

Jeremy Morris

Interested Party Testimony on HB 166

Finance Subcommittee on Health and Medicaid

Tuesday May 14, 2019

Chairman Hackett, Vice Chairman Huffman, Ranking Member Thomas and members of the subcommittee, thank you for reviewing this Interested Party Testimony on HB 166. My name is Jeremy Morris and I am the Executive Director of the Ohio Statewide Independent Living Council (SILC), a Council that is federally mandated in every state by the Rehabilitation Act of 1973. In this written testimony, I will be providing detail and background information on the Independent Living Program both federally and in Ohio and how the Program impacts the 1.6 million Ohioans with disabilities.

Federally

Each state is composed of a network of Centers for Independent Living and a Statewide Independent Living Council. The network has a primary charge of maximizing the independence and inclusion of persons with disabilities in the state. The Council, or SILC, works to coordinate activities amongst the network and to develop the State Plan for Independent Living. The SILC and the Centers for Independent Living (CILs) within the state develop a State Plan for Independent Living (SPIL), a document required by law that indicates how the state IL Network is going to execute and improve independent living services over the next three years. The Centers within a state have the mandated role of providing direct services to the individuals with disabilities in their region. These services include at a minimum: Information & Referral, Independent Living Skills Training, Advocacy, Peer Support (Peer Counseling), Nursing Home/Institutional Transition to the community, Youth Transition, and Diversion from entering institutional settings.

The Independent Living Program serves all individuals with significant disabilities unlike many programs and services that are limited to specific disabilities, specific ages, or specific types of outcomes. The Centers are able to complement the services provided by other entities as well as provide additional services that are not within the scope of other providers. The Centers address a broad range of issues that impact people with disabilities, such as: housing, health care, transportation, community supports, employment, education, and many others. The Centers are uniquely mandated to be a central point for people with any disability at any age and focus on all areas in which the individual needs assistance in order to maintain their independence.

Across the country, there are nearly 400 Centers for Independent Living and 56 State Councils (includes territories). The Independent Living Program is authorized by Title VII of the

Rehabilitation Act of 1973, as amended by the Workforce Innovation and Opportunity Act (WIOA) of 2014 and is housed in the Administration on Community Living, Department of Health and Human Services. A few particular notes about the federal requirements for the Centers for Independent Living:

- 1.) Each Center must maintain a majority of its Board of Directors as individuals with significant disabilities to ensure that the organization is being led by individuals with disabilities that will have an understanding of how the programs and services will impact the consumers and their local communities;
- 2.) Centers must maintain a majority of staff, including management staff as persons with disabilities allowing for consumers to have peers with lived experience to work with as they are on their path to maximizing independence;
- 3.) Every Center has required services that must be provided, but additional services can be performed based upon the local community need for such services;
- 4.) Centers have the responsibility of working within their communities to promote inclusion and access in other services and programs.

Each state's network must select a state agency or entity to receive and account for the allotment of federal funds that comes to the state. In Ohio, we have long had a partnership with the Opportunities for Ohioans with Disabilities Agency (OOD) that serves as our Designated State Entity. Due to this required relationship, the Independent Living Program's budget is housed within the OOD Budget.

In Ohio

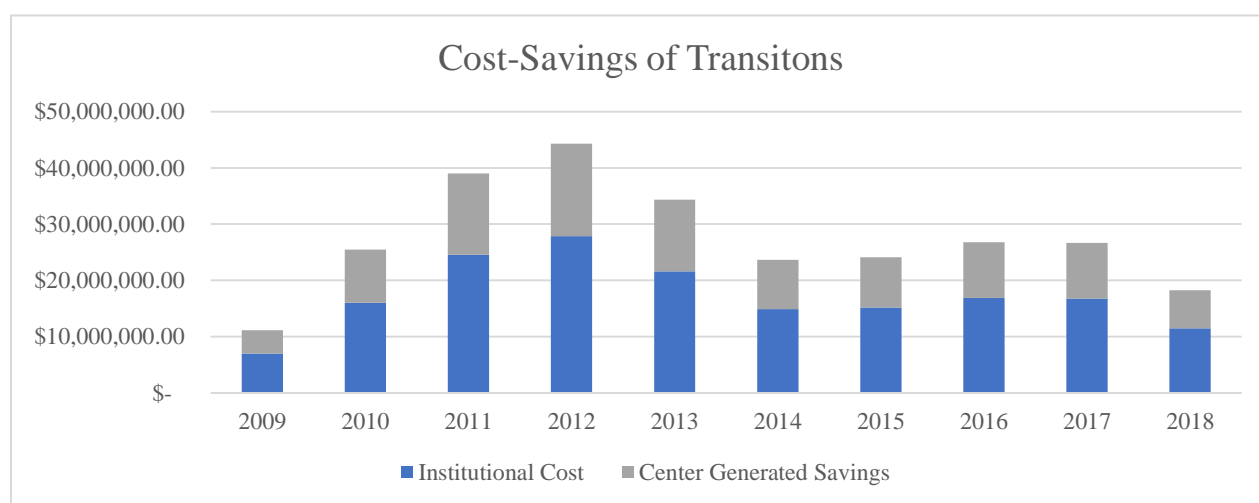
Ohio is home to 12 Centers for Independent Living, 10 of which receive direct federal support from the Administration on Community Living, these direct federal contracts are called Subchapter C funds. The federal funds are allocated based on a population-based formula. Due to this formula, the funds for Ohio have not been increasing in the long-term and no new grant has been offered to the State for 20 years. Eight of the Centers receive federal passthrough funds in the OOD budget called Subchapter B funds, which can be found in line item 415613 of the OOD budget.

Annually, the Ohio Centers are serving approximately 14,000 individuals across Ohio, with around 3,500 of those individuals requiring a more comprehensive service delivery through an Independent Living Plan. In 2018, a total of 11,323 individual services were and the Centers spent over 12,000 hours in the community including providing trainings on disability, assisting in ADA compliance, and advocacy efforts to promote the inclusion and independence of individuals with disabilities.

The Centers' work in Ohio indirectly creates cost-savings in several ways. The services provided that divert individuals from entering an institution can range from assisting in obtaining in-home services, home modifications to enhance accessibility of the home, and teaching someone the skills to manage their personal resources in a way to maintain their independence in the community. The average annual institutional cost per person to the Medicaid program in Ohio is

\$40,000 higher than home-based supports and services. Each individual the Centers diverts from an institution will create this savings for the State of Ohio as well as enhance and improve their long-term quality of life.

An area where the Independent Living network can demonstrate the actual cost savings is the individuals that the Centers have transitioned from institutional settings to community-based settings. Using the estimated \$40,000 in annual savings per person and only looking at the one-year savings the Centers have helped to save the Ohio Medicaid program \$101,360,000 from 2009-2018. These numbers reflect individuals only remaining in community one year post discharge, the total cost savings if factored of individuals remaining in the community for years after the transition is not reflect in this figure.



*Data on number of individuals transitioned by Centers provided by the Ohio Department of Medicaid

Partnership in Ohio

As stated on April 1st, 2019 in the testimony on the OOD budget by Executive Director Kevin Miller: “Nearly one in four people will acquire a disability at some point in their lifetime. People with disabilities are our co-workers, customers, friends and family members, and they want the same opportunities as everyone else. They want a chance to demonstrate their abilities, be productive, and add value to their communities. In other words, they don’t want to just find a job. They want to find their purpose.”

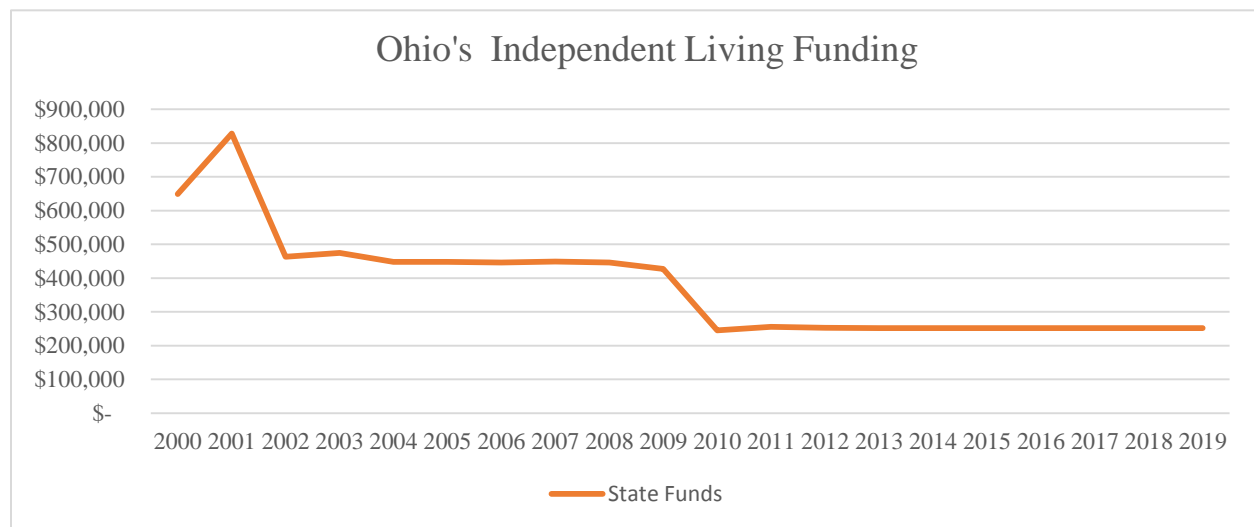
This quote shows how individuals with disabilities do not exist exclusively within one program in Ohio. The individuals we serve can be accessing support and services from the Department of Medicaid, Department of Job and Family Services, Opportunities for Ohioans with Disabilities, Department of Developmental Disabilities, Department of Aging, Department of Transportation, as well as others and county and local level services. The work and services that are provided by our Independent Living network work in conjunction with many others and assist in the goals of the other organizations and agencies.

The versatility of the Centers makes our network a viable partner on service delivery, policy development, and overall quality of life outcomes of individuals with disabilities. Due to the level of funding received by the network, we are often unable to fully engage in these supportive activities with state partners in achieving their outcomes, which assist individuals with disabilities in finding their purpose.

Ohio’s Funding for Centers for Independent Living

The Ohio Centers for Independent Living reviewed and requested information from other states in our region as to how they fund their Independent Living Program. The chart below shows seven states with the amount of funding allocated by the state in 2018, and the number if individuals with disabilities in the state. As shown, Ohio has the lowest state investment in the Independent Living Program.

State	Funding	Non-Institutionalized Individuals with Disabilities
Illinois	\$4,296,500	1,347,468 (11%)
Kentucky	\$2,391,423	728,871 (17%)
Minnesota	\$2,261,000	547,424 (11%)
Michigan	\$2,188,306	1,362,413 (14%)
Wisconsin	\$1,018,400	664,635 (12%)
Indiana	\$864,659	852,946 (14%)
Ohio	\$252,000	1,637,626 (14%)



The current funds allocated in line item 415402, State Independent Living Council currently is used towards supporting the Council’s mandated duties and provide matching funds to the federal funds received by the Centers for Independent Living.

The Centers have created a five-year plan that charts a path forward to achieving what some of the states in the region have accomplished: statewide coverage with the investment of state

funding to support the Independent Living Program. The immediate need that has been defined is to strengthen the existing infrastructure and network of Centers. To achieve this a funding methodology was established that creates a base level of funds needed to have a stable infrastructure to provide supports and services to individuals. The work around achieving base funds involved researching how other states have accomplished this and what the national trends are. At this point we chose a conservative base that will provide \$250,000; \$300,000; or \$350,000 in base funding, including federal funds, based upon population of their regions. A remaining portion of the funds are allocated in a formula that is based on three factors: service capacity that measures the concentration of people with disabilities; rural geography which provides additional funding for the more rural geographies that can cost more to provide supports and services; and economic factors that looks at the average income level and unemployment rates in the community. We are confident that this formula will create a level of sustainability in the service delivery in Ohio that has never been experienced.

The Centers also have created a mechanism to better measure the impacts and outcomes of the Program. This work was completed after a thorough review of the Program's federal reporting mandates, and the lack of valuable information and outcome data that it provides to inform the community about the value we bring to our communities. Currently, we are working collaboratively and taking the process that was completed with an outside consultant to build the data metrics into the data information system that is utilized by the Centers. As this work began, we became a leader nationally as this type of process has not been attempted in any other state in the country. With the state's increased investment in Centers for Independent Living, we will be able truly demonstrate the innovation that comes from Ohio.

Our performance measures include: Improve quality and effectiveness of services; Increase elements of a meaningful quality of life; Increase community participation; Increase diversion/transition from more restrictive settings; Increase awareness of independent living and independent living services/alignment of public perception; Advance policies and practices for independent living and equity.

I thank you for the time in reviewing this testimony,

Jeremy Morris

Executive Director