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Address by Lynn Miehle to the State of Wisconsin's Joint Finance Committee

I would like to thank the Joint Finance Committee for the opportunity to express my concerns this morning. My name is Lynn Miehle and I am the office manager for the DeRose Children's Dental Office at 316 5th Street in downtown Racine.

We are a caring and compassionate office and have been committed to treating children on medical assistance since the doctor began practice twenty years ago. Every day we get calls about children who cried all night long in pain or have been sent home from school with high fevers and swollen faces. I could talk for hours about the heartbreaking cases -- sometimes it's a lack of money, sometimes the parents are loving but negligent with ignorance, sometimes we suspect abuse -- but in all cases, it comes down to one thing, a child's suffering.

In the past, when I got such calls I would schedule an appointment for the child immediately. Now, that Racine has joined a Dental HMO program for medical assistance, and we can only accept certain patients, I apologize that we can't see their child, and direct them to call one of the two dentists in Racine that are HMO providers. What I don't tell them is that their hurting child won't get an appointment any time soon because the few doctors that participate in the HMO are overwhelmed.

Wisconsin has historically been a progressive State and seeking new solutions to a challenging public health issue is in character with our past. Unfortunately, the choice of an HMO structure for dental health was debilitating. Just as many individuals are opting out of their employers HMO's because they have realized that they can get better quality care if they choose from providers operating in a competitive market, the State should reconsider the direction they are steering the Medical Assistance program.

We believe that there is a false sense of security that the HMO is providing adequate care/because it exists. At a certain point, and we hope it is sooner than later, the Medical Assistance program needs to be evaluated by the standards of quality not merely as an option better than nothing.

Funds allocated to health are always wise investments because preventive medicine is always the best -- this is especially true of dentistry. As the one who negotiates payment arrangements with parents, I can assure you it is less expensive to pay for regular exams, cleanings, and fluoride treatments than it is to pay for root canals, crowns, and pulpectomies. Recent research is even indicating a strong correlation between heart disease and the lack of proper dental care.

Dental health providers are good people. I know -- I attend conferences with them, I play volley ball with them, and most significantly, I talk to them about all of the charity work they do in and out of their offices. The lack of participation in the Medical Assistance program is a shame, but it is completely understandable. The Governor's 10% increase is a step in the right direction. But it must be remembered that the program belongs to the State and needs to be fixed by the State. We need the Joint Finance Committee to budget accordingly with fair reimbursement. Thank you.



Wisconsin Council 40 AFSCINE, AFL-CIO

Michael Murphy

President
Robert W. Lyons
Executive Director

8033 Excelsior Drive, Suite B Madison, Wisconsin 53717-1903 Phone: 608 836-4040 Fax: 608 836-4444

Testimony of John Maglio, Staff Representative AFSCME Council 40 Joint Committee on Finance Budget Hearing Thursday, April 8, 1999 — Racine, Wisconsin

Hello. My name is John Maglio and I represent AFSCME Council 40 members who work for local units of government in Racine, Kenosha, and Waukesha counties. I'm here to urge your support for an increase in two very important appropriations that provide critical services to the most vulnerable citizens in our communities: Youth Aids and Basic Community Aids. I would also like to address our concerns with the Governor's Family Care proposal.

Many of the programs funded by Youth Aids and Community Aids are mandated by the state. The shortage of funds has caused the costs for these mandated services to be shifted to the local county tax levy. This pressure on the levy results in waiting lists for non-mandated programs as well as cuts in other important services that counties provide.

The shift from state to county funding of Youth Aids services has been quite dramatic. In 1982, the Youth Aids appropriation funded 92 percent of all county costs for serving juveniles. By 1997, it only paid for 45 percent of the costs, \$82.3 million. Counties now contribute more than the state—around \$100 million per year, primarily from property taxes to fund the other 55 percent of costs associated with the services.



We would urge this committee to consider the following measures to rectify the Youth Aids funding dilemma:

- 1. Increase the Youth Aids appropriation over the 1998-99 base by 5 percent in each year of the biennium. The Governor's budget provides a 2% increase in the appropriation each year of the biennium.
- 2. In the statutes, re-link juvenile corrections rate increases with the requirement that the state increase the Youth Aids appropriation to cover the rate increases.
- 3. Update the current formula and hold harmless those counties that lose funding under the update.

We are equally concerned with the pressures present in our programs that are funded by the Basic Community Aids allocation. Community Aids provides counties with funding to partially pay for mandated services to abused and neglected children and their families, adults with serious and persistent mental illness, older adults, and adults and children with developmental disabilities.

The funds for Community Aids have been frozen or decreased the past two budget biennia. Increased client populations and increasing costs for services have pressured counties to provide significant "overmatch" to the funding pot. In 1997, 252.6 million county tax dollars matched and overmatched the Community Aids allocation from the state. That amount is greater than the \$175 million state GPR appropriation.

The Governor's budget reduces the Community Aids appropriation by 2.5% and 1.8%, respectively, in each year of the biennium. It also transfers \$14.3 million over the biennium into Family Care and proposes withholding \$9 million over the biennium to distribute to counties based on performance requirements. It also proposes to reduce each county's appropriation by an amount to be determined by the Department of Health & Family Services when a county is

providing services funded by Community Aids to a consumer with a disability who will received services under the proposed MA purchase plan.

These recommendations will seriously undermine the services counties are providing to their citizens. We urge this committee to halt the continual degradation of the Community Aids appropriation by supporting the following:

- 1. Increase the Community Aids appropriation by at least 3% in each year of the biennium.
- 2. Delete the statutory requirement for withholding \$9 million of the Community Aids allocation and the performance measures.
- 3. Delete the statutory authority to transfer Community Aids into Family Care based on a flat percentage. A fairer measure to place Community Aids funds into Family Care would be for the department to negotiate with each individual pilot county to determine the proportion of Community Aids currently funding the types of services to be offered in Family Care.
- 4. Delete the statutory requirement to reduce a county's Community Aids allocation if a former recipient of services funded by the allocation is a participant in a MA purchase plan.

Many counties are reaching or have reached the tax levy limit ceiling, and with little or no property growth cannot continue to levy additional taxes to cover these increased costs. Yet the demand to provide services continues to grow.

Finally, while AFSCME has generally supported the concept of Family Care, we would recommend several changes to the program as proposed in the Governor's budget:

- 1. We would recommend that more than one model be piloted. Testing only the model in the Governor's proposal assumes this to be the only model that may meet the goals that you, and the Governor, have for this system of care. A non-risk based model, which would be based upon what the counties are currently doing that works, would not require the creation of duplicative bureaucracies such as the Family Care Districts.
- 2. We strongly oppose the statutory changes being proposed. These are not necessary for the pilot proposals to operate. Making the significant statutory changes the Department is proposing seems to be saying that it does not matter what information the pilots produce—we know what we want.

Thank you for allowing me to appear before your committee.

Questions regarding this testimony should be directed to: Jennifer Grondin AFSCME Legislative Council (608) 836-6666 Good Morning Members of the Legislative Budget Committee:

My name is Helen Woller, and I am the owner / director of Kountry

Kids Child Care in Delavan, WI. I come before you today wearing
many hats. I am a single parent, a former AFDC recipient, small
business owner, child advocate and board member of the Wisconsin

Early Childhood Association.

I am urging you to support the Governor's proposed initiatives for the 1999-2001 budget. These proposed initiatives are necessary for providing safe, healthy, quality childcare for Wisconsin families, and increasing benefits for the childcare workforce.

As a small business owner one of the toughest obstacles I face is that of staff recruiting and retention. With the average child care teacher in Walworth county making \$6.00 / hr., it's very hard to find qualified help, and if you do find them, it's hard to retain them.

Last year our center was a recipient of a quality improvement grant, and this enabled us to cut our staff turnover down by two-thirds, from 1997 to 1998, due to increased wages, the addition of health insurance and providing education opportunities for the staff. We need more programs like the quality improvement grants.

The 2nd greatest obstacle a small business owner faces is trying to keep the doors open. Most childcare centers operate on a "shoestring budget" and when more than 30 % of my income comes from W-2 clients, it's very hard to sleep at night worrying that with one change up in Madison, I could be out of business.

To help overcome these challenges, I am asking that in addition to the governor's budget initiatives, that you consider the proposals presented by the Wisconsin Women's Network Legislative Agenda for 1999. Especially restoring the training requirements for all certified providers, and increase the minimum requirement for training in child development to 20 hrs.

I know that you all have a lot of important decisions to make and have to be fiscally responsible, however, before you make any decisions involving childcare, I am asking that you take a moment to stop and think of the impact this will have upon our children and child care businesses. Without changes, many children will not be able to experience quality childcare and many child care centers will not be able to stay open.

Sincerely,

Helen M Woller Kountry Kids Child Care 5496 Hwy. 50 Delavan, WI 53115

WALWORTH COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES

W3955 Highway NN, P.O. Box 1006, Elkhorn, Wisconsin 53121-1006 414-741-3300 1-800-365-1587 TTY 414-741-3272 FAX 414-741-3320

MEMO

TO:

Members of the Joint Finance Committee

FROM:

Thomas K. Mackesey, Director

Walworth County Department of Health & Human Services

RE:

State Budget

DATE:

April 8, 1999

As you deliberate on the budget which is presently before you, I would ask you to give special consideration to your partner in providing essential health and human services to citizens of Wisconsin. The partnership the counties of Wisconsin have had with the State over the last ten years has suffered from the inadequacy of sufficient funding to carry on the increased demands at the local level. While some of these demands resulted from State mandates, others were simply the result of societal changes and problems which have resulted in increased use of local services which we are simply unable to provide without substantial increases in funding.

Since the State has been unable to assist counties in meeting these needs, we have had to request additional funds from our county taxpayers in order to keep services at a level which we feel we must retain. The State has exacerbated this problem by raising the rates it charges counties for essential supportive services such as mental health in-patient days at our state institutes and correctional charges from our youth correctional facilities. These charges, over the past 5 years, have increased in one case 27% and another 50%. This shortfall needed to be covered by the county, and in my situation I am fortunate to have supportive a county board who has stood behind essential services that our department must provide.

Walworth County has, in the past 10 years, integrated, modernized and, in many situations, privatized its operations. We have eliminated administrative overhead from 5 previously separate departments and developed one responsive, technology-assisted health and human services department. We have, meanwhile, made a county investment in prevention projects such as family preservation, Early Intervention programs for families, and alcohol and drug programs in our county correctional facilities. We have 4 model communities working under our Family Preservation program who are making significant progress dealing with the problems of our youth and families at the local level, and are seeing that these efforts will reduce the long-term reliance on the county for assistance. However, these efforts will probably be jeopardized

if limits are put on our county, which may end up forcing these programs to die while we pay the ever-increasing bills which our state facilities will pass on to us, with no limits on their ability to do so.

Any effort you can make to infuse a better sense of equity and fairness into our partnership arrangement will eventually end up assisting those for whom you are setting public policy. Many of the responsibilities that we now carry out at the county level are shared responsibilities that at one time were all state responsibilities. If we could, in good faith, share our support of those services and develop a better financial partnership, we would do a much better job of serving our citizens.

Thank you for taking the time to listen. If there is any way in which I can provide information to help you deal with the difficulties regarding this budget, I would be happy to provide same.

TKM:vm



Transitional Living Services, Inc.

TLS

Elizabeth Aldred

CSP Director



The joint finance committee is meeting at Case High School here in Though attending this meeting may be difficult for you, as a consum we would appreciate your comments as to the following questions:

436 Main Street • Racine, Wisconsin 53403 414-637-8820 (VOICE/TTY) • 414-637-6942 (FAX)

1. What does the community support program mean to you and your recovery from Mental Illness?

The that this Program has helped the through some difficult times. I would really Feel lost if this Program is Cut by the budget.

2. How would you be affected if this program were to be cut?

my medication and privee world be hard to do.





436 Main Street

The joint finance committee is meeting at Case High School here in Racine on Thursday April 8, 1999. Though attending this meeting may be difficult for you, as a consumer of mental health services to attend, we would appreciate your comments as to the following questions:

1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

Racine, Wisconsin 53403

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4-637-8820 (VOICE/TTY)

414-637-6942 (FAX)

1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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Shane Thurley



1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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2. How would you be affected if this program were to be cut?

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1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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What does the community support program mean to you and your recovery from Mental Illness?

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What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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Surry wilmer





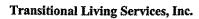
What does the community support program mean to you and your recovery from Mental Illness?

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mis Carel A







1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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The Psychiatrist -







1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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Robert Schooles



What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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What does the community support program mean to you and your recovery from Mental Illness?

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How would you be affected if this program were to be cut?

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1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

I proably will become depressed and that's all

Brenda L. Bennett





What does the community support program mean to you and your recovery from Mental Illness?

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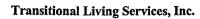
414-637-6942 (FAX)



Transitional Living Services, Inc.

The joint finance committee is meeting at Case High School here in Racine on Thursday April 8, 1999. Though attending this meeting may be difficult for you, as a consumer of mental health services to attend, we would appreciate your comments as to the following questions:

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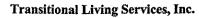
1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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1. What does the community support program mean to you and your recovery from Mental Illness?

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2. How would you be affected if this program were to be cut?

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LADIES AND GENTLEMEN OF JOINT FINANCE, MY NAME IS MAUREEN REED, I SERVE ON THE KENOSHA COUNTY COMMISSION ON AGING. I AM HERE TODAY TO TELL YOU THAT I'M NOT INTERESTED IN SELLING MY GRANDMOTHER FOR A \$75 TAX BREAK.

NEITHER AM I INTERESTED IN BENEFITTING IN ANY WAY FROM THE REDUCTION OF SERVICES TO ANY OF OUR MOST VULNERABLE PEOPLE; MENTALLY ILL, PHYSICALLY CHALLENGED, THE POOR, THE UNEMPLOYED, THE ELDERLY, THE CHILDREN.

I'VE LIVED IN WISCONSIN ALL MY LIFE AND HAVE BEEN PROUD OF OUR

NATIONALLY RECOGNIZED CHARACTER AS AN INDEPENDENT PEOPLE WITH

A TREMENDOUS WORK ETHIC, A STRONG FAITH, AND COMPASSION FOR

THOSE WHO NEED OUR HELP.

NOW, FOR THE FIRST TIME, I AM ASHAMED TO SAY I'M A WISCONSINITE.

THE LONG-TIME LEADER OF OUR STATE HAS BETRAYED OUR PRINCIPLES

AND ERODED OUR COMPASSION BY USING EACH BI-ENNIAL BUDGET TO SET

POLICY, TO MANDATE REDUCTION OF SERVICES TO OUR NEEDIEST

POPULATIONS, AND TO GAIN PERSONAL PRESTIGE AS AN ECONOMIC

"WIZARD."

THIS "WIZARD" HAS MADE THE POOR DISAPPEAR FROM WISCONSIN BY THE WAVE OF A PEN.

HE HAS CREATED A CLASS OF SUCCESSFUL AND PROSPEROUS BUSINESS

OWNERS THROUGH "REDISTRIBUTION OF WEALTH" VIA TAX

MANIPULATIONS AND MANDATED "FEES" IN EVERY BUDGET, ALL THE

WHILE CLAIMING HE IS CUTTING TAXES AND PROVIDING TAX "GIFTS" TO

WISCONSIN TAXPAYERS, WHO OF COURSE SUPPLY THE MONEY IN THE FIRST

PLACE.

WE ARE PAYING DEARLY FOR THE MAGIC SHOW PUT ON BY THE "WIZARD OF OZ"; A SMALL MAN SHELTERING UNDER A LARGE STATE-CAPITOL DOME, USING INTIMIDATION AND QUESTIONALBE TACTICS AND INFLUENCE TO MAKE HIMSELF ATTRACTIVE AS A CANDIATE FOR NATIONAL OFFICE.

WE CANNOT CONTINUE TO PROSPER BY CUTTING QUALITY OF LIFE THINGS SUCH AS FISHING LICENSES FOR THE ELDERLY, A MERE \$4 WAGE INCREASE FOR PERSONAL CARE WORKERS TENDING THE HOMEBOUND, OR BY INCREASING THE BASE OF TAXATION FOR SOCIAL SECURITY PAYMENTS TO 85%!!

YOU HAVE THE UNENVIABLE JOB OF ATTEMPTING TO CURTAIL THE
ACTIONS OF THE EMPEROR, OF MAKING IT CLEAR THAT HIS BEAUTIFUL
NEW CLOTHES ARE, INDEED, INVISIBLE, AND WE CAN ALL SEE HIS NAKED

GREED AND LUST FOR POWER.

PLEASE MAKE THE EFFORT, FOR ALL OUR SAKES AND GOD GIVE YOU STRENGTH.

Testimony for Joint Finance Committee Hearings on State Budget
Thursday, April 8, 1999
J.I. Case High School in Racine, WI
Submitted by Ed Adams

Dear Joint Finance Committee Members:

My name is Ed Adams. I am a member of the Advisory Council of the Southeastern Wisconsin Area Agency on Aging, who I am representing today. I am here today because we are concerned about the status of long term care programs and workers who provide these services. The current system of long term care is fragmented, underfunded, and extremely difficult to find your way through and that is why we support the Governor's Family Care proposal. In order to make this proposal work, there are certain things that are essential for making a real attempt at redesign.

The pilot programs that are already in place in areas that cover a large percentage of the state's population need adequate financial resources, in order to function properly and truly serve as a pilot project. These pilots are the cornerstone for the future of the Governor's Family Care proposal. Without proper funding, the state

Testimony for Joint Finance Committee Hearings on State Budget April 8, 1999 Page Two

will never be able to see what affect the pilot programs have on placing individuals in the right setting for care and will essentially fail. If the state is serious about making this system easier for people in need of long term care, it must make an effort to bring the long term care programs together. If the programs are not pulled together with the proper resources, the pilot counties will not be able to plan delivery of much needed services. I repeat, adequate funding is essential for a fair assessment of the pilot programs.

Next, we would like to stress the importance of protecting the rights of long term care customers or clients through the external advocacy component in the proposed language.

To make sure that people receiving these services are empowered with fair and expeditious ways to address their concerns, we are asking for your support that the external advocacy portion be maintained.

This external advocate would be independent of the agency or organization that is providing services for Family Care clients. It would

Testimony for Joint Finance Committee Hearings on State Budget April 8, 1999 Page Three

be the watchdog for all individuals looking to get the most from the programs that are available. It would also act as a center for persons who want to inquire about program eligibility, the level of care they will receive and provider options. If an individual feels their rights are being violated or if they are not receiving the quality of care they deserve, it is unfair to have that same agency or organization that may be violating these rights, investigating the complaint. It is also important that families and clients have an unbiased assessment of their needs. The external advocate is imperative to the success of the long term care redesign.

A major part of providing quality long term care for the elderly and disabled are the personal care workers. They are the front line workers who are the heart of long term care. They provide vital services for people in home care. If the state is going to redesign long term care, a sufficient and reliable workforce is crucial. Unfortunately, the governor's budget only includes a 1% pay reimbursement increase

Testimony for Joint Finance Committee Hearings on State Budget April 8, 1999 Page Four

for personal care workers which does not become effective until 2001. As small as this raise is, it is the first one proposed in four years. It is impossible to run a redesigned long term care network where keeping people in their homes is important, if organizations that provide the home care have to close their doors or turn away clients, because wages and fringe benefits do not stack up to other employment sectors. The time to turn around the image of personal care workers is now.

Adequate compensation is necessary to recruit and maintain these people to provide this valuable service.

In closing, I would like to thank you for your time here today.

This is a great opportunity for us older adults to share our concerns with you. I am hoping that you will support proper funding and resources for the Family Care pilot programs, fair pay and benefits for Personal Care Workers, and the formation of an external advocacy component for long term care services.

Testimony by Dan young 4-8-99 I was in a car accident in 1991. It less me a C5-6 Quad. I live in a Bedroom ranch with my daughters ages Tand 14. I need a PCW to provide the care that peeps me at home at a lower cost compared to all other options. I'm a tay paying home owner, I'm very involved cin keep cost as low as possible and get my needs met. This is a business I must compete with all other Companies for Kelp. I cannot Compete with substanard white wages and no benefits I despertly need Relp. I have not had a shower since December and no brake in sight Independence First has promised to pass the increase directly to the workers. This is the most cost effective situation available all other can not compair. This increase will make it possible for me to compete and get the Set Kelp I need. The other half is COP and they are being ask to help many more people with no increase in fundo. I will loose! Mestimony in support of the #4.00 increase to

Wages need to be raised for personal able to earn enough to live + pay their rent + food + gas + expenses + utilities, which going otherwise they constently look for new work + we dose them. We have to compete with nursing kones + Home hearth care agencies which often times are spared significantly higher & have ince that the day or dealed. INCOPPCIATONIDE THE CARETAT REEPS MEAT HOME ATA LOWER COMPAIR FAALL OTHER OPSOINS I ZM A TAX PAYING HOME DWISTM VARY INVARAGE IN KEEP COST AS LOW ASPOSABIL AND GOT WINNELDS WITH ALL OTDER COMPANES FOR HELP

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8008 West Capitol Dr. • Milwaukee, WI 53222 • (414) 464-1800 • FAX (414) 464-1804 April 6, 1999

11 -

Representative Cloyd Porter P.O. Box 8953 Madison, WI 53708

Dear Representative Cloyd Porter,

On behalf of children and families served by our agency and as Executive Director, we strongly urge your support of action to restore Community aids funding to Milwaukee County. While all other counties will face a reasonable and equitable cut of 2.9% in Community Aids, Milwaukee County's share are to be decreased by 13% (equalling \$2.9 million) from current levels.

Our agency staff and board members feel the stress created out of the continuous changes brought on by service delivery reorganization. Other programs experience this same difficulty but can tell you better the direct impact on treatment and care for individuals. We feel the State Legislature, through action by the Joint Finance Committee, should use \$2.9 million from its emergency contingency fund to solve this critical problem. We urge you to support action that would correct this inequity. Thank you.

Sincerely,

John H Molenaar 8008 W Capitol

Milwaukee, WI 53222

1-414-464-1800

home: N78 W14942 Pueblo Menomonee Falis, WI 53051

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To the Members of the Joint Finance Committee:

I am the parent of a child who receives special education services through the Racine County School Office and reside in the Waterford School District. I am unable to attend this meeting due to a prior commitment. Please allow me to submit my input regarding the funding issue before us.

My 9 year old son has the diagnosis of autism and has been a part of state programming since age 2. In addition to school, he participates in a state funded behavior modification home program. Having a child with any disability is an extremely time consuming and labor intensive lifestyle for parents, not to mention the emotional strain it can have on family members and all who work with these kids.

When he entered the Waterford school district, I was overwhelmed by how much is involved to ensure that my son received quality programming. Through the extraordinary efforts of RCSO in coordination with my local school district, I feel that everyone involved has done all they can to achieve that goal. We have had obstacles of little to no funding to implement certain areas of his education and I am astonished that we now have to face having funds cut even further!

Please, do not allow funding to be cut any further than it already is. Racine County School Office should be entitled to the funding that was not included in the Governor's funding provision. The taxpayers of Racine County should not be forced to pay more than its fair share of taxes to make up for an oversight on the part of the state.

Sincerely,

Maggie Kumbier

maggie Kumbie

3122 Buena Park Road Burlington, WI 53105

Community Aides Can not continue to be cet without continuing impact on the consumers being served. I am the Director of a Community Support Program in Milwaukee county as well as more in Raine County. Transitional Living Services are serving 175 people with Severe and Persistant Mental IMpess in Paline and Serving approximately 300 people in Milwaukee. I have seen the elifterence that the cuts in budgets have had in the different aunties. Palane Country lost an excellent Provider of CSP in Goodwill Industries due to insufficient finds. Who sufferred? The Consumersite one of which committed suicide during the transtron/enogogement phase. Services hade also been cut in Milwaukee. Group Home beds have decreased coop and Tem gots have decressed & we have run 2 certified community Support program in Milw. since. 1993 Last year of my team in Milw had only I hospitalization for 60 people. These 2 gracyams show how consistant community supports create a decreased need for country services ic hospitalization as well insuring a quality of life that could not otherwise be denicula. I have submitted multiple written statements from some of our consumers we were unable to attend todays meeting. The one that struck me

most was the consumer who indicated that how she was affected by CSP coss "life" and what would be the result if this program is cut was "death". This is a life and death budget out that you are discussing. The mental illnesses that are affecting these consumers are will result in deaths, drug alcohol self-medication & animinal justice incolvement, if services are out or eliminated. Please ansider corefill, the lives of your anotitoants that will be effected. Remember when dollars relate to lives we are all held accountable. Thank you for your time in reading this statement.

Dixerter, Mall Alland Elizabeth Aldred CSP Director

Transitional Living Scruces
Racine County and Milwarkee Clark

Ladies & Gentelmen el am addressing you because I feel that if the mental health is cut, the programs that are not cut will be overloaded. I have been solienvolved in several programs that are funded by you and I feel as well as others that they have benifited me, Without the programs like DXR, Division of Vocational Rehabilitation, I never would have graduated from & Gateway Technical Collage, They helped me pay for my books, and get through collage with special needs, like to special testing and textbooks read. another program is Homes for Independent living. el benifited from this & when el was getting out of Winibago and had nowhere to go. I was abbt able to stoy there for 6 months, till el got back on my feet, another program & benifited from was Goodwill. The CSP (community Support Program) helped me to get on my feet as far as controlling my money and helping to keep my medicine controlled. Eln January TLS Transitional Living Services took the goodwill or CSP program, When they started the Drop- in program, I started coming down and really having fun. This stopped

me from sitting an the couch at home and used that, too. When I was in my own suicidal, I could go there and get conseling, not be here today, these are just a few hove helped me in one way or another. you not to cut to cut the budget of the most for many or another. you not to cut the budget of the mental health services

Jodine L'Delray

Cup int and

> they really more then you even

> > Thank You 3219 Victory Ave Pacine WI

Hi, my name is Ryan c. Disole.

and I'm a client of PSN.

Swot Davis and His is my
worker and friend. And I
believe they should continue
to pressed with thier
work. Me and other kids
love to work a with them.
but its more tike playing
Thank you for your time.

have a nice. I hope to

Hi, my name 15 Sean O'Toole I am also a client of PSN, This is my first speech speech and I am very nerves. So really all.

-10: kim berly rlache If it was should be and fro gir my home that Helfed at School at home too. that Helped me got Back in School Becuse School is varry Important. Your have to stay in School.