

**Linking Employment, Abilities and Potential (LEAP)  
2009 Advocacy Principles and Priorities**

<b>Advocacy Priority</b>	<b>Description</b>
<b><u>EMPLOYMENT and EDUCATION</u></b>	
Rehabilitation Act	Next 3 Federal Acts: <u>Rehab Act</u> (needs reauthorization) authorizes public rehab services to support persons with disabilities in independent living, work, and community integration.
Workforce Invest. Act	Known as <u>WIA</u> , supports workforce development activities-employment, retention, quality of workforce-targets persons with disabilities and other populations.
Ind. With Disabilities Education Act	Known as <u>IDEA</u> , establishes fed. Expectations/accountability for the public schools in the education of children with disabilities.
<b><u>INDEPENDENT LIVING</u></b>	
Olmstead Decision	4 interconnected priorities which support independent living and consumer choice- In Olmstead, the Supreme Court held that confinement in an institution is a violation of civil rights, when life in a more integrated setting in the community is possible through reasonable accommodations in supports and services. States must provide alternatives to institutional based care. The most recent CMS data for Ohio (2007) shows that the state spends 70% on institutional care and only 30% on community-based services.
	Creation of affordable and accessible public & private long term care supports and services or HCBS (state level)
	Known as <u>PAS</u> , these are activities of daily living or of independent living that a person would do for themselves but cannot do so because of their disability. Only available in Ohio through waiver programs, no stand alone program.
	Most waivers have a case management component, under this type of waiver the consumer directs their own care, including whom they want to provide care.
Community Choice Act of 2007	Under current Fed. law, Medicaid beneficiaries are entitled (if they meet all the requirements) to nursing home care but not home and community based care. This law would eliminate the institutional bias in Medicaid, making HCBS an entitlement along with facility based care for those who need it. (Will need to be reintroduced)
Home Choice (Money follows the person)	Ohio's pilot program to enable residents of facilities who choose to and are able to transition back into the community.
Community Living Assistance Services & Supports	Known as the <u>CLASS Act</u> , this federal law would allow ind. to put money aside for their LTC needs and still qualify for Medicaid coverage. (Will need to be reintroduced)
Direct Service Support Professional Bill	Fed. Law which would address workforce issues by increasing Medicaid reimbursement rates for these caregivers. (Will need to be reintroduced)
Centers for Ind. Living/Services	Increased state & federal support for CILs and their ability to

	provide independent living services. There are not enough CILs to serve Ohioans with disabilities, nor does the state provide adequate funding to provide needed services.
Disaster/Emergency Preparedness	On the local, state and federal level for persons with disabilities
Assistive Technology	Need to increase access and funding for assistive devices to support independence and self-sufficiency.
<b><u>HOUSING</u></b>	
Accessible, Affordable and Safe housing	Unmet need for many in the disability community.
Federal and State funding for Housing	Diminishing commitment on the part of the federal government to assisting in the development and maintenance of affordable housing.
OHFA and QAP	On state level, the Ohio Housing Financing Agency provides tax credits for the development of affordable, accessible, special needs housing.
Housing Discrimination	Still a major issue for persons with disabilities, enforced under ADA and civil rights law.
Universal Design/Visitability	A positive approach to architectural barriers—creating communities where everyone has at least partial access
Housing with Supportive Services	MetroHealth project to supplement Home Choice. Will provide affordable, accessible housing and formal/informal community services and supports.
<b><u>TRANSPORTATION</u></b>	
Equal Access	Lack of accessible cab service, need to improve public transportation for persons with disabilities i.e. availability, lack of regional systems (cross county lines)
<b><u>VOTING</u></b>	
Equal Access	Persons with disabilities should be able to exercise their right to vote by making accommodations not with assistance. System chosen should work for all voters, regardless of disability.
<b><u>INCOME SUBSIDY</u></b>	
Social Security, SSI, SSDI, TANF	Privatization of social security. Tightening of the rules for SSI or SSDI which is the income safety net for the aged, blind and disabled. Cutting of TANF (Temporary Assistance for Needy Families)
Disability Determination Process	Process takes too long for the initial determination. Appeal process takes even longer and many persons with disabilities are denied initially and then receive benefits upon appeal.
<b><u>HEALTH CARE/MEDICAID/MEDICARE</u></b>	
Universal Health Care	This is a major public policy issue and we want to be sure that any discuss of how to “fix” or reform the system takes into account the unique needs of persons with disabilities and must not only deal with preventative or acute care but with long term care and supports
Special Needs Plan for Dual Eligible	Care Source Project – Best Practices to create a consumer directed managed care plan for persons with disabilities
Medicare mobility devices/DME	“In the Home” restriction, which states that if you don’t need the device to move around your home, it will not be covered by Medicare. Also competitive bidding which could severely limit the availability of complex mobility devices for persons with significant physical disabilities.
Disability Medical Assistance (DMA)	Was practically eliminated in Ohio, the absolute safety net for single disabled adults who have not been able to receive a disability determination from the SSA. Many of these persons

	with disabilities need medications to control symptoms and to aid in functioning.
Medicaid Funding	Expand children's funding between 250%-300% FPL, this would include disabled children for whom parents cannot get coverage due to pre-existing conditions, restore dental coverage for adults, increased funding for all Medicaid waivers so that home and community based services are a viable option for the under 60 population.
Ending Medicare Waiting Period	Eligible individuals with disabilities won't wait 24 months before they can receive coverage. Eliminate waiting period over time and would add individuals with life threaten conditions.
<b><u>ROLE OF GOVT. &amp; PUBLIC FUNDING</u></b>	
Adequate revenue	This is an important public policy issue as to whether a democratic government has a role/responsibility in investing in its people by meeting basic human needs. In the field of disability services, where the majority of our consumers live in poverty, who pays for services and supports often determine the opportunities that individuals enjoy, where they live and with whom, and what care and services they receive or don't receive.
Federal, State and County Budget priorities	How do we want our tax dollars to be spent? What are our budget priorities, tax policies? How do our spending priorities shape our public policy decision?
<b><u>Developmental Disabilities Council Issues</u></b>	LEAP has been designated as an ODDC Center for Public Policy and as such is committed to advancing Council's public policy agenda.
County Board Membership	Each County has a Bd. Of MRDD and Board membership is established by statute. At present, consumers or individuals eligible for board services are not required to have a seat at the table although their guardians or family members are categorically included. This issue is about self-determination and the fact that persons being served should be part of the decision-making process. (Will need to be reintroduced)
Developmental Disabilities Assistance & Bill of Rights Act	Needs reauthorization.
Removing MR from MRDD Depts., & County Bds.	Bill has been introduced in Ohio House and will need to be reintroduced if it doesn't pass this session.

Approved by LEAP's Advocacy Committee, 11/18/08  
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