

2013 – 2015 State Budget Overview For Disability Advocates

Disability Rights Wisconsin
March 27, 2013

About DRW

Disability Rights Wisconsin is the federally mandated protection and advocacy agency for people with disabilities in Wisconsin, designated by the Governor to protect the rights of people with disabilities. DRW helps people with disabilities across Wisconsin gain access to services and opportunity through our advocacy and legal expertise. DRW also provides training and promotes positive legislative policy for people with disabilities.

www.drwi.org

Big Picture: More Revenue

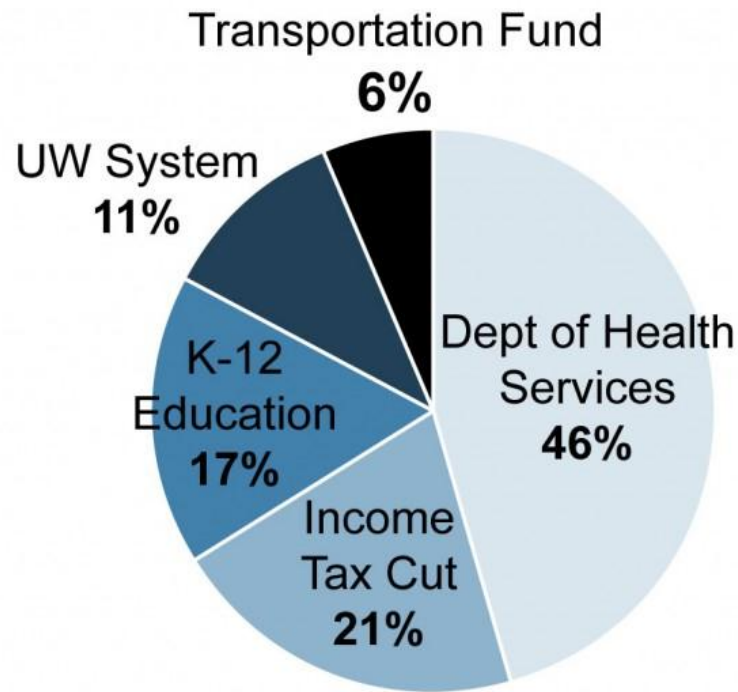
- Last biennium: WI faced a \$3.6 billion budget deficit, resulting in significant cuts
- Now: WI has a budget surplus plus increasing revenue projections that the Legislative Fiscal Bureau says equal \$1.6 Billion in “new” revenues for the 2013-2015 budget
- Gov. Walker’s Budget Priorities:
Creating jobs, developing our workforce, investing in infrastructure, transforming education and reforming government.

Big Picture: The Budget Process

- Governor's Budget is introduced as [Assembly Bill 40](#).
- **April:** Joint Finance Committee holds statewide budget hearings for public input.
- **May:** Budget sent to Assembly and Senate for approval and amendment. Possible conference for disagreement.
- **Late June:** Governor reviews & signs budget; possible vetoes.
- **Late June:** Possible veto overrides by the Legislature.

Big Picture: Governor's Budget Proposal

How the Surplus and Revenue Growth is Divided



Wisconsin Budget Project

Big Picture:

Where the Revenues Go - New Spending

- Medicaid Programs: BadgerCare, Family Care, etc.: \$763 million (\$660 is cost to maintain programs)
- Income Tax Cut: \$343 million
- Transportation Fund: \$126 million
- K-12 Public Schools: \$159 million (this equals ZERO per pupil increase for all 870,000 public school students)
- Voucher and Independent Charter Schools: \$117 million (40,500 students)
- UW System: \$181 million

Mental Health Investments

- \$3.7 million in Coordinated Service Teams. (CST)
- \$10.2 million in Comprehensive Community Services (CCS)
- \$1.3 million in Peer Run Respite Centers.
- \$535,000 in children's mental health – Creates Office of Children's Mental Health
- \$524,000 in In-home counseling for children and adults
- \$12.5 million in Forensic Treatment units at Mendota Mental Health for two additional inpatient units.

Comprehensive Community Services (CCS)

- 2011: 26 counties offered CCS; 1,469 consumers served statewide.
- CCS is a community based program, many services are provided in home and/or community.
- Typical outcomes: reduced psychiatric hospitalizations, improved primary health care outcomes, improved familial and social relationships, access to meaningful employment, and improved reports of overall life satisfaction.
- New funding reimburses counties for state Medicaid match for all eligible CCS costs if provided on a regional basis .
- Expected expansion of CCS to all counties

Coordinated Service Teams (CST)

- Coordinated Service Teams are wraparound models of care for children with behavioral health issues.
- CST is targeted to children and families involved in two or more systems of care (such as mental health, long term care, juvenile justice, child welfare, substance abuse or special education) who have complex needs.
- Currently there are 44 programs; 764 children served.
- Outcomes: fewer suspensions/expulsions; reduced involvement with juvenile justice; improved stable relationships; improved school performance

Peer Respite Services

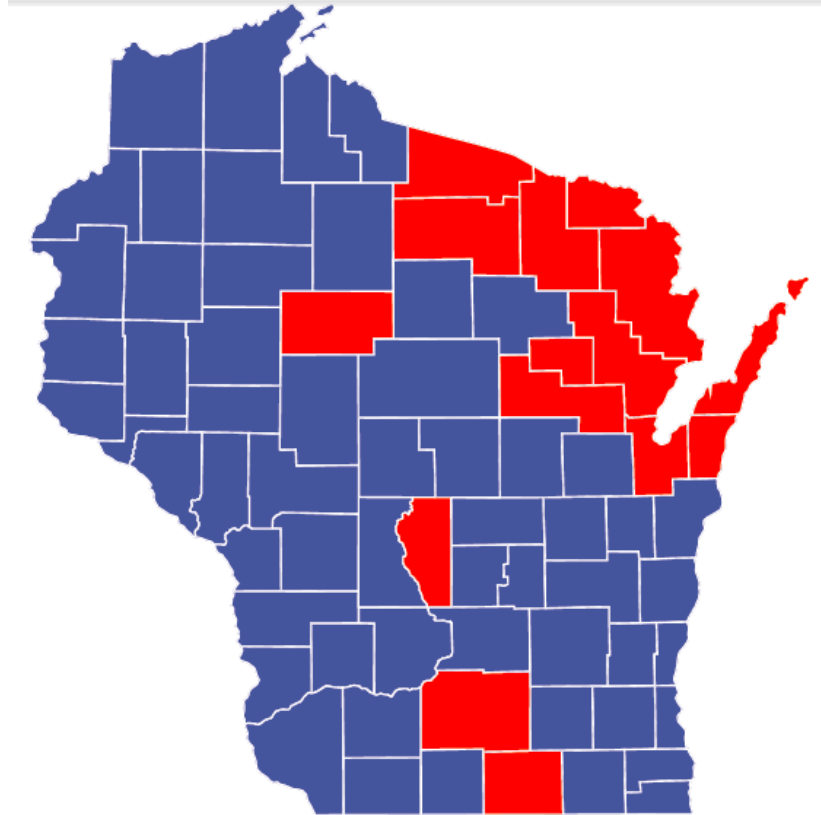
- Peer based services are delivered by people who have been successful in the recovery process.
- The services are provided in community based residential settings (typically 5-8 beds) to people facing a crisis or those having difficulty coping with mental illness.
- Length of stay typically 3-5 days.
- Offer services beyond respite: peer supports, 24/7 warm lines, wellness activities.
- Three peer respite centers to be developed across the state. Serve regional areas.

Recommendations Mental Health

- Keep these mental health investments in the budget! Thank you!

Adult Long Term Supports: Family Care/IRIS

- Family Care expansion not included.
- 15 counties still do not have Family Care/IRIS; some are ready to come into the system.
- 1600 people continue to wait for daily supports.
- There is a budget initiative to triple the # of individuals who self-direct their LTC services (IRIS).



Recommendations: Adult Long-Term Supports

- End wait lists by expanding and fully funding Family Care / IRIS statewide.
- Consolidate Southern and Central Centers and relocate residents to the community with adequate services and supports, instead of maintaining costly facilities.
- Enhance reimbursement rates to support people in moving out of institutions. Increase attention to people with complex needs.
- Ensure services adequately reflect needs and costs of services for members within the system to continue to live in the community.
- Strengthen infrastructure for people in IRIS.
- Invest in training that educates about and emphasizes self-direction and employment option for IRIS participants.

Children's Long Term Supports

- For the 2nd biennium in a row, no new long term supports funding for children with significant disabilities.
- There are approximately 3000 children and youth with significant disabilities and their families waiting for long term support.

COUNTIES with the
LARGEST WAITING LISTS

| COUNTY | CHILDREN WAITING |
|-----------|------------------|
| Milwaukee | 343 |
| Brown | 226 |
| Waukesha | 196 |
| Dane | 176 |
| Jefferson | 90 |
| Rock | 82 |
| Walworth | 76 |
| La Crosse | 75 |
| Dodge | 69 |
| Barron | 64 |

Recommendations: Children's Long-Term Supports

- \$5.4 million will reduce the waiting list for children with significant disabilities by 1,000.
- \$1.3 million will provide access to short-term service coordination for 600 families whose children are eligible, but waiting for long-term supports.

Medicaid “Expansion” & BadgerCare

- Other states will accept federal funds (feds pay 100% for first three years and 90% thereafter) and expand Medicaid coverage to all under 133% Federal Poverty Level.
- The Governor proposes only expanding coverage to people under 100% FPL. (estimated 84,000)
- The Governor’s plan also eliminates BadgerCare coverage for 100,000 people above this income level.
- Taking federal funds and expanding to 133% FPL would cost the state less and potentially support an estimated 175,000 people, one-quarter of whom have mental health disorders, depression and other chronic disabling conditions, such as multiple sclerosis or seizure disorders.

Recommendations: Medicaid Expansion & BadgerCare

- Maintain current eligibility standards and services provided by Medicaid, instead of lowering BadgerCare eligibility to 100% FPL.
- Make sure Wisconsin gets its fair share of federal funds, like other states, and free up millions in state tax dollars for education and other priorities.
- Expand Wisconsin Medicaid to cover adults with incomes below 133% of the FPL.
- Actively enroll individuals with mental illness or substance abuse and other chronic conditions who are currently untreated. This will lower costs for everyone.

Changes to Medical Assistance Purchase Plan (MAPP)

- MAPP is a Medicaid “buy-in” program that provides Medicaid to people who have been found “disabled” by SSA or Medicaid but have income or assets that are too high for traditional Medicaid programs. Recipient must meet a work requirement.
- The budget bill changes the way unearned income is treated in calculating premiums; will significantly reduce premiums for many people with large SSDI checks.
- The bill will make people ineligible (9,000) for MAPP if they are not working at a job that requires the withholding of Social Security and Medicare taxes.

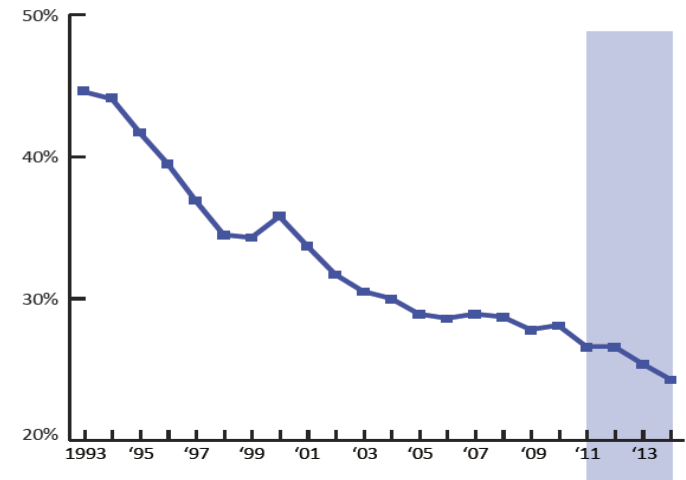
Recommendations: MAPP

- Look for a solution that does not make it cost-prohibitive for current MAPP participants to maintain their health care coverage.
- Ensure that all MAPP participants who will lose MAPP eligibility under this proposal retain coverage.
- Increase access to and funding for Health Education Counseling (HEC).
- Adopt Employment First policies across agencies that prioritize and improve employment supports.

Special Education Funding

- No increase in special education aids; will result in a cut based upon estimated cost increases.
- Over the last two decades, the state's share of special education funding has dropped from 44% to 26%.
- No increase in the high cost fund for 7th consecutive year. It was intended to provide relief to support the education of students with the most significant disabilities; state's support to these districts (1/3 of all) drops to 40% in 2014.

STATE REIMBURSEMENT RATES
for SPECIAL EDUCATION



Special Needs Vouchers

- \$21 million in funding for special needs vouchers to be used in private schools anywhere in the state.
- Funding “follows the student” and comes directly out of neighborhood public school budgets, negatively impacting the students with disabilities who remain in those districts.
- Private school can choose who they serve. Students with the most significant needs are likely to remain in public schools which will have reduced funds to serve them.
- Parents and students lose special education rights and any guarantees to special education or related services such as therapies, assistive technology and access to qualified staff.

Recommendations: Special Education

- Increase state reimbursement for state special education aid from 26% to 30%, a cost of \$66,039,900 in 2014 and \$86,484,000 in 2015.
- Increase the high-cost special education fund to \$1.5 million in the biennium.
- **Take the Special Needs Voucher program out of the budget.** To address parent requests for more education options, pursue first an equitable solution to discriminatory open enrollment practices.
- Increase per pupil spending in public schools to at least \$150/student.

Transportation

- The Governor proposes considerable new funding for highways, while moving funding for transit operating aids from the Transportation Fund to the General Fund. This will make it more difficult to get funding for transit in future budgets. Transit funding will have to compete with other budget priorities such as Medicaid and education.
- Transit funds continue at a 10% cut level from the last budget. Local systems may address the cuts in state aid by raising prices or reducing service.
- Specialized transit 85.21 funding continues at current levels.

Recommendations: Transportation

- Restore the 10% cut in Transit Operating Aids.
- Keep transit in the segregated transportation fund to protect these funds.
- Support the creation of Regional Transit Authorities to provide local governments with more options for sustaining transit.
- Increase funding for Specialized Transportation Assistance (85.21) by \$678,000 to keep counties at least at their 2012 levels.
- Add an additional \$5M in 85.21 funds over the biennium to maintain access to vital transportation services.

Employment

- The Governor's budget makes various workforce system investments that do not mention people with disabilities:
 - ❑ Increased aid for technical colleges (\$5 million) and flexibility in existing worker training funds for high-demand areas.
 - ❑ New performance-based funding requirements for tech colleges.
 - ❑ \$20 million for UW system to support development of a skilled workforce.
 - ❑ \$1.1 million for school districts to provide academic career plans to students.
 - ❑ State funding for apprenticeship program - \$1.8 million.
- Funding for Division of Vocational Rehabilitation (DVR) continues at minimum state funding levels to avoid penalties.

Recommendations: Employment

- Ensure that the Governor's Workforce Initiative supports workers and youth with disabilities, especially in apprenticeship and employment training programs.
- Ensure performance benchmarks and grants incentivize addressing poor employment rates of people with disabilities.
- Provide funding for Work Incentives Benefits Counseling, so workers with disabilities continue to receive appropriate benefits when they begin paid employment.
- Change state use contracting so incentives include (a) a variety of businesses employing workers with disabilities in integrated settings, and (b) more small businesses owned by people with disabilities.
- Establish performance targets for participants in integrated employment in Family Care, Partnership and IRIS.
- Provide funding for regional employment specialists in every Family Care and Partnership MCO.

Other Positive Budget Items

- Extension of foster care payments until age 21 for child who has an IEP.
- Extension of out of home placements for juveniles with IEPs.
- New flexible on-line course options to allow diverse learners (potentially students with disabilities) more variety in courses to meet credits.
- Funding for digital learning portal – should help teachers share materials and curriculum designed to meet needs of students with disabilities.

Other Questions About Budget Items

- New DOA ability to sale/lease state properties, including Northern Center. Where do proceeds go?
- Medicaid expenditure reporting changes and internal credits of revenues to programs instead of funding other community-based priorities?
- \$96 million - 2% rate increase for nursing homes?
- No new funding in YoungStar to help lower rated child care facilities (2 stars) improve their care and be able to support children with disabilities.
- Community-Based Residential Facilities (CBRF) changes: change from inspections of settings to only evaluations for some facilities.
- Estate recovery changes – impacts on people with disabilities who are in pooled trusts?

Your Opportunity to Influence the Budget!

[Thursday April 4 \(10:00 a.m. - 6:00 p.m.\)](#)

Greendale High School Auditorium, Greendale

[Monday, April 8 \(10:00 a.m. - 5:00 p.m.\)](#)

Lambeau Field, Green Bay

[Wednesday, April 10 \(10:00 a.m. - 5:00 p.m.\)](#)

Kalahari Resort, Wisconsin Dells

[Thursday, April 18 \(10:00 a.m. - 5:00 p.m.\)](#)

Baldwin-Woodville High School Auditorium, Baldwin

What you can do to make your voice heard



1. Develop relationships w/your legislators and policy makers. Share your views and stories regularly – follow up. (Who are my legislators: <http://legis.wisconsin.gov/pages/waml.aspx>)
2. Write letters to the editor.
3. Participate in budget and other hearings.
4. Work in coalition with other advocates.
(www.survivalcoalition.wi.org)

Thank to the following content contributors:

- WI Board for People with Developmental Disabilities
www.wi-bpdd.org
- Survival Coalition of Wisconsin Disability Organizations
www.survivalcoalitionwi.org
- Disability Rights Wisconsin www.drwi.org
- Michael Blumenfeld and Associates
- Transit Now
- Wisconsin Council on Children and Families
www.wccf.org
- Wisconsin Budget Project
www.wisconsinbudgetproject.org