

February 22, 2011

TO: House Committee on Aging and Long Term Care

FR: Tom Laing, Executive Director, InterHab

RE: House Bill 2296: Regarding the establishment of a joint legislative committee

for oversight of the closure of the Kansas Neurological Institute.

Thank you, Representative Bethell and members of the committee. We appreciate the introduction of House Bill 2296, and this hearing today. We appear in support of HB 2296 because we believe an organized legislative effort to oversee the reallocation of institutional resources is important. Additionally, this bill creates a statutory direction to the administration to assure that dollars saved from closure, if closure occurs, will be directed back into the DD system, to help provide needed financing for community services.

The long term interests of all persons with disabilities and all community service networks are better addressed when both the executive and legislative branches engage in intentional oversight. The bill proposes a means by which to do this, by addressing and materially evaluating the potential benefits that have been prospectively identified to be derived from institutional downsizing.

It is proper that the committee does not cross unnecessarily into regulatory and programmatic issues, the responsibility for which clearly rests with the administration and the community leadership. Nevertheless, we would urge the committee to consider adding a requirement in the bill that State and Community leadership make regular reports to the committee regarding the programmatic aspects of services for persons moving from institutional settings into the community.

In addition we have the following comments:

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1. Regarding the calculation of savings: (page one, lines 21-26)

We believe it is a more defensible measure of savings, if the comparison by which such savings are calculated is the comparison between the average daily institutional costs and the actual costs of each person who is served, or by the averages of all relocated persons by funding tier into which their disability profile places them. Furthermore, we would urge that the committee ask for a report which evaluates over time the changing nature, if any, of each such person's tier placement.

2. Regarding the reporting on the relocation of persons for services: (page two, lines 27-32)

The committee may wish to clarify the language as follows:

".. and whether adequate progress is being made to transfer individuals from the Kansas Neurological Institute into a different service setting, and whether adequate progress is being made to move persons from the waiting list to receive home and community based services.

The clarifying language is to clarify as noted:

- (a) there is no requirement that persons relocating from KNI in the event of its closure will enter into an HCBS program, and;
- (b) the current language in the bill leaves open the impression that a person leaving KNI may go onto a waiting list, which will not occur.

3. Regarding the composition of the committee: Page 2, re composition

We would recommend the committee consider creating this oversight body with a similar philosophy as recent statutorily-created panels such as the 2010 Commission, in which a blend of legislators and non-legislators with specific expertise comprise the membership.

We support House Bill 2296, we encourage your thoughtful consideration of the changes proposed, and we thank you for your time and interest in the lives of persons with developmental disabilities.