

Virginia Disability Commission November 16, 2005 Meeting Summary

I. Call to Order/Opening Remarks

Governor-elect Tim M. Kaine, Commission Chairman, called the meeting to order. He thanked the Commission members for their hard work, and announced that this would be his last meeting as the Commission's next meeting will involve a determination of legislative and budget initiatives, which should be discussed in his absence because of his election as governor.

II. Our Lives, Our Voices Conference

Dana Yarbrough, Community Support Specialist for the partnership for People with Disabilities, recapped the October conference, held in Richmond. Ms. Yarbrough stated that there were 175 attendees, including policy makers, agency leaders, and individuals nominated by local Community Services Boards. There were segments on subjects such as transportation, employment, adult education, housing, and personal assistance. A complete summary will be available on the Partnership's website in December 2005.

Christina Draper, one of the members of the New Voices Planning Committee, spoke to the Commission about needs shared by many people with disabilities. These needs include: (1) allowance for more personal care hours; (2) transportation to allow people with disabilities to live productively and independently; (3) employment; (4) health care for personal assistants, thereby reducing turnover; (5) accessible and affordable housing.

Ms. Draper praised the Commonwealth's progress in making polling places accessible. She voted unassisted for the first time because her polling place had implemented touch screen technology.

III. Transportation Projects through Virginia Board for People with Disabilities (VBPD)

Teri Barker-Morgan, Program Manager at VBPD, reviewed three programs funded by the Board. The first was the LINKS Unified Transportation Clearinghouse. The Peninsula Center for Independent Living received a \$45,000 grant to conduct a consumer-directed transportation survey to capture information relating to users' needs, demographic information, and satisfaction, as well as barriers to a well-coordinated transportation system. In addition to surveys, public forums were held. A final [report](#) providing data and recommendations was given to the members of the Commission.

The second program discussed was the Community Transportation Coordination Demonstration project. Four County Transit, the transportation department of the Appalachian Area Association for the Aging, received \$100,000 for a two-year project to develop a model approach for community-based transportation planning, coordination, and deployment.

In achieving coordination in this rural area, Four County Transit called upon 29 community-based organizations for input. Utilizing the VBPD funding, Four County Transit developed software to support its coordination efforts. This technology has resulted in increasing passenger trips from 2001 to 2004 by 57% while decreasing miles traveled by 71%. A complete report will be posted to the VBPD website.

The third program discussed was the Transportation and Housing Alliance. In July 2005 VBPD awarded the Thomas Jefferson Planning District Commission an 18-month, \$100,000 grant to develop a Transportation and Housing Alliance (THA) to "serve as a conduit of information, resources, technical assistance and education." In addition, the THA will make policy recommendations in the areas of transportation and housing to address these issues statewide. The THA will develop an "assessment tool kit" for planning districts across the state to use in making future planning decisions.

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

IV. Housing Work Group

Denise Goode, Chairman of the Disability Commission's Housing Work Group, reported to the Commission that the work group is endeavoring to assist localities with implementation of 2005 legislation (HB2407 – Phillips; SB1238 – Puller) that requires localities to provide for the needs of elderly and disabled people in their comprehensive plans. The work group has created a steering committee to work with the THA in developing guidelines for use by the localities. The work group plans to make its efforts known to planners at their annual meeting.

V. Personal Assistance Services

Jim Rothrock, Commissioner of the Department of Rehabilitative Services (DRS), reported on compensation to personal assistants (PAs) paid through DRS. This is a consumer-driven program, as the PAs are individuals hired by individuals. The PAs are paid an hourly wage for assisting with daily living activities such as bathing, dressing, and eating.

A concern has been the turnover created by low wages, lack of health benefits, insufficient training, and limited opportunities for advancement. At the September Disability Commission meeting, Senator Miller asked whether it might be possible to provide health benefits to PAs. Mr. Rothrock reported that there are several barriers to providing these benefits within the framework of this program. The employer is the consumer, not the agency; PAs work inconsistent hours from week to week; the individual consumer may employ several PAs; the cost of administration is burdensome; and there is not a large enough group of PAs to create a sufficient pool for economical insurance rates.

Mr. Rothrock noted that Virginia's rate of pay is relatively low. To increase the pool of qualified assistants, Mr. Rothrock submitted three options: (1) increase base hourly pay, (2) provide monthly stipends for PAs working at least 30 hours per week on a regular basis, and (3) offer incentive payments to PAs for skill development or longevity.

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

VI. JLARC Study on Medicaid Reimbursement Rates for Home and Community-Based Care Services

Kimberly Sarte, Project Leader for the study, directed under the 2005 Appropriation Act, reported on the study's findings and recommendations. Pursuant to this mandate, JLARC studied both the adequacy of Medicaid reimbursement rates for home and community-based care services (HCBs) and the impact of reimbursement rates on access to care for Medicaid recipients.

Among the findings related by Ms. Sarte are the following:

- Virginia ranks 48th in terms of total Medicaid long-term care expenditures per capita
- An above-average proportion of the long-term spending goes to institutional services versus HCB services
- While overall Medicaid spending has increased, reimbursement rates have increased little over the last decade
- Rates do not appear to enable providers of certain services to pay their employees a competitive or living wage
- A rate adjustment for Northern Virginia appears appropriate
- Concerns over reduced access to services in certain areas of the state were unwarranted

Members of the Commission asked follow-up questions, including discussion about the effect of moving recipients out of institutional settings, which are more costly, into community-based settings, thus allowing increase in rates without additional overall expenditures.

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

VII. Report Regarding Virginia's Olmstead Initiative

Joan Manley, chair of the Oversight Advisory Committee, and Julie Stanley, Director of Community Integration for People with Disabilities, jointly presented a report summarizing the progress made and priorities for future action adopted by the Oversight Advisory Committee, which was created by executive order that expires January 14, 2006. (EO 61 (2004); EO 84 (2005)).

Among the achievements are the full implementation of 34 task force recommendations, including newborn screening, housing registry, and education of builders and architects on accessibility and universal design principles. In addition, there has been substantial progress on many other recommendations, including new waiver slots and additional waivers in existing programs.

Ms. Manley informed the Commission of the Oversight Advisory Committee's top six priorities:

1. Increase Medicaid reimbursement rates
2. Increase personal maintenance allowance (relating to Medicaid benefits)

3. Increase the number of Medicaid waiver slots to enable faster transition out of residential programs
4. Address state mental health facility discharge waiting lists
5. Create incentives to attract and retain qualified candidates to disability care occupations
6. Increase eligibility for Medicaid services

In addition, eight other priorities were discussed, as were housing needs. [Link to complete presentation is [here](#).]

Governor-elect Kaine excused himself from the remainder of the meeting.

Finally, Ms. Stanley advised the Commission of the Oversight Advisory Committee's recommended "next step," legislative creation of a permanent advisory board, team, and director. This legislation would create an executive branch team with membership from multiple agencies and secretaries, with the duty to develop a cross-governmental strategy for community integration of people with disabilities. In addition, the proposed legislation would create an advisory board of citizens to monitor implementation and advise the implementation team. [Link to proposed legislation is [here](#).]

After extensive discussion, the Commission members determined that they would write a letter to Governor-elect Kaine, encouraging him to issue an executive order continuing the Olmstead initiative in the current manner.

VII. Public Hearing

Jason Young, representing the Virginia Alliance of Brain Injury Service Providers, advised the Commission that they had found patrons in both houses to support budget requests for funding of the brain injury waiver and for funding to maintain and expand program infrastructure for services to people with brain injury. The brain injury waiver funding requested is \$75,000 for FY 06-07 and \$7.5 million for FY 07-08. This would fund 200 slots. The infrastructure amount requested is \$3.6 million for FY 06-07 and \$3.6 million for FY 07-08.

VIII. Next meeting.

The Commission determined that a December meeting will not be necessary. It will take up budget recommendations when it meets in January; date to be determined.