

# Council Connection

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DDA BUDGET  
HEALTH  
EDUCATION

*The Maryland  
Developmental  
Disabilities  
Council advocates  
for public policy  
and supportive  
practices and  
opportunities that  
promote the full  
inclusion of all  
people with  
developmental  
disabilities in  
community life.*

## SELF-EMPLOYMENT BY PEOPLE WITH DEVELOPMENTAL DISABILITIES ON THE RISE

**S**elf-employment is an often overlooked work opportunity for people with developmental disabilities in spite of numerous benefits. One of the biggest advantages is the ability to earn more money, have cash resources, and accumulate wealth. People can pursue their own interests and utilize their unique skills. Business owners have more control over their lives, and work schedules can be more flexible.

Greg Prater of Carroll County is a good example of a successful entrepreneur. Every year, the Baltimore District Office of the U.S. Small Business Administration (SBA) recognizes outstanding small business owners. Mr. Prater, a self-employed business owner, is one of this year's recipients of the SBA's Small Business Week Awards.

When Mr. Prater began receiving vocational services from The Arc of Carroll County, he was clear that he wanted to work. So when workshop jobs slowed, he was enthusiastic about exploring other opportunities. With the support of The Arc, the Division of Rehabilitation Services (DORS), and the RISE Program of Maryland, he was able to obtain funding and support to begin his business, *Greg's Vending Machines*. He keeps the vending machines stocked, makes sure they are working, and collects the money. The Arc supports Mr. Prater and assists with the financial records and other

business operations as needed.

You don't have to go far to see other successes. Project Income, a Council project, has assisted other people with developmental disabilities in Howard and Anne Arundel Counties to start their own businesses. The project has helped people identify an interest, develop a business plan and find resources to start a venture. Josh Miller tailored his passion for wood working by developing *JW Wood Creations*, a business that makes and markets crab mallets. Lori Powell is the owner of the *Heart & Friendship Company*, a note card company featuring her own artwork. Lauren Duffy's *Affordable Mail Service LLC* provides first class and local bulk mailing services.

Like most businesses, those run by people with developmental disabilities require seed money and assistance to get off the ground. However, most people with developmental disabilities need on-going support of families and/or support agency. Fortunately in Maryland, these resources are available. The primary role of DORS is to provide support and information throughout the assessment, planning, and implementation process, including assisting with identification of community resources. DORS will provide limited funding of a small business if necessary after a

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## EFFORTS TO IMPROVE AND PROTECT MEDICAID HEALTH CARE SERVICE AND DELIVERY

**S**everal bills this session were intended to improve and or protect Medicaid related health care services and delivery. The Council supported many of the bills and joined forces with the newly established Medicaid Matters Maryland (MM!MD); a statewide cross-constituency coalition of consumers, advocates and providers united to ensure that the needs of Medicaid consumers are understood, included, and met. In addition to becoming an active member of MM!MD, the Council provided the coalition with a small grant intended to support the activities of the self-advocates serving on the coalition.

Health care related bills the Council supported include:

**Medical Assistance Program (SB 472): Passed Senate/No Action in House.** Would have prohibited DHMH from amending waivers or seeking waivers to the State Medicaid Plan that would consolidate federal grants, cap federal contributions, or alter the proportion of federal funding to the Medical Assistance Program. Advocates argued that requiring legislative approval prior to any amendments or approvals of waivers to the State Medicaid Plan strengthens the process by which the interests of those who receive benefits from Medicaid are represented and protected.

**MD Quality Home Care Act (HB 1542): Passed.** Initially called for a Quality Home Care Commission within the Department of Human Resources (DHR), charged with providing guidance to DHR on personal care, attendant care, and home care services. Amendments offered by Delegate Hubbard and passed by the Health and Government Operations Committee, transfers the Office of Personal Assistance Services from DHR to the Maryland Department of Disabilities (MDOD). The charge and composition of the “commission” remains unchanged, but under MDOD is established as a “Personal Assistance Services Advisory Committee” with reporting requirements to the Governor and General Assembly.

**REM (SB 899/HB 1519): No Action.** Would have protected the Rare and Expensive Case management Program (REM), which was established as a carve-out of HealthChoice in 1997 and provided intense case management services for eligible individuals. The Department of Health and Mental Hygiene’s (DHMH) proposed budget cut would have transitioned REM into Managed Care Organizations (MCOs). The majority of the approximately 3500 enrollees currently served in the program are children under the age of 21 (according to the Department of Disabilities as of July 2004, there were 2,850 children in REM), and roughly 70% of the children in the REM program have developmental disabilities. The REM

program currently offers these children access to health care through a varied provider network, and coordination of services facilitated and achieved largely by case management services. DHMH opposed the bill arguing that those served in REM could now be effectively managed in MCOs. Advocates in favor of the bill argued that REM is essential for the well being of those eligible and that MCOs have not yet demonstrated that they could handle the influx of the medically fragile enrollees or assure that enrollees would not lose needed services. Although no action was taken on the bill, budget language was passed that allows the REM program to continue for another year and requires a report be developed in consultation with stakeholders that includes cost savings.

**Personal Care Providers-Reimbursement, Training and Benefits (SB 986/HB 1566): No Action.** Would have immediately increased the daily reimbursement rate of personal care providers (the last wage increase was in 1986), and would have required DHMH to develop and provide training and benefits for personal care workers.

**MD Medical Assistance Program and MD Children’s Health Program (HB 53): No Action.** Would have required DHMH to provide guaranteed eligibility for enrollees in MCOs in the Maryland Medical Assistance Program and in

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## NO ACTION ON BILL TO ADDRESS WAITING LIST NEEDS

**D**elegate James Hubbard introduced a bill (HB 1199) that the Council and other advocates strongly supported that would have allocated \$50M over 10 years to provide community-based services to individuals on DDA's Waiting List. These resources could have been matched with over \$3M in federal funds each year bringing the 10 year total to an estimated \$80M. The bill would have required funds to be transferred from the Cigarette Restitution Fund and distributed through DDA's Waiting List Equity Fund. The Health and

Government Operations Committee supported the bill but the Appropriations Committee took no action.

*If you are interested in joining other individuals and families in advocating for increased funding*

### DDA's Waiting List (as of January 2005)

Individuals and families waiting for services = 14,616  
 Number of services they are waiting for = 23,048\*  
 Crisis resolution/emergency services requested = 5,249  
 Crisis prevention services requested = 5, 239  
 People on the WL whose caregiver is over 60 = 17.2%  
 \* many people are waiting for more than one service

*for people waiting for services from DDA, please contact the Arc of Maryland at 410-571-9320 (Annapolis), 410-974-6139 (Baltimore) or 1-888-272-3449 or send an email to [info@thearcmd.org](mailto:info@thearcmd.org)*

## DDA BUDGET INCREASES OVERALL Individual & Family Support Services Cut

**T**he Developmental Disabilities Administration (DDA) budget was increased by approximately \$25M — including state, federal and special funds. Most notable is additional funding to increase the wages paid to direct support staff and to provide employment or day services to all transitioning youth leaving school this year. Approximately 475 transitioning youth are expected to need services. DDA received limited funds to

### DDA FY06 Budget

(state and federal funds)

Wage Increase*	+ \$16.2 million
Transitioning Youth**	+ \$7.0 million
Emergencies	+ \$2.0 million
Waiting List***	+ \$963,000
Behavioral Supports	+ \$300,000
Individual & Family Support Services (cut)	- \$2.0 million

\* wage & benefit increases for direct support staff

\*\* employment & day services for young adults leaving school

\*\*\* all Special Funds from the Waiting List Equity Fund

address approximately 46 new emergencies, which is not enough to cover an entire year. In addition, approximately 40 people on DDA's Waiting List will receive community services. Over 14,000 people are now on the Waiting List. While these service categories received limited increases, Individual & Family Support Services (FISS) was cut \$2M. This means that 200 less individuals and families will receive support services this coming year. FISS provides a relatively low level, low cost set of services that are individually designed for each person.

# QUALITY & RIGHTS BILLS GAIN GENERAL ASSEMBLY SUPPORT

## HEALTH

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**N**umerous bills were passed this legislative session that address quality assurance within DDA programs and increase the rights of people with developmental disabilities who live in State Residential Centers or receive community supports. The Council supported these bills because they will enhance service quality and improve access to information and planning that should result in more people with disabilities accessing more integrated services.

***Better Planning & More Opportunities for Integrated Setting (SB 714/HB 794):*** Will enhance and strengthen the annual planning process for individuals in State Residential Centers (SRCs) by adding an independent Resource Coordinator to the planning team, similar to what is available to people served in the community. Requires the annual plan to include a description of services the individual would need to be supported in the most integrated setting appropriate to his or her individual needs and a list of barriers that prevent the individual from receiving services in the most integrated setting. Also requires SRCs to provide information on barriers to DDA and the Maryland Department of Disabilities with the intent that the State address systemic barriers, expand service capacity and improve overall service delivery.

***Additional Rights (SB 776/HB 988):*** For individuals living in State Residential Centers or supported in community programs, adds the right to be informed of all of the most integrated setting options licensed by DDA. At least annually, staff must determine whether an individual's needs can be met in a more integrated setting and provide that information to the individual.

***Enhanced Standards for Licensing (SB 831/HB 737):*** Strengthens the requirements that new agencies must meet when applying for a license from DDA. Requires, among other things, a business plan that demonstrates the ability of the organization to provide services; a summary of developmental disabilities experience; licensing reports to reflect past performance; and a written quality assurance plan. The bill also tightens the requirements for board composition.

***Improved Process for Investigating Serious Incidents (SB702/HB 651):*** Requires DDA and the Office for Health Care Quality to develop regulations that establish a system of prioritization to respond to and investigate serious reportable incidents in State Residential Centers (institutions) and community programs. This will ensure that the most serious incidents (including abuse, neglect, injury and medication errors) are prioritized, reviewed and addressed appropriately by defining roles, reasonable timelines, and consistent follow-up.

the Maryland Children's Health Program (MCHP) for six months unless an enrollee obtains health insurance through another source. Also would have allowed those eligible to reenroll in MCOs under MCHP after paying any prior premiums owed in full, or after a three month waiting period if prior premiums are not paid.

***MD Medicaid Advisory Committee (HB 1554): No Action.*** Advocates for the bill argued that this would improve the charge of the Maryland Medicaid Advisory Committee (MAC) by providing for membership of Medicaid consumer representatives, and would further ensure meaningful input by requiring that the committee be provided with advance meeting notice and relevant information to the agenda. The bill would have required consumer membership to represent the diverse population of individuals who receive Medicaid services. Members would have been recommended by organizations including the State Protection and Advocacy System (Maryland Disability Law Center), the Maryland Department of Disabilities, and the Developmental Disabilities Council. These organizations represent and support the interests of those who are likely to depend upon Medicaid services and are therefore well positioned to make appropriate member recommendations to the Secretary of the Department.



# AUTISM ISSUES RECEIVE ATTENTION IN ANNAPOLIS

Photo: Tom Darden, Governor's Office



**F**ollowing a national trend, Maryland considered several pieces of legislation

aimed at improving identification of children with Autism and increased funding for the Autism Medicaid Waiver. In addition, the General Assembly heard, for the first time, legislation regarding a possible link between mercury and autism. Mercury is believed by some to be a contributing factor in a 350% increase in Maryland children diagnosed with autism over the past decade.\*

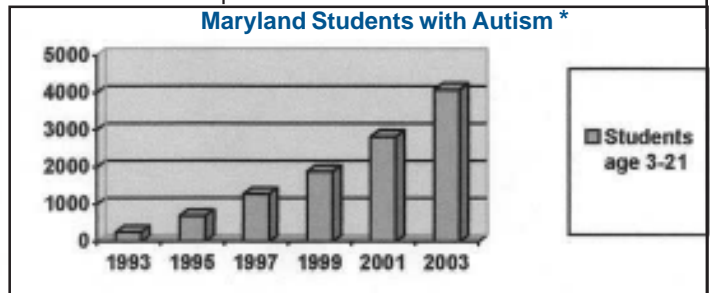
**Pilot Program to Study and Improve Screening Practices for Autism Spectrum Disorders (SB834/HB579): Passed.** Calls for the Maryland State Department

of Education (MSDE) to develop a pilot program aimed at improving early identification by pediatricians. Research shows that early identification and early intervention services are key to improved outcomes for children with autism and in many cases, result in less costly special education services. As the legislation moved forward, the DD Council refined amendments to help clarify the purpose of the Pilot Program and involvement of local Infants & Toddlers Programs.

**Autism Medicaid Waiver:** The FY06

proposed budget called for a 10% increase to the Autism Medicaid Waiver, managed by MSDE. Proposed funding was to ensure adequate and appropriate services to the almost 900 children currently on the Waiver. In addition, there are more than 1,100 children on

the registry, awaiting services. Those on the Autism Medicaid Waiver have the most intense needs and challenging behaviors. Waiver services and supports are vital to these children's and families' well-being, preservation, and ability to live in their community. Unfortunately, the \$2 million request was pared down to a \$1 million increase.



Maryland continues to look closely at the causes and needed services to support children and students with autism spectrum disorders. In addition to the above legislative efforts, the Autism Task Force, under the direction of MSDE, recently released its report: *Autism Task Force Report – Service Delivery Recommendations for Young Children with Autism*. A copy of the report may be obtained by contacting MSDE's Division of Special Education/Early Intervention Services 410-767-0858 or download a PDF from the website [www.marylandpublicschools.org/msde](http://www.marylandpublicschools.org/msde) Click on *Divisions* on the left side of the menu bar, select *Special Education Early Intervention* from the drop down menu, double click on *Publications and Reports* in the *In Focus* box, double click on the report.

\* MSDE Special Education Census Data, 1993-2003

## DUE PROCESS RIGHTS

**T**wo bills related to due process were considered by legislators this session.

**Procedures for Continuing Commitment (SB 752): Failed.**

Would have provided procedural guidelines and a timetable to be followed after a person has been found incompetent to stand trial on the basis of mental retardation and poses a danger to themselves, other persons, or the property of others. It contained procedures for continuing

commitment and release when a person with a cognitive disability is no longer a danger to themselves, others, or the property of others and is not likely to become competent in the future.

**Competency Procedures for Juveniles (HB 802/SB 616):**

**Passed.** Establishes court procedures for initiating and conducting competency proceedings for a child who is alleged to have committed a delinquent offense.

## EDUCATION LEGISLATION IMPACTS STUDENTS WITH DISABILITIES

**S**everal bills were introduced this session that directly impact students with disabilities and/or special health care needs. Highlights include:

**Suspended or Expelled Students – Community Resource List (SB806/HB1074): Passed.** Calls for a “community resource list” to be provided to the parents or guardians of any student suspended or expelled from school. In addition, any parent or guardian of a student with an Individualized Education Plan (IEP) would, in addition to the community resource list, receive a copy of the procedural safeguards. The bill was well received during hearings; however, it passed with an amendment that requires a resource list be provided, but the content of the list is left to the discretion of the school systems.

**Children in State-Supervised Care – Transfer of Educational Records (SB426/HB1259):**

**Passed.** This long overdue legislation requires that educational and other related records of students in group homes and/or foster care settings be forwarded to a “receiving” school district within two days of the student’s enrollment in that jurisdiction. This is critical for students receiving special education services because their IEP is often needed to determine the appropriate supports and services necessary to ensure a free and appropriate public education in the least restrictive environment, which is often the community school where the child resides.

**Mathematics Graduation Requirements – Special Education Students (SB246/HB761): With-**

**drawn.** This Bill called for the Maryland State Board of Education to adopt regulations that allowed special education students in high school to substitute other math instruction for the required algebra and geometry. MSDE argued that such a law would violate the federal No Child Left Behind Act. While the bill received an unfavorable report by the Senate’s Education, Health & Environmental Affairs Committee, the Committee requested further clarification on this issue. The House version of the bill was eventually withdrawn by the sponsor. The debate about alternative instruction for students with disabilities will continue as the state moves toward new high school graduation requirements.

**Education Funding** - For the third year in a row, the Governor’s proposed budget included significant increases in education funding. The fiscal year 2006 budget includes an increase of \$34M dedicated to special education services.

While differences were evident in this year’s budget process, ultimately education was seen as an ongoing priority on both sides of the political spectrum; it fared well with an overall budget of \$389 million.

## SELF-EMPLOYMENT

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business plan has been favorably reviewed by the RISE program and approved. The RISE Program helps individuals explore self-employment, develop a business plan, obtain market information, and have a business concept or plan assessed by business and banking experts. The RISE Program has expanded its services to provide business planning and preparation for people with significant disabilities.

Several agencies have made strong commitments to support individual dreams. Project Income has enabled Howard and Anne Arundel County Arc staff to develop

expertise in establishing small businesses. Technical assistance in business planning and implementation is also offered. Staff are available to provide information and assistance to other agencies in Maryland.

Finally, it is crucial that people with developmental disabilities who are pursuing an interest in self-employment receive benefits counseling. A benefits analysis will help individuals and families learn how earnings will impact benefits and to optimize work incentives. For the nearest benefits planner, visit [www.ssa.gov/work/ServiceProviders/BPAODirectory.html](http://www.ssa.gov/work/ServiceProviders/BPAODirectory.html)

**Want to Know More?**

For additional information on bills from the 2005 Maryland Legislative Session, go to [www.mlis.state.md.us](http://www.mlis.state.md.us) and click on “Bill Information & Status”

## CHILD CARE ADMINISTRATION TRANSFER

### *Disability Issues Addressed*

A bill passed the General Assembly this session that essentially transfers the Child Care Administration (CCA) from the Department of Human Resources, as well as certain programs of the Office of Children Youth and Families and the Maryland Family Support Centers Network, to the Maryland State Department of Education (MSDE).

Those who introduced the legislation and advocates in favor of the transfer of CCA argued that the goal of children entering school “ready to learn” would best be met if child care and its related programs were managed by MSDE. They reasoned that MSDE could align child care programs and associated

early intervention with Maryland’s School Readiness efforts and the No Child Left Behind Act.

The Council focused its advocacy on ensuring that if passed, the bill contained an amendment that requires MSDE to develop an implementation plan addressing the needs of families with children who have disabilities and/or special health care needs. The amendment requires that the plan incorporate the recommendations recently completed by the Task Force on Inclusive Child Care and After School Care for Children with Disabilities and Special Health Care Needs. Although the CCA and the Maryland Department of Disabilities facilitated the design of the recommendations

and both publicly stated commitment to the work of the Task Force and its recommendations, the Council was concerned that the Task Force recommendations could be “lost” or overshadowed in a move of such magnitude.

Fortunately, the disability related amendment passed and the plan must incorporate the recommendations of the Task Force, reflect parent input, be incorporated in the State Disability Plan, and progress reports must be submitted to the General Assembly. The CCA move will occur unless Governor Ehrlich vetoes the bill.

*For more information on the Task Force contact Lynell Otto, [Lotto@mdod.state.md.us](mailto:Lotto@mdod.state.md.us)*

## LEGISLATION ELIMINATES OCYF

One of the more talked about legislative initiatives this session was a bill concerning the Governor’s Office for Children, Youth and Families (OCYF). The law that established a Children’s Subcabinet and the Governor’s Office for Children, Youth and Families (OCYF), was due to sunset in June; meaning that without further action the office, programs and services would cease to exist. As a result, the Governor introduced legislation designed to elevate OCYF to cabinet level status, creating a Children’s Cabinet and establishing a Children’s Trust Fund.

Currently, OCYF is responsible for working collaboratively with all

state agencies to create and promote an integrated, community-based service delivery system for Maryland’s children, youth and families.

Before making its way out of the Senate and the House of Delegates, the legislation encountered many amendments, led in part by disability and child-serving advocates primarily concerned about the fate of Local Management Boards (LMBs) and the programs and services that currently exist and support children and their families. Ultimately, the Senate and House passed very different versions of the Bill, resulting in the appointment of a conference committee to work out

the differences.

The committee was unable to resolve the differences and therefore SB222/HB293 did not make it to the floor for consideration. As a result, as of June 30th, the OCYF will no longer exist, thereby ending many of its programs and services.

It is anticipated that the Governor will re-establish many of the Office’s functions and a limited number of programs through Executive Order. Advocates, including disability organizations, will continue to work with the Governor’s staff and agencies to ensure the most effective programs and services remain in existence regardless of their location.



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*Working for communities that include and support everyone.*

## COMMISSION ON QUALITY EDUCATION IN MARYLAND *Public Hearings Held in May*

**I**n May 2005, the Governor's Commission On Quality Education in Maryland will hold public hearings throughout the State. The Commission seeks to raise student performance by identifying and supporting effective strategies that accomplish the goal of high academic achievement for all students.

The regional hearings are designed to gain individual and organizational input about issues prior to the release of the Commission's findings and recommendations in the final report to the Governor in September 2005.

Speakers should address the following questions:

1. How can MD enhance the role and accountability of teachers and administrators in schools?
2. How can MD build stronger linkages between schools and their communities?

3. How can MD maximize best-practice models in education from around the world?
4. How can MD best prepare its youngest children for school success?

### **May Public Hearings Schedule**

- 12<sup>th</sup> - Montgomery College 7-9 pm, Germantown
- 17<sup>th</sup> - Cambridge-South Dorchester HS 7-9 pm, Cambridge
- 18<sup>th</sup> - Greater Waldorf Jaycee Hall 7-9 pm, Waldorf
- 19<sup>th</sup> - Hagerstown Community College 7-9 pm, Hagerstown
- 24<sup>th</sup> - Baltimore City Community College 7-9 pm, Baltimore
- 25<sup>th</sup> - C. Milton Wright High School 7-9 pm, Bel Air
- 26<sup>th</sup> - Largo High School 7-9 pm, Upper Marlboro

This newsletter is a publication of the Maryland Developmental Disabilities Council  
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