

HOUSE No. 00984

The Commonwealth of Massachusetts

PRESENTED BY:

Tom Sannicandro

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act to encourage responsibility, cost effectiveness and meaningful lives for individuals with disabilities.

PETITION OF:

| NAME: | DISTRICT/ADDRESS: |
|-------------------------------|-----------------------|
| <i>Tom Sannicandro</i> | <i>7th Middlesex</i> |
| <i>Kay Khan</i> | <i>11th Middlesex</i> |
| <i>Patricia A. Haddad</i> | <i>5th Bristol</i> |
| <i>Jason M. Lewis</i> | <i>31st Middlesex</i> |
| <i>Angelo J. Puppolo, Jr.</i> | <i>12th Hampden</i> |
| <i>David Paul Linsky</i> | <i>5th Middlesex</i> |
| <i>James M. Murphy</i> | <i>4th Norfolk</i> |
| <i>Robert M. Koczera</i> | <i>11th Bristol</i> |
| <i>William M. Straus</i> | <i>10th Bristol</i> |
| <i>Stephen R. Canessa</i> | <i>12th Bristol</i> |
| <i>Paul Brodeur</i> | <i>32nd Middlesex</i> |
| <i>George Ross</i> | <i>2nd Bristol</i> |
| <i>James Arciero</i> | <i>2nd Middlesex</i> |
| <i>James J. Dwyer</i> | <i>30th Middlesex</i> |
| <i>John J. Binienda</i> | <i>17th Worcester</i> |
| <i>Christine E. Canavan</i> | <i>10th Plymouth</i> |

| | |
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| <i>Walter F. Timilty</i> | <i>7th Norfolk</i> |
| <i>Timothy R. Madden</i> | <i>Barnstable, Dukes and Nantucket</i> |
| <i>Cory Atkins</i> | <i>14th Middlesex</i> |
| <i>Thomas P. Conroy</i> | <i>13th Middlesex</i> |
| <i>Ellen Story</i> | <i>3rd Hampshire</i> |
| <i>Viriato Manuel deMacedo</i> | <i>1st Plymouth</i> |
| <i>Gailanne Cariddi</i> | <i>1st Berkshire</i> |
| <i>John V. Fernandes</i> | <i>10th Worcester</i> |
| <i>David M. Torrasi</i> | <i>14th Essex</i> |
| <i>Jonathan Hecht</i> | <i>29th Middlesex</i> |
| <i>Mark Cusack</i> | <i>5th Norfolk</i> |

HOUSE No. 00984

By Mr. Tom Sannicandro of Ashland, petition (accompanied by bill, House, No. 00984) of Mark Cusack and others for legislation to promote responsibility, cost effectiveness and meaningful lives for individuals with disabilities. Joint Committee on Children, Families and Persons with Disabilities.

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act to encourage responsibility, cost effectiveness and meaningful lives for individuals with disabilities.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 I. Preamble

2 It is known:

3 · there are more than 400,000 identified individuals across the nation on waiting lists for
4 agencies that serve individuals with developmental and intellectual disabilities within the
5 Medicaid program.

6 · more individuals with developmental disabilities live at home with an aging caregiver than
7 are presently served in 24 hour services and supports.

8 · Massachusetts and other states continue to fail to meet the needs of our citizens due to the
9 limitations placed on flexibility or choice of services

10 · a growing number of adults with intellectual and developmental disabilities will require
11 assistance to live in the community

12 · people with disabilities have the same rights and responsibilities as others and we should use
13 public dollars to assist them to realize those rights and exercise those responsibilities as
14 contributing members of our communities.

15 · too often services isolate individuals with disabilities in their homes or segregated settings,
16 engaging them in inadequate activities with no or few quality outcomes. regarding personal
17 choices, satisfaction, social integration and increased learning that may lead to rewarding
18 occupations

19 Demographics pose the greatest challenge to the Medicaid system of supports for individuals
20 with developmental disabilities. Too many people are not receiving the assistance they need.
21 The public Medicaid system is reeling from cost pressures. The time has come for individuals
22 with disabilities, families, advocates and providers to work together with policy makers in the
23 administration and legislature in crafting a support system that both increases quality and on
24 average reduces costs whenever possible.

25 Therefore, let Massachusetts implement a new program of services which will be focused in
26 improving the lives of individuals with intellectual and developmental disabilities in the
27 community including economic self-sufficiency whenever possible and to ensure meaningful
28 occupation during the day and social interaction throughout their lives.

29 This program of services should encourage efficient use of public dollars and be flexible so that
30 individuals may use the funds to live a typical life and budget in creative fashion within a
31 targeted amount of dollars.

32

33 The Executive Office of Human Services working in conjunction with MassHealth and
34 Department of Developmental Services will implement a new home and community based
35 services program through HCBS State plan, 1115 waiver or 1915C waiver or other method to
36 implement the following program of supports for individuals with intellectual and developmental
37 disabilities.

38 II. Goals for the individual

39 These goals are the quality foundation and planning and budgeting underpinning of the program
40 of services that each person should enjoy:

- 41 • A place to call home with control over anyone who comes to the front door or otherwise
42 provides any services or supports with freely chosen assistance when necessary
- 43 • Community membership with real connections to citizens and memberships in vital community
44 organizations
- 45 • Close friends, family and other significant relationships and receive assistance to develop or
46 maintain these relationships
- 47 • Economic self sufficiency through supports or funds as needed provided through jobs, self
48 employment and active or passive pursuit of private dollars

49

50 III. Implementation

51 A. Individuals will be deemed eligible and receive prioritization for services in a transparent
52 manner. There will be four major categories for spending available to ensure adequate dollars
53 for supports in addition to social security and medical insurance. The program of services will
54 include the full range of people identified with disabilities including those with complex medical
55 or behavioral conditions and those with profound intellectual impairments. The funding for
56 individuals will be defined through cost corridors as defined in the waiver or state plan based on
57 the functional needs of the individual. The number of cost corridors will total a minimum of
58 three to a maximum of five corridors.

59

60 B. Funds will be provided through individual service allocations from EOHHS or the state
61 agency. Dollars are tied to the individual so that they can be utilized as needed for generic
62 community resources, supports or other activities.

63

64 C. The categories for supports through all sources of income will be prioritized around the four
65 self-determination domains. These are a place to call home, real community memberships,
66 support for existing or sought after long term relationships, and the development of private
67 income whenever possible. The Plan of Care (POC_ and the Individual Supports Plan (ISP) will
68 be designed around the four goals identified in Section II.

69 D. Individuals may purchase supports through services that are presently possible to purchase
70 both within and outside the present human service system in any of the present waivers. All
71 services will be marked by self direction and individual rather than congregate services and will
72 include but not be limited to the following:

73 Individual Support Community Habilitation

74 Supported Employment

75 Day Habilitation Supplement

76 Family Support Navigation

77 Individualized Day Supports

78 Transportation

79 Day Supports

80 Homemaker

81 Individualized Home Supports

82 Broker services

83 Live-in Caregiver

84 Respite

85 Adult Companion

86 Assistive Technology

87 Behavioral Supports and Consultation

88 Chore

89 Community Family Training

- 90 Community Peer Support
- 91 Home Modifications and Adaptations
- 92 Stabilization
- 93 Vehicle Modification
- 94 Residential Habilitation
- 95 Individual Goods and Services
- 96 Occupational Therapy
- 97 Integrated work and volunteer services
- 98 Individualized Day Supports
- 99 Physical Therapy
- 100 Speech Therapy Residential Family Training
- 101 Residential Peer Support
- 102 Self-Directed 24 Hour Supports
- 103 Recreation\Leisure
- 104 Additional Health Supports
- 105 Stabilization
- 106 Transitional Assistance Services

107 Self-advocacy

108 E. The individual will engage in a contract with the state office or agency which will be based
109 upon a plan that identifies the supports to be developed and how funds will support the major
110 self-determination domains and goals listed herein as Section II. The planning and budgeting
111 process shall be melded with the assistance of an unbiased circle of support including the help of
112 an independent broker (to be freely chosen by the individual including size or composition).
113 Using the targeted amount of dollars individuals will be free to utilize them in any helpful
114 fashion within the four domains and specifically include within these plans provisions for health
115 and safety. This new system will provide fiscal incentives for individuals and families to save in
116 return for maximum flexibility in planning and budgeting. Initial funding allocations will be
117 determined at a lesser percentage than traditional services.

118

119 F. Any dollars saved for the individual will be dealt with in the following ways:

120 a. Year one, 50% of savings will be applied to one-time only expenses as identified by the
121 individual; the rest will return to the funding agency to be spent on other individuals for that
122 fiscal year. The savings in year one will be placed in a reserve fund in year two to assure that all
123 needs of the individual are being met. Negotiations will be made with the individual regarding
124 the adequacy of the allocation and some or all of the savings may be transferred to a reserve fund
125 pool for all individuals.

126 b. In year 2, 50% of any savings will be added to the individual reserve account in case they
127 are needed for unforeseen circumstances; If not spent in year 2, funding will revert in that year to
128 the reserve fund pool to be used for other qualified individuals.

129 c. In year 3 a new budget will be finalized based on costs for the coming year.

130 d. If due to unanticipated events or the need for more supports, the individual allocation is
131 inadequate, the individual will be able to negotiate for additional resources from the reserve fund
132 pool.

133 e. If the individual's needs change significantly in either direction, negotiations should take
134 place between the individual and designated authority to move to a different allocation corridor.

135 G. The individual or the guardian and the individual will be able to utilize resources or types
136 of services as he/she/they sees fit. They will be assisted by state designated or other fiscal
137 intermediaries. They also will have access to independent support brokers to assist in the
138 development of a plan. Provider organizations may be engaged to help organize his/her
139 services/supports upon payment of a negotiated fee but in no way may this arrangement infringe
140 on the authority of the individual outlined above.

141 H. The individual or guardian and the individual shall have the sole authority over which
142 services or providers are qualified and selected and shall be able to terminate a service agreement
143 with a thirty day notice allowing for purchase of service from another qualified provider of their
144 choice both from within and without the current human service system. The state will develop a
145 random and limited audit to evaluate the services and develop a quality review system based
146 upon the four goals in Section II.