

On the eve of health care reform

The United States' health care system is on the verge of major change. On the morning of Dec. 24, 2009, the U.S. Senate passed the much-debated Patient Protection and Affordable Care Act (H.R. 3590). This came just two months after the House of Representatives passed its health reform bill, the Affordable Health Care for America Act (H.R. 3962), Oct. 29, 2009.

At the 2009 Conference for People with Disabilities, held Nov. 16 and 17 in Indianapolis, Elizabeth (Liz) Savage, director of housing and health policy for the Disability Policy Collaboration, gave an insightful presentation about health care reform, particularly addressing how the pending legislation could impact people with disabilities.

"We're at a very exciting time in Washington with respect to health care reform," said Savage. "We really think we're on the brink of passing something that will make a significant difference in the lives of all Americans."

Savage identified four overall purposes of health reform: Cover the uninsured; lower skyrocketing health care costs; change the health care system's focus from sickness to wellness by emphasizing prevention; and address the shortage of health care providers, primarily physicians.

While both versions of health care reform legislation address these four purposes, the challenge now facing the Senate is merging its version of health care reform with that of the House before a bill reaches President Barack Obama's desk. According to a CNN news report, the House and Senate agree on many provisions in their health reform bills. Similarities include:

- ▶ **Subsidize insurance for a family of four** making up to roughly \$88,000 annually, or 400 percent of the federal poverty level.
- ▶ **Create health insurance exchanges** designed to make it easier for small businesses, the self-employed and the unemployed to pool resources and purchase less expensive coverage.

- ▶ **Bar insurers from charging higher premiums** based on a person's gender or medical history. However, both bills allow insurance companies to charge higher premiums to customers who are elderly.
- ▶ **Expand Medicaid.** The House bill would extend coverage to individuals earning up to 150 percent of the poverty level, or roughly \$33,000 for a family of four. The Senate plan ensures coverage to those earning up to 133 percent of the poverty level, or about \$29,000 for a family of four.
- ▶ **Address long-term care.** The House bill includes the Community Living Assistance Services and Supports (CLASS) Act, which would establish a new nationwide, long-term services insurance program. The program would be financed through voluntary payroll deductions and go into effect this year. The Senate version (as introduced) includes the CLASS Act, but the program would go into effect January 2011. In addition, it includes the Community First Choice (CFC) Medicaid option, which will make comprehensive community-based services available to Medicaid beneficiaries in states that choose to participate.

"We really think we're on the brink of passing something that will make a significant difference in the lives of all Americans."

- Liz Savage, Director of Housing and Public Health Policy for the Disability Policy Collaboration

Although the Senate bill roughly mirrors the House version, there are major differences between the two proposals that are currently being addressed in Congress:

- ▶ **How to pay for reform.** The House package finances health reform through a combination of a tax surcharge

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Governor's Council receives award

On Nov. 5, 2009, the Governor's Council for People with Disabilities was recognized with the Voices Public Policy Award from Bethesda Lutheran Homes and Services, Inc. Bethesda is a faith-based organization located in Wisconsin that provides spiritual and physical supports to people with developmental disabilities.

Each year, Bethesda presents this award to individuals or groups who have made significant contributions to advance the welfare of, and improve public policy affecting, people with disabilities.



The Governor's Council staff accepted the Bethesda Voices Public Policy Award. From left: Jim Geswein, Christine Dahlberg, Suellen Jackson-Boner, Brenda Wade, Betty Jones and Chad Crowe.

A tribute to two remarkable women

by *Suellen Jackson-Boner, executive director*

The Indiana disability community lost two of its strongest advocates this past year. Ms. Sharon Kay Arvin Byrnett died Oct. 26, 2009, at age 63, and Ms. Alice Tinsley died Nov. 14, 2009, at age 84.

These women lived extraordinary lives. Sharon and Alice believed that people with disabilities and their family members should first and foremost be treated with respect, and they should have choices and opportunities to participate in the community as valued citizens.

Because of their passion and values, Sharon and Alice were destined to cross paths on their life journeys. They both served on the board of the Governor's Council for People with Disabilities and held a variety of

leadership positions during their service. They were also both honored with the Council's Distinguished Leadership Award in 2007. Furthermore, both of these women played a vital role in shaping disability policy in Indiana. Sharon and Alice loved life, living it to the fullest and on their own terms.

These two remarkable women will be missed as friends, colleagues and allies in the struggle for social justice. They will be remembered for their tenacity, enthusiasm, keen sense of humor and understanding of fair play as they quietly and successfully tended to disability issues. Their lives indeed made a difference, and their spirits will live on as an inspiration for all of us in the work that lies ahead for the disability community. ●

Health care reform, continued from page 1

on Americans with higher incomes (individuals making more than \$500,000 and families making more than \$1 million annually) and new Medicare spending reductions. The Senate bill also cuts Medicare by roughly \$500 billion, but instead of an income tax surcharge on wealthier Americans, it would impose a 40 percent tax on insurance companies that provide what are called "cadillac" health plans valued at more than \$8,500 for individuals and \$23,000 for families.

- ▶ **Public option.** The House plan includes a public option, or a health insurance program offered by the federal government. The Senate plan would instead create non-profit private plans overseen by government.
- ▶ **Individual mandate.** Individuals under both plans would be required to purchase coverage, but the House bill includes stiffer penalties — a fine of up to 2.5 percent of an individual's income — for most of those who fail to comply. The Senate plan would impose a fine of up to \$750, or 2 percent of the individual's income, whichever is

greater. Both versions include a hardship exemption for Americans with low incomes.

- ▶ **Abortion.** The House version bans most abortion coverage from the public option, and it prohibits abortion coverage for people receiving federal subsidies through the private policies available in the exchange. The Senate bill would allow states to choose whether to ban abortion coverage in plans offered in the exchanges. Individuals purchasing plans through the exchanges would have to pay for abortion coverage out of their own funds.

"There are almost 50 million people in this country who have no health insurance whatsoever," said Savage. "As President Clinton told the Democratic Caucus [in early November], we can't let perfect be the enemy of good. A bill that's imperfect is better than no bill at all, because an imperfect bill can always be improved."

To monitor health reform updates from the White House, visit www.HealthReform.gov. ●

Arc of Indiana releases survey results

The Arc of Indiana recently released the results of a survey entitled, “Our Voice, Our Vision, Our Future.” More than 500 people with disabilities, family members, leaders of organizations and other professionals in the field of developmental disabilities were asked to respond to a series of questions. The Indiana Governor’s Council for People with Disabilities provided funding for the survey, and the results will be used to help develop a five-year statewide plan. The survey gathered feedback about various disability-related issues:

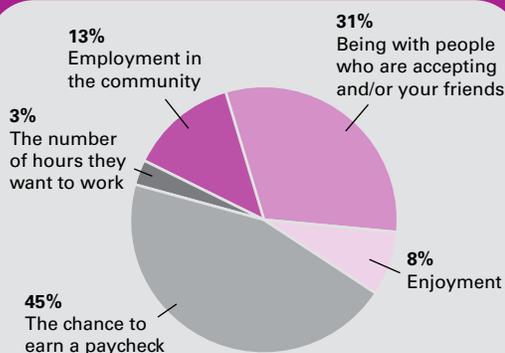
Education

Thirty-six percent of respondents feel that individuals in education systems should be required to learn about Medicaid waiver services as part of the Individualized Education Program. Also, participants feel the most important priorities for improving special education are positive support from school administration (28 percent), resources (27 percent) and teacher training (27 percent).

Employment

Forty-five percent of respondents most value employment that gives them the chance to earn a paycheck.

People with disabilities MOST value having work that gives them:



Living in the community

Respondents believe the most important factor that families consider when deciding where their adult child will live is safety (28 percent), quality providers (25 percent) and family (22 percent).

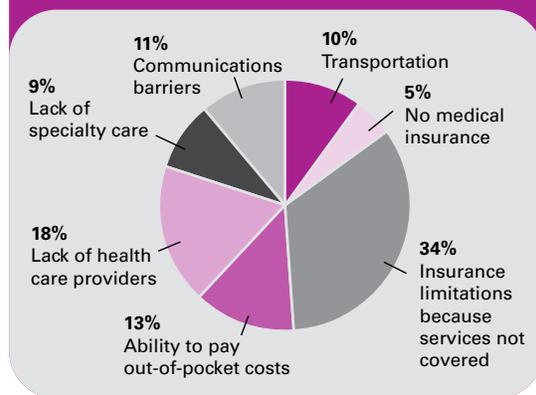
In-home support

When families need support caring for a person with a disability, 35 percent of respondents go to family and friends and 29 percent turn to a local provider. They feel the biggest challenges in using Medicaid waiver services for in-home supports are limited hours and staff turnover, at 31 percent each.

Health and wellness

When asked to identify the greatest barrier to individuals with disabilities accessing health care, 34 percent of respondents named insurance limitations because these services are not covered. Eighteen percent feel the greatest barrier is lack of health care providers.

The GREATEST barrier to individuals with disabilities accessing health care:



Future planning and guardianship

When asked to identify the most important consideration when planning for the future of a person with a disability, 37 percent of those who responded chose financial security and 25 percent ranked independence as most important. Participants believe the greatest barriers to planning for the future of a person with a disability are lack of money (30 percent) and information (24 percent), and uncertainty of the future (23 percent).

Training for self-advocacy

Respondents believe the greatest needs in self-advocate training are self direction and determination (30 percent), making decisions (18 percent) and speaking out appropriately (17 percent).

To access the full report, go to www.arcind.org and click on “News and Events.” ●

Obama signs expanded hate crime legislation

President Barack Obama recently signed hate crime legislation that added federal protections against crimes based on disability, gender, sexual orientation and gender identity.

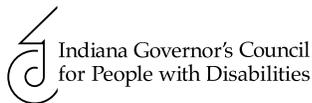
The new law loosened limits on when federal law enforcement can intervene and prosecute crimes, making it the largest expansion of the civil-rights era law in decades. Hate crimes laws enacted in 1968, after the assassination of Martin Luther King, Jr., focused on crimes based on race, color, religion or national origin.

The bill is named for Matthew Shepard and James Byrd, two individuals who fell victim to hate crimes in 1998. Both families of the deceased stood with Obama as the new law was signed.

Forty-five states have hate crimes statutes, and the new bill will not change current practices where hate crimes are generally investigated by state and local officials. However, the new law broadens actions, such as attending school or voting, that can trigger federal involvement and allows the federal government to step in if the Justice Department certifies that a state is unable to follow through on an alleged hate crime.

“No one in America should be forced to look over their shoulder because of who they are or because they live with a disability,” said President Obama.

For more information, visit www.whitehouse.gov.



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on target is made available in accessible formats upon request.

Of Note

Disability Awareness materials

Free materials for March 2010 Disability Awareness Month are available. To order materials, use the order form that was included in the November issue of On Target, visit www.IndianaDisabilityAwareness.org or contact Kim Dennison at kim.dennison@borshoff.biz or (317) 631-6400 (voice).

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General Assembly now in session

The second regular session of the 116th Indiana General Assembly began Jan. 5, 2010. The session will end on or before March 14, 2010, leaving a brief window for advocates to reach out to their legislators and influence important decisions. Both the Arc of Indiana and Fifth Freedom distribute regular e-mail updates with current information about legislative activity. Sign up for the Arc's Action Alerts at www.arcind.org. Under the Public Policy Advocacy tab, select "Legislative Action Center." To sign up to receive e-mail alerts from Fifth Freedom, visit www.fifthfreedom.org.

Social Security benefits not increasing in 2010

The Social Security Administration (SSA) announced that monthly Social Security and Supplemental Security Income benefits will not automatically increase in 2010. This will be the first year without a Cost-of-Living

Adjustment (COLA) since Social Security benefits first went into effect in 1975. The Social Security Act provides that benefits increase automatically each year if there is an increase in the Bureau of Labor Statistics' Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W) from the third quarter of the previous year to the third quarter of the current year. However, there was no increase in the CPI-W from the third quarter of 2008 to the third quarter of 2009.

Obama appoints new RSA commissioner

President Barack Obama has appointed Lynette Ruttledge as the new commissioner of the Rehabilitation Services Administration (RSA). Ruttledge, who was born with a disability, previously served as the executive director of the Washington Division of Vocational Rehabilitation since 2005. She also held leadership positions at the Oregon Office of Vocational Rehabilitation Services for more than 25 years. ●