

The State Budget and Principles that Guide Our Advocacy

An Opportunity to Reform the System

- Do no harm - the state should ensure that those among us who are most vulnerable, least powerful, and often invisible to the public eye are protected from harm
- Individuals with disabilities and elders should have REAL CHOICES when it comes to where they live, and should be able to remain living in their own homes, or to return to their own homes if they are in an institutional setting

The present system is fragmented, institutionally biased, and difficult for people to navigate. The state should look to cost-effective and efficient strategies to put the principles noted above into action:

- Support MFP – which is designed to assist individuals who have been in a nursing facility for more than 6 months - and its related services
 - Retain existing state funding for Centers for Independent Living (zeroed out of the Governor’s budget) and AAAs – to carry out the important work of supporting people in the community and moving people out of facilities and into their homes [Note: there is money in the federal stimulus package for centers for independent living, but it is restricted to new projects only; plus it is one time, 2 yr funding only and does not address the issue of Connecticut’s responsibilities to support consumer directed centers for independent living].
 - Increase slots for Medicaid waivers where there is a waiting list: Acquired Brain Injury Waiver (20), Personal Care Assistance Waiver (24), DDS Comprehensive Supports Waiver and DDS Individual and Family Support Waiver (combined #: 630) and the Katie Beckett Waiver
 - Increase slots for state funded Home Care Program for Disabled Adults and the state funded Home Care Program for Elders, where there are, or will soon be, wait lists – Medicaid waiver services and state funded programs keep people independent and out of expensive nursing facilities and other institutions; there is no choice when there are waiting lists for services
 - Educate hospital discharge planners – so as to minimize unnecessary institutional placements following acute medical treatments
 - Activate this year the Long Term Care Reinvestment Account mandated by the 2008 General Assembly (the Governor has proposed postponing implementation for two years, meaning that funds will go to the General Fund, and will not be used to enhance community living options as intended)

- Fund “Money Follows the Person 2” this year – to complement the the Money Follows the Person initiative that kicked off last December by providing funds to help people move back home if they are in a nursing facility for less than six months (mandated by the legislature last year, the Governor has also proposed postponing implementation for two years)
- Support workforce development strategies – to provide an expanded workforce capable of providing people home health care and personal assistance support to help them remain or become independent
- Implement a single point of entry system (also known as Aging and Disability Resource Centers) - to make the long term service system more person-centered and consumer-directed, make it easier for people with disabilities of all ages to access information about home and community-based alternatives to institutional services, and support people of all income levels to live independently in their communities
- Maintain ConnPACE and prescription drug coverage – to provide people with the medications they need to remain in their homes and maximize their physical and mental health
- Enhance supportive housing initiatives – to enable individuals with mental disabilities to have access to housing with the supports they need to stay or become independent and remain out of more expensive institutions, including nursing facilities
- Maintain benefit COLAs – to provide people with a minimal level of funds needed to remain independent and provide the bare minimum for their survival needs
- Maintain provider COLAs – to allow service providers to continue in business by hiring competent staff
- Maintain and support watchdog agencies (Commission on Aging, Long Term Care Ombudsman Program, Office of the Child Advocate, Office of the Health Care Advocate, and Office of Protection and Advocacy for Persons with Disabilities) – to ensure the services provided by state agencies are not only humane but also cost-effective and efficient
- Maintain current level of state funding for the Brain Injury Association of Connecticut (BIAC) in order to continue to provide critical services to those affected by brain injuries

This Statement of Principles is supported by the following organizations:

CT Disability Advocacy Collaborative (organizer)

CT Lifespan Respite Coalition

CT Family to Family

AARP/CT

Disability Resource Center of Fairfield County
Independence Unlimited
Independence Northwest
Disability Network of Eastern CT
AFCAMP
the Brain Injury Association of CT
the CT Legal Rights Project
the Commission on Aging
the Council of Organizations Serving the Deaf
the National MS Society/CT Chapter
the Office of Protection and Advocacy
WeCAHR
CT Council on Developmental Disabilities
the Arc of CT
the Long Term Care Ombudsman Program