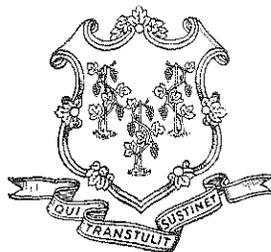


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Public Health Committee

March 18th, 2015

LOB 1D 10:30 AM

In **SUPPORT** of Raised Senate Bill 1088
An Act Concerning Services for Individuals with Intellectual Disability

Chairwoman Gerratana, Chairman Ritter, and distinguished members of the Public Health Committee, thank you for hearing SB 1088. I am here to testify in **support** of **Raised Senate Bill 1088**, *An Act Concerning Services for Individuals with Intellectual Disability*.

Connecticut's five regional centers for intellectually disabled adults and Southbury Training School should be closed. As many of you may know, in *Messier v. Southbury Training Sch.*, 916 F. Supp. 133, 142 (1996), the United States District Court for the District of Connecticut reasoned that state-operated intermediate care facilities for individuals with intellectual disabilities cannot refuse to consider certain residents for community placement, merely based upon the degree of their disability. Three years later, in *Olmstead v. L.C.*, 527 U.S. 581, 599 (1999) the United States Supreme Court concluded that placing mentally disabled individuals in institutions created unfounded beliefs among the community that these individuals are unfit to participate in community life. In reality, intermediate care facilities greatly diminish the daily activities of individuals with intellectual disabilities. In fact, these facilities significantly reduce the individual's family relations, social contacts, work options, cultural enrichment, educational advancement, and general independence. Therefore, through developing and implementing a plan to close these facilities, we can provide a greater quality of life for individuals with intellectual disabilities.

However, we must provide proper protection for those currently living in institutions and a plan for transitioning into the community including providing appropriate housing and care. Generally, providing community care is less expensive than other institutional alternatives. Therefore, our state can adopt effective community alternatives through a reallocation of the existing mental health funds which are currently distributed to these state-operated intermediate care facilities.

I believe that, through closing all state-operated intermediate care facilities for individuals with intellectual disabilities, we can bring freedom and independence to patients long accustomed to these types of facilities and eliminate stereotypic assumptions about their individual ability to contribute and participate in society.

Thank you again for the opportunity to testify in support of Senate Bill 1088.