



For people with intellectual and developmental disabilities

2021 Policy Agenda

Funding and policy changes to strengthen the CO Medicaid State Plan, state programs, and HCBS Medicaid waivers for people with disabilities to include support for:

- Preserving and maintain current funding levels for I/DD services and supports;
- Changes in Colorado statute, where needed, to comply with the requirements established in federal law for Home and Community Based Services (HCBS);
- Full implementation of Colorado's Olmstead Plan including implementation of strategies for integrated competitive employment;
- Fair and equal access to personal care services for all people currently receiving long term services and supports. Access should be at a level that meets individual needs and not be limited based on specific waiver participation;
- Fair and equal access to behavioral health services for adults and children with co-occurring intellectual and/or developmental disability and mental health diagnoses in the public and private insurance systems;
- Accelerated Medicaid waiver simplification with the purpose of creating single, easily accessible HCBS waivers for 1) all eligible children and 2) all eligible adults with intellectual/developmental disabilities. Each waiver should further access to quality services and supports when and where needed throughout their lifetimes;
- Consumer and participant directed service delivery options in all HCBS/LTSS waivers;
- Increasing the accessibility and availability of appropriate, person-centered technology and create billable services for technology utilization and training and support in order to bridge the digital divide;
- Increasing the accessibility and availability of telehealth services for Medicaid recipients;
- Increased Supported Living Services and equitable access to services across all LTSS with rate increases;
- Therapeutic, out-of-home placement, and intensive treatment options for children with I/DD and dual diagnosis/secondary diagnosis of serious health, mental health, and behavioral conditions;
- Phase out and permanently end the use of sub-minimum wage employment in Colorado and provide necessary supports to eliminate the need for sub-minimum wage employment through the advancement of opportunities for meaningful employment at or above the Colorado minimum wage.

Policy Measures Prompted by COVID 19

- Ensuring that ample and proper personal protective equipment is supplied to those who provide and receive services during any health emergency so that services are provided in the safest possible manner;

- Retaining flexibilities and codifying changes in rules and processes that, based on community feedback, have proved essential to maintaining public health as a result of COVID-19;
- Maintaining funding for respite and other services needed to sustain family stability, including retainer payments for these programs that provide such services;
- Expanding the Cross-System Behavioral Health Crises Pilots to address the increased behavioral health need as a result of COVID-19 and any future public health crisis;
- Hazard pay or bonuses for all direct care staff and other related personnel who work directly with individuals with IDD, their families, and caregivers in their homes or in other residential and/or day programs.

Colorado students with disabilities have a legal right to free, appropriate and inclusive educational opportunities in all settings within the least restrictive environment. Colorado must provide for:

- Adequate funding, professional development, and staffing resources for public schools for inclusive, student-centered programs for all students;
- Special education services provided in the least restrictive and most inclusive setting by qualified teachers, staff and therapists for all eligible students including an appropriate continuum of services, para-professional support, and related supports including transportation;
- Equal access to technology and technology supports for students with I/DD;
- Alternatives to harmful disciplinary practices such as suspension and expulsion for young students and requirements that schools work to de-escalate minor school infractions rather than call for police department assistance;
- Elimination of corporal punishment in public schools that receive federal funding;
- Adequate and quality educational supports to ensure appropriate and accountable progress;
- Adequate medical, nursing, and behavioral support services (with appropriate staffing) for students with complex needs;
- Meaningful transition services and a strong pipeline of employers for students with disabilities that are person-centered and that prepare them for continuing education resulting in competitive integrated employment, and successful community living;
- Achieve equal access to appropriate supports and services in publicly funded education services for student age birth through 21;
- Preservation and maintenance of funding for Inclusive Higher Education programs across Colorado; and encouragement of future and current programs to attract and support students with disabilities and I/DD.

Policy Measures Prompted by COVID-19

- Require schools to implement proper safety measures to help slow the spread of COVID-19;
- Parity and flexibility for students with I/DD who, because of possible health complications, may suffer more adverse health effects from the contraction of COVID-19 and therefore, require remote learning options;

- Applicable person-centered contingency plans included in Individualized Education Plans and amendments are regularly provided and followed for students with I/DD during the pandemic.

Protection of civil rights for people with disabilities including:

- Equitable opportunities, rights and protections are afforded to all people with intellectual and developmental disabilities, their families and caregivers;
- Dismantling of historical institutions that promote systemic racism and negatively impact persons with disabilities of color, their caregivers, and family;
- Promoting alternatives (e.g., health-care proxies, advance directives, supported decision-making, powers of attorney, notarized statements, representation agreements, etc.) in favor of permanent, restrictive protective arrangements; guardianship policies should respect the rights of people with disabilities to manage their own affairs with informal assistance and guidance from family, friends, and others. If guardianship is essential, it should be limited to the fewest restrictions necessary for the shortest amount of time and tailored to the individual's specific capacities and needs, always with a presumption in favor of limited rather than full guardianship;
- Promote development of policies, procedures, and funding to ensure that the preferences, needs, and complaints expressed by people with IDD are respected, honored, and enforced effectively to enhance quality of life;
- Affordable, safe, accessible, integrated, and community-based housing options that promote independence, freedom, authority, and support to exercise control over their housing, reflect personal preferences and styles, and are free from housing discrimination;
- School discipline policies that provide positive behavioral supports for students with disabilities that avoid trauma, seclusion, restraint, and involvement of law enforcement;
- Appropriate accommodations, modifications, and preventative measures designed to support individuals with disabilities in the criminal justice system;
- Equal access to medical information and treatment by ensuring that: 1) all communications are tailored to meet the needs of the individual receiving treatment and/or the guardian; and 2) the appropriate treatment is determined in the context of a person's overall unique medical history and not based on the person's diagnosis of a disability.

Policy Measures Prompted by COVID-19

- Protections for people with disabilities that ensure that they are not discriminated against during considerations for life-saving treatments and other necessary medical care, even in the event of medical shortage;
- Patients with IDD who require help with the provision of care are allowed support professionals in hospital, clinical, behavioral, and other health settings.