

# Virginia Disability Commission

## January 9, 2006 Meeting Summary

### I. Call to Order/Opening Remarks

Delegate McQuigg, acting chair, called the meeting to order and reviewed the proposed agenda.

The Commission received a copy of the letter Delegate McQuigg wrote to then-Governor-elect Kaine, encouraging him to continue the work of the Olmstead Initiative through executive order.

### II. Report on Governor's Proposed Budget

Susan Massart, Legislative Fiscal Analyst for the House Appropriations Committee, presented an overview of the Governor's proposed budget for Health & Human Resources (HHR). Of the total \$7,619 million, approximately 65% was allotted to the Department of Medical Assistance Services (DMAS), which administers Virginia's Medicaid program. Approximately 1% of the budget was for "disability agencies," such as the Department of Rehabilitative Services (DRS), the Department for the Blind and Vision Impaired (DBVI) and the Department for the Deaf and Hard of Hearing (VDDHH).

The HHR budget reflected a net increase of \$886.0 million General Fund (GF) and \$399.8 million Nongeneral Fund (NGF). Of this amount, however, 78% was attributable to federal and state mandates, caseload and cost increases in existing programs, and critical needs. Spending initiatives included major mental health and mental retardation restructuring and rate increases for selected service providers under Medicaid.

Ms. Massart also listed requested funding by agencies versus funding included in the proposed budget. Of the total \$84.9 million GF requested, the proposed budget includes approximately \$15.7 million GF. The budget includes \$25,000 to fund the Disability Commission.<sup>1</sup>

[Link to complete presentation is [here](#).]

### III. State Rehabilitation Council – Summary of Budget Priorities

Hiawatha Nicely, Vice-Chair of the Virginia State Rehabilitation Council, the advisory council to DRS, thanked the Commission for its past support of disability programs and presented the Commission with information on budget initiatives the Council requested that the Commission consider.

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<sup>1</sup> Pursuant to the second enactment clause in Chapters 992 and 1015 of the Acts of Assembly of 2004, the chapter creating the Commission "shall expire on July 1 of the fiscal year in which the Commission fails to receive such funding."

These items were:

- **Funding to end Order of Selection**

In 2004, DRS began using Order of Selection, mandated by the federal Rehabilitation Act when funds are not sufficient to serve all eligible individuals. The Council estimated that, by adding \$600,000 per year for FY 2007 and 2008, DRS would be able to serve the estimated 630 people who will be on the waiting list as of June 30, 2006. This budget increase would lead to increased numbers of Virginians with disabilities who could become gainfully employed.

- **Funding to expand the Postsecondary Education Rehabilitation Transition (PERT) Program**

The Council sought \$490,000 per year to address increased demand for PERT services offered at the Woodrow Wilson Rehabilitation Center (WWRC). The PERT program is a 9-10 day residential assessment program directed at high school students age 16-20. It is designed to provide a continuum of services to these young people as they transition from high school to adulthood.

- **Funding to expand and improve the Life Skills Transition Program**

The Life Skills Transition Program at WWRC is an eight-week program for young adults, age 18-22, with severe or complex disabilities, whether they are still in high school or have dropped out of high school. The program encompasses pre-employment, social, interpersonal, and independent living skills, with a goal of allowing these young people to reach their employment and independent living goals. Without increased funding, approximately 120 youths would be served; with an additional \$490,000 per year, the total number served could be increased to 270.

[Link to complete presentation is [here](#).]

#### **IV. Department of Medical Assistance Services – Report on Medicaid Buy-In Waiver**

Jack Quigley of the Department of Medical Assistance Services (DMAS), joined by Raymond Bridge on behalf of the advisory committee, reported on developments related to the Medicaid Buy-In waiver program that DMAS has been developing, an effort the Commission has supported. After working since 2002 on various proposals, the advisory committee working with DMAS is concerned that a waiver will not be approved, and they suggest implementing a buy-in arrangement as a part of the state Medicaid plan.

Support of a budget amendment to include a buy-in is encouraged because employed people with disabilities who currently receive and need Medicaid benefits are discouraged from working to their abilities as a result of the possibility of losing their benefits while not earning enough to pay for needed care on their own.

## **V. Public Comment**

### **Rehabilitative Services Incentive Fund**

Chet Avery, member of the Alexandria Commission on Persons with Disabilities, requested the Commission to consider a budget amendment that would restore the Rehabilitative Services Incentive Fund (RSIF) to \$912,500 per year -- the level of funding in existence in 2002. Because of budget cuts in FY2003 and FY2004, the amount expended has dropped to only \$180,000 appropriated in the Governor's proposed budget.

Mr. Avery recounted the development of the RSIF, through which Disability Services Boards in the Commonwealth identify unmet or unserved local needs and, more importantly, are able to create model programs, coordinated services systems and other innovations. The RSIF consists of reimbursement grants to localities. In 2002 there were 69 grants awarded. In FY2004 there were 13 grants and in FY2006 only 12 grants.

Mr. Avery discussed innovations within Alexandria that were made possible through RSIF funding, and cited other DSBs that would support increased funding.

[Link to complete presentation is [here](#).]

### **Brain Injury Services**

Jason Young of the Virginia Alliance of Brain Injury Services Providers requested Commission support for two budget amendments for which the Alliance had previously found patrons:

First, funding for a Brain Injury Waiver. The proposed waiver would provide 200 slots statewide, and would support individuals already in nursing homes or other institutions and would also provide funding for community-based services. The amount requested is \$75,000 for the first year to complete the waiver application and \$7.5 million GF in FY2008 for service delivery.

Second, funding to maintain and expand state services. This would build upon the system already in place by ensuring that core services are available to the approximately 147,000 brain injury survivors statewide. The budget request is \$3.6 million GF per year.

## **VI. Commission Discussion of Budget Amendments**

After much discussion of the needs expressed, the Commission determined to endorse a budget amendment to fund the Medicaid Buy-In in the amount stated above, and to support the budget amendments related to brain injury waiver and services.

The Commission also endorsed a budget amendment to provide funding to end order of selection for DRS services, in the amount recommended by the State Rehabilitation Council.

## **VII. Proposals for 2006 Work Plan**

The Commission members discussed possible avenues of inquiry for 2006, with a focus on meeting the Commission's mission as stated in Code § 30-232: "to identify and recommend legislative priorities and policies for adoption or examination by the General

Assembly in order to provide ongoing support in developing and reviewing services and funding related to Virginians with physical and sensory disabilities."

The Commission determined that its work for the 2006 interim will include the following topics: the Rehabilitative Services Incentive Fund (uses, successes, and any needed improvements or increased funding); Centers for Independent Living (with a long-term goal of establishing centers throughout the state); employment of people with disabilities within the Commonwealth (including review of the Commonwealth's own employment practices); and remaining informed of efforts taken by various agencies, with a focus on ensuring coordinated efforts across the spectrum of disability services.