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The Developmental Disabilities Alliance of Western New York (DDAWNY) is a collaborative group of 40 member voluntary agencies in Buffalo and Rochester that provide services to people with developmental disabilities.

**2022-2023 Executive Budget Asks**

**OFFICE FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES**

**5.4% COLA for SFY 2023**

**RECOMMENDATION:**

* **Accept the Health & Mental Hygiene Article VII Part DD authorizing the 5.4% COLA for Human Services Agencies**

**WORKFORCE INVESTMENTS**

The Executive Budget includes a proposal to provide up to **$3,000 in bonus payments** to frontline health care and mental hygiene workers.

**RECOMMENDATION:**

* **Amend the Health & Mental Hygiene Article VII Part D to include part-time employees who worked on average at least 15 hours and reduce the top tier from an average of 40+ hours to an average of 30+ hours (or full-time as determined by the agency) to mirror the eFMAP requirement and make this bonus an annual recurring bonus or wage enhancement.**

**ESTABLISH A PERSONAL INCOME TAX CREDIT FOR DIRECT CARE STAFF**

The establishment of a refundable personal income tax credit is an additional way to address the significant workforce challenges of the I/DD and mental hygiene service delivery systems.

**RECOMMENDATION:**

* **Include S.7643/A.9200 in the final state budget, which would establish a refundable personal income tax credit for direct care staff employed by provider agencies.**

**NURSES ACROSS NEW YORK**

I/DD providers historically have had challenges in recruiting and retaining essential nursing staff.

**RECOMMENDATION:**

* **Amend the Health & Mental Hygiene Article VII Part A to specify I/DD and Behavioral Health agencies are included as eligible places of employment for tuition loan forgiveness.**

**CAPITAL FUNDING**

The Executive Budget proposes authorizing additional funds for the **Statewide Health Care Transformation Program** and new funding for the **Nonprofit Infrastructure Capital Investment Program**

**RECOMMENDATION:**

* **Accept the inclusion of the Nonprofit Infrastructure Capital Investment Program (NICIP).**
* **Amend the Statewide Health Care Facilities Transformation Program (SHCFTP) to include community based I/DD providers, that are authorized, approved and/or funded by OPWDD, as eligible participants.**

**STATE EDUCATION DEPARTMENT**

**WE WHOLEHEARTEDLY SUPPORT THE 11% INCREASE PROPOSED BY THE GOVERNOR BUT WITHOUT MODIFICATIONS, THE DOLLARS WILL BE RECOUPED BY THE STATE.**

**RECOMMENDATIONS:**

* **Support SED’s proposal to discontinue Rate Reconciliation for five years while a new rate methodology is created and approve SED’s request for $1.25 million to develop a new, tuition rate methodology with stakeholder input.**
* **Hold providers harmless for any part of the cost screens for under enrollment of 5% and staff vacancies and adjust the 70/30 cost screen to more accurately reflect direct vs. indirect costs**
* **Implement Interim-Plus Rates and include all applicable approved tuition reimbursement growth since each school’s last official rate.**
* **Establish a 4410 reserve fund similar to other schools**

**TEACHER SHORTAGES**

Teacher shortages in general and special education in particular make it even harder for our schools to recruit and retain the certified teachers our children have a right to.

**RECOMMENDATION:**

* **We ask that 4410 and 853 schools be included in the Governor’s initiatives to increase the number of certified teachers including: Expanding Alternative Teacher Certification; Acceleration of the Teacher Certification Process; Creation of the Empire State Teacher Residency Program and Implementation of a program to upskill paraprofessionals and teaching assistants to earn their certifications**

**DEPARTMENT OF HEALTH**

**MRT #26 CUT TO ARTICLE 16 CLINICS**

The 2011 Medicaid Redesign Team (MRT) was established by Governor Andrew Cuomo to “bend” the Department of Health Medicaid cost curve. The Office for People With Developmental Disabilities’ (OPWDD) supports and services were not supposed to be included in the 2011 MRT discussion or cuts. However, MRT #26 cut Article 16 clinics’ overall payments for those utilizing a higher number of visits per patient in comparison to their peers. Individuals with severe physical disabilities require more frequent and intensive therapy services, and by implementing a cut based on the average number of services provided per month, DOH is discriminating against individuals with the most complex disabilities.

This year the 2023 Executive Budget Health and Mental Hygiene Article VII/S.8007/A.9007 Part W repeals utilization thresholds that have been in place for other Medicaid recipients but not individuals with severe physical disabilities

**RECOMMENDATION:**

* + **Repeal MRT 26/ Part H of chapter 59 of the laws of 2011**

**EARLY INTERVENTION**

The Early Intervention (EI) program, authorized under Part C of the federal Individuals with Disabilities Education Act (IDEA), provides critical services for children with disabilities and developmental delays from birth to three years of age, and their families.

**RECOMMENDATIONS:**

* **Provide an 11% Increase to EI reimbursement rates.**
* **Include a requirement for a comprehensive assessment of the methodology used to determine payment for all EI evaluations, services and service coordination (S.5676/A.6579)**