

Hello,

I would like to first thank Chairperson Carpenter and the esteemed members of this Special Committee for your continued work on behalf of Kansans with disabilities.

My name is Zoe Surprise-Murphy. I am a TCM at Cottonwood, Inc. in Lawrence. Cottonwood is a service provider with a department of nine TCMs, which serves 311 persons with disabilities who receive a variety of services at Cottonwood, other provider organizations in the community, or who are on the waiting list for the I/DD Waiver.

My fellow conferees have spoken today and have written testimony about how this will impact the end user of services: Kansans with disabilities and their families.

I'd like to provide the perspective of myself, my colleagues, and many other TCMs across Kansas that will be negatively affected if this issue is not thoroughly deliberated and thoughtfully executed.

Like many in the I/DD field, I started off as a direct support worker at a group home, where I fell in love with helping others and felt like I was changing lives for the better. I changed my undergraduate major and any career aspirations I had to instead work with individuals with disabilities. After college, becoming a TCM broadened my scope further, and allowed me to apply those skills into making long-term plans and advocate at a higher level. **That** is what I want to do for the rest of my life.

I did not get into this field to start a business. I did not get into this field to operate a case management organization, to handle the finances, to hire and fire staff, or to advertise my services. I got into the field because I love helping people access the community, find resources they need to meet their goals, and create plans that reflect the supports and preferences of the people I serve.

To put it bluntly, I would not be able to continue my career as a TCM if I were forced to start and manage an independent organization. In 2023, TCMs got a rate increase for services for the first time in 15 years. No viable business can survive with rate adjustments on a 15-year timetable. I rely on the cushion of my employer as a whole to make up for the sheer cost of case management.

I am here providing testimony because I love my job. I love the people I work with and getting to know them over the long term. I've been a TCM for three years, and in a field with extreme turnover rates, I'm sometimes the longest stable member of a person's support team. If this issue is not handled with the time and consideration it deserves, I will not continue in my TCM role and be forced to prematurely abandon my career aspirations before I could live them out. My TCM colleagues at Cottonwood shared that they, too, will not pursue starting independent TCM businesses, or work in regional centers with unmanageable caseload numbers as other states that KDADS and PCG want to model after. There are simply not enough providers to absorb the 311 individuals who will no longer have a TCM if the "easy" route is taken by the state. And that's just one provider among any others across the state who have shared the same feeling. We do not want to manage a business, check boxes on papers, and leave at 5 o'clock. We want to get to know and meaningfully interact with the people we serve so that we can provide services and supports they deserve.

I want the powers that be to make a thoughtful and deliberate plan for this issue. We did not get into this field out of convenience, and convenience should not be the reason a system made up of thousands of Kansans is thrown into disarray.