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**House Committee on Aging and Long-Term Care
Testimony in Support of HB 2296**

Good Morning Chairman Bethell and Members of the Committee, my name is Rocky Nichols. I am the Executive Director for the Disability Rights Center of Kansas (DRC). DRC is the federally mandated, officially designated protection and advocacy organization for Kansans with disabilities. DRC is a 501(c)(3) nonprofit. We are not a provider of any of the Home and Community Based Services (HCBS) Developmental Disability (DD) Waiver services. DRC stands to gain nothing from transferring any savings from closure to the HCBS DD Waiver.

I appear before you today in support of HB 2296. This bill is not about KNI hospital closure. This bill takes no position on KNI closure. This bill is about what happens *if* KNI closes. HB 2296 would effectively ensure that if KNI does close that all the savings resulting from closure would be tracked in a separate fund and would establish the precedent to ensure that those savings were dedicated toward the HCBS DD Waiver. Whether KNI closes is wrapped up in the Governor's Budget Recommendation. The budget is never final until the last Omnibus Appropriations bill is passed, which is typically one of the last bills to be dealt with. You can't afford to wait until the decision on whether KNI is closed is made in the budget. If you do, the gavel will be in the process of swinging down to adjourn the Legislature Sine Die. What you do with the savings from closure of KNI is an important public policy matter, and preferably, should be set in state law and discussed separate from the budget.

Regardless of your views on KNI hospital closure, we hope that we can all agree that if KNI is closed, then all the savings from the closure must go to the HCBS DD Waiver to reduce the waiting list. If not, then there will be a net decrease in funding for the DD Waiver. KNI either will or won't close. This bill does not take a stand on that issue. If KNI is not closed, then this bill is effectively moot. However, you shouldn't wait until the waning moments of the Legislature to deal with this important policy issue of how the savings from KNI closure should be dedicated.

HB 2296 sets up the mechanism to try to follow the precedent set when Winfield State Hospital was closed in the mid-1990's. When Winfield was closed, all the savings from closure were tracked and went to the DD Waiver. This infusion of new dollars for the DD Waiting list created additional capacity in the community. This was the last time the DD Waiting Lists were for all intents and purposes eliminated. I have included a chart titled HCBS DD Waiting List

HOUSE AGING & LTC
DATE: 2/27/11
ATTACHMENT # 2

(Unserved & Underserved) with my testimony that tracks the DD Waiting List over the past 10 years.

DD Hospital closure should not be about saving State General Fund (SGF) dollars. If a DD hospital is closed, we believe the savings needs to go to the HCBS DD Waiver to reduce the waiting list. You have a lot of people who have waited a long time for DD Waiver services. Passing HB 2296 can give you the tools to begin the process of fixing this injustice.

To understand how important this bill is you have to understand the extent of the HCBS Waiting List problem in Kansas.

3413 adults and children are on the on the HCBS Developmental Disabilities Waiting Lists (as of Dec. 1, 2010).

- *If KNI is closed, SRS estimates it will save at least \$15 million dollars of programmatic savings per year, which could be transferred to this fund and help dramatically reduce the waiting list. In addition, the facility is worth an untold amount of dollars. We support the balloon amendment which would clarify that both the programmatic savings and the savings from the sale of real estate and personal property at KNI should go to this fund.*

When we talk about the “DD Waiting List,” we are talking about two different lists: 1) the “Unserved” Waiting List, where a service request has been made, but the person is forced to wait without receiving any services, and 2) the “Underserved” Waiting List, which is made up of people who have cleared the first “unserved” waiting list, start receiving *some* of the services they need, only to find out the cruel joke of the DD Waiting List Game ... which is that they are then put on a *second* waiting list for the rest of the services they need.

Average Wait Times for Waiting Lists (as of December 1, 2010)

“Unserved” Waiting List = Average wait time 31 months for adults and 29 months for children.

“Underserved” Waiting List = Average wait time of 32 months for adults. It is important to note that because children in need of services have largely been limited by the State to receive only Supportive Home Care – the state does not provide an accurate estimate for children with DD on the Underserved Waiting List (as their service options are limited).

Unserved Waiting List Statewide Numbers = 2,400 Kansans (1440 children and 960 adults) are on the Unserved Waiting List. They receive no DD Waiver services.

- *It's important to note that according to the Dec. 2010 SRS data, the person at the front of the line for the “Unserved” list has been waiting since May 1, 2006 (55 months). Let me let that sink in for a moment. That means that the “lucky” person at the front to the Unserved Waiting List line has been forced to wait without any DD Waiver services for over 4.5 years!*

Underserved Waiting List Statewide Numbers = 1,013 adults. According to SRS, the number on the Underserved Waiting List is 1013 adults. As previously mentioned, because of the way SRS tracks the data we cannot provide an accurate estimate for children with DD on the Underserved Waiting List.

- To put into perspective how utterly cruel this second Underserved Waiting List is, let's take the example above of the "lucky" person at the front of the Underserved Waiting List who has been waiting without services for over 4.5 years. Let's say that person clears the waiting list today. They think to themselves "great, now I can get the services I have been waiting nearly 5 years for." Not so fast. Their individualized plan of care may say that they need both day and residential services. When the magic date happens and they clear the Underserved Waiting List, they may be offered only day services and they are then put on a second Underserved Waiting List for residential services. So, they still have nowhere to live. They will then wait on this Underserved Wait List on average for an additional 32 months! This is on top of the over 55 months they waited on the Underserved Wait List. **All total, this "lucky" person with profound Developmental and Intellectual disabilities who is at the front of the line will have been waiting for over 7.5 years just to receive the services they need to accommodate their disabilities.**

Community Capacity Must Expand in Kansas; Kansas has the Lowest DD Waiver Spending in our Region - Kansas is last in our surrounding five-state region in the average amount spent per person, per year on DD HCBS Waiver services:

- Oklahoma \$47,700 per person, per year
- Nebraska \$44,500 per person, per year
- Colorado \$40,200 per person, per year
- Missouri \$36,700 per person, per year
- *Kansas \$32,500 per person, per year*

(source: 2008 State of the State in Developmental Disability Services – a 50 State Comparison; David Braddock, University of Colorado)

[NOTE: This is the latest national report that uses a uniform method by which to calculate the average to ensure that they can compare the states. The numbers from the Braddock report are slightly different from the numbers SRS will give you because of this uniform method to ensure comparability between the states.]

Oklahoma spends nearly 50% MORE per person, per year on the DD Waiver than Kansas.

The savings must move to the community and the DD Waiting List in order to help Kansas reach goals of ending the waiting list and improving community capacity -

- When Winfield was closed, all the savings transferred to the DD Waiver.
 - The Facilities Realignment & Closure Commission recommended all the savings from KNI closure to go to the DD Waiver.
 - Closure Creates Capacity (which we desperately need)
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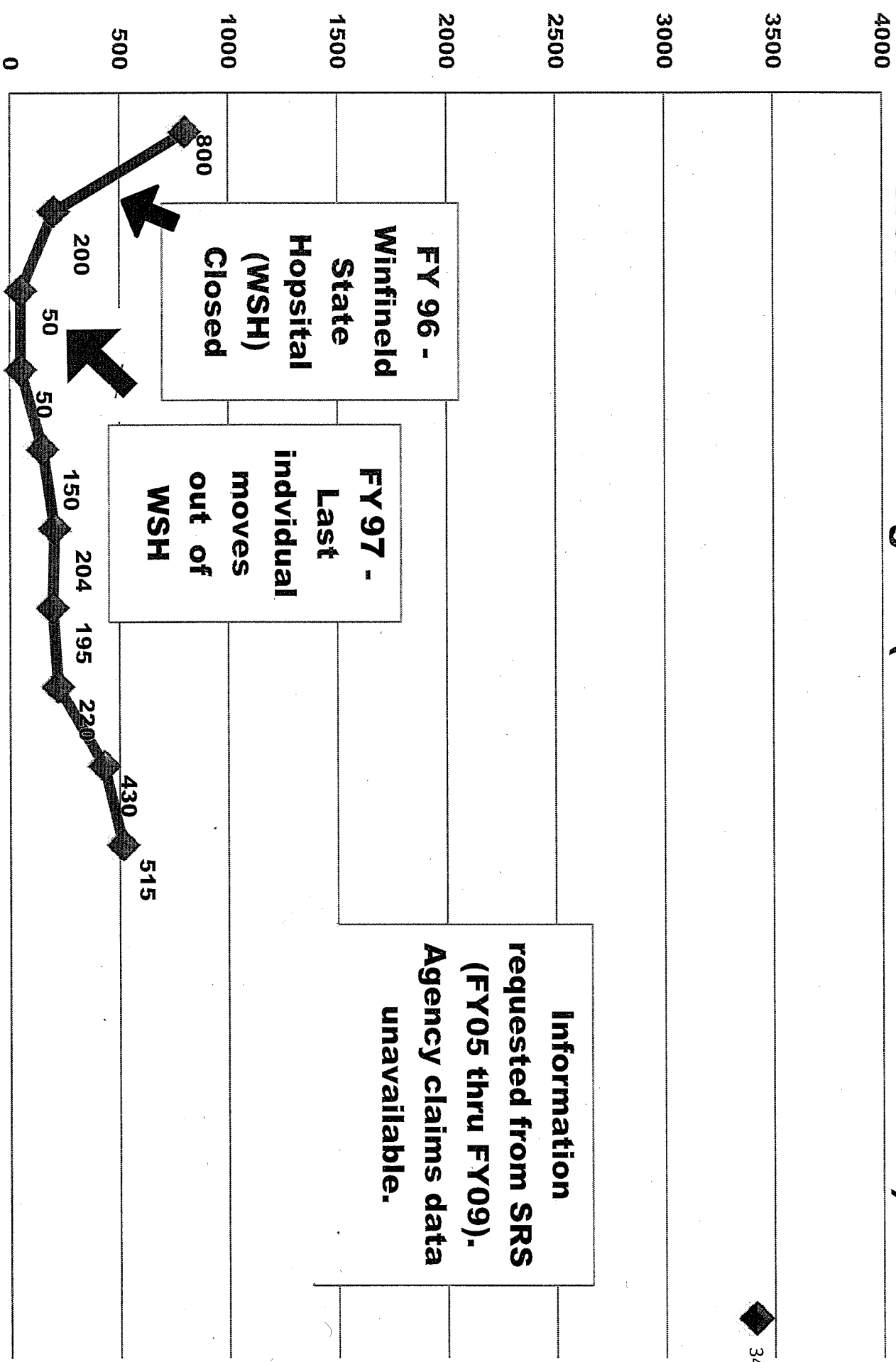
- **ALL** the money means not just the programmatic money ... it means the sale of **any** real estate, buildings or other surplus property from KNI and Parsons. We support the Facilities Realignment and Closure Commission recommendation which calls for **ALL** the savings (programmatic, sale of property, etc.) to go to the DD Waiver.
- If, however, you want to close DD hospitals to save SGF dollars and help the budget crunch, then we frankly don't want any part of that.

HCBS DD Waiver waiting Lists by Committee Member Counties

Member	Co.	Adult Unserviced	Children Unserviced	Adults Underserved	Children Underserved	Total
Rep. Bethell	RC	3	0	1	0	4
	BT	10	10	14	0	34
	RN	31	21	19	0	71
		44	31	34	0	109
Rep. Worley	JO	125	248	274	0	647
Rep. Flaharty	SG	219	300	153	0	672
Rep. Henderson	WY	51	47	54	0	152
Rep. Hill	LY	19	23	16	0	58
Rep. Kelly	EK	1	1	0	0	2
	CQ	0	2	1	0	3
	MG	19	20	11	0	50
		20	23	12	0	55
Rep. Otto	AL	8	8	4	0	20
	AN	3	3	1	0	7
	CF	1	5	3	0	9
	FR	15	9	12	0	36
	WO	0	2	4	0	6
	27	27	24	0	78	
Rep. Schwab	JO	125	248	274	0	647
Rep. Vickery	MI	7	20	6	0	33
Rep. Weber	FO	19	17	12	0	48
Rep. Wolf	JO	125	248	274	0	647
Rep. Wolf Moore	WY	51	47	54	0	152
Committee Total	18	531	736	585	0	1852
Statewide	ALL	960	1440	1013	0	3413

HCBS DD Waiting list (Unserviced & Underserved)

3413



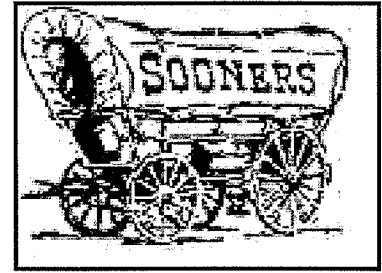
Information requested from SRS (FY05 thru FY09). Agency claims data unavailable.

FY 96 - Winfield State Hospital (WSH) Closed

FY 97 - Last individual moves out of WSH

FY 95 FY 96 FY 97 FY 98 FY 99 FY 00 FY 01 FY 02 FY 03 FY 04 FY 05 FY 06 FY 07 FY 08 FY 09 FY 10

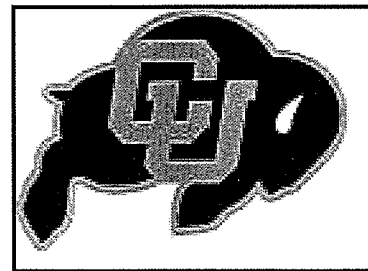
1. Oklahoma



2. Nebraska



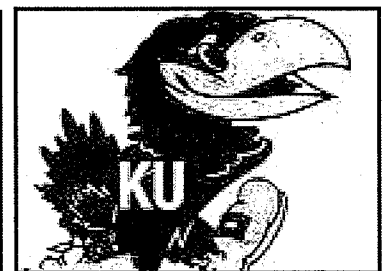
3. Colorado



4. Missouri



5. Kansas



HCBS DD Waiver

1. Oklahoma \$47,700 per person per year

2. Nebraska \$44,500 per person per year

3. Colorado \$40,200 per person per year

4. Missouri \$36,700 per person per year

5. Kansas \$32,500 per person per year