



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

March 6, 2006

Dear Budget Committee Member:

The Consortium for Citizens with Disabilities (CCD) urges you to reject proposals in the Administration's FY 2007 budget that would have an extremely negative impact on the health and long term care of children and adults with disabilities and their families.

CCD is a coalition of national disability organizations working together to advocate for national public policy that ensures the self determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society. We represent individuals facing a wide range of impairments including mental illness, epilepsy, diabetes, physical disabilities, sensory disabilities, traumatic brain injuries, and mental retardation. Access to health and long term supports that lead to these goals is critical.

Medicaid:

Medicaid programs across the country are facing increasing financial pressures, many of which result from changes in federal policies. These cost pressures threaten the ability of states to provide life-saving health and long-term services to more than 9.4 million people with disabilities. The Deficit Reduction Act of 2005 is projected to reduce federal Medicaid spending by \$4.7 billion over the next five years. This represents a significant cost shift to states and low-income Medicaid beneficiaries. In 2006, Congress should not exacerbate the financing pressures on Medicaid by calling for additional Medicaid savings.

Key legislative provisions in the President's FY 2007 budget proposal to save an additional \$4.9 billion over the next five years are misguided and would severely harm individuals with disabilities. These include the President's proposal to reduce federal support for Targeted Case Management Services (TCM). TCM is a critical Medicaid service that is essential to the ability of states to meet key policy goals for Medicaid, such as moving people with disabilities out of costly institutions and into cost-effective and more appropriate community-based alternatives. The loss of these critical services would be particularly harmful to children and adults with mental illness.

Further, the proposal to allow states to use more restrictive formularies in their Medicaid programs could not be more counterproductive. Under current law, state Medicaid programs have an appropriate range of tools to safely, appropriately, and effectively manage the Medicaid pharmacy benefit. States can—and do—use prior authorization and other

utilization management tools to -manage the pharmacy benefit and promote the prescribing and dispensing of the most cost-effective drugs. At the same time, individual Medicaid beneficiaries retain a right to obtain the full range of FDA-approved drugs when they can demonstrate their clinical need. This is a balanced policy that promotes the interests of both Medicaid beneficiaries and the federal government. Eliminating this essential consumer protection would do nothing to lessen the need for pharmaceuticals, but could only lead to abuses where medically necessary drugs are denied which may lead to increases in other physician and hospital costs paid by Medicaid.

Medicare

The President proposes significant cuts to Medicare, largely through fee freezes or reductions to hospitals and other providers, as a way of further reducing entitlement spending. With so many major improvements critically needed in the Medicare program, these proposals are misplaced. Putting aside the merits of whether these providers can tolerate these fee reductions, Congress should be focused on fixing the problems with implementation of the Part D drug benefit, extending reasonable treatment of Medicare beneficiaries whose outpatient therapy needs exceed the caps set to apply in full force next year, averting a significant decrease in the physician fee schedule, and modifying the "in the home" restriction under the durable medical equipment benefit so that people requiring wheelchairs are not confined to the four walls of their homes. Without these types of meaningful improvements to the Medicare program, CCD believes that further restrictions in funding to the Medicare program would be ill-advised at this time.

Disability Related Health Programs

CCD also strongly urges you to reject the significant cuts in the President's budget for discretionary spending for critical disability-related health programs. If these cuts are accepted, not only would children and adults with disabilities lose access to important services but efforts to prevent and/or ameliorate disability would be set back. The budget proposes to eliminate several important programs located in the Health Resources and Services Administration (HRSA). Among these are the Traumatic Brain Injury (TBI) state grant program and the TBI protection and advocacy program. It is difficult to comprehend eliminating funds for the TBI programs considering that a very large percentage of the almost 17,000 soldiers wounded in the Middle East have TBIs. In addition, critical HRSA child-health programs, such as the Universal Newborn Hearing Screening program, Emergency Medical Services for Children, and Health Professions Training grants have been targeted for elimination.

The Administration also proposes to zero out important disability programs at the Centers for Disease Control, including the Epilepsy Public Health program, which is the only federal program solely concerned with documenting the scope of epilepsy as a national health problem and addressing the impact of epilepsy on individuals and their families. Also targeted for elimination is the CDC Preventive Health and Health Services Block Grant,

which has been the primary source of flexible funding to states to address the national health objectives in the Healthy People 2010 health improvement plan.

Federal funding for important mental health programs is also in jeopardy. The administration is proposing a 4 percent cut to the Center for Mental Health Services -- on the heels of cuts last year to mental health funding. The demand for mental health services and supports has increased due to the many returning veterans facing Post Traumatic Stress Disorder and the many victims of Hurricane Katrina facing a variety of mental health problems.

Again, we urge you to reject cuts to important health and health related programs that help make life better for millions of children and adults with disabilities and their families.

Thank you for your consideration.

Alexander Graham Bell Association for the Deaf and Hard of Hearing
American Association on Mental Retardation
American Academy of Pediatrics
American Academy of Physical Medicine and Rehabilitation
American Association of People with Disabilities
American Council of the Blind
American Congress for Community Supports and Employment Services
American Dance Therapy Association
American Music Therapy Association
American Network of Community Options and Resources
American Occupational Therapy Association
American Therapeutic Recreation Association
Association of Assistive Technology Act Programs
Association of University Centers on Disabilities
Bazelon Center for Mental Health Law
Brain Injury Association of America
Center for Disability Issues & the Health Professions
Council of State Administrators of Vocational Rehabilitation
Council for Exceptional Children
Division for Early Childhood of the Council for Exceptional Children (DEC)
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Easter Seals
Epilepsy Foundation
Helen Keller National Center
Learning Disabilities Association of America
National Alliance on Mental Illness

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National Association for the Advancement of Orthotics and Prosthetics

National Association of Councils on Developmental Disabilities

National Association of School Psychologists

National Association of Social Workers

National Association of State Head Injury Administrators

National Coalition on Deaf-Blindness

National Disability Rights Network

National Down Syndrome Congress

National Mental Health Association

NISH

National Multiple Sclerosis Society

National Organization of Social Security Claimants' Representatives

National Rehabilitation Association

National Respite Coalition

National Spinal Cord Injury Association

Paralyzed Veterans of America

The Arc of the United States

Title II Community AIDS National Network

United Cerebral Palsy

United Spinal Association

US Psychiatric Rehabilitation Association

World Institute on Disability

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