

THE HARMFUL EFFECTS OF THE DISABILITY INTEGRATION ACT (DIA) H.R. 555 / S. 117

VOR urges Members of Congress to consider the harmful effects the DIA would have on severely disabled people, state budgets, and legal precedent before taking any action:

- The DIA would eliminate the option for individuals with disabilities and their families to choose to receive care in an Intermediate Care Facility (a so-called "institution"). This Medicaid-certified federal program, which is jointly funded with the states, provides comprehensive care with extensive oversight for society's most intellectually disabled individuals. In turn, the legislation would put tremendous pressure on the Home and Community Based Services (HCBS) program, another federal-state program, which does not provide a similar level of care for individuals with complex needs.
- The DIA is unaffordable. As noble as providing services for every person with intellectual and developmental disabilities (I/DD) on waiting lists may be, the cost of doing so would be prohibitive for both state and federal budgets. The proof of this would lie in a CBO score, which has not been requested since the legislation was first introduced in the 115th Congress.
- The DIA would overturn a key portion of the landmark Olmstead decision, in that it specifically states that it would eliminate the option to choose institutional care (see pp. 21 & 32-33). As the Court said:

"Unjustified isolation, we hold, is properly regarded as discrimination based on disability. But we recognize, as well, the States' need to maintain a range of facilities for the care and treatment of persons with diverse mental disabilities, and the States' obligation to administer services with an even hand." (Olmstead v. L. C., 527 U.S. 581, at 597)

"We emphasize that nothing in the ADA or its implementing regulations condones termination of institutional settings for persons unable to handle or benefit from community settings. . . Nor is there any federal requirement that community-based treatment be imposed on patients who do not desire it." (Olmstead v. L. C., 527 U.S. 581, at 601-602)

Instead of pursuing unrealistic discriminatory legislation, we would encourage the Congress to provide additional funding for all residential options for individuals with I/DD and to target funds to alleviate the dangerous shortage of Direct Support Professionals whose services are essential to serve this and the elderly population.

In sum, before you consider taking any action on the DIA, VOR asks that you read the entire bill. We believe a fair reading supports our contentions that it would overturn key portions of Olmstead, marginalize our most vulnerable citizen with I/DD, limit their families' choices for appropriate residential care, and overwhelm states budgets.

We urge you to oppose the Disability Integration Act.