



Connecticut Association of Centers for Independent Living
151 New Park Ave. Suite 106, Hartford, CT 06106
voice 860-656-0430 fax 860-656-0496
www.cacil.net

...Working for the full integration, independence, and civil rights of people with disabilities
through Centers for Independent Living

Testimony of Gary E Waterhouse, Executive Director
CT Association of Centers for Independent Living

October 26, 2010

**Appropriations and Human Services Committees Public Hearing Testimony
Amendment to Acquired Brain Injury Medicaid Waiver**

Center for Disability Rights
764A Campbell Ave.
West Haven, CT 06516
V 203-934-7077
TDD 203-934-7079

Disabilities Network of
Eastern CT
238 West Town Street
Norwich, CT 06360
V/TDD 860-823-1898

Disability Resource Center
of Fairfield County
80 Ferry Boulevard
Suite 210
Stratford, CT 06497
V 203-378-6977
TDD 203-378-3248

Independence Northwest
1183 New Haven Rd.
Naugatuck, CT 06770
V 203-729-3299
TDD 203-729-1281

Independence Unlimited
Suite D
151 New Park Avenue
Hartford, CT 06106
V/TDD 860-523-5021

The Connecticut Acquired Brain Injury Medicaid Waiver gives hope and the promise of a better life to people with traumatic brain injury and their families.

As advocates for people with disabilities we are very pleased there is proposed funding for an additional thirty-five (35) ABI slots.

We are very disturbed that the additional thirty-five (35) ABI slots will create a new silo requiring institutionalization before being eligible for the new slots.

The existing ABI waiver has a waiting list of fifty (50) fully eligible people that will be eliminated from consideration under the proposed change.

CACIL supports the position of the *Brain Injury Association of Connecticut* that the fifty (50) people on the waiting list should be funded along with the thirty-five (35) on the MFP list.

An equitable distribution of the thirty-five (35) new slots between the existing ABI waiting list and the MFP list may be a solution.

The most recent draft of the Mercer Report prepared for the State of Connecticut Department of Social Services says, "Multiple interviewees reported a lack of overall direction and integration in the long-term care program attributable to the separate and distinct Medicaid waiver reporting structures for each waiver within DSS". The Mercer report makes many suggestions regarding system change in the way Connecticut manages its Medicaid waiver programs.

The change contemplated today is an example of short-term expedience and no long-term strategic policy implications.