



Disability



Action



Coalition

DISABILITY CAPITOL ACTION DAY

Public Policy Priorities

THIS YEAR'S DCAD THEME IS THE ***Olmstead*** DECISION, WHICH STATES THAT PEOPLE WITH DISABILITIES, INCLUDING SENIORS, MUST BE ABLE TO CHOOSE LIFE IN THE COMMUNITY RATHER THAN IN AN INSTITUTION. DURING YOUR LEGISLATIVE VISITS WE ENCOURAGE YOU TO FOCUS ON THE FOLLOWING BILLS AND BUDGET ISSUES, WHICH AFFECT CONSUMER CHOICE.

LEGISLATION

HEALTH & ASSISTIVE TECHNOLOGY & EMPLOYMENT

SUPPORT: AB 214 (Chesbro) REQUIRES HEALTH SERVICE PLANS TO COVER MEDICALLY NECESSARY DURABLE MEDICAL EQUIPMENT (DME) AND SERVICES; WITH NO CAPS LOWER THAN THOSE FOR THE OVERALL HEALTH BENEFIT.

- DME (INCLUDING WHEELCHAIRS, BREATHING MACHINES, SHOWER CHAIRS, HOSPITAL BEDS, ETC...) IS CRUCIAL FOR THE PEOPLE WHO NEED IT TO WORK AND PAY TAXES, TAKE CARE OF THEIR FAMILIES, AND CONTRIBUTE TO THEIR COMMUNITIES, WHETHER THEY ARE RECOVERING FROM A CAR ACCIDENT OR LIVING WITH A LONG TERM DISABILITY;
- 90% OF CALIFORNIA HEALTH PLANS LIMIT DME COVERAGE TO \$2,000 ANNUALLY, WHICH IS NOT ENOUGH TO EVER BUY A WHEELCHAIR;
- AB 214 CAN SAVE THE STATE A LOT OF MONEY. ELEVEN PERCENT OF PEOPLE ON MEDI-CAL ALSO HAVE PRIVATE INSURANCE, AND THEIR INSURANCE HAS LIMITS ON DME. IN 2008, MEDI-CAL SPENT \$6,526,503.67 – HALF OF IT GENERAL FUND – ON DME FOR PEOPLE WITH OTHER HEALTH INSURANCE COVERAGE.

SUPPORT: AB 1269 (Brownley) ENHANCES THE MEDI-CAL CALIFORNIA WORKING DISABLED PROGRAM, WHICH PROVIDES AFFORDABLE HEALTH COVERAGE FOR WORKING DISABLED INDIVIDUALS, BY:

- EXTENDING ELIGIBILITY TO 26 WEEKS DURING PERIODS OF UNEMPLOYMENT, AS LONG AS INCOME FALLS BELOW 250% OF FEDERAL POVERTY LEVEL;

- LIMITING THE AMOUNT OF THE PREMIUMS;
- EXEMPTING SOCIAL SECURITY DISABILITY INCOME AND PERMITTING SAVINGS.

THESE CHANGES WILL ALLOW MORE PEOPLE WITH DISABILITIES TO JOIN THE WORKFORCE AND SAVE SOME EARNINGS WITHOUT PENALTIES.

IN HOME SUPPORT SERVICES

SUPPORT: AB 1532 (Lieu) ENSURES THAT CERTAIN FEDERAL FUNDING RECEIVED BY COUNTIES IS KEPT IN THE IHSS PROGRAM. ORIGINALLY, THE STATE AND COUNTIES PAID FOR IHSS, BUT STARTING IN THE MID-1990'S, THE FEDERAL GOVERNMENT HAS TWICE INCREASED THE AMOUNT IT PAYS TOWARDS IHSS. BOTH TIMES, THE COUNTIES SAVED MONEY BECAUSE OF THE INCREASED FEDERAL CONTRIBUTION, BUT THE COUNTIES WERE NOT REQUIRED TO KEEP THE SAVINGS IN THE IHSS PROGRAM. NOW THE FEDERAL GOVERNMENT HAS AGAIN INCREASED ITS CONTRIBUTIONS THROUGH THE AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009, WHICH MEANS THE COUNTIES SAVE MONEY AGAIN – MONEY WHICH SHOULD STAY IN THE IHSS PROGRAM.

WHILE NO ONE IN THE DCAD COALITION WANTS TO SEE FRAUD IN THE IHSS PROGRAM, WE OPPOSE THESE BILLS, BECAUSE THEY **do not reduce fraud** BUT WILL BURDEN CONSUMERS AND WORKERS.

OPPOSE: SB 141 (Maldonado) REQUIRES THAT EVERY IHSS PROVIDER TIMESHEET SUBMITTED FOR PAYMENT BE SIGNED BY BOTH IHSS PROVIDER AND RECIPIENT DECLARING UNDER PENALTY OF PERJURY THAT THE INFORMATION ON THE TIMESHEET IS TRUE AND CORRECT.

- PROVIDES CIVIL PENALTY OF \$500;
- BURDENS IHSS WORKERS AND CONSUMERS. THIS IS NOT REQUIRED OF OTHER EMPLOYER AND EMPLOYEE RELATIONSHIPS.

OPPOSE: SB 142 (Maldonado) REQUIRES THE DEPARTMENT OF SOCIAL SERVICES TO DEVISE A METHOD TO GIVE IHSS PROVIDERS A LIST OF APPROVED DUTIES BEFORE WORKING FOR AN IHSS CONSUMER. THIS WOULD:

- UNDERMINE CONSUMER CONTROL OVER IHSS BECAUSE, BY LAW, THE CONSUMER IS THE EMPLOYER WITH THE AUTHORITY TO HIRE, FIRE, AND DIRECT THE HOMECARE WORKER;
- MAKE IT DIFFICULT TO MEET THE CONSUMERS' NEEDS AT THE TIME THE SERVICES ARE PROVIDED. FOR EXAMPLE, IF A CONSUMER IS ILL AND CAN'T GET OUT OF BED TO PREPARE HER MEALS, THE HOMECARE WORKER SHOULD BE ABLE TO DO THAT

EVEN IF MEAL PREPARATION WASN'T ON THE ORIGINAL LIST OF SERVICES BECAUSE WHEN THE CONSUMER WAS ASSESSED, SHE WAS ABLE TO PREPARE HER OWN MEALS.

STATE BUDGET

THE GOVERNOR AND THE LEGISLATURE HAVE ALREADY SLASHED SUPPORTS AND SERVICES FOR PEOPLE WITH DISABILITIES FOR THE BUDGET YEAR STARTING JULY 1, 2009. ON MAY 14, WITH A BUDGET DEFICIT ESTIMATED TO BE UP TO \$23 BILLION THROUGH JUNE 2010, THE GOVERNOR RELEASED HIS MAY REVISION PROPOSALS, WHICH INCLUDE NEW AND DEEPER CUTS TO VITAL SERVICES. THE GOVERNOR SAID THAT SOME CUTS WOULD BE WITHDRAWN IF THE PROPOSITIONS PASS ON MAY 19TH. THESE ARE SOME OF THE CUTS ALREADY TAKEN AND SOME OF THE CUTS PROPOSED IN THE MAY REVISION.

MEDI-CAL

Medi-Cal Cuts Already Taken in the 2009-10 Budget

ELIMINATION OF MEDI-CAL OPTIONAL BENEFITS: ADULT DENTAL, ACUPUNCTURE SERVICES, AUDIOLOGY SERVICES AND SPEECH THERAPY SERVICES, CHIROPRACTIC SERVICES, OPTOMETRIC AND OPTICIAN SERVICES, INCLUDING SERVICES PROVIDED BY A FABRICATING OPTICAL LABORATORY, PODIATRIC SERVICES, PSYCHOLOGY SERVICES, AND INCONTINENCE CREAMS AND WASHES. PEOPLE GETTING MEDI-CAL WILL GO WITHOUT THESE VITAL SERVICES, OR GO TO EMERGENCY ROOMS WHEN THEY ARE IN CRISIS, AT GREAT COST TO THE STATE. THEY MAY FEEL THEIR ONLY CHOICE IS TO GO TO NURSING HOMES. THESE SERVICES WILL CONTINUE TO BE AVAILABLE IF A PERSON IS IN A NURSING HOME. THIS CREATES AN INSTITUTIONAL BIAS, WHICH GOES AGAINST THE PRINCIPLES OF THE OLMSTEAD DECISION.

The May Revision Proposal for Medi-Cal

THE GOVERNOR PROPOSES UNSPECIFIED ADDITIONAL CUTS IN MEDI-CAL SPENDING OF \$750 MILLION, IF THE OBAMA ADMINISTRATION GIVES CALIFORNIA PERMISSION TO MAKE THEM. THE ADDITIONAL CUTS WILL PROBABLY CHANGE ELIGIBILITY FOR SOME MEDI-CAL SERVICES, MEANING PEOPLE WILL LOSE COVERAGE.

THE GOVERNOR PROPOSES TO SAVE AN ADDITIONAL \$125 MILLION BY REDUCING MEDI-CAL SERVICES FOR NEWLY QUALIFIED LEGAL IMMIGRANTS AND FOR THOSE WHO ARE PERMANENTLY RESIDING IN THE UNITED STATES UNDER COLOR OF LAW (PRUCOL). EFFECTIVE OCTOBER 1, 2009, THIS PROPOSAL WOULD LIMIT BENEFITS FOR NEWLY QUALIFIED IMMIGRANTS (OVER THE AGE OF 20 AND EXCLUDING PREGNANT WOMEN) AND PRUCOL IMMIGRANTS TO EMERGENCY SERVICES ONLY.

May Revision Proposed Additional Cuts if Propositions Fail

THE GOVERNOR PLANS ON CUTTING THE CASH ASSISTANCE PROGRAM FOR IMMIGRANTS (CAPI) AND CALIFORNIA FOOD ASSISTANCE PROGRAM (CFAP):

- CAPI PROVIDES CASH ASSISTANCE TO IMMIGRANT SENIORS AND PERSONS WITH DISABILITIES WHO DO NOT QUALIFY FOR FEDERAL SSI. CFAP PROVIDES FOOD STAMPS TO IMMIGRANTS WHO DO NOT QUALIFY FOR FEDERAL SSI OR FOOD STAMPS;

- CAPI SERVES AS A LIFELINE FOR PEOPLE WHO RELY ON THE GRANT TO SECURE HOUSING, FOOD, AND OTHER BASIC NEEDS. CAPI SERVES ALMOST 10,000 LAWFULLY RESIDING IMMIGRANT SENIORS AND IMMIGRANTS WITH DISABILITIES IN CALIFORNIA.

IN HOME SUPPORT SERVICES

IHSS Cuts Already Taken in the 2009-10 Budget

Share of Cost Increase: FORCES NEW IHSS CONSUMERS WHO COME ON THE PROGRAM AFTER JULY 1, 2009 AND WHO HAVE INCOME GREATER THAN SSI TO PAY A SHARE OF COST WHICH CAN BE SEVERAL HUNDRED DOLLARS. IF IHSS CONSUMERS CAN'T AFFORD THE COST, THEY COULD LOSE HOME CARE SERVICES.

Wage Cuts: THE BUDGET CUT STATE PARTICIPATION IN IHSS WAGES SO THEY WILL BE \$9.50 PER HOUR, PLUS 60 CENTS FOR BENEFITS. THIS BUDGET CUT HAS NOT YET BEEN APPROVED BY THE OBAMA ADMINISTRATION.

IHSS Proposal for the May Revision

Reduce Wages to Minimum Wage: THE GOVERNOR PROPOSES TO FURTHER CUT THE STATE'S SHARE OF IHSS WAGES TO THE STATE **minimum wage** of **\$8.00 per hour**, PLUS \$0.60 PER HOUR FOR HEALTH BENEFITS.

Elimination of IHSS Domestic and Related Services and Increase share of cost. IHSS CONSUMERS ARE ASSIGNED A FUNCTIONAL INDEX RANK (1-5) FOR EACH IHSS SERVICES, REFLECTING HOW MUCH HELP IS NEEDED FOR EACH SERVICE. THE GOVERNOR PROPOSES TO TAKE AWAY ANY DOMESTIC AND RELATED SERVICES (SUCH AS MEAL PREPARATION AND CLEANING KITCHENS AND BATHROOMS) IF THE CONSUMER RANKS BELOW A 4 FOR THAT SERVICE, AND TO INCREASE THE SHARE OF COST FOR ANY IHSS CONSUMERS WITH AN AVERAGE FUNCTIONAL INDEX SCORE BELOW 4.

\$15.8 Million IHSS Anti-Fraud Initiative: THE GOVERNOR PROPOSES TO SAVE 15.8 MILLION DOLLARS THROUGH AN ANTI-FRAUD INITIATIVE, BUT HAS SUPPLIED NO DETAILS WHAT LAWS OR RULES OR ACTION WILL BE NEEDED TO DO SO.

IHSS Cuts if Propositions Fail for the May Revision

THE GOVERNOR PROPOSES TO TAKE AWAY ALL IHSS DOMESTIC SERVICES FOR CONSUMERS WITH AN AVERAGE FUNCTIONAL INDEX BELOW 4.

THE GOVERNOR PROPOSES TO TAKE AWAY ALL IHSS SERVICES (BOTH PERSONAL CARE AND DOMESTIC) FOR ANY CONSUMER WITH A FUNCTIONAL INDEX BELOW 3. THIS MEANS THAT IF AN IHSS CONSUMER HAS THE PHYSICAL ABILITY TO DO THE IHSS TASK, BUT NEEDS DIRECTION OR PROMPTING, NO SERVICES WILL BE ALLOWED. THIS CUT WILL SEVERELY AFFECT CONSUMERS, INCLUDING SENIORS, WITH CERTAIN PSYCHIATRIC OR DEVELOPMENTAL DISABILITIES OR WHO HAVE TRAUMATIC BRAIN INJURY.

- THESE CUTS WILL JEOPARDIZE THE SAFETY OF PEOPLE WHO NEED THESE SERVICES.
- THESE CUTS WILL MAKE IT MORE DIFFICULT FOR PEOPLE WITH DISABILITIES TO LIVE IN THEIR COMMUNITIES.
- THE STATE IS INCREASING THE RATES **to nursing homes**, CLEARLY CONTRARY TO *Olmstead*.

SUPPLEMENTAL SECURITY INCOME (SSI)

SSI Cuts Already Taken in the 2009-10 Budget

- **May 1:** GRANTS WILL GO FROM \$907 TO \$870 PER MONTH FOR AN INDIVIDUAL AND FROM \$1,524 TO \$1,524 PER MONTH FOR COUPLES.
- **July 1:** GRANTS WILL GO FROM \$870 TO \$850 PER MONTH FOR AN INDIVIDUAL AND \$1,524 TO \$1,489 PER MONTH FOR COUPLES.

The May Revision Proposal for SSI: Deeper cuts_

- ON SEPTEMBER 1, THE MAXIMUM GRANT FOR AN INDIVIDUAL WOULD DROP FROM \$850 TO \$830 PER MONTH AND THE MAXIMUM GRANT FOR A COUPLE FROM \$1,489 TO \$1,407 PER MONTH.
- PEOPLE ON SSI/SSP – CALIFORNIA’S POOREST SENIORS AND PEOPLE WITH DISABILITIES – HAVE TO MEET ALL THEIR BASIC NEEDS LIKE FOOD, CLOTHING AND SHELTER, FROM THIS CHECK. THESE CUTS, COMBINED WITH CUTS TO MEDI-CAL AND IHSS, WILL MAKE THREATEN THEIR ABILITY TO LIVE WITH ANY LEVEL OF SAFETY AND INDEPENDENCE.

DEPARTMENT OF DEVELOPMENTAL SERVICES (DDS)

Cuts Already Taken in the 2009-10 Budget

\$100 MILLION CUTS IN THE DDS BUDGET FROM THE COMMUNITY CARE SYSTEM. THESE CUTS ARE STILL YET TO BE DECIDED THROUGH A STAKEHOLDER PROCESS.

The May Revision Proposal for Department of Developmental Services

- \$234 MILLION IN ADDITIONAL CUTS;
- ALL CUTS ARE TO THE COMMUNITY CARE SYSTEM, NOT TO THE INSTITUTIONS, CONTRARY TO OLMSTEAD.