



Description of graphic: RI State Seal an anchor in gold behind a blue wheelchair logo. Just below is a blue banner with the state motto "Hope". All are in the center of a ring of 8 blue stars, in groups of 2 separated by the logos for Braille, hearing aids, low vision and amplified phone.

Governor's Commission on Disabilities Business Meeting Minutes

Monday November 29, 2010 5 - 7 PM

John O. Pastore Center, 41 Cherry Dale Court,
Cranston, RI 02920-3049

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	R. Timothy Flynn (Chair.); Dr. Kate McCarthy-Barnett (Vice Chair.); Cristina Amedeo; Sharon Brinkworth; Frederick Burke; Rosemary Carmody; Laura Jones; William Inlow; James Pitassi; Arthur Plitt; Msgr. Gerard Sabourin; Theresa Thaelke; & Linda Ward
Attendees:	
Absent:	Jeanne Behie; Julie DeRosa; Dr. Judith Drew; Roger Harris; Katherine Lowe; Lisa McKay; Ronald McMinn; Patricia Ryherd; Sarah Everhart Skeels; & Nancy Thomas
Staff:	Bob Cooper, Secretary, Harvey Salvas, State ADA Coordinator, Christopher DeGrave, Assistant State ADA Coordinator

	Agenda Topics	Moderator/Leader	Time
	Call to Order and Acceptance of the Minutes	R. Timothy Flynn, Chairperson	5:00
Chair calls the meeting to order at 5:20			
MOTION: To accept the minutes of the previous meeting as written AP/KMcC-B passed unanimously			

Action Items:			
	Adoption of the Commission's: <ul style="list-style-type: none"> o 2011 Legislative Package; o Legislation Committee's 2011 Scope of Review; & o 2010 Public Forum Report 	Linda Ward, Chairperson Legislation Committee	5:05
Purpose/Goal: To decide the Commission's 2011 legislative goals.			
<p>Commission's Regulations/Bylaws require the following procedure for the Adoption of Legislative Package</p> <p>The Legislation Committee shall conduct public hearings to elicit public comments prior to the development of the Commission's Legislative Package.</p> <p>The committee shall prepare and mail to all commissioners, at least two (2) weeks prior to the Commission's Fall Legislative Meeting:</p> <ol style="list-style-type: none"> (1) <i>Proposed a Legislative Package for the commission to review; and</i> (2) <i>A Scope of Review that outlines the areas of general assembly legislation that the</i> 			

Agenda Topics	Moderator/Leader	Time
<i>committee should be empowered to review and comment on during the upcoming legislative session.</i>		
Discussion: The Legislation Committee's recommendations for the Commission's 2011 Legislative Package:		
<ol style="list-style-type: none"> 1. Crisis Intervention Services for abuse non-elderly adults (18-64) with severe impairments: <ol style="list-style-type: none"> a) Request information on the new EOHHS¹/BHDDH² program and b) Prepare legislation if needed to address any gaps; 2. Bureau of Criminal Identification checks of in-home personal care service workers: <ol style="list-style-type: none"> a) Find out which services do not require BCI check and b) Prepare legislation if needed to address any gaps; 3. Transportation to Employment, job training, education, health care, etc.: <ol style="list-style-type: none"> a) Maintain the existing RIPTA/Ride service areas and b) Advocate for adequate funding.; c) Outside of the RIPTA/Ride service areas/hours: <ol style="list-style-type: none"> i) Watch the startup of the RI Public Transit Authority's John J. MacDonald Jr. Transportation /New Freedom Initiative [accessible taxicabs] and ii) Prepare legislative if needed; d) Join the RI Coalition for Transportation Choices³. 4. Global Medicaid Consumer Choice Waiver: <ol style="list-style-type: none"> a) Make sure the 2008 level of services stay in place for persons with severe disabilities: <ol style="list-style-type: none"> i) Keep the children with special health care needs programs, the 2008 		

¹ Executive Office of Health and Human Services

² Department Behavioral Healthcare, Developmental Disabilities, and Hospitals (formerly MHRH)

³ RICTC Principles

Expand clean, efficient transportation choices. Rhode Island must invest new funds in light rail, commuter rail, rapid bus service and other forms of modern public transportation. Transportation investments encourage dynamic and accessible communities where residents can walk, bike or take transit to get where they need to go. These investments ensure that all Rhode Islanders have the mobility and access needed to participate fully in a robust 21st century economy.

Invest in healthy and safe transportation choices. State and local policies should provide incentives so communities can retrofit unsafe urban roads and bridges, create complete streets safe for motorists, pedestrians and cyclists and encourage active living in communities free of harmful levels of vehicle emissions.

Spend taxpayers' money wisely and ensure accountability for how funds are spent. Rhode Island's investments in transportation money should be spent on projects that produce real results and reduce dependence on oil, curb global warming pollution, alleviate congestion, improve safety and support healthy, sustainable communities.

Bring existing transportation assets into good repair. The state must take better care of what it has built by making repair and modernization of existing roads & bridges a priority.

Coalition Members

AARP; Amalgamated Transit Union; American Lung Association in RI; Apeiron Institute for Sustainable Living; Audubon Society of Rhode Island; Blueways Alliance; Blackstone Valley Partnership; Blackstone Valley Tourism Council; Blueways Alliance; Brown emPower; Childhood Lead Action Project; City-State, the Urban Design Lab at RISD; Clean Water Action; Conservation Law Foundation; Cornish Associates; DOT Watch; East Coast Greenway Alliance; Ecolect; Environmental Justice League of RI; Farm Fresh Rhode Island; Goodwill Industries; Grow Smart RI; Head of the Bay Gateway; LISC-RI; Narragansett Bay Estuary Program; Pawtucket Foundation; Providence Foundation; Providence Warwick Convention & Visitors Bureau; Recycle-A-Bike; Rhode Island Bicycle Coalition; RI Consulting Engineers (RICE); Rhode Island Student Climate Coalition; RI Association of Railroad Passengers; RI Interfaith Power and Light; RI Land Trust Council; RICOSH; Save The Bay; SEIU, District 1199; Sierra Club; U.S. Open Cycling; Working Rhode Island; Youth in Action;

	Agenda Topics	Moderator/Leader	Time
	<p>Katie Beckett and children with autism spectrum disorders eligibility rules;</p> <ul style="list-style-type: none"> ii) Expand the Sherlock (employee buy-in health care) Plan⁴; and iii) Keep the right to medically necessary brand name drugs. Do not require 2 generic failures before allowing brand name drugs; and <p>b) Prepare legislation if needed to address any rollbacks;</p> <p>5. Home Modifications (access changes) so family members with severe disabilities can remain at home rather than be placed in costly institutions:</p> <ul style="list-style-type: none"> a) Increase funding to address the 1 - 2 year backlog and b) Establish a Home Modifications Revolving Fund for People with Disabilities and the Elderly⁵, similar to the Commonwealth of Massachusetts <p>6. Disability Business Enterprise program's purchasing rules⁶ are in place;</p> <p>7. Housing Support and other services for people with behavioral health concerns</p> <ul style="list-style-type: none"> a) Advocate for continued funding of the Neighborhood Opportunities Program and b) Support the creation of a supportive housing program⁷; <p>8. Affordable Care Act⁸ (national health care reform):</p> <ul style="list-style-type: none"> a) Watch the impact on people with special health care needs and b) Prepare legislation if needed; <p>9. Respite for Family Caregivers of non-elderly adults with non-developmental disabilities:</p> <ul style="list-style-type: none"> a) Advocate for expansion of services to cover the family caregivers of 22 - 60 year old adults who have disabilities other than developmental. <p>10. Assist in creating rules for:</p> <ul style="list-style-type: none"> a) RI Department of Transportation - accessible (pedestrian) crosswalks have curb cuts on both sides. b) RI Housing/Housing Resources Commission - allowing clothes washing & drying machines in apartments in low cost housing as an accommodation for people with chemical sensitivities; and c) RI Department of Human Services - address the Workers' Compensation liability of the person w/ the disability who employs in-home care; 		

⁴ The Medicaid Buy-In law, also known as the Sherlock Act or Plan, will allow qualified Rhode Islanders receiving SSI or SSDI payments to continue receiving government subsidized health coverage in the form of Medicaid even if they return to work and exceed the income threshold that currently exists for Medicaid eligibility. The Sherlock Plan allows qualified working people with disabilities to earn more income without the risk of losing vital health care coverage. Plan participants pay a premium for Medicaid coverage. Rhodes to Independence

⁵ Rhodes to Independence <http://www.rhodestoindpendence.org/housinghome.htm>

⁶ RIGL 37-2.2-3.1 **Disability Business Enterprises – Policy and applicability.** "The director of administration, in consultation with the governor's commission on disabilities, is authorized and directed to establish rules and regulations for awarding contracts to small disadvantaged businesses owned and controlled by persons with disabilities in the procurement of goods, services, construction projects, or contracts funded in whole or in part by state funds, in accordance with 37-2-9(b)(14)."

⁷ SAMHSA (Substance Abuse, Mental Health Services Administration) With flexible supports, people with psychiatric disabilities can live in housing of their choice, just like any other member of the community. Programs take different approaches to housing. In some, people live in units reserved for the program's tenants, among those with and without special needs. In others, people receive the program's help finding, qualifying for, and keeping housing on the open market. All tenants have access to an array of services that help them keep their housing, such as case management, assistance with daily activities, conflict resolution, and crisis response. Tenants also receive help in becoming fully participating members of the community, through assistance with socialization and seeking employment. <http://store.samhsa.gov/shin/content/SMA10-4510/SMA10-4510-08.pdf>

⁸ <http://www.whitehouse.gov/healthreform/healthcare-overview#healthcare-menu>

	Agenda Topics	Moderator/Leader	Time
	<p>11. Transition from Youth services (education, Medicaid, etc.) to Employment, or post-secondary education or adult services:</p> <ul style="list-style-type: none"> a) Request information from the RI Dept of Education on barriers to smooth transition and b) Prepare legislation if needed. 		
	<p>The State ADA Coordinator wants to add 12. Update RI's Access Building Code to match the 2012 US Access Guidelines. On January 1, 2012, the new federal access standard takes effect. The RI update should happen on the same date.</p>		
 <p>voting check off graphic</p>	<p>MOTION: To adopt the Commission's 2011 Legislative Package below:</p> <ol style="list-style-type: none"> 1. Crisis Intervention Services for abuse non-elderly adults (18-64) with severe impairments: <ul style="list-style-type: none"> a) Request information on the new EOHHS⁹/BHDDH¹⁰ program and b) Prepare legislation if needed to address any gaps; 2. Bureau of Criminal Identification checks of in-home personal care service workers: <ul style="list-style-type: none"> a) Find out which services do not require BCI check and b) Prepare legislation if needed to address any gaps; 3. Transportation to Employment, job training, education, health care, etc.: <ul style="list-style-type: none"> a) Maintain the existing RIPTA/Ride service areas and b) Advocate for adequate funding; c) Outside of the RIPTA/Ride service areas/hours: <ol style="list-style-type: none"> i) Watch the startup of the RI Public Transit Authority's John J. MacDonald Jr. Transportation /New Freedom Initiative [accessible taxicabs] and ii) Prepare legislative if needed; d) Join the RI Coalition for Transportation Choices¹¹; 		

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AARP; Amalgamated Transit Union; American Lung Association in RI; Apeiron Institute for Sustainable Living; Audubon Society of Rhode Island; Blueways Alliance; Blackstone Valley Partnership; Blackstone Valley Tourism

	Agenda Topics	Moderator/Leader	Time
	<p>4. Global Medicaid Consumer Choice Waiver:</p> <ul style="list-style-type: none"> a) Make sure the 2008 level of services stay in place for persons with severe disabilities: <ul style="list-style-type: none"> i) Keep the children with special health care needs programs, the 2008 Katie Beckett and children with autism spectrum disorders eligibility rules; ii) Expand the Sherlock (employee buy-in health care) Plan¹²; and iii) Keep the right to medically necessary brand name drugs. Do not require 2 generic failures before allowing brand name drugs; and b) Prepare legislation if needed to address any rollbacks; <p>5. Home Modifications (access changes) so family members with severe disabilities can remain at home rather than be placed in costly institutions:</p> <ul style="list-style-type: none"> a) Increase funding to address the 1 - 2 year backlog and b) Establish a Home Modifications Revolving Fund for People with Disabilities and the Elderly¹³, similar to the Commonwealth of Massachusetts <p>6. Disability Business Enterprise program's purchasing rules¹⁴ are in</p>		

Council; Blueways Alliance; Brown emPower; Childhood Lead Action Project; City-State, the Urban Design Lab at RISD; Clean Water Action; Conservation Law Foundation; Cornish Associates; DOT Watch; East Coast Greenway Alliance; Ecolect; Environmental Justice League of RI; Farm Fresh Rhode Island; Goodwill Industries; Grow Smart RI; Head of the Bay Gateway; LISC-RI; Narragansett Bay Estuary Program; Pawtucket Foundation; Providence Foundation; Providence Warwick Convention & Visitors Bureau; Recycle-A-Bike; Rhode Island Bicycle Coalition; RI Consulting Engineers (RICE); Rhode Island Student Climate Coalition; RI Association of Railroad Passengers; RI Interfaith Power and Light; RI Land Trust Council; RICOSH; Save The Bay; SEIU, District 1199; Sierra Club; U.S. Open Cycling; Working Rhode Island; Youth in Action;

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	<p>place;</p> <p>7. Housing Support and other services for people with behavioral health concerns</p> <p>a) Advocate for continued funding of the Neighborhood Opportunities Program and</p> <p>b) Support the creation of a supportive housing program¹⁵;</p> <p>8. Affordable Care Act¹⁶ (national health care reform):</p> <p>a) Watch the impact on people with special health care needs and</p> <p>b) Prepare legislation if needed;</p> <p>9. Respite for Family Caregivers of non-elderly adults with non-developmental disabilities:</p> <p>a) Advocate for expansion of services to cover the family caregivers of 22 - 60 year old adults who have disabilities other than developmental</p> <p>10. Assist in creating rules for:</p> <p>a) RI Department of Transportation - accessible (pedestrian) crosswalks have curb cuts on both sides;</p> <p>b) RI Housing/Housing Resources Commission - allowing clothes washing & drying machines in apartments in low cost housing as an accommodation for people with chemical sensitivities; and</p> <p>c) RI Department of Human Services - address the Workers' Compensation liability of the person w/ the disability who employs in-home care;</p> <p>11. Transition from Youth services (education, Medicaid, etc.) to Employment, or post-secondary education or adult services:</p> <p>a) Request information from the RI Dept of Education on barriers to smooth transition and</p> <p>b) Prepare legislation if needed; and</p> <p>12. Update RI's Access Building Code to match the 2012 US Access Guidelines.</p> <p>SB/AP passed unanimously</p>		

Purpose/Goal: To set the Legislation Committee's 2011 Scope of Review

Discussion: In 2010 the Legislation Committee reviewed legislation in the following categories:

Scope of Review Tally

Budget [Legislation Committee only makes recommendations for action by either the Commission or Executive Committee]

Commission Neutral now that it has been

Incorporated into Budget Act 1

Effective without Governor's signature 1

Commission Neutral now that it has been 2

	Agenda Topics	Moderator/Leader	Time
	<i>Commission Opposes</i> Indefinitely Postponed 1 <i>Commission Opposes 1</i> <i>Commission Opposes unless amended</i> Incorporated into Budget Act 1 <i>Commission Opposes unless amended 1</i> <i>Commission Supports if amended</i> Indefinitely Postponed 1 <i>Commission Supports if amended 1</i> <i>No Position taken</i> Incorporated into Budget Act 5 Indefinitely Postponed 6 Effective without Governor's signature 3 Held for Further Study, Continued, or Heard 2 <i>No Position taken 16</i> Budget 21		
	Civil Rights <i>Commission Supports if amended</i> Held for Further Study, Continued, or Heard 1 <i>Commission Supports if amended 1</i> <i>Committee finds this bill Beneficial</i> Effective without Governor's signature 1 Held for Further Study, Continued, or Heard 5 <i>Committee finds this bill Beneficial 6</i> <i>Committee finds this bill Beneficial if amended</i> Held for Further Study, Continued, or Heard 1 <i>Committee finds this bill Beneficial if amended 1</i> <i>Committee finds this bill Harmful</i> Held for Further Study, Continued, or Heard 2 <i>Committee finds this bill Harmful 2</i> <i>No Position taken</i> Effective without Governor's signature 1 Signed by Governor 1 Passed and Transferred 1 Held for Further Study, Continued, or Heard 4 Referred to Committee 5 <i>No Position taken 12</i> <i>The Commission recommends the Governor sign</i> Vetoed by Governor 2 Effective without Governor's signature 3 <i>The Commission recommends the Governor 5</i> Civil Rights 27		
	Disability Prevention <i>Committee finds this bill Beneficial</i> Recommitted 1 Held for Further Study, Continued, or Heard 3 Referred to Committee 1 <i>Committee finds this bill Beneficial 5</i>		

	Agenda Topics	Moderator/Leader	Time
	<p><i>Committee finds this bill Beneficial if amended</i> Effective without Governor's signature 2 Signed by Governor 2 Held for Further Study, Continued, or Heard 1 Referred to Committee 1 <i>Committee finds this bill Beneficial if amended 6</i> <i>Committee finds this bill Harmful</i> Held for Further Study, Continued, or Heard 1 <i>Committee finds this bill Harmful 1</i> <i>No Position taken</i> Resolution Adopted 11 Withdrawn by sponsor 1 Postponed by sponsor 3 Effective without Governor's signature 4 Signed by Governor 2 Passed in Concurrence 1 Passed and Transferred 7 Passed 1 Held for Further Study, Continued, or Heard 37 Referred to Committee 13 <i>No Position taken 80</i> <i>The Commission recommends the Governor sign</i> Signed by Governor 1 <i>The Commission recommends the Governor 1</i></p>		
			Disability Prevention 93
	<p>Employment <i>No Position taken</i> Resolution Adopted 1 Postponed by sponsor 1 <i>No Position taken 2</i></p>		Employment 2
	<p>Health Insurance <i>Committee finds this bill Beneficial</i> Held for Further Study, Continued, or Heard 3 <i>Committee finds this bill Beneficial 3</i> <i>Committee finds this bill Harmful</i> Referred to Committee 1 <i>Committee finds this bill Harmful 1</i> <i>No Position taken</i> Recommitted 1 Indefinitely Postponed 1 Transferred 2 Withdrawn by sponsor 1 Postponed by sponsor 1 Effective without Governor's signature 8 Passed 1 Held for Further Study, Continued, or Heard 31 Referred to Committee 7</p>		

	Agenda Topics	Moderator/Leader	Time
	<i>No Position taken 53</i>		
		Health Insurance 57	
	Housing		
	<i>Committee finds this bill Beneficial if amended</i>		
	Held for Further Study, Continued, or Heard 1		
	<i>Committee finds this bill Beneficial if amended 1</i>		
	<i>Committee finds this bill Harmful</i>		
	Referred to Committee 1		
	<i>Committee finds this bill Harmful 1</i>		
	<i>No Position taken</i>		
	Effective without Governor's signature 3		
	Held for Further Study, Continued, or Heard 4		
	<i>No Position taken 7</i>		
		Housing 9	
	Human Services		
	<i>Commission Supports if amended</i>		
	Held for Further Study, Continued, or Heard 2		
	<i>Commission Supports if amended 2</i>		
	<i>Committee finds this bill Beneficial</i>		
	Referred to Committee 1		
	<i>Committee finds this bill Beneficial 1</i>		
	<i>Committee finds this bill Beneficial if amended</i>		
	Recommitted 1		
	Held for Further Study, Continued, or Heard 1		
	<i>Committee finds this bill Beneficial if amended 2</i>		
	<i>Committee finds this bill Harmful unless amended</i>		
	Held for Further Study, Continued, or Heard 2		
	<i>Committee finds this bill Harmful unless 2</i>		
	<i>No Position taken</i>		
	Incorporated into Budget Act 3		
	Postponed by sponsor 1		
	Effective without Governor's signature 4		
	Passed and Transferred 1		
	Held for Further Study, Continued, or Heard 8		
	Referred to Committee 1		
	<i>No Position taken 18</i>		
	<i>The Commission recommends the Governor sign</i>		
	Signed by Governor 2		
	<i>The Commission recommends the Governor 2</i>		
	<i>The Commission recommends the Governor veto</i>		
	Vetoed by Governor 1		
	<i>The Commission recommends the Governor 1</i>		
		Human Services 28	
	Medicaid		
	<i>Commission Recommends Held for Further Study</i>		
	Effective without Governor's signature 1		
	<i>Commission Recommends Held for Further 1</i>		
	<i>Commission Supports</i>		

	Agenda Topics	Moderator/Leader	Time
	<p>Effective without Governor's signature 1 <i>Commission Supports 1</i> <i>Committee finds this bill Beneficial</i> Held for Further Study, Continued, or Heard 1 <i>Committee finds this bill Beneficial 1</i> <i>No Position taken</i> Effective without Governor's signature 1 <i>No Position taken 1</i> <i>Tabled for more information</i> Effective without Governor's signature 1 <i>Tabled for more information 1</i> Medicaid 5</p> <p>Professional Standards <i>Committee finds this bill Beneficial</i> Withdrawn by sponsor 1 <i>Committee finds this bill Beneficial 1</i> <i>Committee finds this bill Beneficial if amended 1</i> Held for Further Study, Continued, or Heard 1 <i>Committee finds this bill Beneficial if amended 1</i> <i>Committee finds this bill Harmful</i> Referred to Committee 1 <i>Committee finds this bill Harmful 1</i> <i>No Position taken</i> Incorporated into Budget Act 2 Passed, held on desk 1 Resolution Adopted 1 Recommitted 3 Transferred 1 Withdrawn by sponsor 2 Postponed by sponsor 1 Vetoed by Governor 1 Effective without Governor's signature 18 Signed by Governor 1 Passed and Transferred 5 Passed 1 Held for Further Study, Continued, or Heard 37 Referred to Committee 9 <i>No Position taken 83</i> <i>The Commission recommends the Governor veto</i> Passed in Concurrence 1 <i>The Commission recommends the Governor 1</i> Professional Standards 87</p> <p>Special Education <i>Committee finds this bill Beneficial</i> Referred to Committee 1 <i>Committee finds this bill Beneficial 1</i> <i>Committee finds this bill Harmful</i> Referred to Committee 1</p>		

	Agenda Topics	Moderator/Leader	Time
	<p><i>Committee finds this bill Harmful 1</i> <i>No Position taken</i> Transferred 1 Signed by Governor 2 Held for Further Study, Continued, or Heard 8 Referred to Committee 9 <i>No Position taken 20</i></p> <p style="text-align: right;">Special Education 22</p> <p>Transportation <i>Committee finds this bill Beneficial if amended</i> Held for Further Study, Continued, or Heard 1 <i>Committee finds this bill Beneficial if amended 1</i> <i>Committee finds this bill Harmful</i> Referred to Committee 1 <i>Committee finds this bill Harmful 1</i> <i>No Position taken</i> Transferred 1 Effective without Governor's signature 1 Held for Further Study, Continued, or Heard 4 Referred to Committee 2 <i>No Position taken 8</i> <i>The Commission recommends the Governor sign</i> Effective without Governor's signature 2 <i>The Commission recommends the Governor 2</i></p> <p style="text-align: right;">Transportation 12 Grand Total: 363</p>		
<input checked="" type="checkbox"/> <small>voting check off graphic</small>	<p>MOTION: To let (authorize) the Legislation Committee to read and comment on 2011 bills about: Civil Rights, Disability Prevention, Employment, Medicaid, Health Insurance, Professional Standards, Housing, Human Services, Special Education, and Transportation. KMcC-B / RC passed unanimously</p>		
<input checked="" type="checkbox"/> <small>voting check off graphic</small>	<p>MOTION: To direct the legislation committee report to the Executive Committee on the impact of budget articles. AP/RC passed unanimously</p>		
	<p>Purpose/Goal: To adopt the 2010 Public Forum Report</p>		
	<p>Discussion: See attached Draft Report</p>		
<input checked="" type="checkbox"/> <small>voting check off graphic</small>	<p>MOTION: To adopt the 2010 Public Forum Report as written RC/CA passed unanimously</p>		
	<p>Purpose/Goal: To revise the Commission's John E. Fogarty Awards.</p>		
	<p>Discussion: The final version of Rep. Costantino's bill 09 - H 5112 Sub C AN ACT RELATING TO CENTERS FOR MEDICARE AND MEDICAID SERVICES WAIVER</p>		

	Agenda Topics	Moderator/Leader	Time
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AND EXPENDITURE AUTHORITY, had the phrase “excluding services for persons with developmental disabilities”. The Commission had those words taken out of the Senate bill by Sen. DaPonte. See the bold words below:

RI Public Law 2009 Chapter **069** 09 - H 5112 Sub C AN ACT RELATING TO CENTERS FOR MEDICARE AND MEDICAID SERVICES WAIVER AND EXPENDITURE AUTHORITY

SECTION 6. Section 40-8.9-9 of the General Laws in Chapter 40-8.9 entitled "Medical Assistance - Long-Term Care Service and Finance Reform" is hereby amended to read as follows:

40-8.9-9. Long-term care re-balancing system reform goal. -- (a) Notwithstanding any other provision of state law, the department of human services is authorized and directed to apply for and obtain any necessary waiver(s), waiver amendment(s) and/or state plan amendments from the secretary of the United States department of health and human services, and to promulgate rules necessary to adopt an affirmative plan of program design and implementation that addresses the goal of allocating a minimum of fifty percent (50%) of Medicaid long-term care funding for persons aged sixty-five (65) and over and adults with disabilities excluding services for persons with developmental disabilities to home and community-based care on or before December 31, ~~2012~~ 2013; provided, further, the executive office of health and human services shall report annually as part of its budget submission, the percentage distribution between institutional care and home and community-based care by population and shall report current and projected waiting lists for long-term care and home and community-based care services. The department is further authorized and directed to prioritize investments in home and community-based care and to maintain the integrity and financial viability of all current long-term care services while pursuing this goal.



voting check off graphic

MOTION: To reconsider the MOTION: To award the John E. Fogarty Awards to:

Sen. Walaska & Rep. Coderre for 10 - H 7498 Sub A as Amended & 10 - S 2674 Sub A ACTS RELATING TO PUBLIC UTILITIES AND CARRIERS - WHEELCHAIR ACCESSIBLE TRANSPORTATION,

Sen. Tassoni & Rep. Kennedy for 10 - S 2133 Sub A as Amended & 10 - H 7300 Sub A ACTS RELATING TO HIGHWAYS-ACCESSIBLE CROSSWALKS,

Rep Lally & Sen. McCaffrey for 09 - H 5949 Sub A & 09 - S 0783 Sub A as Amended ACTS RELATING TO CRIMINAL OFFENSES - PERSONS WITH DISABILITIES

Rep. Costantino & Sen. DaPonte for 09 - H 5112 Sub C & 09 - S 0053 Sub A as Amended AN ACT RELATING TO CENTERS FOR MEDICARE AND MEDICAID SERVICES WAIVER AND EXPENDITURE AUTHORITY.

BI/TT passed, RC & LW Nay



voting check off graphic

MOTION: To award the John E. Fogarty Awards to:

Sen. Walaska & Rep. Coderre for 10 - H 7498 Sub A as Amended & 10 - S 2674 Sub A ACTS RELATING TO PUBLIC UTILITIES AND CARRIERS - WHEELCHAIR ACCESSIBLE TRANSPORTATION,

Sen. Tassoni & Rep. Kennedy for 10 - S 2133 Sub A as Amended & 10 - H 7300 Sub A ACTS RELATING TO HIGHWAYS-ACCESSIBLE CROSSWALKS,

Rep Lally & Sen. McCaffrey for 09 - H 5949 Sub A & 09 - S 0783 Sub A as Amended ACTS RELATING TO CRIMINAL OFFENSES - PERSONS WITH DISABILITIES

BI/KMcC-B passed, Abstained RC & LW

	Agenda Topics	Moderator/Leader	Time
	Adoption of the Commission's FY 2010 Annual Report and FY 2011 & 2012 Operational Plan	Tim Flynn & Bob Cooper	5:35
<p>Purpose/Goal: <u>42-51-6 Governor's Commission on Disabilities-Duties</u>. It shall be the duty of the commission</p> <p>(5) From time to time, but not less than once a year, to report to the legislature and the governor, describing the investigations, proceedings, and hearings the commission has conducted and their outcome, the decisions it has rendered, and the other work performed by it, and make recommendations for further legislation concerning abuses and discrimination based on disability that may be desirable.</p> <p>Discussion: Draft Reports be sent out soon.</p>			
	MOTION: To table adoption of the Report until the next meeting AP/LW, passed unanimous		
	Adoption of the Commission's FY 2011 Meeting Schedule	Bob Cooper, Executive Secretary	5:50
Purpose/Goal: To adopt the Commission and Committee 2011 Meeting Schedule			

Governor's Commission on Disabilities

The Commission's aim is to make sure that all people with disabilities have the same rights and duties as anyone else. They also should be able to be work and live independently. The Commission meets Mondays 5 - 7 PM: 01/24; 04/18; 07/18; 09/12; and 11/28.



The Committee is in charge of getting rid of access barriers in state owned buildings and places. The Committee makes sure police tag cars parked in disabled parking spaces. The Committee meets the 4th Monday 2 - 3:30 PM: 02/28; 04/25; 06/27; 8/22*; and 10/24.



The Committee helps small business owner with a disability try to win state contracts. The Committee helps businesses with lots of workers who are disabled (60% or their workforce). The Committee also helps (agencies) rehabilitation facilities. The Committee meets the 2nd Wednesday 9 - 10:30 AM: 01/12; 02/09; 03/09; 05/11; 8/24*; 11/09; and 12/07.



Election Assistance Committee

The Committee makes sure voters with disabilities can cast a secret vote without help. Local boards of canvassers are paid to remove access barriers at polling places. A videotape is used to train election officials and poll place workers.

Adults with disabilities are trained on how to vote and registered to vote. They are also encouraged to serve as poll workers.

The Election Assistance Committee meets the 3rd Thursday, 9:30 - 11:00 AM: 01/20, 3/17, 5/19, 8/25*, 9/15 & 11/17.



Employment Committee

The Committee is in charge of ADA employment training and services. The Committee also promotes work and work incentives.

The Employment Committee meets the 3rd Thursday 9 - 10:30 AM: 02/17; 04/14; 06/16; 8/18*; and 10/20



Hearing Board

The Board decides if unfairness (discrimination) was caused by access barriers. [RIGL 42-87]

The Board approves state agencies requests to lease places with access barriers. The agency must have a plan to make all services and employment accessible. [RIGL 37-8-15.1]

The Board decides if a member of a government committee who is disabled can take part in meetings by telephone or aid. The member is not able to get to the meeting room due to the disability. [RIGL 42-46-5(b)(3&4)]

The Board approves Open Meeting Access Plans from local and state government. [RIGL 42-46-13]

The Hearing Board meets to conduct hearings, as needed.



Legislation Committee

The Committee runs meetings to find out the concerns (fears) of people with disabilities and their families, the last full week in July. The Committee writes bills to better the lives of people with disabilities. The Committee reads other bills that might help or hurt on people with disabilities. The Committee lets the General Assembly know about the bills. The Committee then lets the Governor know about the bills.

The Legislation Committee meets the 2nd Monday 3 - 4:30 PM: 01/10; 02/14; 03/14; 04/11; 05/09; 06/13; 07/11; 08/15*; 09/19; 11/07; and 12/12.



State Coordinating Committee on Disability Rights

The Committee steers the State Government's carrying out of the disability rights laws. [Americans with Disabilities Act, Section 504, Civil Rights of People with Disabilities, etc.]

The State Coordinating Committee on Disability Rights will meet if needed.



Executive Committee

This Committee is in charge when the Commission is not meeting. The Committee talks to students who want to be fellows. Then the Committee hires the Fellows. The Committee talks to people who want to work for the Commission. The Committee advises the Commission who to hire.

The Executive Committee meetings the 3rd Mondays 4 - 5:30 PM: 02/21; 06/20 (spring & fall fellowship interviews); 08/29*; 10/17; and 12/05 (winter fellowship interviews)

*Annual planning meetings to review of achievements and develop operations plans for the next two program years



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MOTION: To adopt Commission's 2011 Meeting Schedule as written KMcC-B/CA passed unanimously.



Ballot box graphic

Election Assistance Committee - 2010 Election Day Access

Rosemary Carmody,
Chair & Christopher DeGrave

6:00

Purpose/Goal: To review how well the State complied with the Help America Vote Act's sections requiring polling places to be accessible and that ballots can be cast in secret without help (independently).

Discussion: All 536? Polling places were surveyed prior to election day, 1## Barriers to accessible voting were identified and recommendations for eliminating were provided to local boards of canvassers. To accomplish the surveys all accessibility technical assistance was postponed until after Election Day. On Election Day ## election access monitors visited 1## polling places. The State Board of Elections were immediately notified on any substantial barriers and actions were taken to remove them during the morning of Election Day. Ninety # percent of the election day access barriers were either no marked accessible parking places or lack of signage. Most of the locations without disability parking were public schools. The Election Assistance Committee & staff will contact the local boards of canvassers and school departments and offer to use HAVA funds to create permanent disability parking spaces at those schools.

The other election issue that arose was a report in the Providence Journal concerning challenges to the right to vote of residents of Zambarano Hospital for party poll watchers. The RI Disability Law Center is addressing that issue.



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MOTION: To adopt and submit a report on how well the State complied with the Help America Vote Act's sections requiring polling places to be accessible and that ballots can be cast in secret without help (independently), to the Governor Elect, General Assembly Elect, Secretary of State, State Board of Elections and the Federal Election Commission. LW/SB passed unanimously



Presentation

Adoption of Commission's Policy Recommendations to Governor Elect

Bob Cooper,
Executive Secretary

6:10

Purpose/Goal: To provide the Governor Elect and incoming administration with advice on services to people with disabilities.

Discussion:

According to the Annual Disability Statistics Compendium: 2010ⁱ Rhode Island , in 2009 had:

- 127,082 Rhode Islanders who reported having disabilities out of a total population of 1,035,366, just higher than the national average (12.3% vs. US 12.0%)
- Almost twice the national average of children under 5 years old have a disability (1.2% vs. US 0.7%);
- A larger percentage of school age children (ages 5 to 17) have a disability than nationally (6.2% vs. US 5.2%);
- Fewer Rhode Islanders sixty-five and older have a disability than nationally (33.7% vs. US 37.4%);

Over 75,000 veterans, 1,919 had a service-connected disability rating of 70 percent or moreⁱⁱ.

Working

- In 2009 35.5% of Civilians with disabilities, ages 18 to 64 Years (of those living in the Community were employed, lower than the national rate of 36.2%
- Only 19% of adults with disabilities were employed full-time, year-roundⁱⁱⁱ
- The median earnings^{iv} of Rhode Islanders with disabilities over 16 was higher, in 2009 \$21,225 than nationally \$18,831.
- Rhode Island ranked 11th highest with regard to the employment gap^v
- Rhode Island had the 13th highest full time employment gap^{vi}
- Rhode Island's successful (vocational rehabilitation) employment outcomes were 5 percentage points higher than the nation (62.8% to US = 57.8%), in FY 2008
- A lower percentage of vocational rehabilitation dollars go to higher education than the nation (RI = 5.4% to US = 7.3%)
- Over the period from 2001 to 2008, RI was one 18 states to utilize "Order of Selection" every year. (Arizona, Arkansas, California, Colorado, Georgia, Illinois, Kansas, Kentucky, Maine, Maryland, Mississippi, Ohio, Oklahoma, Pennsylvania, Rhode Island, Tennessee, West Virginia, and Wisconsin.)

The US Department of Education has reported over the years that between 60 - 80% of Temporary Assistance to Needy Families recipients have learning disabilities that were not identified nor addressed during their school years.

Welfare, Jobs And Basic Skills:

The Employment Prospects Of Welfare Recipients In The Most Populous U.S. Counties,
Executive Summary

In August 1996, President Clinton fulfilled a campaign pledge to "end welfare as we know it" by signing into law the Personal Responsibility and Work Opportunity Reconciliation Act. This law changed the fundamental nature of the welfare system. Before the law passed, families could receive cash benefits for an indefinite period of time. The 1996 law imposed time limits on the receipt of cash assistance to families with children. In order to underscore the new emphasis on self-sufficiency, the name of the program was changed from Aid to Families with Dependent Children (AFDC) to Temporary Assistance to Needy Families (TANF). With some exceptions, adults must be employed or be in an activity that will soon lead to work after

receiving two years of TANF benefits. Federal funds cannot be used to support those who have been on TANF for more than five years in a lifetime.

This article evaluates the basic skills and employment prospects of current adult TANF recipients. We perform an analysis for the U.S. as a whole, as well as separate analyses for nearly all of the 75 most populous U.S. counties plus the District of Columbia. These counties contain 43 percent of the nation's welfare caseload.

We base our analyses on a measure of basic skills different than formal schooling; the measure comes from the National Adult Literacy Survey. Individuals at the lowest level of literacy, level 1, are able to do very simple tasks such as locating the expiration date on a driver's license, totaling a bank deposit slip, or signing their names. They are unable to do level 2 tasks, such as locating an intersection on a street map, understanding an appliance warranty, filling out a government benefits application, or totaling the costs from an order. Individuals at literacy level 2 can perform these tasks, but cannot perform higher-order tasks such as writing a letter explaining an error on a credit card bill, using a bus schedule, or using a calculator to determine a 10 percent discount.

The results for the U.S. as a whole show that typical TANF recipients have extremely low basic skills: 35 percent are at level 1 and 41 percent are at level 2. Because of their low basic skills, the vast majority of jobs are not open to TANF mothers. ^{vii}

Health

- The US Centers for Disease Control and Prevention's 2008 Behavioral Risk Factor Surveillance Survey of 822,084 Rhode Islanders 18 and older included 170,601 persons with disabilities (20.8% vs. USA 22.2%). It reported that Rhode Islanders with disabilities:
 - Smoked at a lower rate than nationally;
 - Were obese at a lower rate than nationally;
 - Did not participate in binge drinking as much as their non-disabled peers; and
 - Received the influenza vaccination at a higher rate than nationally.
- Rhode Island ranked 38th in the health insurance gap, 87.5% of RI's with disabilities had health insurance coverage in 2009, vs. 82.5% nationally
- More RI's with disabilities have private health insurance (56.3% to US = 79.1%)
- In federal fiscal year 2007, prior to the Global Waiver; 39,508 RI Medicaid recipients were disabled^{viii} (19.0% vs USA 14.8%).
- In July 2008, 32,015 persons with disabilities under the age of 65 were enrolled in Medicare^{ix} (18%)

Education

The US Department of Education's Office of Special Education Programs' Data Accountability Center's Fall 2008 report:

- Ranked Rhode Island as number one^x in the nation for the percentage of school students, ages 6 -17 who are receiving special education services (24,666);
- Ranked 12th in graduation rate of special education students 14 -21 in the 2007 - 2008 school year, more than twelve percentage points (12.3%) higher than the national average;
- Ranked 33rd in dropout rate for special education students; and
- Special education students that spend more than forty percent of their school day in regular classrooms were below the national average (78.0% vs. US 79.7%)^{xi}.

Poverty^{xii} and Income Supports

- The poverty rate^{xiii} amongst Rhode Islanders with disabilities, 18 - 64 was more than three

times that of persons without disabilities ages 18 - 64 (24.8%^{xiv} vs. 8.4%^{xv}).

- Rhode Island had the 13th highest poverty gap^{xvi}.
- In 2009, 8,040 veterans with disabilities were living in poverty (16.6% vs. USA 15.8%). The US Department of Veterans Affairs paid disabled veterans \$119,530,684 in total compensation and pensions, in 2008

According to the Social Security Administration's 2009 Annual Statistical Supplement:

- Supplemental Security Income (SSI) benefits infused into RI's economy in December 2008 totaled \$180,393,000
- Social Security Disability Insurance Their annualized benefits, based on December 2008 totaled \$424,884,000
- A smaller percentage of "Aged" and "Blind" made up RI's SSI recipients, offset by a much greater percentage of "Disabled" (87.4% to US 83.1%)
- RI's SSDI beneficiaries in December 2008 were closer to the national average (89.% "Disabled worker vs. US 87.2%)



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MOTION: To hold a special meeting of the full Commission to develop a report for presentation to the incoming administration, in December. AP/LW passed unanimously



Announcer graphic

Announcements

Tim Flynn

6:55

The special Commission meeting on the Commission's Policy Recommendations to Governor Elect will be Monday December 13, 2010 5 - 7 or 8 PM.

The Executive Committee's meeting to interview fellows has been moved from Tuesday December 14th to Wednesday December 15th? 4 - 6 PM.



alarm clock graphic

Adjournment

Tim Flynn

7:00



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MOTION: To adjourn at 7:01 PM AP/BI passed unanimously

Notes

ⁱ Annual Disability Statistics Compendium: 2010 Derived from the American Community Survey (ACS). Based on a sample and subject to sampling variability. Resident Population—All residents (both civilian and Armed Forces) living in the United States (all 50 states and the District of Columbia).

ⁱⁱ Table 6.1 Service-Connected Disability Rating—Civilians Veterans Ages 18 Years and Over Living in the Community, by Disability Status: 2009

ⁱⁱⁱ Table 2.11 Employment: Full-Time, Year-Round—Civilians with Disabilities Ages 16 to 64 Years Living in the

Community for the United States and States: 2009

^{iv} ACS defines earnings as regularly received income from salaries/wages, self employment or both, for people 16 or more years old before deductions for personal income taxes, Social Security, bond purchases, union dues, Medicare deductions, etc.

^v Table 2.9 Employment Gap—Civilians Ages 18 to 64 Years Living in the Community for the United States and States, by Disability Status: 2009

^{vi} Table 2.13 Employment: Full-Time, Year-Round Gap—Civilians Ages 18 to 64 Years Living in the Community for

the United States and States, by Disability Status: 2009

^{vii} The National Center for the Study of Adult Learning and Literacy's NCSALL Reports #10B, April 1999

^{viii} Table 10.2 Medicaid—Medicaid Persons with Disabilities Served (Disabled Beneficiaries): Fiscal Year 2007

^{ix} Medicare is a Federal program that provides health care services to individuals 65 or older, individuals under age 65 with disabilities, and individuals of all ages with end stage renal failure. There are three programs within Medicare: Part A (hospital insurance), Part B (medical insurance), and Prescription Drug Coverage (new since January 1, 2006). Individuals pay into Part A throughout their careers, and then Part A covers that individual for hospital care. People who are eligible for Medicare have the opportunity to purchase Part B, or medical insurance that covers them for more than just hospital care.

^x Table 11.1 Special Education—Students Ages 6-17 Served under IDEA, Part B, as a Percentage of Population: Fall 2008

^{xi} Table 11.4 Special Education—Educational Environment—Students Ages 6-21 Served under IDEA, Part B that Spent 40 Percent or More Time Inside Regular Class: Fall 2008

^{xii} The Office of Management and Budget in Statistical Policy Directive 14 sets the standards for which poverty is calculated. The U.S. Census Bureau uses a set of dollar value thresholds that vary by family size and composition to determine who is in poverty. If a family's total income is less than the dollar value of the appropriate threshold, then that family and every individual in it are considered to be in poverty.

ACS defines income as the sum of all wages, salary, commissions, bonuses, and tips; self employment income from own nonfarm and farm businesses, including proprietorships and partnerships; interest, dividends, net rental income, royalty income, and income from estates and trusts; Social Security and Railroad Retirement income; Supplemental Security Income (SSI); any public assistance and welfare payments from the state and local welfare office; retirement, survivor, and disability pensions; and any other sources received regularly such as Veterans' (VA) payments, unemployment compensation, child support, and alimony.

^{xiii} Percent of the population who are determined to be in poverty.

^{xiv} Table 4.1 Poverty-Civilians with Disabilities Ages 18 to 64 Years Living in the Community for the United States and States: 2009

^{xv} Table 4.2 Poverty-Civilians without Disabilities Ages 18 to 64 Years Living in the Community for the United States and States: 2009

^{xvi} Table 4.3 Poverty Gap-Civilians Ages 18 to 64 Years Living in the Community for the United States and States by Disability Status: 2009