



Bob Ehrlich: A Legacy of Achievement, a Vision for the Future

I am so very delighted to be here today to share some thoughts about the future of supports and services for people with disabilities. Hopefully, most of you will recall that the issues impacting people with disabilities and their families are near and dear to my heart.

During my first term as governor I felt enormous pride with the creation of the Department of Disabilities and the good work that was accomplished during those four years. Under the able leadership of Kris Cox the Department of Disabilities audited every department of State government against outcomes that you – people with disabilities, advocates, families, and providers of support – told us were important. We held each department of state government accountable to performance measures engineered to improve the outcomes for people with disabilities and their families.

There are those who criticize the Ehrlich Administration for increasing spending when I was governor before. Let's review the record:

Education

First and foremost, we fully funded the Thornton Commission for Education to the tune of \$1.5 billion. This allowed Maryland's schools to achieve the national standing we now currently enjoy, including special education and the creation of the first charter schools in the state. The record improvements in education we are experiencing today are in large part due to the reforms that took place during those years.

Employment

We fully funded the Medicaid Buy-In at \$11 million which allows people with disabilities to go to work and retain their medical insurance and the provision of personal care attendants. Today almost 700 people are working, paying taxes, and prospering as a result. People with disabilities experience an inordinately high level of unemployment and underemployment which is unacceptable. My vision would be for people with disabilities to be employed at the same level as their typical peers. We also created unique employment pilots such as the benefit of extended support duration through the Division of Rehabilitation Services for people with traumatic brain injury, the initiation of an Employment First philosophy in DDA and MHA, and funding for transitioning youth.

We extended a special pilot for young people with learning disabilities at community colleges that provided mentors and funding for assistive technology and materials that would increase the likelihood

of success for the student. We enacted legislation that moved us closer to universal access of textbooks at the college level for people who are blind.

Transportation

We took what had been deemed among the worst para-transit systems in the country in 2003 and turned it into a high-performing, fully ADA compliant transportation system. We invested in the purchase of accessible MTA vehicles so that 100% of the fleet met the standards, something no other Maryland administration had ever done. While no transportation system is perfect, Maryland made huge strides toward a better system for those who needed it.

Rebalancing Funding for Long Term Services and Supports

We heard the outcry from people sequestered in institutions and nursing homes and adopted a policy that anyone who wanted out, got out. We were on the cusp of implementing a more strategic rebalancing strategy to shift the emphasis of funding for long term services and supports away from institutional models to community. Maryland supports almost 15,000 people with disabilities and elders in various attendant care programs which provide similar supports but provide widely disparate wage reimbursement for caregivers.

Funding for Maryland's HCBS community waivers increased for people with disabilities and those who are aging; and, our administration allocated funds providing the first significant increase to home care workers – an increase of nearly 20% - in more than almost two decades in the Medicaid Personal Care Program and the DDA wage initiative, recognizing the way in which prior administrations marginalized this critical workforce. To those Maryland citizens who are waiting for long term services and supports in their community, we will move aggressively to rebalance the way in which we fund those services.

We will aggressively pursue a long term services and support strategy to increase the number of Marylanders who can benefit from these community supports whether through waivers or enhanced state plan services. We know there are people with disabilities who require intensive lifelong supports and we are committed to doing all we can to see that they don't have to leave their homes to receive that support. While I have significant concern over the impact of the Affordable Care Act (health reform) for employers in Maryland, I am also aware of the opportunities it offers to enhance health care and long term services and supports for people with disabilities and those who are aging. I pledge to work with all stakeholders to take advantage of the provisions of the ACA wherever it is advisable for Maryland to do so.

Children and Families

When we talk about children with disabilities and their families I am painfully aware of how Maryland needs to do better. While we have begun to implement wrap-around services for children with mental health needs, we recognize that there is always room for improvement. Local management boards have taken a big budget hit in the current administration and that has impacted the delivery of supports to children at the local level. We need to reverse that and use wrap-around services creatively to keep

more children and youth with their families and in their communities. This is good for families and ultimately a cost saving to the state.

I'd like to look again at mental health parity in health coverage for children. When I was in Congress I supported this for adults because it was the right thing to do. Well, it's the right thing to do for kids as well. I know that families and individuals, including our returning service men and women, in the rural areas of our state often have no choice of providers and end up traveling 50+ miles to receive care. Perhaps this can be addressed by increasing mobile facilities, the use of interns, and the use of existing programs in our neighborhood schools. Perhaps we can partner with our neighboring states allowing Maryland families to receive care in Pennsylvania, Virginia, and Delaware. We could establish local sites for families to use teleconferencing to connect with providers, and partner with community health centers which receive federal funds. I know that in the 2010 Title V Needs Assessment, 47% of families from the Western Maryland Counties reported driving more than 100 miles for specialty care and 35.8% of families responding stated that a family member had to stop working or reduce the number of hours worked to care for a child with special health care needs. It doesn't make much sense to reduce a family's productivity if we can intervene with assistance that would preclude that.

I'm also aware that Maryland's 1915c waivers supporting people with intellectual disabilities and autism provide services to very few children. Under the new provisions of the Affordable Care Act I will look at ways that would allow us to expand supports to families with kids who have similar functional needs, regardless of diagnosis, to allow families a bit of breathing room. I know, too, that we still have a bit to do with streamlining the referral process for Infants and Toddlers programs across jurisdictions so that children receive services before they begin school. This is a long term cost saver as many children receiving early intervention services go on to no longer need them.

Parents need to be equal partners with school systems in the planning of educational services for their children with disabilities. We need to improve the ways in which local school systems and families of children with disabilities receive training and information regarding the IEP process. This includes training of providers to further reduce the use of restraint and seclusion in both schools and residential treatment centers as well as requiring out-of-state facilities caring Maryland's children follow Maryland law in this respect.

Housing

The fair housing act assures that people with disabilities will be able to live anywhere they choose with no barrier as a result of their disability. We understand that the availability of accessible and affordable housing throughout Maryland is insufficient and will advocate with local jurisdictions to strengthen the building code to incorporate the principles of universal design, including visitability. We can also continue what we previously started to create incentives to increase the volume of accessible and affordable housing stock. And, we will expand the bridge subsidy program started in our administration to assist low income individuals with disabilities to leave nursing homes and institutions without waiting for public housing assistance.

Accommodations, Training, Opportunities

We listened to people with behavioral health needs, implementing pilots in self-direction and consumer satisfaction teams. Under the Affordable Care Act, Maryland is now able to apply for a waiver to support people with chronic behavioral health needs in our CRPs and RRP's throughout the state. I pledge to assess the viability of doing this and if it's possible, moving forward. There may be numerous opportunities of which we can take advantage.

For our citizens who are deaf, hard of hearing, and deaf/blind – we will strive to increase access to government through routine use of sign language interpreters, Video Relay Services (VRS) and Video Remote Interpreting (VRI). Maryland's citizens who are deaf should be able to choose physicians and other health specialists knowing communication will NOT be an issue and with the Governor's Office on Deaf and Hard of Hearing, we will look at ways to enhance the awareness of medical practitioners about their responsibility under the ADA.

For our citizens who are blind, we know the loss of eyesight is not the issue. The real problem is the misunderstanding and lack of information that exist. If a blind person has proper training and opportunity, blindness can be reduced to a physical nuisance. We will work to create accessible electronic textbooks in our University system to assure that people who are blind can achieve higher education on an equal playing field.

We know that people with disabilities can achieve anything given the right training, opportunity and accommodation. They deserve equal access to public resources regardless of diagnosis or age of onset – and if they need long term services and supports, they deserve to be supported in their communities, in their homes, and surrounded by their friends and families.

The next four years will be difficult years for all of us. The economy has not recovered and we must find new ways to infuse vitality into Maryland's budget. At the same time, people with disabilities can expect to continue to move forward under progressive leadership. I pledge to uphold the original statute creating the Department of Disabilities to continually audit state government and move the delivery of services and supports to people with disabilities to the forefront. I truly believe that if we can figure out how to efficiently and comprehensively accommodate people with disabilities in our communities, all Marylanders will benefit and prosper.

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