

NCARF Legislative Agenda 2009-2010

Guiding Principles

Our major emphasis should be on efficient system change providing for best practice, higher quality and cost efficient vocational and day DD services.

We must: JOINTLY with the Division develop and PILOT new program change, not repeating the state's costly past mistakes with Mental Health Reform.

We must: Promote an "Employment First" initiative with a support service model versus a medical model, assuring the first dollar of service money goes towards vocational services.

Adult Developmental Disabilities Service Recommendation to:

Governor Purdue, North Carolina legislators, BRAC and the Legislative Oversight Committee

- 1) We must: Assure LME's utilize fund balances to offset state IPRS budget cuts as intended by legislature. Encourage members to attend LME BOD meetings to address such, as necessary.
- 2) We Must: Continue the transition of all developmental disability Day Vocational providers to the CAET model using one or all of the following (dependant upon individual needs, wants & regional/county resources in regards to service delivery models utilized) components:
 - a) School-to-Work Transition programs
 - b) Complex and Multiple Needs programs
 - c) Senior Services
 - d) Supported Employment
- 3) We Must, regarding CAP /DD waiver services:
 - a) Assure members are prepared for utilization of the first CAP Tier One Supports Waiver slots, utilizing \$12 million (total state and federal) for approximately 800 new Tier One slots statewide.
 - b) Diligently research the Medicaid Waiver **eligibility definition**, potential to leverage state dollars with 2-1 federal match dollars and increase CAP eligibility from 30% to 90-95 % of Adults with Developmental Disabilities.
Note: this is being done successfully in many states across the country.
 - c) Further pursue and develop the CAP MR/DD Four Tiered Waiver proposal.
 - d) Explore a RE-write of the CAP Medicaid service definitions to reflect service supports as opposed to a medical treatment model. Explore how other states have been successful with this.
- 4) We must, continue to promote the use of VR ARRA funds to assist CRP's in expanding job creation and vocational training opportunities.

Action Items:

- 1) Review all above recommendations with: Governor Perdue's Mental Health staff, LOC Legislators, MH/DD/SAS Director and VR Director as appropriate.
- 2) Track LME use of Fund Balances to reduce service budget cuts.
- 3) Provide for training of members, as necessary, in CAP Tier One implementation.
- 4) Research the Medicaid Waiver Eligibility definition utilized in other states.
- 5) Work with Division to establish Rates and adopt Definitions of CAET service components
- 6) Work through VR/CRP steering committee for CRP use of ARRA funds