



1 INCREASE FUNDING FOR LONG-TERM CARE

The availability of care for older Vermonters and those with disabilities is woefully inadequate. A stark example is the overall loss of twenty-one Residential Care and Assisted Living facilities, one hundred and twenty-three beds, between 2018-2024¹. At the same time, people aged 65-74 are the fastest growing age-cohort of households in Vermont². Addressing the shortage of long-term care options for Vermonters and their families is essential during the 2025 session.

WE URGE THE LEGISLATURE TO:

- **Increase Enhanced Residential Care (ERC) Medicaid rates** that cover the true cost of care for residents that need nursing home level of care. Without such increases, Cathedral Square’s two affordable assisted living communities providing homes and care to 44 Vermonters may face closure, as may many others.
- **Ensure annual rate increases to Medicaid reimbursement rates** for all home and community-based providers to keep pace with inflation and cover the increasing cost of care; and implement a regular rate review and update process.

¹ Vermont Department of Disabilities, Aging and Independent Living

² VHFA Housing Needs Assessment 2025-2029

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CATHEDRAL SQUARE BY THE NUMBERS

(December 2024 Snapshot)



2 INCREASE FUNDING OF PERMANENTLY AFFORDABLE AND SERVICE-ENRICHED HOUSING TO PREVENT HOMELESSNESS AND BUILD VIBRANT AND INCLUSIVE COMMUNITIES

Older adults (65+) are the fastest growing demographic group in Vermont and do not have the housing supply and options they need to live and age safely and healthfully in Vermont. Significant investments in affordable housing are needed to alleviate Vermont's chronic housing crisis and workforce shortage. This must include creating new housing units (375 age-specific homes needed per year according to the Age Strong Vermont Plan), re-investing in existing affordable and service-enriched communities to preserve them into the future, and creating a statewide supportive services fund. Increasing affordable and appropriate housing options for older adults will also increase the housing options for younger adults and families.

WE URGE THE LEGISLATURE TO:

- **Direct the full statutory share of the Property Transfer Tax (PTT) of \$34M to VHCB** along with additional one-time funds to prioritize new construction of affordable housing, reinvestment in existing affordable communities, and to establish a supportive services fund.

3 PRESERVE AND EXPAND SASH®: Improve the Health Equity and Housing Stability of All Vermonters while Saving Health Care Costs

SASH® (Support and Services at Home), is a proven model that has reduced the cost of health care for Vermonters by investing in prevention and focusing on the social drivers of health since 2011. Over 12,000 older Vermonters and those with disabilities have participated in SASH since its inception. The primary funding source for SASH is Medicare via the All-Payer Model which concludes at the end of 2025. The AHEAD (All-Payer Health Equity Approaches and Development) model is targeted to begin in 2026 and is the only path for continued funding for SASH at this time.

WE URGE THE LEGISLATURE TO:

- **Continue to support full SASH funding to Cathedral Square for statewide administration** with an annual increase to help off-set inflation and ensure SASH funding from Medicare is part of Vermont's implementation of the AHEAD model. Without the essential Medicare funding for SASH, over 5,000 Vermonters will lose SASH services, causing health care costs to increase and over 120 staff to lose their jobs.

For more information on Cathedral Square's priorities, please contact:

Molly Dugan, Director of Policy & Strategic Initiatives: dugan@cathedralsquare.org | 802-578-6074

Or visit: CathedralSquare.org/take-action



cathedralsquare.org

412 Farrell St., Suite 100, South Burlington, VT 05403
802-863-2224 | info@cathedralsquare.org

