



**CONSORTIUM FOR CITIZENS  
WITH DISABILITIES**

April 1, 2008

The Honorable John Dingell  
Chairman  
Committee on Energy and Commerce  
United States House of Representatives  
Washington, D.C. 20510

The Honorable Tim Murphy  
U.S. House of Representatives  
Washington, D.C. 20510

Dear Chairman Dingell and Representative Murphy:

We are writing as members of the Consortium for Citizens with Disabilities (CCD) to express our strong support for the Protecting the Medicaid Safety Net Act of 2008 (H.R. 5613), legislation to place a one-year moratorium on Medicaid regulations which are very harmful to Medicaid beneficiaries, especially those with disabilities.

The CCD is a coalition of national organizations working together to advocate for national public policy that ensures the self determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society.

Children and adults with physical, cognitive, and developmental disabilities, traumatic brain injuries, youngsters in the foster care system, persons living with HIV/AIDS and individuals with serious mental illnesses rely upon several state optional Medicaid programs to finance an array of intensive community-based services and supports. We are deeply troubled by recent Medicaid rulemaking that is causing severe distress for states and that will result in serious harm to Medicaid beneficiaries.

While all of the recent Medicaid rules will produce serious negative consequences for Medicaid beneficiaries and the nation's health system, we would like to highlight the harmful changes caused by three rules in particular. The Medicaid rehabilitation services (rehab) option is an essential tool used by nearly all states. For example, the unique flexibility of this option enables states to provide proven, evidence-based treatment for people with serious mental illnesses that keeps them out of hospitals and living successfully in the community. The Bush Administration's rule threatens states' capacity to operate such programs. Medicaid funding for appropriate school-based administration services uses the school

setting to ensure that Medicaid eligible children are enrolled in the program and to ensure that children with disabilities receive the services they need. The Bush Administration's own proposed rule stated that Medicaid coverage of school-based transportation services was already highly restricted and covered only specialized medical transportation for Medicaid-eligible individuals on days when they receive Medicaid services in the school. The Bush Administration's school-based services rule would prohibit all Medicaid funding for school-based administration and transportation services. The targeted case management (TCM) benefit is used by the District of Columbia and all, but one state. It is a critical service that ensures Medicaid beneficiaries can access the services they need. The Bush Administration's rule goes well beyond the reasonable changes the Congress made in the Deficit Reduction Act. For example, it would restrict transition case management services to such an extent (A maximum of 60 days to plan a transition to the community, identify housing, and arrange for community services, down from 180 days established following the Supreme Court's Olmstead decision) that it seriously undermines the Administration's own signature initiative, the Money Follows the Person demonstration - relegating more people with disabilities to institutions by limiting the assistance available to help get them into the community.

By the Administration's own estimate, these three programs would be cut by a combined total of \$7 billion over five years - and the other rules would cut Medicaid further, shifting costs onto states at a time of growing state economic distress. These funding reductions threaten access to vital medical, social, and educational services.

As the National Governors Association has underscored in its unanimous support for blocking all seven Centers for Medicare & Medicaid Services (CMS) regulations and others, states cannot afford these cuts, especially during an economic downturn. Ultimately they will be forced to make cost shifts and vulnerable beneficiaries will lose access to cost-effective services.

The CCD strongly supports swift passage of H.R. 5613. This legislation is needed to ensure that these cuts can be averted. Moratoria will allow Congress, using its deliberative process to thoroughly examine the policy issues set forth in the regulations and determine what changes to the underlying Medicaid statute are needed. We believe it vitally important for the Congress to affirm a simple principle: that the Medicaid program is a partnership involving the United States Congress, state governments, county and local governments and CMS. The federal government should not attempt to skirt the legislative process by imposing fiscal and policy decisions on its partners through administrative fiat.

On behalf of the vulnerable Medicaid beneficiaries we represent, thank you for your leadership in introducing this critical legislation. We look forward to working with you to secure its passage.

If you have any questions, please contact: Liz Savage, The Arc and United Cerebral Palsy Disability Policy Collaboration (202-783-2229- [savage@thedpc.org](mailto:savage@thedpc.org)), Kathy McGinley, National Disability Rights Network (202-408-9514, [Kathy.McGinley@ndrn.org](mailto:Kathy.McGinley@ndrn.org) or Peter Thomas, ACCSES, (202-466-6550).

Sincerely,

ACCSES

ADAP Advocacy Association

Alexander Graham Bell Association for the Deaf and Hard of Hearing

American Association of People with Disabilities

American Association on Intellectual and Developmental Disabilities

American Counseling Association

American Foundation for the Blind

American Medical Rehabilitation Providers Association

American Music Therapy Association

American Network of Community Options and Resources

American Occupational Therapy Association

American Physical Therapy Association

Association of Assistive Technology Act Programs

Association of University Centers on Disabilities

Autism Society of America

Bazelon Center for Mental Health Law

Brain Injury Association of America

Child Welfare League of America

Children and Adults w/Attention Deficit-Hyperactivity Disorder (CHADD)

Council of Parent Attorneys and Advocates

Council for Exceptional Children

Council of State Administrators of Vocational Rehabilitation

Disability Rights Education and Defense Fund

Division for Early Children of the Council for Exceptional Children

Division for Learning Disabilities of the Council for Exceptional Children

Easter Seals

Epilepsy Foundation

Helen Keller National Center

IDEA Infant Toddler Coordinators Association

Learning Disabilities Association of America

Lutheran Services in America

Mental Health America

National Alliance on Mental Illness

National Association of Councils on Developmental Disabilities

National Association of County Behavioral Health and Developmental Disability Directors

National Association of School Psychologists

National Association of Social Workers

National Association of State Directors of Developmental Disabilities Services

National Association of State Directors of Special Education

National Association of State Head Injury Administrators

National Association of State Mental Health Program Directors

National Coalition on Deaf-Blindness

National Council for Community Behavioral Healthcare

National Disability Rights Network

National Down Syndrome Congress

National Down Syndrome Society  
National Multiple Sclerosis Society  
National Organization of Social Security Claimants' Representatives  
National Rehabilitation Association  
National Respite Coalition  
National Spinal Cord Injury Association  
NISH  
School Social Work Association of America  
Spina Bifida Association  
The Arc of the United States  
TASH  
Title II Community AIDS National Network  
United Cerebral Palsy  
United Jewish Communities  
United Spinal Association  
World Institute on Disability