and adequately fund the transportation and client-equipment budgets. An additional \$100,000 needs to be allocated to this programs in each year of the next biennium to adequately fund services to older blind or visually impaired adults.



**BADGER
ASSOCIATION
OF THE
BLIND, INC.**

Kathy Brockman
Membership Coordinator

President

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Milwaukee, WI 53213

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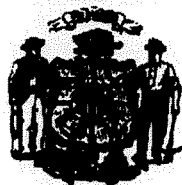
RATIONALE

Governor Tommy Thompson stated in his 1999 State of the State Address the need to make the lives of senior citizens more secure through long-term care in their own homes. Older people who are blind should have the opportunity to maintain their independence and remain in their own homes - if not for the dignity of a human being, for the economic benefit to the state. These people have been managing their personal affairs, taking care of their homes, cooking and involved in the leisure of their choice for many years. When their vision becomes dramatically reduced, tragically most of them will stop doing things for themselves. Often times they or their families seek a nursing home or other assisted living placement. This does not have to happen. Older persons who are blind or severely visually impaired can live independently.

The Office of the Blind (in the Division of Supportive Living) has fifteen rehabilitation teachers located across the state. It is their job to teach older blind people how to maintain their independence. They teach communications, cooking, cleaning, budgeting and anything else the customer needs to learn to remain in his/her home. In addition to teaching people how to maintain their independence without sight they will provide special equipment that will be helpful (e.g., talking clocks, magnifiers, kitchen utensils). The teaching occurs in the client's home; thus it is an itinerate program.

STATISTICAL EVIDENCE: In 1990, approximately 90,000 Wisconsin residents were estimated to be blind or severely visually impaired. Of this number, nearly 75,000 were over the age of 55. Given that estimates from the Wisconsin Demographic Services Center show the population of our state will increase from about 4.9 million in 1990 to about 5.7 million in 2020 and that baby boomers will be entering the ranks of the elderly, it is certain that the number of people eligible to receive vision rehabilitation services will dramatically increase. According to 1995 statistics from the American Foundation for the Blind, almost 1.1 million Wisconsin residents were over the age of 55. Of these, 10 percent were visually impaired and 2 percent were severely impaired (includes blindness). Of those people 65 years of age and older, 13 percent were visually impaired and 2 percent were severely visually impaired. In the 75 and over age group, 19 percent

were visually impaired and 4 percent were severely visually impaired. Of those folks 85 years of age and older, 29 percent were visually impaired and 7 percent were severely visually impaired.



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ADEQUATE FUNDING FOR SERVICES FOR THE OLDER BLIND--April 1999

Older people who are blind or visually impaired should have the opportunity to maintain their independence in their homes and remain active in their communities. Inadequate state funding for the elderly blind or visually impaired causes many of these people to depend on their families and the State for costly long-term living arrangements.

Current Services and Funding

Rehabilitation Teachers employed by the State of Wisconsin, Department of Health and Family Services, Office for the Blind, teach older blind people how to maintain their independence. This includes techniques for communicating, mobility, and work in the home, such as food preparation, budgeting, and record keeping.

Fifteen Rehabilitation Teachers for the blind and visually impaired serve approximately 1,000 people statewide with an annual budget of about \$69,000 for travel and adaptive equipment. This equals \$69.00 per client as opposed to the approximately \$100 per day, or \$3,000 per month that can be spent on assisted living facilities.

As of July 1, 1998, the Rehabilitation Teaching program lost approximately \$80,000 of funding from the Division of Vocational Rehabilitation. With this change, client services have decreased.

Population

In 1990, approximately 90,000 Wisconsin residents were estimated to be blind or severely visually impaired. Of this number, nearly 75,000 were over the age of 55. Estimates from the Wisconsin Demographic Services Center show the population of our state will increase from about 4.9 million in 1990 to about 5.7 million in 2020. In addition, baby boomers will be entering the ranks of the elderly. Thus, it is certain that the number of people eligible to receive vision rehabilitation services will dramatically increase.

The American Foundation for the Blind 1995 data show that almost 1.1 million Wisconsin residents were over the age of 55, with the following breakdown:

Age	Visually Impaired	Severely Visually Impaired
Over 55	10 percent	2 percent
Over 65	13 percent	2 percent
Over 75	19 percent	4 percent
Over 85	29 percent	7 percent

Legislative Action Requested

The Wisconsin State Legislature should build into the base of the budget for the Office for the Blind \$100,000 to restore lost revenue and adequately fund transportation and adaptive equipment to serve the older blind and visually impaired population in the state.

Charlja/winword/cob/AARP

1702 N. Page
Stoughton, WI 53589
April 15, 1999

To the Joint Finance Committee:

I am writing to beg you to change your mind about the proposed state Budget freeze. I work with adults with serious and persistent mental illness, as well as am a parent of a child with a developmental disability.

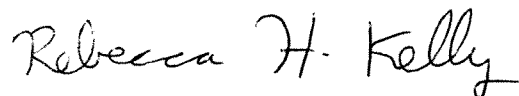
The programs which would be affected by the freeze affect the most vulnerable people in our society. I have no doubt that with the freeze, more money will end up being spent in the long-run due to lack of programs and support. Decomensation of people whose needs are not being met will result.

All programs desperately need every bit of money possible, many needing even more than what's presently available. For example there is at least a 5 year wait for programs like Family Support and Resource Center. This wait is way to long already, let alone more cuts which would result in a reduction of the already too-far-cut-back services. This program is for developmentally disabled children, and a freeze may make a major impact on their development, thus increasing the future need for monies.

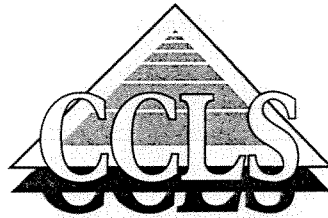
Furthermore day treatment/vocational services enable adults with serious and persistent mental illness with needed structure /self-esteem to maintain mental health. They also make it possible for people to become productive members of society. I can't imagine CSP cuts, transportation cuts, or loss of adult family homes options. All these would be purely devastating.

I urge you to restore the cuts which have occurred to the Community Aids in the last two budgets.

Sincerely,

A handwritten signature in cursive script that reads "Rebecca H. Kelly". The signature is written in dark ink and is positioned above the printed name.

Rebecca H. Kelly



**Creative Community
Living Services, Inc.**

TO: Senator Brian Burke, Co Chair; Representative John Gard, Co Chair;
Senators Decker, Jauch, Moore, Shibilski, Plache, Cowles, Panzer
Representatives Ward, Porter, Albers, Kaufert, Duff, Huber, Riley

RE: 1999-2001 State Biennial Budget

My name is Barbara Fox. I am the President of Creative Community Living Services, Inc. Our agency provides community services for nearly 500 people with developmental disabilities in 15 different Wisconsin counties. We employ over 500 people, most of them in direct care positions. I have some serious concerns about the allocations for people with disabilities in the proposed state budget.

Our agency is already experiencing a cut in allocations from Milwaukee County because of the 1999 cut in base community aids to Milwaukee County. We are seriously looking at closing at least one program in Milwaukee County because of that cut.

Over the past two years, the State of Wisconsin has approved increased licensing regulations in community-based residential facilities and increased regulations in criminal background checks and reporting requirements. All of these regulations have been expensive to implement, and yet we had to implement them with no increase in allocations. A cut in community aids and no increases in the waiver programs is adding insult to injury.

Our agency is currently hiring direct care staff at \$7.50 to \$8.00 per hour. It is the most we can afford. The fast food restaurants are paying better than that. With the labor shortage, we are having a very difficult time hiring and maintaining staff. For the past several months, 9% of our staff positions have been vacant. We have been using our current staff to fill the positions, and paying an enormous amount of overtime, and burning people out.

If there are cuts in funding to the counties, those cuts will be passed on to provider agencies. We cannot cut already low staff wages or we will lose all of our staff. The other alternative, which many providers will need to consider, is to close programs or simply go out of business. If agencies start closing their doors, the State of Wisconsin will have to find some way to provide services. Emergency placements are expensive and traumatic to the individuals involved.

Please restore the cuts to community aids and put in an inflationary increase of 3%. There also needs to be an increase in the waived dollars. CIP 1A is currently paying anywhere from \$125 to \$184 per day, compared with \$349 per day in the state centers. CIP 1B has not had a significant increase in 9 years. The current rate of \$48.33 per day is not enough to provide adequate services to an individual in the community. This amount needs to be increased to a minimum of \$70 per day.

I am also very concerned about the proposal to re-design the long-term care system. We need to pilot the Family Care proposal in a few counties, and then use an outside source to evaluate the data from the pilots. I would also like to suggest that one of the pilots be an alternative plan to the proposed Family Care, utilizing the current county-run system. Family Care will be expensive to implement. The current county-run system needs reforms, but I believe it can continue to work for Wisconsin for many more years.

In summary, Wisconsin is in an economic boom. It is a wonderful place to live and to work. Please make it be a wonderful environment for people with disabilities, as well.

Barbara Fox
Creative Community Living Services, Inc.
P.O. Box 260
Watertown, WI 53094-0260
920-261-1345, extension 32

A Response to the 1999-2001 Biennial Budget by Wisconsin's consumers, families, and advocates for MENTAL HEALTH.

Grassroots Empowerment Project, Mental Health Association of Milwaukee, National Alliance for the Mentally Ill of Wisconsin, WeCARE Coalition, Wisconsin Coalition for Advocacy, Wisconsin Council on Mental Health, and Wisconsin Family Ties.

Last year, through the Governor's Blue Ribbon Commission on Mental Health a blueprint for mental health systems revision was developed and approved. Families, consumers, advocates and county representatives and professionals were encouraged that Wisconsin was once again taking a forward step in genuinely responding to the mental health needs of its citizen. Our reputation as being a leader in this arena is well-known.

The new system is described as one that will be community-based, consumer and family-centered in which funding will follow the person and not the services.

With the encouragement of the Governor, DHFS then started workgroups. For months, these workgroups that included consumers, families, advocates, local county representatives and professionals have been busy pulling together the details for the new system as described in the Governor's Blue Ribbon Commission on Mental Health report.

Now the people of Wisconsin are presented with a budget that does very little to support our mental health needs. In many ways, lessens the leadership role that Wisconsin has assumed for many years in the country.

1. Community Aids - Not supported

The recent 17% cut in the federal Social Services Block Grant resulted in a loss of \$18 million over the biennium in Community Aids. This cut will produce an unacceptable reduction in services to our most vulnerable citizens. We support that the legislature the replacement of these funds with GPR dollars.

2. Behavioral Health Managed Care Demonstration Projects - Not supported

We are testifying against the proposed budget cut in funding for the Blue Ribbon Commission on Mental Health Demonstration Projects. The drastic reduction from 8 to only 2 sites will seriously affect the ability of the Department of Health and Family Services to test and pilot the carefully crafted reforms for mental health services.

These reforms were the result of the efforts of many consumers, advocates, state administrators, local county representatives, professionals and consultants for the past two years. The Governor received their work with enthusiasm. Then the budget's proposed under-funding of the demonstration pilots is a serious blow to the efforts of so many of our citizens to help improve the mental health services of Wisconsin.

We urge you to restore the budget cuts and allow these carefully planned demonstrations to reach their goals.

3. Governor's Blue Ribbon Commission on Mental Health - Support

In order to initiate the positive changes in the alcohol and drug abuse, developmental disabilities and mental health systems as recommended by the Governor's Blue Ribbon Commission on Mental Health we support the modifications of DHFS's powers and duties.

4. Non-Institutional Rate Increases - Not Supported

Since there have been no increases for years in these rates, we support a 3% rate increase for all community-based, non-institutional mental health MA providers in 2000-01.

5. SSI Caretaker Supplement - Benefit Level - Not supported

Increase the Caretaker Supplement above the Governor's recommendation from \$150 a month per dependent child to \$250 a month for the first child and \$150 a month for each additional child equally \$6.65 million of federal TANF dollars. It has been documented that 40% of these mothers are coping with mental illnesses.

Support of the Governor's proposal to expand the child care assistance program to include children ages 12-18 with special needs or chronic health conditions who require supervision after school.

6. Mental Health Institutes - Expanded Services - Support

We support the opportunity for MHIs to expand the scope of services provided that could enhance the provision of community services needed.

7. Health Insurance Risk-Sharing Plan (HIRSP) Not Supported

It is difficult to support a decrease in funds for this program. This program is in desperate need of a legislative audit in order to determine the effectiveness of this program and determine its true costs. Leave GPR support at its current level until the audit is conducted and it can be determined what level of change may or may not be appropriate. This decrease in funds will result in a increase in the premium costs for consumers.

8. School Funding for Special Education - Not Supported

Retain the statutory language directing the state to reimburse local school districts at 63% of the actual costs of special education.

Provide additional funding to increase the Categorical Aids reimbursement rate to local school districts to 40%.

Wendy Kilbey, Parent of children with mental illness, Wisconsin Family Ties, 16 N. Carroll St. #640, Madison, WI 53703, 608/267-6888

Bill Daniel, Consumer, Grassroots Empowerment Project, 106 E. Doty St, #3A, Madison, WI 53703, 608/251-9151

Robert Beilman, M.D., Family member, NAMI Wisconsin, 4510 Woods End, Madison, WI 53711, 608/238-2235.

3576 South 43 Street, #32
Milwaukee, WI 53220-1550
April 7, 1999

Joint Finance Committee
State Capitol
Madison, Wisconsin

Dear Committee:

I have worked as a live-in and come-in Personal Care Worker for over eight years in Wisconsin. I enjoy my work and feel I'm good at what I do in helping people who are physically disabled.

But because wages are so low and there is no health insurance offered, I'm forced to work two other jobs just to make ends meet.

Please raise the wages of workers like myself and offer health insurance so I can continue working as a PCW.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Constance Fuss". The signature is written in dark ink and is positioned to the right of the word "Sincerely,".

Constance Fuss

Joint Finance Committee:

I have been working as a PCW for 6 years. Without my help the people I care for could not live at their home.

Many agencies have closed because they can't afford the cost of a PCW program. The same is why good PCW's are quitting - we just can't afford to work at these wages.

The agency I work for has committed the increase in wages and benefits to the PCW's.

Please support the \$4.00 rate increase to agencies for MA Personal Care.

Date 4-7-99

PCW Signature Pep/Ello

P. Tekhina

Joint Finance Committee

I have been working as a PCW
for 3 years. Without my help the
people I care for would not live in
their homes.

Please support the #4.00 rate increase
to agencies for MR Board Care
Barbara Satche
3576 S. 413 #30
Milwa, WI 53220

I've been working in this
business for the last 10 years. I'm tired
continuing job & we do need some
kind of new. We are losing
because it won't work it. ~~working~~ workers.

m.A.

Date _____
PCW Signature _____
Ampral



*March of Dimes
Birth Defects Foundation*

*Capital Wisconsin Chapter
4904 Triangle Street
McFarland, WI 53558-9363
Telephone (608) 838-6649
Toll Free (800) 747-DIME (3463)
Fax (608) 838-6661*

**Testimony on Funding for Birth Defects Surveillance
Wisconsin Joint Finance Committee - Madison - April 15, 1999**

presented by Terry Bucheger, Volunteer

March of Dimes Birth Defects Foundation

My name is Terry Bucheger. I am a volunteer for the March of Dimes Birth Defects Foundation. Thank you for the opportunity to present testimony today on behalf of the March of Dimes in support of increased state funding for a comprehensive birth defects surveillance program in Wisconsin.

The mission of the March of Dimes is to improve the health of babies by preventing birth defects and infant mortality. A comprehensive birth defects surveillance program will improve the health of our babies by counting the number of babies born with defects and pointing to ways we can prevent or treat congenital conditions.

In my professional life, I work with substance-abusing women and their families at the Center for Women and Children here in Madison. Every day I am confronted with the damage done by drugs and alcohol during pregnancy—damage to the baby in the form of Fetal Alcohol Syndrome and quite often lifelong damage to the health of the entire family.

Birth defects are a major health problem, occurring in children of all races, economic classes, and in every part of the state. Birth defects are the leading cause of infant mortality. In Wisconsin, every year, 150 babies die as a result of birth defects. We know this from infant death certificates, but we do not know how many infants are born with and survive a birth defect. We estimate — because we do not really know — that 2,000 Wisconsin babies are born with a birth defect each year.

Saving babies, together

It is important to note that not all birth defects are readily apparent at birth. In Wisconsin birth defects are reported on birth certificates; however, this method of data collection provides incomplete information. Many conditions are diagnosed months and sometimes years following birth. For example, Fetal Alcohol Effects – a less severe birth defect than Fetal Alcohol Syndrome - may not be detected until a child is two or three years old.

40 other states have initiated birth defects surveillance programs, leaving Wisconsin far behind in this important data collection function. There are model programs that show how surveillance and research can be combined to study the relationship of birth defects to factors such as nutrition, tobacco use, occupational hazards, and toxic substances in the environment. Only a quality state birth defects surveillance system will accurately identify birth defects and provide data that can be used to study causes.

A state birth defects program would provide data needed to investigate the cause of birth defects, assess progress of prevention and evaluate the need for services. Surveillance systems enable health officials to monitor infant health and look for clusters of birth defects. The detection of birth defects should not be left to chance.

Given the high price of birth defects, the cost for a comprehensive birth defects surveillance and research program is small. In the proposed state budget, funding for birth defects surveillance is at \$49,500 per year, to fund one full time position. And while we support the proposed change in statutory language, a larger financial investment must be made as well.

It would take \$8.00 per birth or about \$500,000 per year to make Wisconsin's program the first-class system that our citizens and future generations need. That is an awfully small investment compared to the high cost of medical care and long-term care associated with poor birth outcomes. The volunteers and staff of the March of Dimes look forward to working with you as Wisconsin invests its resources to prevent birth defects.

Thank You

BUDGET HEARING--LEGISLATIVE JOINT COMMITTEE ON FINANCE
April 15, 1999

The Dane County Elderly Services Network is a coalition of agencies providing social and other services to the elderly in Dane County. It has a core group of the fourteen Focal Points and community centers. I am a member and represent the Dane County SOS Senior Council.

The Elderly Services Network supports the basic concepts underlying the Family Care Program and recommends legislative authorization for implementation. We believe that the pilot projects should continue and that the proposed additional pilot sites in the Governor's Budget be included for funding. ESN has concerns with some basic elements of the Family Care proposal; however, the concepts are sound in that the thrust is to assure community placement planning with reliance on nursing home care whenever indicated through assessment and evaluation.

ESN requests that non-pilot counties not be overlooked insofar as state funding is concerned. Waiting lists for the Community Options Program (COP) exceed 10,000 persons as of December 1998. We suggest that the Legislature consider allocating sufficient funds to reduce the waiting list by fifty percent in the first year of the biennium and an additional 50 percent in the second. We recognize that the cost is considerable; however, we also know the effects of insufficient funding at the local level and the despair of persons on waiting lists.

Paul H. Kusuda; 200 Tompkins Dr.; Madison WI 53716-3255; 222-2780



NAMI Wisconsin

April 12, 1999

Dear Member of the Joint Finance Committee
Wisconsin State Legislature

I am testifying before you regarding the proposed budget cut in funding for the Blue Ribbon Commission On Mental Health Demonstration Projects over the next biennium. This drastic reduction from eight to two demonstration projects will seriously affect the ability of the DHFS to test and pilot the carefully crafted reforms of the Blue Ribbon Commission (BRC).

The effort of the many task committees and work groups that are implementing the BRC recommendations has been progressing for nearly two years and is nearly finished. The work product of the many consumers, advocates, state administrators, local county representatives, professionals and consultants is ready for the contracting process. The BRC was given the task by the governor to reform the public mental health system.

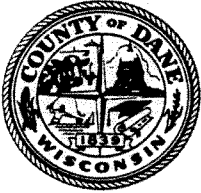
The new system will use managed care techniques to provide community based, outcome driven, consumer and family oriented services with greater flexibility. The planning process has utilized the experience, both positive and negative gained by similar programs nation-wide.

The Governor received the BRC report with enthusiasm. I feel that the under-funding (\$1,170,000 requested vs. \$290,000 provided in the budget bill) of the demonstration pilots is a serious blow to the the research and analytic effort that was to have made this project an example of Wisconsin's leadership in the mental health field. The under-funding is a slap-in-the-face to the people who have participated in this entire program and would thwart the effort to test out a number of pioneering methods for mental health care delivery to ascertain the most effective strategies.

I urge you to restore the budget cuts and allow this innovative and carefully planned process to reach its goals. This has been a once-in-twenty -year project which deserves to be implemented with sufficient resources to accomplish its goal in a reasonable time frame.

Sincerely,

Robert L. Beilman, M.D.
Immediate Past President
Wisconsin Alliance for the Mentally Ill (NAMI-WI)



DANE COUNTY

Kathleen M. Falk
County Executive

DATE: April 15, 1999

TO: Members of the Joint Committee on Finance

FROM: Kathleen M. Falk *KMF*
Dane County Executive

RE: TESTIMONY ON THE 1999-2001 BIENNIAL BUDGET

Since you have heard from many of my colleagues in county government at your hearings around the state, I join their pleas too and will not take time today to repeat them. My urgent and sincere request is that you please support modest increases funding for the services we provide at the state's direction and on the state's behalf.

Holding down property taxes is important to all of us. Counties have heard over the past several months that we must hold down our spending in order to minimize property tax increases. We've done that in Dane County. In our 1999 budget, the county board and I held the levy increase to 2.9%, the second lowest increase in 20 years. We set the target by combining the rate of inflation and population growth in our county.

However, the proposed state budget will force us to either raise property taxes or cut services. For example, Dane County will lose \$1.1 million in major human services revenues alone in just 2000 alone under the proposed budget bill. With the addition of other freezes in aid, we face cuts of \$2.6 million in human services in 2000 alone. You'll have heard and will hear from consumers and family members in our community who would be affected by those cuts and they can tell their own stories better than I. This budget, unless improved, will hurt their lives.

We do not want to pass on to property taxpayers these expenses for services the state requires us to provide. Consequently, the other choice this budget would force us to make is to reduce services.

With the leadership of this committee, we could instead be facing the next budget biennium with a third and better choice. That is to continue to provide our current level of services. I am not asking you to do more than I have done at our county level. Please provide increases in revenues to local governments which account for inflation and population growth.



With some major new revenues in play in this budget, including surplus TANF, tobacco suit settlement and transportation revenues, you have an opportunity to do that.

I surely know that this committee wants a great budget for the people of Wisconsin. For example, I greatly appreciate Senator Burke's sponsorship of a proposal that would provide local governments across the state with additional transportation aids to more accurately reflect local governments' responsibility for 90% of the state road mileage maintenance. I also thank the Governor for the progress he made on this issue yesterday. I also very much appreciate the acknowledgment that Representative Gard is giving on the funding problems for Youth Aids, a terribly important state/county program.

In closing, I want to briefly mention three policy issues in the budget bill that are of particular interest to Dane County. First, voters in my county recently passed a land and parks referendum with an overwhelming 75% endorsement. They told me they support using public funds to purchase parks and open space. I need to have the statutory authority for a 1/12 of a cent sales tax so I can carry out those purchases our citizens have voted for. We need your approval of that local option. I am willing to take the heat and do this, but I need you to remove the statutory barriers that prevent us from doing this.

Second, there are wholesale changes in the farmland preservation law that will harm our efforts to preserve farmland and the agricultural character of our county. 1,700 Dane County farmers greatly benefit from this credit, and I ask that you to retain this credit.

Finally, we wholeheartedly support the Governor's Stewardship Program, but firmly believe some changes are needed in the regulatory language in the budget bill. These changes would reduce the amount of assistance local governments and private, non-profits receive from the state to preserve Wisconsin lands for generations to come. I ask for your support to ensure we continue to have their current access to the funds this vital program provides.

Thank you, in advance, for your support on these critical funding and policy issues.



DANE COUNTY

Kathleen M. Falk
County Executive

April 12, 1999

To: Members of the Dane County Legislative Delegation

From: Kathleen Falk, Dane County Executive

Re: Biennial Budget Bill (AB133/SB45)

We greatly appreciate your many efforts to protect the interests of Dane County citizens in both budgetary and policy matters. We have also appreciated your responsiveness to our requests for help on legislative issues that affect the constituents we jointly serve. We fully understand the many and tough demands many different groups and individuals make of you. We have worked hard to limit and prioritize the top funding and policy issues this proposed biennial budget bill presents to Dane County citizens.

In summary, the proposed budget bill actually cuts major human service revenues in Dane County for the year 2000 by \$1.1 million from the 1999 base. Additionally, we lose \$550,000 annually in local revenues due to a proposed new property tax exemption for office equipment and an increase in the state administrative fee for local sales tax. Finally, our county will also lose \$268,000 in shared revenue during the biennium. Other major state aids are essentially frozen, such as funding for the court system. (None of these figures include smaller revenue losses in the budget or address major factors such as inflation, population growth or citizen demand for services.)

Two major new sources of revenue in this budget biennium are tobacco suit settlement funds and transportation revenues. Yet, counties do not receive any of the tobacco suit settlement, despite our history of paying for public health costs to treat tobacco-related illnesses for the General Assistance and jail populations. Further, Dane County will actually receive a decrease over the biennium in our General Transportation Aids, in spite of substantial new federal and state revenues that the state has recently received.

Conversely, there are several proposals in the proposed budget that will help Dane County and its citizens, and we ask you to support those provisions identified below.

Thank you, in advance, for your support in addressing these critical policy and funding issues that affect Dane County's citizens.

Funding Changes

Here's what the budget bill does to our major sources of state funding. It cuts revenues, with significant reductions for Dane County in Community Aids, the Intergovernmental



Transfer Program and Shared Revenue: \$1.3 million in 2000 alone. This means county government needs to either cut services or increase property taxes. In an attached document, Susan Crowley, director of Dane County Human Services, offers many examples of such cuts.

Only one of our major appropriations, Youth Aids, was increased. That increase, 2 percent in each year of the biennium, will generate an additional \$130,000 in 2000. Our projected 1999 Youth Aids expenses are \$27 million. Other major revenues are frozen over the biennium.

If the state revenues we receive as local aids had increased by a modest 2 percent in each of the last five years, Dane County would be receiving an additional \$2.6 million more than we received in 1999. As the attached chart shows, even a 2 percent increase would not have been, on average, sufficient to keep up with the five year average of population growth the county experienced and inflation, as determined by the consumer price index.

It is not reasonable for the state to depend on counties to carry out the Legislature's will without recognizing inflation and population growth. We are not asking the state to do more than what we are willing to do locally. I have used inflation and population growth to develop my own targets for levy growth in Dane County. In 1999, that meant that levy growth was 2.9 percent, the second lowest increase in 20 years.

If it is unreasonable to freeze key state revenues, it is even more destructive and unacceptable to cut these funds. Our choice in Dane County will be a grim one: to cut vital human services or raise property taxes.

The following list is what we really need you to change in the budget bill:

- **Property Tax Exemption for Copiers, ATMs, and other Office Equipment and Increases in the Sales Tax Administrative Fee to 1.75%:** Delete the language from the budget. These provisions will cost Dane County \$550,000 annually in lost local revenues.
- **Shared Revenue:** Since Dane County loses under the formula, we urge a formula change that would ensure our shared revenue funds do not decline each year. Since 1995, Dane County has lost \$588,470. The county will lose an additional \$268,018 under the formula in the upcoming biennium.
- **Community Aids:** Restore the cuts in Community Aids and allocate a 3% increase in each year of the biennium. Explore using tobacco suit settlement funds and Temporary Assistance to Needy Family block grant surpluses to the extent possible. Eliminate performance requirements and use the \$4.5 million in each year of the biennium to apply toward restoring the cuts in the appropriation and eliminate language authorizing the state to reduce a county's appropriation based on a consumer's eligibility for the MA purchase plan.
- **Reimbursement for Treating Tobacco Related Illnesses:** Using a portion of the tobacco suit settlement funds provide a one-time lump sum payment of \$12.5 million to counties (Dane County's share would be approximately \$449,430) to pay for past

General Assistance medical costs charged to property taxpayers to treating tobacco related illnesses. Also provide funding for an on-going appropriation to pay for the annual costs of treating tobacco related illnesses associated with locally funded medical care for the indigent and jail populations and for public health costs to prevent youth from starting to smoke and to help adults who do smoke quit.

- **Circuit Court Block Grant:** Add 3% in each year using expanded county authority to retain a greater portion of the court fees it collects. Dane County currently puts in \$3.8 million in levy to fund the state court system. Recently, Dane County's share of funding for the state court system has grown from 70 percent in 1996 to 74 percent in 1999.
- **General Transportation Aids:** We support Senator Burke's proposal, which would increase transportation aids by 11.7% over the 1999 base. This increase brings funding for transportation for local units of government closer to receiving our fair share of segregated transportation revenues to more accurately reflect our responsibility for roads in the state. Currently local governments have jurisdiction over 90 percent of the 112,000 miles of roads in Wisconsin, but we receive only 32.5% of the segregated transportation revenues.
- **Youth Aids:** Increase the appropriation by 3% over Governor's 2%. Restore statutory language requiring the Department of Corrections to fund juvenile corrections rate increases out of state funding. Explore using tobacco suit settlement funds and Temporary Assistance to Needy Family block grant surpluses for Youth Aids to the extent possible.
- **Community Options Program:** Increase the number of COP slots sufficiently to reduce current waiting lists by 25 percent. Dane County's current waiting list is 1,200.
- **Medical Assistance Waivers:** Increase waiver per diem rates by 3 percent in each year of the biennium.
- **Medical Assistance Nursing Home Rates:** Increase nursing home rates by 3 percent in each year of the biennium.
- **Intergovernmental Transfer Program:** Increase the ITP by allowing counties to keep a greater share of the ITP returned to the state from county nursing home losses.

Policy Changes

- **Local Sales Tax for Land Conservation Purchases:** Pilot in Dane County a local sales tax option of 1/12 of a percent to be used exclusively for purchase of open space and park lands. The provision would sunset once \$30 million was raised. (Our local referendum passed on a 75% vote.)
- **Stewardship:** Base stewardship grants on the appraised, versus the assessed, value of the land using the current process employed by DNR and DOT. Increase the funding in the local assistance category to \$6.5 million (proposed levels reduce local assistance from the current \$5.5 million to \$2.3 million, with \$1 million going to brown fields). Also, ensure local units of government have access to the land acquisition category.
- **Farmland Preservation:** Maintain the linkage between tax credits offered to farmers and exclusive agricultural zoning. (Dane County has the highest number of

farmers receiving the Farmland Preservation Credit statewide.) Retain the soil and water conservation credit, but treat it as a supplement to the farmland preservation credit. Re-evaluate credit formulas to allow for cost of living increases and allow for reasonable off-farm income.

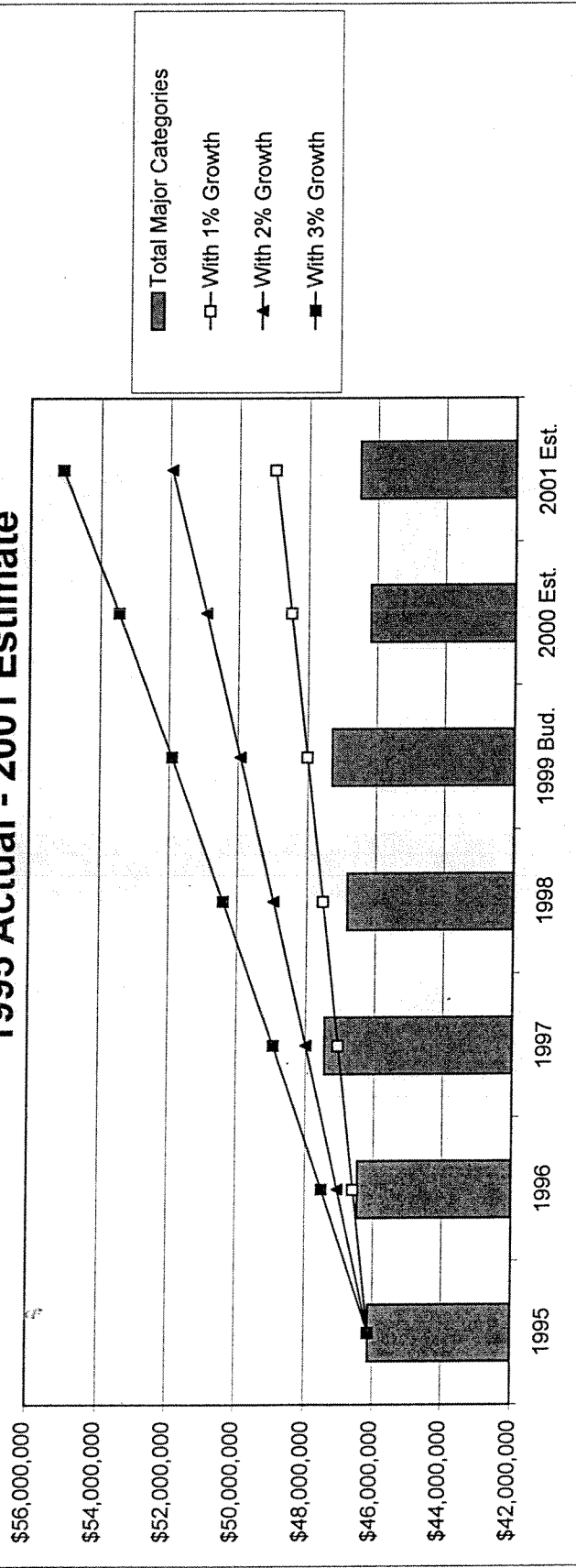
- **Long-Term Care Redesign:** Pilot different long-term care redesign models, but eliminate statutory changes in the budget.
- **Community Youth Grants:** This grant opportunity could help Dane County fund prevention programs locally for juvenile offenders through community-based agencies. However, the budget language requires DWD, not the local human/social services to review and approve grant applications from community-based agencies. This should be changed to allow the local human/social services department to review and approve local grant applications.

Save List

- Y2K Liability Protection
- MA Purchase Plan for People with Disabilities
- Brighter Futures Prevention Funding
- Funding for Workforce Attachment Services
- BadgerCare
- River Grant Program

Thank you, in advance, for your efforts on behalf of Dane County citizens.

Changes in State Aid (Selected Sources) 1995 Actual - 2001 Estimate



NOTE: 1999 Budget allowable Mill Rate increase was based on the most recent actual data available at the time - from 1997. The 2000 Budget will be based on actual data from 1998.

	1995	1996	1997	1998
INFLATION	2.83%	2.95%	2.29%	1.56%
POPULATION	1.07%	1.11%	1.19%	1.14%

Amount of Shortfall between 2000 Estimate and 1999 Budgeted -\$1,105,595
Mill Rate Change Assuming 5 % valuation increase over amount used for 1999 budget 0.04637107

Effect on \$135,000 House \$6.26

Calculation of Mill Rate:

Shortfall	<u>-\$1,105,595</u>	=	0.04637107 or 4.64 cents per thousand
Eq. Value	\$23,842,345,643		

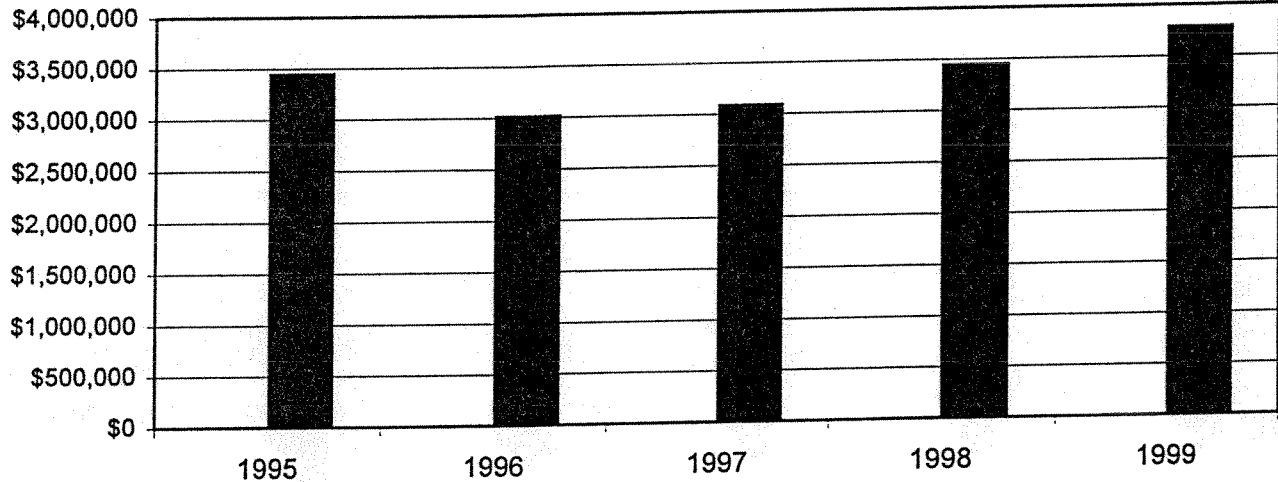
Amount of Shortfall between 2000 at 2% growth and 2000 Estimate -\$4,746,085
Mill Rate Change Assuming 5 % valuation increase over amount used for 1999 budget 0.19906115

Effect on \$135,000 Home \$26.87

Calculation of Mill Rate:

Shortfall	<u>-\$4,746,085</u>	=	0.19906115 or 19.91 cents per thousand
Eq. Value	\$23,842,345,643		

DANE COUNTY LEVY FOR COURT-RELATED COSTS



Circuit Court Block Grant funding increased from \$279,500 in 1995 to \$1,272,900 in 1996.

DANE COUNTY TAX DOLLARS LEVIED FOR COURT-RELATED COSTS 1995 - 1999 BUDGETS

CATEGORY	1995	1996	1997	1998	1999
General Court	\$2,591,300	\$1,972,250	\$2,170,000	\$2,469,500	\$2,722,180
Alt. To Incarceration	\$346,500	\$300,600	\$315,200	\$345,480	\$369,928
GAL	\$194,100	\$417,600	\$265,800	\$267,400	\$303,500
Fam. Court Commissioner	\$314,500	\$321,900	\$335,000	\$367,000	\$389,800
ALL COURT COSTS	\$3,446,400	\$3,012,350	\$3,086,000	\$3,449,380	\$3,785,408



Dane County Department of Human Services

Director - Susan Crowley
1202 Northport Drive, Madison, WI 53704-2092
PHONE: (608) 242-6200 FAX: (608) 242-6293

KATHLEEN M. FALK
DANE COUNTY EXECUTIVE

MEMORANDUM

To: Dane County Legislators

From: Susan Crowley, Director

Date: April 12, 1999

Re: Proposed 1999-2001 Biennial Budget --Human Services

A review of the proposed 1999-2001 biennial budget will freeze or cut critical county revenues during the next two-year period. Included are Community Aids, Medical Assistance Waiver programs (CIP), Income Maintenance Administrative Allocation, Intergovernmental Transfer Program Revenues and Medical Assistance rates. These revenue sources affect the most vulnerable individuals in our communities -- adults with developmental, mental and physical disabilities and the frail elderly-- as well as children, youth and their families. Youth Aids receives a very modest increase (to cover the cost of juvenile correction rates only).

If Dane County were to increase local levy to assure the continuation of services at present levels, a 10% increase in the department's share of levy would be necessary. For example, looking just at the year 2000 the 10% levy increase would occur due to cuts of \$1.1 million in federal and state revenue and \$1.5 million in lost cost-of-living increases (2%). Alternatively, if the county budget were not increased by 10%, cuts in current level of services would result.

It is estimated that Dane County would need to reduce services in 2000 by \$2.6 million dollars under the proposed state budget. Depending on local decisions, the following are examples of reductions that could affect Dane County citizens:

- 12 persons with developmental disabilities will lose community living, opportunities (\$443,870)
- 48 persons with developmental disabilities will lose their supported employment programs (\$381,140)
- 28 families with children with disabilities will lose Family Support program resources (\$108,536)

- 34 families will lose access to critical respite services which enable them to have their children with disabilities live at home (\$ 24,620)
- 54 persons with disabilities will lose transportation services to participate in the community (\$ 99,682)
- 15 persons with physical disabilities will lose the support service which allows them to live independently in the community (\$ 64,980)
- 8 adults with serious and persistent mental illness will lose adult family home options (\$ 67,176)
- 15 individuals with serious and persistent mental illness will lose the support of their Community Support Program (\$ 81,000)
- 50 individuals with serious and persistent mental illness will lose access to important day programs that enable them to become self-sufficient (\$109,296)
- 33 older adults experiencing dementia and age-related psychological disorders will not receive mental health services (\$ 33,000)
- 4000 meals per year will be unavailable to the frail elderly (\$ 21,200)
- Home chore and outreach service hours will be reduced to 54 elderly participants (\$ 88,500)
- 10 women with children will not access necessary drug and alcohol treatment (\$80,000)
- 10 parents at high risk of abuse and neglect will go unserved (\$7,000)
- 20 youth will lose pre- employment and skills training (\$85,000)
- 35-40 youth will not receive service to assist them in staying in school or getting a GED (\$45,000)
- 400 individuals will lose Alcohol and Other Drug Abuse outreach and early intervention services (\$220,000)
- 5 families will lose comprehensive services for their severely emotionally disturbed child (\$210,000)
- Reduce department staff by 10 positions (\$430,000)

Total
\$ 2,600,000

In conclusion, the Governor's proposed budget will mean a reduction in the availability of critical community services that provide our most vulnerable citizens with the opportunities to participate and grow in the Dane County community or a very large increase in property taxes. It is critical that the State of Wisconsin continues to adequately support local human services departments as we carry out state mandates and protect our citizens.

April 15, 1999

Dear Member of Joint Finance Committee:

Thank you for this opportunity to express my support of the request from Choices for Independent Living, Inc., for \$80,000 for a locally controlled Independent Living Center in southwestern Wisconsin.

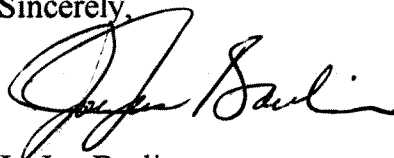
I am an active member of my community: Chair of the Hodan Center Board of Directors, member of the Iowa County Long Term Support Committee, member of Arc of Southwestern Wisconsin and now member of the Board of Directors of the newly formed Choices for Independent Living, Inc. At meetings and related events, I have heard from many people with disabilities who want an independent, locally controlled Independent Living Center in our area.

I can appreciate their desire, because for three and one-half years I was a member of the Board of Directors of the Great Rivers Independent Living Services, Inc., which is located in LaCrosse and covers thirteen counties including southwestern Wisconsin. All Board meetings were held in LaCrosse which for me meant a drive of approximately five hours for each meeting. It is no surprise that more than half of the Board lived in LaCrosse or the immediately surrounding area.

CHOICES for Independent Living, Inc., was formed by people with disabilities living in southwestern Wisconsin. It could provide locally controlled and locally accessible Independent Living Center services.

Thank you for your time and consideration. I would be happy to provide additional information or answer any questions you may have.

Sincerely,



JorJan Borlin

3300 Rohowetz Road

Dodgeville WI 53533

e-mail: jorjan@mhtc.net

phone: 608-935-3966

cc: Senator Dale W. Schultz
Representative David Brandemuehl
Representative Stephen J. Freese

Peggy M. Powers
5325 Marsh Road
Madison, WI 53718
Home Phone 608-838-7255

April 14, 1999

Joint Finance Committee
Wisconsin State Legislature
Madison, WI 53707

Dear Members,,

My 29 year old developmentally delayed daughter represents the successful use of state, county, federal and personal funds to integrate her fully into the life of our community and to allow her to be the very best, most productive person she can be within the limits of her disability.

After she graduated from a mediocre special education program, I found myself on my own in trying to build a life for Sarah. After several fits and starts, including two sexual assaults, we found our way to DVR, MOC, Transportation training, Community Support Network and RFDF. These agencies each have their own models of operation. Some are more flexible and creative than others. Sarah was one of the lucky individuals who is now served by Community Support Network for supported employment and RFDF for her residential needs.,

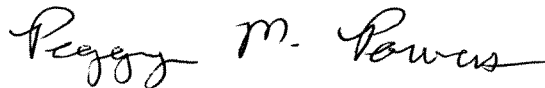
Sarah's model is unique in that she is living by herself with staff oversight and visits six days per week. Her compulsive behavior makes it impossible for her to be gainfully employed, but she is able to do volunteer activities in the community which enrich her life and the lives of those she helps.

Sarah has never had a Social Worker Case Manager, so her residential provider has assumed that role and that individual works closely with Community Support Network, Sarah's psychotherapist (remember the two sexual assaults) and myself to assure that her life runs as smoothly as possible.

Sarah and I are very fortunate because the services she receives have made it possible for her to be all that she can be. I try my best to give back to the community by serving on the Community Support Network board of directors and by making donations of time and money to the agencies. Not all of the consumers have advocates who are as involved as I am in these programs. However, that does not lessen their needs for services and a decent quality of life.

When I see an individual with a handicap I always think "There, but for the grace of God, go I." Please consider your very good fortune when you see a Sarah or one of her contemporaries out in our community. Without help from the state, none of this would be possible.

Sincerely,



Peggy M. Powers

I'm sorry I was not able to give my statement. I was here at 9:30 but had to leave at 2:00.

Pacific Internation out of Nebooska Wis

My name is E H

Since I don't give speeches often I'd like to read my statement today.

I'm here on behalf of Pac Int, They work with the correction of the problem of nocturnal enuresis which is (bedwetting) Senator Kevin Shibilski is in favor of the cost of Pacific's correction being handled by State of Wis for those who cannot afford it.

We had this problem with our son. For 8 years we went to doctors and eroulogists, we tried everything. We tried pills, nasal sprays, bed alarms, Big Ben alarm clocks and waking him up at all hours of the night to use the restroom. Nothing worked-we were told he'll out grow it-he'lloutgrow it. We tried these same things over and over for years, but it never got better only worse. Our son missed out on so much of his earliest years. He missed years of camp outs and overnights stays. He was affraid of the embarrasment if he was found out. Our vacations were well prepared with extra supplies to bring along to protect the hotels bedding. (Our son was 12 years old and still wetting most every night.) We heard of Pac and of course we decided to try once again.

To our joy in just 3 1/2 months with Pac they helped us change our sons sleep patterns. We had a case worker assigned to us. We followed their detailed directions, and with hard work and determination on our son and my part he did it. He was declared dry and has been doing fine since. We were thrilled for him and for us. I only wish we had heard of Pac earlier. I feel sad for him and for all those years wasted.

There's no price we could put on our son's self esteem. He can now do what kids do all the time- stay over night, have a friend over, RELAX no more washing bedding every morning. We're thrilled we could afford to do this for him, but others cannot. HERE is where some money can do some real good.

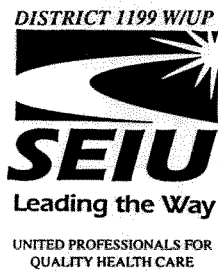
Bedwetting is devastating for the child or adult who has this problem. It can totally disrupt everyone in the family. Please find a spot in the budget to help those who do not have the finances to pay for this program.

Thank you

Elaine Hellenband

ie had sleep
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This effort
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updates no
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could
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trunk
either



DISTRICT 1199W/UNITED PROFESSIONALS FOR QUALITY HEALTH CARE
Affiliated with Service Employees International Union, AFL-CIO, CLC

2001 West Beltline Highway, Suite 201
Madison, Wisconsin 53713-2366
608-277-1199 * Fax: 608-270-2025 * Toll Free: 888-285-1199
Web: www.1199wup.org * E-Mail: 1199wup@1199wup.org

UNITED PROFESSIONALS, LEADING THE WAY TO QUALITY HEALTH CARE

April 15, 1999

Good Morning. My name is Kathy Christensen. I am a registered professional nurse [RN] with special graduate preparation in rehabilitation and long term care. I am currently employed at Meriter Hospital on the Medical Unit. In addition, I am also a Member Organizer for District 1199W/United Professionals for Quality Health Care, SEIU.

I have been involved in health care as a Nursing Assistant at age 16, and as a Nurse since my graduation from Nursing School in 1960. During that time, I have seen the birth of Medicare and Medicaid and the gradual degradation of bedside care for the long term patient/resident, as soon as they became a source of "big money" for the profit makers jumping into the field. Health care has become an "industry"; patients/residents are now "customers". Facility supervision is antiquated and enforces inadequate standards, with the emphasis on "paper-compliance."

I am here today in the company of care givers and care providers, because I must congratulate you for keeping your eyes focused solidly on the issue: providing adequate care and services to residents of nursing homes through recruitment and retention of qualified and competent Certified Nursing Assistants [CNAs].

The proposed "pass through" legislation will deal with the matter head on. It will not allow additional monies to be frittered away on new acquisitions or "competitive strategies" by corporations. My mother, a nursing home resident in Green Bay, and I, a 63 year old citizen, thank you.

I know that you are aware of the difficulty in recruiting and retaining CNAs. If you and I were placing an ad in the newspaper that was accurate it would read:

WANTED - CNA FOR NURSING HOME WORK

any number of shifts including every other weekend and holidays. Must be willing to work overtime whenever staffing is a problem regardless of transportation or child care problems. Benefits are very limited and your share of health care insurance is a large percentage of any wages. You will be subject to verbal and physical abuse from confused residents and may not retaliate in any manner. You will be at risk for many communicable diseases and the incidence of back and other injuries is very great.

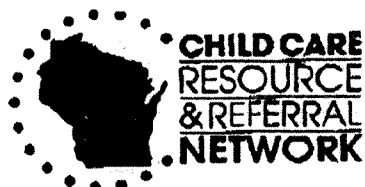
JUST THINK, YOU CAN DO ALL OF THIS FOR A WAGE THAT WILL KEEP YOU AND YOUR FAMILY WITHIN, OR CLOSE TO, THE POVERTY GUIDELINES IN ALMOST EVERY COUNTY IN THE STATE OF WISCONSIN.

We probably would not mention that there are tremendous physical and psychosocial requirements for this direct care position - requirements so difficult that not everyone can handle the demands that will be made of them.

I sincerely hope that you will do all in your power to make this proposed legislation into law, to assure that administrative hang-ups do not prevent its implementation for months and months and make sure it escapes line item veto.

This is neither a partisan issue, nor a union issue. This is a "people" issue, one that effects thousands of seniors on a long term or short term basis. Please pass this measure that is in accordance with our State's traditional values and morality. This is an opportunity to do something that is positive until we can deal with this whole "Health Care Fiasco."

Thank you for your time and attention.



**CHILD CARE
RESOURCE
& REFERRAL
NETWORK**

Wisconsin Child Care Resource & Referral Network, Inc.

www.wisconsinccrr.org

Home: 519 W. Wisconsin Avenue
Office: Appleton, WI 54911
920-734-1739 fax: 920-734-3887
wiccrrn@athenet.net

Field: 5706 Anchorage Avenue
Office: Madison, WI 53705
608-231-1836 fax: 608-231-0203
dadams@facstaff.wisc.edu

Making Child Care Work

April 15, 1999

To: Members of Joint Finance Committee
From: Diane Adams, Coordinator, Wisconsin Child Care Resource and Referral Network
Re: Testimony from Child Care Resource and Referral (CCR&R) agencies concerning child care items in the Governor's budget

As the Joint Finance Committee examines all tax and spending initiatives for the next biennium, it will be important to focus on the programs that impact most directly on children and families in this state. Nearly 100% of Wisconsin preschool children are enrolled in child care at some point in their lives before they attend public or private school. Child care has become a way of life for working families and a common experience for young children. There is almost no service for consideration in the state budget that is more pervasive than child care.

The Governor's proposed child care budget initiatives represent comprehensive policy thinking on services to the very young. Like other governors with competing interests in their states, Governor Thompson is attempting to accomplish two important goals for child care:

- a) to assure access to quality child care for low-income families and children through a subsidy system and
- b) to shore up the child care quality we have and make it better.

Each of these strands is critical if Wisconsin is to maintain its competitive edge as one of the "top 10 states for child care." The subsidy program is beginning to be understood by more and more working families as a place to turn for help with their third largest budget item: housing, taxes, and child care. This budget proposes to change some of the co-payment stipulations in the original W-2 plan, and make eligibility more in line with other services such as Badger Care. The child care subsidy program will eventually prove to be an important legacy, with now more than 26,000 children receiving a partial payment for child care. All parts of the "Wisconsin Shares" program should integrate to offer smooth access and accountability for families.

The second half of the Governor's child care budget (the quality initiatives) provide the undergirding of the child care system. Specifically, the local community planning for grants that improve both access and quality are increasingly important, as CCR&Rs document the continued need to sustain the existing supply of child care. Given our healthy economy and low unemployment rates, child care programs and providers can, and do, find other positions beside child care and leave the field. Thus, the need for sound community planning is critical, if we are not to lose ground.

-2-

The proposed "Early Childhood Excellence Initiative" if passed by the Legislature, would provide the state with a more solid research base concerning Wisconsin children, which is now lacking. These centers should draw on the expertise of existing quality programs and providers, and use all available talent to assure that the goals of high quality environments are met. Further, these centers should balance rural and urban sites, and guarantee maximum use of the dollars in low population areas.

The focus on compensation and training for child care providers in the proposed budget will help address the need for continuity in children's lives. The CCR&R Network documented a high turnover among child care programs in 1998, and we can assure you that - without more attention paid to such initiatives as the T.E.A.C.H. project -our child care worker supply will continue to dwindle.

Child care resource and referral (CCR&R) agencies stand ready to help implement these initiatives at the community level. CCR&Rs serve every single county, and work with every single licensed or certified child care program and provider. We recognize that there is a delicate balance in the "three-legged stool" of availability, affordability, and quality. The increased CCR&R allocation as proposed in this budget will help these community-based agencies offer their basic services of parent referrals/consultations, data documentation, and support for the child care system through training and information to new and existing providers. Healthy, safe child care will be enhanced by the funding for more licensing positions and through the Safe Child Care program. Each of these parts of the "Quality/Availability Initiative" will undergird early care and education in the state.

The challenge for the Joint Finance Committee is to accept these innovative child care measures, while assuring there is sufficient federal funding to help support them. Thus far, Congress is in a positive stance toward the states, helping each of them achieve the type of child care necessary for children's healthy development that meets state goals. We encourage you to accept the Governor's budget proposals for child care, knowing that the return on investment is going to be realized only as these children enter the elementary school system fully competent, and as their parents are able to be fully employed - with peace of mind that their children are receiving quality child care.

Thank you very much.

cc: Office of Child Care