


HHS COMMITTEE #1
April 15, 2010

MEMORANDUM

April 13, 2010

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst 

SUBJECT: **FY11 Operating Budget: Department of Health and Human Services**
Public Health Services (continued from April 12th)
Aging and Disability Services

Those expected for this worksession:

Uma Ahluwalia, Director, Department of Health and Human Services
Dr. Ulder Tillman, Health Officer and Chief of Public Health Services
John Kenney, Chief, Aging and Disabilities Services
Kim Mayo, DHHS Management and Budget
Beryl Feinberg, Office of Management and Budget
Pooja Bharadwaja, Office of Management and Budget
Trudye-Ann Durace, Office of Management and Budget

Excerpts from the County Executive's Recommended Budget are attached at © 1-6 for Public Health Services and © 7-10 for Aging and Disabilities Services.

1. PUBLIC HEALTH SERVICES (continued from April 12th at the April 12th session, the Committee completed its initial review of Section A – Health Care for the Uninsured)

B. Communicable Disease and Epidemiology

The Executive is recommending two specific changes in this program which investigates and manages issues regarding communicable diseases such as rabies, Hepatitis A, B, and C,

Lyme Disease, H1N1, and other diseases proscribed by law. Educational programs are provided. This program is also responsible for the medical screening of people who enter the county with refugee status. Total recommended funding is \$1.74 million with 14.4 workyears.

	Dollars	WY	Fund
Enhance Refugee Resettlement program due to increase in MONA grant	\$ 125,370	0.0	Grant
Abolish part-time Community Health Nurse - Communicable Disease	\$ (43,340)	-0.5	General

1. Increase in MONA Grant

This grant reimburses the county for costs associated with assessments done in the refugee resettlement clinic. The increase is due to the shift of two positions to the grant which have higher salaries than were budgeted in FY10. It is not an impact on the General Fund.

Council staff recommends approval.

2. Abolish part-time Community Health Nurse

This is the abolishment of a vacant part-time Community Health Nurse for fiscal reasons. Work will be handled by remaining staff. **Council staff recommends approval.**

C. Community Health Services

The Executive is recommending two specific changes for this program which provides preventive health services to uninsured or underinsured people of all ages, nurse management of targeted populations, and housing the service eligibility unit for screening and access to local, State, and Federal programs. As previously noted, eligibility staff that was budgeted in Montgomery Cares has been transferred to this program as the Department views eligibility screening as a departmental function.

	Dollars	WY	Fund
Abolish full-time Manager III - Community Health Services	\$ (162,070)	-1.0	General
Abolish 2 full-time Community Health Nurses - Community Health Services	\$ (186,040)	-2.0	General

1. Abolish Full-Time Manager III

This position is being abolished because of the loss of the Under One Roof Clinic (discussed in Montgomery Cares). **Council staff recommends approval.**

2. Abolish Two Full-Time Community Health Nurses – Community Health Services

These are both filled positions but it is expected that the employees will be placed in other currently vacant positions. These positions are located at the Silver Spring Health Center

and provide services including immunizations, case management, and education programs as needed. **Council staff recommends approval.**

D. Dental Services

The Executive is recommending a \$100,000 reduction to this program which funds dental services for adults, seniors, children, and the maternity partnership program.

	Dollars	WY	Fund
Reduce Dental Services for approximately 430 Adults/Seniors	\$ (100,000)	0.0	General

The following table shows the funding and clients served in all programs in this area.

DENTAL PROGRAM FUNDING					
Program	FY10 CC Approved Budget	FY09 Clients Served	FY10 Estimated Clients Served	FY11 Estimated Clients Served	FY11 CE Rec Budget
Maternity Dental Services (Budget includes funding for Adult & Maternity Dental)	1,253,598	492	550	550	1,193,805
Adult Dental Services		738	774	829	
Children Dental Services	302,560	2,033	2,000	2,000	302,060
Senior Dental Services	474,091	788	754	739	459,886
Less Lapse	(53,171)				(50,627.00)
TOTALS	1,977,078	4,051	4,078	4,118	1,905,124

The above table shows that even with a reduction in funding, it is expected that more adults will be served in FY11 than in FY10. During the Savings Plan worksession, the Committee heard from the Department that staff shortages in this program has slowed the ability to refer and see clients for service. The staff issues have been resolved and more people are able to be scheduled for service. The \$100,000 will reduce the number that could have been served in FY11 but not the actual number served when compared to FY10. In addition to the \$100,000 identified in the budget book, there will be an \$8,740 (7%) to the contract for dental supplies. **Council staff recommends approval.**

E. Environmental Health and Regulatory Services

Last year, the Committee discussed the wide range of inspections and other duties that must be provided by the staff in this program. They include restaurant and farm market inspections and inspections of swimming pools, group homes, private educational facilities, hotels, and motels. The county's rat control program is also in this program. The Committee discussed last year whether fees should be raised but agreed that the burden would be placed on

businesses that were already being significantly impacted by the economic downturn. Total recommended funding for this program is \$2.98 million and 28.2 workyears.

For FY11, the Executive is recommending only one specific change with a reduction of \$30,000 included in the budget for West Nile Virus Surveillance.

	Dollars	WY	Fund
Reduce Cost of West Nile Virus Surveillance (continuation of FY10 Savings Plan)	\$ (30,000)	0.0	General

This is a continuation of a reduction approved as a part of the FY10 Savings Plan.
Council staff recommends approval.

F. Health Care and Group Residential Facilities

The Executive is not recommending any specific changes to this program that inspects and licenses nursing homes, large assisted living facilities, adult day care centers, and small assisted living facilities and group homes for children, elderly, mentally ill, and developmentally disabled people. Total recommended funding is \$1.35 million and 10.2 workyears. **Council staff recommends approval.**

G. Health Promotion and Prevention

The Executive is recommending six specific changes to this program which provides a wide range of prevention programming and assists community groups in addressing issues such as obesity, alcohol and tobacco use, family violence, shaken baby syndrome, and parenting skills for at-risk families. The total recommended funding for this program is \$186,080 and 1.9 workyears for FY11. This is over an 80% reduction from the FY10 budget. As has been previously noted, there have been significant reductions to funding for health promotion and prevention both from the State and the county.

	Dollars	WY	Fund
Increase in Childhood Prevention Injury Grant	\$ 500	0.0	Grant
Eliminate Nutrition Risk Reduction Grant	\$ (45,130)	0.0	Grant
Abolish full-time Principal Administrative Aide - Health Promotion and Prevention	\$ (66,130)	-1.0	General
Decrease Miscellaneous Operating Expenses	\$ (91,600)	0.0	General
Eliminate GOSPEL program (some elements of the program will be done by the African American Health Program)	\$ (125,050)	1.0	General
Reduce a full-time Manager III from 1 WY to 0.2 WYs Health Promotion and Prevention	\$ (127,930)	-0.8	General

The Department has provided the following information on what FY11 funding will provide:

Health Promotion & Prevention	
Staffing	
Manager III - .20WY	
Community Health Nurse II - 1.0WY	
Program Specialist I - 1.0WY	
Program Services & Activities	
<p>PHS will consider addressing one or more health prevention focus areas such as:</p> <ul style="list-style-type: none"> - childhood obesity prevention/intervention - preconception health education for young women - breast cancer awareness outreach - screenings for breast, colon or prostate can 	
<p>Health Promotion Staff will continue support other health promotion activities, but at a reduced level, such as: the car seat safety awareness program (which is managed by Fire and Rescue,) injury prevention outreach, and awareness activities, and particip</p>	
<p>Continued management of the Improved Pregnancy Outcome Grant activities which includes staffing the Fetal and Infant Mortality Review Board</p>	
<p>Continued management of the Minority Infant Mortality Reduction Grant activities.</p>	
Total FY 11 CE Recommended	186,080

1. Increase funding for Childhood Prevention Injury Grant (+\$500) and eliminate funding from the Nutrition Risk Reduction Grant (-\$45,130)

Both of these items are in response to changes in the availability of grant funding. **Council staff recommends approval.**

2. Abolish Full-time Principal Administrative Aide

This is a filled position that is being abolished in order to meet overall budget targets. Program duties will be handled by other staff. Council recommends approval.

3. Decrease Miscellaneous Operating

The Department estimates it can save \$91,600 in several operating expense categories in order to meet budget targets. Council staff recommends approval.

4. Eliminate G.O.S.P.E.L. Program (some elements may be provided through the African American Health Initiative)

The following is a description of this program when the Committee last discussed it as a part of the FY09 operating budget -- *G.O.S.P.E.L. - Glorifying Our Spiritual and Physical Existence for Life* - is an outreach program to 11 African American church congregations throughout Montgomery County. The health outreach focuses on health disparities, especially those disparities related to tobacco use or exposure. The program was developed in collaboration with the Montgomery County Black Ministers' Conference. The program was originally started with Cigarette Restitution grant funds that supported a full time coordinator position and operating funds.

Because grant funding was no longer available, this program was shifted to the General Fund. The Executive has proposed its elimination in FY11 in order to meet overall budget targets. While it is a highly regarded program, it is an outreach and prevention program. These types of programs have generally been eliminated from the DHHS budget. **Council staff recommends approval.**

5. Reduce Manager III from 1.0 WYs 0.2 WYs and abolish position during FY11

This position is being abolished for fiscal reasons but it is expected that it will become vacant shortly after FY11 begins. Therefore funding is included for 0.2 WYs. **Council staff recommends approval.**

H. Cancer and Tobacco Prevention

The Executive has noted three specific items in the budget document that reflect changes in available State funding.

	Dollars	WY	Fund
Reduce Miscellaneous Operating funded by Cigarette Restitution Funds	\$ (10,000)	0.0	Grant
Reduce Tobacco Prevention and Educations funded by Cigarette Restitution Funds	\$ (70,760)	-1.0	Grant
Reduce cancer Prevention, Education, Screening, and Treatment funded by Cigarette Restitution Funds	\$ (209,070)	-0.5	Grant

These reductions are not new for FY11 but reflect the implementation of changes that have been made due to last year's reduction in Cigarette Restitution Funds. The Department has provided the following information. **Council staff recommends approval.**

The Cancer Screening and the Tobacco Prevention Programs were reduced by 30% and 25% respectively in September 2009. DHMH indicated that the Board of Public Works cut the program due to declining revenues. As a result of reductions, the Tobacco program lost one position. For FY10 this severely affected our efforts for continuing success, resulting in the loss of 8 contractual work years that supported tobacco prevention minority initiatives, the loss of the enforcement officer, and 8

vendors that provided services to youth, teens, and minorities. The focus of the program now is smoking cessation through the few vendors that have contracts. The operation of these programs and services were performed not only by government and contract positions, but also vendors and nonprofits partners who were adversely impacted. This fiscal year there have been fewer outreach and education activities, a very limited number of smoking cessation classes.

The Cancer program reduced the funding of a contractual Nurse Case Manager, funding for outreach, and reduced the current contracts for colonoscopy services. This fiscal year there has been less outreach and fewer education activities and smoking cessation classes. Colonoscopies and prostate screenings have been reduced considerably. The number of colonoscopies was reduced from 250 in FY09 to 200 in FY10, and prostate screenings were reduced from 150 in FY09 to 92 in FY10. Almost a quarter of the colonoscopies being done are recalls, limiting the number of new clients seen.

I. STD/HIV Prevention and Treatment Program

For FY11, the Executive is recommending funding of \$6.705 million and 40.8 WYs. This is a program that has **good news** as the county has seen an increase in the funds awarded through the Ryan White Grants.

	Dollars	WY	Fund
Increase in Ryan White Emergency AIDS Services Grant	\$ 456,600	0.0	Grant
Increase in Ryan White Consortia Services	\$ 121,990	0.0	Grant
Increase in Housing Opportunities for People with AIDS (HOPWA) Grant (\$452,220 to \$525,300)	\$ 73,080	0.0	Grant
Add HIV Outreach to Minority Populations	\$ 69,840	0.0	Grant
Abolish a full-time Principal Administrative Aide - STD/HIV	\$ (46,990)	-1.0	General
Eliminate AIDS Diagnostic and Evaluation Grant	\$ (153,510)	-1.0	Grant

1. Increase Ryan White Emergency AID Services Grant (+\$456,600) and Ryan White Consortia Services (+\$121,990)

The county has received an increase in funds available through Ryan White Parts A&B. The programs support the following services areas at Dennis Avenue Health Center:

- Ambulatory medical
- Medical Case management
- Nutritional Therapy
- Oral Health
- Emergency Financial Assistance (utilities rental, food)
- Mental Health
- Substance Abuse counseling
- Transportation
- AIDS pharmaceutical Assistance
 - The Ryan White Part A&B grants supports services for 640 total service clients.
 - The Ryan White Parts A&B supports 16.45 work years (staff)

There are 640 clients under care for a variety of services including primary medical care, medical and psychosocial case management, dental, nutrition support and other supportive services. The funding for Ryan White Part A run through February 2011 and is a competitive grant. The funding for Ryan White Part B runs through June 2011 and is formula based.

Council staff recommends approval.

2. Increase Grant Funds for Housing Opportunities for People with AIDS (+\$73,080)

The Department has told Councils staff that with this additional money the county has progressed from providing rental subsidies for 38 units (73 individuals housed) in July 2009 to subsidizing 43 units (83 individuals housed) in September 2009 and currently. There is not a formal waiting list for HOPWA subsidies. Although there are always individuals and families seeking rental subsidies through HOPWA program, turnover is infrequent. When a vacancy occurs it is filled based on client needs as determined by the HIV Case Managers. Determining factors considered relative to need include, but are not limited to: health status, current housing situation, income, family situation, availability of other resources, and ability to live independently. **Council staff recommends approval.**

3. Abolish Full-time Principal Administrative Aide

This is a vacant position and is being abolished for fiscal reasons. **Council staff recommends approval.**

4. Eliminate AIDS Diagnostic and Evaluation Grants (-\$153,510)

The AIDS Diagnostic and Evaluation Unit grant was eliminated in July 2009. The impact of this change has affected only program administration. Funding in Ryan White Part B grant continues to support the same level of direct services to the clients. AIDS Diagnostic and Evaluation is the initial diagnostic visit for HIV Primary Medical Care Services. DHHS continues to report to the state and county on these clients. **Council staff recommends approval.**

5. Update on Efforts to Increase STD/HIV Services in the UpCounty (funded in Community Health Services)

The Council added funds to the FY10 budget to create a Nurse Practitioner position to increase STD and HIV testing and treatment services in the Upcounty. Council staff understand that the new employee was hired at the end of March and is now training and working at the Silver Spring Health Center. The Nurse Practitioner will probably be able to start seeing patients in about 90 days.

J. Tuberculosis Services

The Executive is not recommending any specific changes to this program in FY11. The program tests people for exposure to TB and treats active cases. They identify people at risk for

TB and perform contact studies to determine who may have been exposed to an infected person. FY11 funding is \$1.85 million and 16.9 WYs. **Council staff recommends approval.**

K. Women's Health Services

The Executive is recommending two specific changes to this program for FY11, both related to grant funding. However, there is a large miscellaneous change to this program in part because Project Deliver and the Maternity Partnership program have been shifted to Healthcare for the Uninsured. The Administrative Care Coordination Team, which assists children and pregnant women who have medical assistance was moved into this program.

	Dollars	WY	Fund
Increase in CDC Early Detection and Control Breast and Cervical Cancer Grant (\$555,160 to \$675,160)	\$ 120,000	0.0	Grant
Reduction in Improved pregnancy outcome grant from \$139,540 to \$119,540	\$ (20,000)	0.0	Grant

1. CDC early Detection and Control Breast and Cervical Cancer Grant

For FY11, there will be \$675,160 to increase the screening and treatment services that can be provided to women through county programs. **Council staff recommends approval.**

2. Improved Pregnancy Outcome Grant

The Improved Pregnancy Outcomes (IPO) grant funds the work of the Fetal Infant Mortality Review (FIMR) Board and the Community Action Team (CAT). These two groups consist of invited volunteer health care providers and community members. The FIMR group (primarily health professionals) reviews prenatal records of fetal and infant deaths and makes recommendations to help reduce morbidity and mortality. The CAT group develops an annual action agenda to address local identified needs. The grant supports a half-time contractual nurse who gathers the perinatal health information and a half-time program coordinator who plans and staffs the meetings. They both contribute to required reports to DHMH. With the reduced funding, \$119,540 remains for these efforts. **Council staff recommends approval.**

3. Follow-up to Report of the MC Reproductive Health, Advocacy, and education Work Group

On April 5th the HHS Committee held a worksession where they were briefed on the Work Groups findings and recommendations. The Committee expressed their interest in continuing to look strategically at the issue of teen pregnancy, encouraged the Department to look into recently announced Federal grants, find ways to collaborate with government and community partners, and understand the impacts from recent health insurance reform.

L. Public Health Emergency and Preparedness Response

The Executive is not recommending any specific changes to this program which is responsible for planning and readiness for disasters, including bio-terrorism threats. Staff

coordinates with other departments and agencies for planning and exercises. FY11 recommended funding is \$2.04 million and 11 WYs.

M. Service Area Administration

The Executive is not recommending any specific changes to this program that includes service wide administration and health planning. FY11 funding is \$1.4 million and 10.3 WYs.

N. Miscellaneous Adjustments

	Dollars	WY	Fund
Miscellaneous Adjustments - Health Care for the Uninsured	\$ 2,235,500	0.5	General and Grant
Miscellaneous Adjustments - Communicable Disease and Epidemiology	\$ 217,880	2.7	General and Grant
Miscellaneous Adjustments - Community Health Services	\$ (1,009,040)	-14.3	General and Grant
Miscellaneous Adjustments - Dental Services	\$ 28,040	0.6	General and Grant
Miscellaneous Adjustments - Environmental Health and Regulatory Services	\$ (93,950)	-1.5	General and Grant
Miscellaneous Adjustments - Health Care and Group Residential Facilities	\$ (5,450)	-0.5	General and Grant
Miscellaneous Adjustments - Health Promotion and Prevention	\$ (623,920)	-1.0	General and Grant
Miscellaneous Adjustments - Cancer and Tobacco Prevention	\$ (16,920)	0.5	General and Grant
Miscellaneous Adjustments - STD/HIV Prevention and Treatment	\$ (72,720)	-0.3	General and Grant
Miscellaneous Adjustments - Tuberculosis Services	\$ (320,210)	-2.9	General and Grant
Miscellaneous Adjustments - Women's Health Services	\$ (1,524,820)	4.2	General and Grant
Miscellaneous Adjustments - Public Health Emergency Preparedness and Response	\$ (3,210)	-0.2	General and Grant
Miscellaneous Adjustments - Service Area Administration	\$ 125,530	3.7	General and Grant
NET MISCELLANEOUS ADJUSTMENTS	\$ (1,063,290)	\$ (8.5)	

Council staff recommends approval.

2. AGING and DISABILITIES SERVICES

As background for this discussion, attached at © 11-14 are excerpts from the Commission on People with Disabilities 2009 Annual Report that provide information on the number of people in the State and Montgomery County with disabilities, the types of disabilities,

waiting list for Medicaid Waiver services, MCPS special education, and the FY10 sources of funding for Aging and Disabilities Services in Montgomery County.

Overview

For FY11, Aging and Disabilities Services is organized into 11 program areas. The following tables show the changes in dollars and workyears for the program area since FY09. Overall from the FY10 original budget to the FY11 recommended budget funding is proposed to decrease by \$1.38 million (3.6%) and workyears by 5.5 workyears (3.4%).

Aging and Disabilities Services Expenditures in \$000's	FY09 Budget	FY10 Budget	FY11 Recommend	Change FY10 Budget to FY11 Rec
Community Support Network for People with Disabilities	16,127	16,453	15,786	-4.1%
Assessment and Continuing Case Management Services	6,085	6,157	6,157	0.0%
Assisted Living Services	2,078	1,973	2,005	1.6%
Community /Nursing Home Medical Assistance and Outreach	2,658	-	4,328	na
In-Home Aide Services	4,722	4,615	1,340	-71.0%
Information and Assistance	945	994	1,000	0.6%
Ombudsman Services	651	664	633	-4.7%
Respite Care	1,196	1,036	806	-22.2%
Senior Community Services	3,767	3,936	2,378	-39.6%
Senior Food Program	1,686	2,291	2,337	2.0%
Service Area Administration	473	487	456	-6.4%
TOTAL	40,388	38,606	37,226	-3.6%

Aging and Disabilities Services Workyears	FY09 Budget	FY10 Budget	FY11 Recommend	Change FY10 Budget to FY11 Rec
Community Support Network for People with Disabilities	44.3	43.4	42.7	-1.6%
Assessment and Continuing Case Management Services	54.4	54.2	52.0	-4.1%
Assisted Living Services	6.8	6.8	6.7	-1.5%
Community /Nursing Home Medical Assistance and Outreach	32.9	-	16.4	na
In-Home Aide Services	16.9	16.9	12.8	-24.3%
Information and Assistance	9.8	9.8	9.7	-1.0%
Ombudsman Services	6.3	6.3	5.1	-19.0%
Respite Care	-	-	-	na
Senior Community Services	21.1	19.1	5.6	-70.7%
Senior Food Program	2.9	4.4	4.5	2.3%
Service Area Administration	2.8	2.8	2.7	-3.6%
TOTAL	198.2	163.7	158.2	-3.4%

A. Community Support Network for People with Disabilities

The Executive's recommended budget identifies three specific items that result in a net reduction of \$253,240 to the General Fund and \$59,560 to the Grant fund. Total FY11 recommended funding for this program is \$15,785,900 and 42.7 workyears. This program area coordinates a wide range of services for people (adults and children) with disabilities including employment, services for the visually impaired, autism waiver services, and funding for community based and residential services.

Aging and Disabilities:	Dollars	WY	Fund
Shift Program Manager from ISS Grant to Service Coordination Grant	\$ 19,750	1.0	Grant
Shift Program Manager from the ISS Grant	\$ (79,310)	-1.0	Grant
Eliminate County DD Supplement to ISS and FSS Providers (continues FY10 Savings Plan)	\$ (253,240)	0.0	General

- 1. Shift Program Manager from ISS Grant to Service Coordination Grant***
- 2. Shift Program Manager from ISS Grant (same position)***

This was a FY10 mid-year change. A position was shifted from the Individual Support Services Grant to the Service Coordination Grant. The total cost of this position is about \$100,000 which was able to be covered in total by the Service Coordination Grant. There is no impact to the General Fund.

- 3. Eliminate County Supplement for Providers to People in the Individual Support Services (ISS) and Family Support Services (FSS) Programs***

This reduction is a continuation of a policy change approved as a part of the FY10 Savings Plan Round 2. The FY10 Savings Plan amount is \$60,000; the \$253,240 is the estimated annualized cost. Until FY10, the providers serving about 220 clients in the Individual Support Services and Family Support Services program received a share of the county's supplement to providers of services to the developmentally disabled ("DD Supplement). At the Committee worksession on the Round 2 Savings Plan the Committee heard from both Director Ahluwalia and Mr. Weins of InterAcc that for these two programs services, that may include transportation, tuition, equipment and other ancillary items, are funded as a package for the client. While the local agencies receiving the DD supplement have benefited from having these funds, they are not as necessary as they are for other providers who are providing services in group homes, day programs, or out of other facilities. There are currently 12 providers who serve ISS and FSS clients. For some it is a small portion of the funding they receive, for a few it is the majority of their caseload and they will receive a significant reduction in DD Supplement funds. **Council staff recommends approval.**

4. Reduce the non-FSS/ISS DD Supplement by \$390,145

The FY10 total pool of funds for the DD Supplement (including ISS and FSS) is \$8,425,430. These funds are allocated to all DD providers in the same proportion as State funding as State funding takes into account the number of clients, severity of disability, and services required. While Montgomery County has chosen to provide a county supplement in recognition of the higher cost of providing services in Montgomery County, the State payment is a full payment to the client. The county DD Supplement is not a direct supplement to a specific employee's pay but rather a payment to assist the entire organization in meeting its costs. That said; testimony from InterACC/DD (© 15) notes that the organization pays its employees an average of \$12 per hour but the State funding pays at a rate of \$8.97.

For FY11, the Department has proposed reducing the overall amount of funding by \$643,400 about 7.5% (including FSS and ISS reductions). This is a bit more than 7% because some providers have a majority of ISS and FSS clients and all this funding was eliminated. For the remaining "regular" DD Supplement the reduction will be 4.7% (as shown below). As in previous years, the Council would approve the total amount of funding which is then allocated by DHHS to providers based on the State formula.

FY10 DD Supplement Funding – Includes ISS/FSS	\$8,425,430
Less ISS/FSS Funds	<u>253,250</u>
Revised FY10 Base DD Funding	\$8,172,180
FY11 to Base DD Funding	<u>390,150</u>
FY11 DD Supplement Funding	\$7,782,030

% Reduction to "regular" DD Supplement from revised FY10 base = 4.7%

Council staff also notes that the testimony received correctly states that funds have not been added to reflect any expansion of services by the DD providers and that annualization of FY10 expansions would previously have resulted in \$300,000 in additional DD Supplement funding. FY11 expansions would previously have added another \$300,000. InterAcc has requested the Council fund this \$600,000 in expansion costs.

Council staff is recommending approval of the funding level recommended by the Executive. Council staff recognizes that these agencies are not compensated sufficiently by the State for the costs associated with higher priced areas like Montgomery County, but does not believe that the Council can find additional funding for this supplement for FY11 given the overall budget shortfall.

5. Contracts in Community Support Network impacted by the 7% reduction.

The following table provides the Committee with information on contracts in this program area that will be impacted by the 7% reduction but are not specifically noted in the budget book. Council staff has not included in this table the contracts with each of the DD Providers (discussed in Item #4) nor contracts where the service is tied to a specific clients and

only carries over from year to year if that specific client is being served. **Council staff recommends approval.**

Purpose and Vendor(s):	FY10 General Fund Contract	Reduction	FY11 Proposed Funding	% Reduction from FY10
Community Support Network:				
ARC of MC for the Building for After All program	\$ 54,127	\$ 3,750	\$ 50,377	-6.9%
Columbia Lighthouse for the Blind services to the visually impaired	\$ 89,931	\$ 6,300	\$ 83,631	-7.0%
Independence Now senior support services	\$ 54,846	\$ 3,800	\$ 51,046	-6.9%
Lt Joseph P Kennedy Institute medical day program	\$ 348,408	\$ 23,390	\$ 325,018	-6.7%
Metropolitan Washington Ear media services for the visually impaired	\$ 54,795	\$ 3,800	\$ 50,995	-6.9%
Potomac Community Resources support services to people with developmental disabilities	\$ 70,902	\$ 4,910	\$ 65,992	-6.9%
Regency Cab taxi cab services	\$ 5,000	\$ 350	\$ 4,650	-7.0%
TransCen supportive employment services	\$ 32,801	\$ 2,270	\$ 30,531	-6.9%

B. Assessment and Continuing Case Management

The Executive is recommending two specific changes in this program which provides multi-disciplinary assessments, care planning, and case management to frail seniors and adults with disabilities. This program area includes Adult Protective Services, Adult Evaluation and Review Services (AERS), and the public guardianship program. Total recommended funding is \$6.157 million with 52 workyears.

	Dollars	WY	Fund
Abolish Full Time PAA - Assessment and Continuing Case Management Services	\$ (49,800)	-1.0	General
Abolish Full Time OSC - Assessment and Continuing Case Management Services	\$ (88,500)	-1.0	General

1. Abolish Full-time Principal Administrative Aide

2. Abolish Full-time Office Services Manager

These are vacant positions and are recommended for abolishment. They provided support to the case management and guardianship programs. The work has been and will continue to be redistributed among remaining staff. **Council staff recommends approval.**

C. Assisted Living Services

The Executive is not recommending any specific changes to this program area that provides subsidies and case management to low-income seniors who live in group homes or in

adult foster care homes. Total funding for the program area is \$2.005 million and 6.7 workyears. Council staff recommends approval.

As a part of the FY10 budget actions, the Council approved both a reduction in the grant monies expected from the State for Senior Assisted Living and \$50,000 reduction in General Fund monies that are used to provide up to a \$625 per month county supplement for those in the Senior Assisted Living program. This program serves clients who live in a licensed assisted living facility of 16 beds or less, are 62 years of age or older, meet financial and physical eligibility requirements, and have a history of county residency. The average age of someone in this program is 85. The FY10 savings were projected because the State had frozen new admissions into this program. The April 2 memo from Director Ahluwalia on changes to State Aid shows only a small reduction to this grant (\$1,770) and notes that the freeze on admissions was extended to February 2010 but that new clients are now being placed. The Committee may want to have an update on this program to understand how many new people may be placed during FY11 given State funding and whether it is expected that the county supplement will continue for all eligible clients.

D. Home Care Services

The Executive is recommending a reduction of \$350,000 to this program which provides in home assistance to senior and adults with disabilities that need help with daily tasks in order to remain independent and live in the community. Total funding for the program area is \$4,327,680 and 16.4 workyears.

	Dollars	WY	Fund
Reduce Maximum Number of Hours for Home Health Care from 20 to 14 (for current clients receiving between 16 and 20 hours	\$ (350,000)	0.0	General

1. Reduce maximum number of in-home aide hours to 14 per week

Prior to FY09, the Department was able to provide in-home assistance to both those people who need assistance with daily tasks (the in-home aide program) as well as people who needed occasional help with heavy housework (chore services). As a part of the FY09 Savings Plan, the Chore Services program was eliminated. This reduction was sustained for FY10 for a savings of \$150,000 and continues in FY11. As a part of the FY09 original budget actions, the maximum number of hours for in-home aide services was reduced from 20 hours to 15 hours per week for about 120 clients. Some existing clients retained the higher hours of service. The Council added \$100,000 to the Department's budget to provide some flexibility for exceptional cases. The net reduction was \$371,960.

For FY11, the Executive is recommending that all in-home care clients be limited to a maximum of 14 hours per week. The expected savings is \$350,000. There will be an impact from this reduction, about 40 clients are receiving the maximum 20 hours per week, but the Department believes that necessary services can be provided in the 14 hours allowed. When the Committee discussed this issue in FY09 it was noted that many other jurisdictions in the area

limit service to four to 6 hours per week. The State of Maryland allows services to be provided up to a maximum of 20 hours but there is no minimum. The average in-home aide earns about \$9.50 per hour and will also be impacted by this change if they are unable to find additional hours elsewhere.

Included in this packet is testimony from the Commission on Aging (© 17-21) and the Commission on People with Disabilities (© 22-23). Both of these Commissions are requesting the Council restore \$100,000 of the FY11 reduction to all some clients with critical needs to continue to receive up to 20 hours of service.

Council staff is recommending approval of the reduction recommended by the County Executive. The Department recognizes that it is very difficult to reduce in-home aide service levels to current clients but believes that the essential needs of clients can be met with 14 hours of service. Setting the maximum at 14 hours is appropriate under State rules. There is an appeals process that clients may use.

E. Home and Community Based Waiver Services

The Executive is recommending the additional of a full-time Social Worker to this program area which coordinates the Medicaid long-term care waiver. The waiver allows the funding of services in the community in order to avoid the need for placement in a nursing home. Total funding for this program area is \$1.34 million and 12.8 workyears. This is a new program area for FY11. Staff was previously budgeted in the Senior Community Services program.

	Dollars	WY	Fund
Create a full-time Social Worker Position in Medicaid Waiver program for older adults (cost offset by reducing operating expenses)	\$ 2,000	1.0	Grant

The new position is grant funded. Department has identified operating expense savings to offset all but \$2,000 of the cost of this additional position. **Council staff recommends approval.**

F. Aging and Disability Resource Unit

The Executive is not recommending any specific changes to this program. The program has been renamed for FY11 and used to be identified as Information and Assistance. Total funding is recommended to be \$1 million and 9.7 workyears. **Council staff recommends approval.** As follow-up to the previous discussion, the Committee may be interested in understanding when someone calling MC311 would be directed to this DHHS unit for assistance and how much will be able to be handled by the HHS specialists at the call center.

G. Ombudsman Services

The Executive is recommending a reduction of \$74,900 and one Community Health Nurse in this program that investigates and resolves complaints in nursing homes and assisted living facilities.

	Dollars	WY	Fund
Abolish full-time Community Health Nurse - Ombudsman Services	\$ (74,900)	-1.0	Grant

The April memo from Director Ahluwalia notes that this reduction of State funds has occurred during FY10 and that the loss of the position is likely to impact the number of unresolved complaints and reduce the amount of volunteer training. The program handles about 300 complaints per year. The Department will make sure a nurse is available to address medical and care issues with ombudsman volunteers.

The Commission on Aging is recommending restoration of this position. The Commission notes that the county has 193 group homes and 34 nursing homes and that the current staff of 3.5 professional ombudsmen, one Program Manager, and one clerical position will not be able to address this workload. **Council staff recommends approval of the recommended reduction.**

H. Respite Care

The Executive is recommending a reduction to the Respite Care program that is a result of eliminating the contract for the respite care house. While this specific reduction is a reduction to General Fund expenditures, the April memo from Director Ahluwalia notes that the State has reduced its funding by \$51,590 during FY10 and that this reduction will carry over to FY11. Total funding for the respite care program is \$806,380 for FY11.

	Dollars	WY	Fund
Eliminate contract for respite care home due to underutilization	\$ (159,000)	0.0	General

In addition to the respite house, respite care is provided through three contracts with the ARC of Montgomery County, the largest of which funds a respite care consortium of providers. Each of these three contracts will be reduced by 7% for FY11 (about \$61,000 total).

The Council has received testimony from the ARC of Montgomery County (© 24) that highlights the overall reductions and the unmet need for respite care (the budget notes that in FY10 it is estimated that 700 requests for respite care will not be met) and provides an alternative proposal for the respite house. The ARC proposes that for about \$70,000 they could use two bedrooms in an existing group home for respite care which would reduce the cost associated with the use of a separate home. The respite would be available 7 days per week from Memorial Day to Labor Day and weekends throughout the year. DHHS has told Council staff that operationally this could work but that this alternate respite home could only serve adults

(over 18) as the full-time residents are adults. DHHS also notes that the majority of respite home requests are for adults.

Council staff understands that funds are extremely limited in this budget but notes the significant unmet need for respite care and suggests the Committee consider adding \$50,000 to the reconciliation list. This is somewhat less than requested in the public hearing testimony but should at least provide for the summer months when the demand is greatest. Council staff agrees with the department that given the fiscal situation, a program that is underutilized, no matter how beneficial the service has been, is appropriate for reduction. Council staff appreciates that the ARC has worked to identify an alternative.

I. Senior Community Services

For FY11, the Executive is recommending two specific reductions to this program area that provides a variety of services that help senior remain independent and active in the community such as legal services, senior transportation to recreations centers and to grocery shopping, and health insurance counseling. Funding of \$2.378 million and 5.6 workyears is recommended for FY11.

	Dollars	WY	Fund
Eliminate information technology grant	\$ (3,540)	0.0	Grant
Reduce Senior Bus Service to Recreation Centers, Meal Programs, and Grocery Shopping by 5 sites	\$ (165,490)	0.0	General

1. Information Technology Grant

This item reflects an adjustment to the Senior Information and Assistance Grant. \$84,230 in grant funding is expected in FY11. Council staff recommends approval.

2. Reduce Senior Bus Transportation

The Executive is recommending a reduction of \$165,490 from reducing senior transportation services. The budget would provide about \$568,000 from the General Fund and assumes \$20,000 is available in grant funding. The proposal is expected to eliminate (© 25):

The Monday route to the Damascus Center
The Monday route to the Longwood Center
The Tuesday route to the Potomac Center
The Wednesday Route to the Schweinhaut Center
One of two Wednesday routes to the Gaithersburg Center
One of two Thursday routes to Holiday Park
One of two Thursday routes to Gaithersburg
Both Friday routes to Long Branch Center
The Friday route to the Damascus Center
One of two Friday routes to the East County Center

Council staff is concern about the impacts of these reductions, but believes it is unlikely that additional funds can be added to restore all this service. **Council staff would like additional time to provide the Committee with better information on how this service reduction will be coordinated with any reductions to the community/recreation/senior centers. At this time, Council staff recommends approval of the recommended funding reduction.**

3. Other contracts impacted by the 7% reduction

The following table shows contracts in this program area that will be impacted by the overall 7% reduction to contracts. **Council staff recommends approval.**

Purpose and Vendor(s):	FY10 General Fund Contract	Reduction	FY11 Proposed Funding	% Reduction from FY10
Senior Community Programs:				
Alzheimer's Association for education and training for public and private county workplaces.	\$ 92,200	\$ 6,450	\$ 85,750	-7.0%
Interages, Inc inter-generational programming for at-risk youth	\$ 56,240	\$ 3,940	\$ 52,300	-7.0%
JESSA Medical Supply assistive devices to to increase the independence of the frail elderly	\$ 24,999	\$ 1,750	\$ 23,249	-7.0%
Jewish Community Center independence skill building for blind seniors	\$ 3,951	\$ 280	\$ 3,671	-7.1%
Jewish Council for the Aging on the job training for low income seniors	\$ 36,674	\$ 2,780	\$ 33,894	-7.6%
University of Maryland Cooperative Extension Service - counseling on insurance, prescription drugs, medical billing, etc.	\$ 100,443	\$ 7,030	\$ 93,413	-7.0%

J. Senior Nutrition Program

The Executive's budget shows two specific changes to this program in FY11. The budget indicates that this year, senior nutrition programs will serve about 5,500 seniors. Total funding for the program is \$2.337 million and 4.5 workyears.

	Dollars	WY	Fund
Increase funds for delivered meals to those with HIV/AIDS, Cancer, and other life-challenging illnesses	\$ 36,000	0.0	General
Reduce Senior Nutrition Meal Program Funds	\$ (25,000)	0.0	General

1. Increase funds for delivered meals to those with HIV/AIDS

The budget includes additional funding for this purpose. The vendor will be selected through a bid process. **Council staff recommends approval.**

2. Reduce senior nutrition meal program funds

The following budget notes a \$25,000 reduction in this program area but the 7% reduction that is being taken across all contracts results in a \$28,120 reduction to meal services and a 7% reduction to grocery delivery services. Council staff notes that it is not only unclear what the impact of the contract reductions will be but there may also be impacts as a results of any reduced hours at senior or community centers that serve as meal sites. **Council staff recommends approval.**

Purpose and Vendor(s):	FY10 General Fund Contract	Reduction	FY11 Proposed Funding	% Reduction from FY10
Senior Nutrition:				
Gaithersburg Meals on Wheels for home delivered meals	\$ 25,926	\$ 1,810	\$ 24,116	-7.0%
Gaithersburg Meals on Wheels for home delivered meals for people with disabilities under 60 years old	\$ 8,000	\$ 560	\$ 7,440	-7.0%
Jewish Social Service Agency Meals on Wheels for home delivered meals for people with disabilities under 60 years old	\$ 3,000	\$ 210	\$ 2,790	-7.0%
Meals on Wheels of Central Maryland	\$ 18,060	\$ 1,260	\$ 16,800	-7.0%
Wheaton Meals on Wheels for home delivered meals for people with disabilities under 60 years old	\$ 5,000	\$ 350	\$ 4,650	-7.0%
Nutrition Inc. congregate and home delivered meals	\$ 255,325	\$ 17,870	\$ 237,455	-7.0%
Nutrition Inc. congregate meals	\$ 36,000	\$ 2,520	\$ 33,480	-7.0%
Nutrition Inc. home delivered meals for people with disabilities under 60 years old	\$ 21,000	\$ 1,470	\$ 19,530	-7.0%
Orient Express delivered meals to the homebound	\$ 12,000	\$ 840	\$ 11,160	-7.0%
Rockville Meals on Wheels home delivered meals for people with disabilities under 60 years old	\$ 2,000	\$ 140	\$ 1,860	-7.0%
Washington D.C. Meals on Wheels home delivered meals for people with disabilities under 60 years old	\$ 15,475	\$ 1,090	\$ 14,385	-7.0%
Top Banana home delivered groceries	\$ 72,140	\$ 5,050	\$ 67,090	-7.0%

K. Service Area Administration

The Executive is not recommending any specific changes to this program that includes service wide administration. FY11 funding is \$455,750 and 2.7 workyears.

N. Miscellaneous Adjustments

	Dollars	WY	Fund
Miscellaneous Adjustments - Comm Support Network	\$ (354,460)	-0.7	General and Grant
Miscellaneous Adjustments - Assessment and Continuing Case Management Services	\$ 138,090	0.0	General and Grant
Miscellaneous Adjustments - Assisted Living Svcs	\$ 32,140	0.0	General and Grant
Miscellaneous Adjustments - Home Care Services	\$ 62,920	-0.5	General and Grant
Miscellaneous Adjustments - Home and Community Based Waiver Services	\$ 1,338,090	11.8	General and Grant
Miscellaneous Adjustments - Aging and Disability Resource Unit	\$ 5,850	-0.1	General and Grant
Miscellaneous Adjustments - Ombudsman Services	\$ 44,500	-0.2	General and Grant
Miscellaneous Adjustments - Respite Care	\$ (70,050)	0.0	General and Grant
Miscellaneous Adjustments - Senior Community Services	\$ (1,389,570)	-13.5	General and Grant
Miscellaneous Adjustments - Senior Nutrition Program	\$ 34,890	0.1	General and Grant
Miscellaneous Adjustments - Service Area Administration	\$ (31,710)	-0.1	General and Grant
NET MISCELLANEOUS ADJUSTMENTS	\$ (189,310)	\$ (3.2)	

Council staff recommends approval.

Public Health Services

FUNCTION

The functions of the Public Health Services programs are to protect and promote the health and safety of County residents. This is accomplished by monitoring health status and implementing intervention strategies to contain or prevent disease (including bio-terrorism and emerging diseases), fostering public-private partnerships, which increase access to health services, developing, and implementing programs and strategies to address health needs, providing individual and community level health education, evaluating the effectiveness of select programs and strategies, licensing and inspecting facilities, and institutions affecting the public health and safety.

PROGRAM CONTACTS

Contact Dr. Ulder Tillman of the HHS - Public Health Services at 240.777.1741 or Pooja Bharadwaja of the Office of Management and Budget at 240.777.2751 for more information regarding this service area's operating budget.

PROGRAM DESCRIPTIONS

Health Care for the Uninsured

Health Care for the Uninsured was previously titled Office of Health Partnerships and Health Planning. This program oversees the Montgomery Cares, Care for Kids, and Maternity Partnership programs. Through public-private partnerships, these programs provide health care services for low-income uninsured, children, adults, and pregnant women, using private pediatricians, a network of safety net clinics, obstetricians, and hospitals along with other health care providers. This program also provides care coordination to uninsured children and adolescents with chronic or handicapping conditions needing specialty diagnostic, medical, and surgical treatment. This program oversees primary health care services for the homeless. Health Planning and Epidemiology moved from Health Care for the Uninsured to Service Area Administration.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Montgomery Cares enrollment ¹	16,773	21,077	23,000	23,000	23,000
Number of pregnant women enrolled in the Maternity Partnership	2,372	2,375	2,136	2,136	2,136
Percentage of children, newly referred to Care for Kids, linked with a provider within 30 days of referral from the County Service Eligibility Units ²	59	34	48	48	48
Percentage of healthy birth weight babies (= or > 2,500 grams) born to pregnant women in the Maternity Partnership Program	94	95	94	94	94

¹ In FY10, funds will be redirected from supporting services to primary care, resulting in a less comprehensive package of services, but maintaining the availability of primary care services.

² A FY09 vacancy and a subsequent FY10 abolishment of a contractual client assistance worker significantly slowed down linkages to providers in FY09.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	11,874,930	15.5
Decrease Cost: Care For Kids Without Service Reduction	-80,000	0.0
Decrease Cost: Absorb Contract for Adult Services Under Montgomery Cares Program	-89,370	0.0
Decrease Cost: Abolish a Full-time Executive Administrative Aide Position	-90,070	-1.0
Decrease Cost: Absorb contract for Primary Care for Uninsured Adults under Montgomery Cares Program	-94,790	0.0
Decrease Cost: Maternity Partnership Program due to Lower Enrollment	-117,750	0.0
Reduce: Montgomery Cares Program Based on Enrollment of 23,000 Patients	-365,500	0.0
Decrease Cost: Reduce Reimbursement Rate from \$62 to \$55 per Encounter for Montgomery Cares Program	-415,800	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	2,235,500	0.5
FY11 CE Recommended	12,857,150	15.0

Notes: Miscellaneous adjustment includes the shift of 3.0 workyears to Community Health Services, 5.0 workyears to Office of the Chief Operating Officer, and 9.6 workyears here from Women's Health Services.

Communicable Disease and Epidemiology

Communicable Disease and Epidemiology was previously titled Communicable Disease, Epidemiology and Lab Services. This program involves investigations, management, and control of the spread of over 65 infectious diseases as stipulated by Maryland law, including: rabies; hepatitis A, B, and C; salmonellosis; measles; cholera; legionellosis, and lyme disease. Emerging pathogens, such

as H1N1 Influenza, are addressed with aggressive surveillance efforts and collaboration with State agencies of Agriculture, Health, and the Environment. Control measures for disease outbreaks in high-risk populations, such as long-term care facilities are implemented to prevent further spread of diseases to others. Educational programs are provided to groups who serve persons at-risk for infectious diseases (homeless shelters, nursing homes, day care centers, etc.). The program also provides vital record administration (death certificate issuance, and birth verification) Immunizations, outreach, and education are available to resident private medical providers, schools, childcare providers, and other community groups. The Refugee Health Program shifted from Tuberculosis Services to Communicable Disease and Epidemiology. This program involves screening all persons who enter the County with refugee status for communicable diseases. Refugees are medically assessed and are either treated or referred to the private sector. The Migrant Health Program is also provided in compliance with Federal laws governing migrant laborers.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,440,150	12.2
Enhance: Refugee Resettlement (MONA) Grant	125,370	0.0
Decrease Cost: Abolish a Part-time Community Health Nurse II Position	-43,340	-0.5
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	217,880	2.7
FY11 CE Recommended	1,740,060	14.4

Notes: Miscellaneous adjustment includes the shift of 2.5 workyears from Tuberculosis Services.

Community Health Services

Community Health Services provides preventative health access services to uninsured and underinsured populations, from newborns to the elderly. Services include women's health services in regional sites, and nurse case management of targeted populations such as, pregnant women, children up to two years of age, and care coordination for vulnerable clients in the Medicaid managed-care system. This program area includes the Community/Nursing Home Medical Assistance and Outreach program in addition to the regional service eligibility units, to provide a single point of entry for eligibility screening, access and assignment to Federal, State or County health programs. Other services include immunizations and conducting pregnancy testing in regional health centers. Coordination of Childhood Lead Prevention services shifted from Tuberculosis Services to Community Health Services.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	12,949,300	133.0
Reduce: Abolish a Full-time Manager III Position	-162,070	-1.0
Reduce: Abolish Two Full-time Community Health Nurse II Positions	-186,040	-2.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-1,009,040	-14.3
FY11 CE Recommended	11,592,150	115.7

Notes: Miscellaneous adjustment includes the shift of 3.0 workyears from Health Care for the Uninsured, a shift of 1.0 workyear to Dental Services, 12.0 workyears to Women's Health Services, and a lapse adjustment.

Dental Services

This program provides dental services to promote oral health. Services include teaching of preventive health practices, primary assessments, targeted dental services, and emergency services. Services are provided to income-eligible Montgomery County children, pregnant women, adults, and seniors. This program provides oral hygiene education to MCPS second grade classes. This program also includes an HIV Dental Program, which provides comprehensive oral health services to HIV-infected clients.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,977,080	14.0
Reduce: Dental Services for Approximately 430 Adults/Seniors	-100,000	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	28,040	0.6
FY11 CE Recommended	1,905,120	14.6

Notes: Miscellaneous adjustment includes the shift of 1.0 workyear from Community Health Services.

Environmental Health Regulatory Services

This program involves issuing permits for and inspection of, a variety of activities in order to protect the public health by ensuring that sanitation standards are met and maintained, and that there is minimal risk of injuries or spread of vector, food, and water borne diseases in facilities licensed by the program. This program also enforces nutritional restrictions on trans fat in foods. Food service establishments, swimming pools, health-care facilities, group homes, private educational facilities for children and adults, hotels, motels, massage establishments, and a variety of other facilities used by the public, are inspected and licensed. Inspections are conducted for compliance with health and safety standards established by the County and by State of Maryland laws and regulations.

The County's Rat Control Ordinance and smoking prohibitions and restrictions are enforced under this program. Complaints made by the public are investigated and orders for correction are issued as appropriate.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	3,104,050	29.7
Decrease Cost: West Nile Virus Surveillance	-30,000	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-93,950	-1.5
FY11 CE Recommended	2,980,100	28.2

Health Care and Group Residential Facilities

This program inspects and licenses nursing homes, domiciliary care homes (large assisted living facilities with less intensive care than nursing homes), adult day care centers, small assisted living facilities and group homes serving children, elderly, mentally ill, and developmentally disabled to ensure compliance with County, State, and Federal laws and regulations. Staff respond to complaints and provide advice and consultations to licensees to maintain high standards of care.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,350,600	10.7
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-5,450	-0.5
FY11 CE Recommended	1,345,150	10.2

Health Promotion and Prevention

This program provides a combination of planning training, consultation, coalition building, and health information to community groups to help change attitudes and behaviors related to nutrition, physical activity, and strategies to help prevent obesity, alcohol, tobacco, and other drug use. The program also administers injury prevention programs for various target groups and provides shaken baby and other family violence prevention and parenting programs for high-risk parents and providers. The program provides a health information and outreach program targeting faith-based communities to help reduce health disparities. Coordination of the Fetal Infant Mortality Board has shifted from Health Promotion and Prevention to Women's Health Services. Substance Abuse Prevention services has shifted from Health Promotion and Prevention to Juvenile Justice Services in the Children Youth and Families Service Area.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,265,340	5.7
Enhance: Childhood Injury Prevention Grant	500	0.0
Eliminate: Nutrition Risk Reduction Grant	-45,130	0.0
Decrease Cost: Abolish a Full-time Principal Administrative Aide position	-66,130	-1.0
Decrease Cost: Miscellaneous Operating Expenses	-91,600	0.0
Eliminate: G.O.S.P.E.L. Program and Absorb the Functions Under the African American Health Program	-125,050	-1.0
Reduce: Abolish a Full-time Manager III Position to 0.2 WY	-127,930	-0.8
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-623,920	-1.0
FY11 CE Recommended	186,080	1.9

Notes: Miscellaneous adjustment includes the shift of the Substance Abuse and Education Program to Juvenile Justice Services including one workyear and operating expenses.

Cancer and Tobacco Prevention

Cancer and Tobacco Prevention was previously titled Cigarette Restitution Fund Programs. Tobacco Use Prevention and Cessation Program and the Cancer Prevention, Education, Screening and Treatment Program are two major programs funded through the State Cigarette Restitution Funds. The State funding allows for administering grants to community groups for outreach, screenings, education, and treatment. Each program has established coalitions consisting of public health partners, community based organizations, hospitals, and other existing resources that work collaboratively to implement the statewide goal of early detection and elimination of cancer disparities, whether based on race, ethnicity, age or sex, as well as the establishment of tobacco-control programs.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,288,590	4.0
Decrease Cost: Miscellaneous Operating Expenses in Cancer Restitution Funds Under Cancer and Tobacco Prevention Program	-10,000	0.0

	Expenditures	WYs
Reduce: Cigarette Restitution Fund (CRF) - Tobacco, Prevention, and Education	-70,760	-1.0
Reduce: Cigarette Restitution Fund (CRF) - Cancer Prevention, Education, Screening, and Treatment	-209,070	-0.5
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-16,920	0.5
FY11 CE Recommended	981,840	3.0

Notes: Miscellaneous adjustment includes the shift of 0.5 workyear from Cancer Prevention, Education, Screening, and Treatment Grant to Tobacco, Prevention, and Education Grant.

STD/HIV Prevention and Treatment Program

The STD Program provides diagnosis and treatment to those who have contracted sexually transmitted diseases (STDs). Contacts of infected patients are confidentially notified and referred for treatment. HIV counseling and testing is provided, with referral for medical and psychosocial support services if the test is positive. The HIV program provides primary medical care through all stages of HIV/AIDS, medication, as well as a broad spectrum of case management support services. Other services include home/hospice care, coordination of a regional HIV dental clinic, and housing services through the Housing Opportunities for People with AIDS (HOPWA).

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
New cases of Chlamydia per 100,000 population among County residents (15-24) ¹	930	1,052	1,115	NA	NA

¹ Data is for the calendar year in which the fiscal year began. This measure is one of the four age cohort components. Projections are not made due to uncertainty as to when case numbers will fall.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	6,257,120	43.1
Enhance: Ryan White I - Emergency AIDS Services Grant	456,600	0.0
Enhance: Ryan White II - Consortia Services	121,990	0.0
Enhance: HOPWA - Housing Opportunities for People With AIDS Grant	73,080	0.0
Add: HIV Minority Outreach Activities	69,840	0.0
Decrease Cost: Abolish a Full-time Principal Administrative Aide Position	-46,990	-1.0
Eliminate: AIDS Diagnostic and Evaluation Grant	-153,510	-1.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-72,720	-0.3
FY11 CE Recommended	6,705,410	40.8

Notes: Miscellaneous adjustment includes the shift of 1.0 workyear from AIDS Diagnostic and Evaluation Grant to Ryan White I - Emergency AIDS Services Grant.

School Health Services

This program provides health services to the students in Montgomery County Public Schools. These services include: first aid and emergency care; health appraisal; medication and treatment administration; health counseling, consultation and education; referral for medical, psychological and behavioral problems; case management for students with acute and chronic health conditions, and pregnant and parenting teens. Hearing and vision, screenings are provided to students in 1st and 8th grade, new entrants, and by teacher referral. Immunizations and tuberculosis screenings are administered at the School Health Services Centers, primarily to international students enrolling in MCPS. Primary health care, provided by nurse practitioners and physicians, is provided, in addition to routine health services to students enrolled at the County's four School Based Health Centers and one High School Wellness Center.

Head Start-Health Services is a collaborative effort of HHS, Office of Community Affairs, School Health Services, Montgomery County Public Schools (MCPS), and contracted community-based child care centers to provide comprehensive pre-kindergarten services to Federally eligible three and four year old children. School Health Services provides a full range of health, dental, and social services to the children and their families.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	21,255,590	240.1
Add: Opening Up W.I.D.E (Wellness Initiative and Dental Enhancement)	89,640	0.0
Increase Cost: School Based Health and Linkages to Learning Centers - Operating Budget Impact (CIP)	15,000	0.0
Decrease Cost: School Based Health Center	-15,220	0.0
Decrease Cost: School Based Health Centers Contractual Medical Services Based on Historical Spending	-20,000	0.0
Reduce: Abolish a Full-time and a Part-time Community Health Nurse II Positions	-176,930	-1.6
Reduce: School Health Room Aide I and II Positions from .73 Workyear to .62 Workyear	-1,541,340	-22.2

	Expenditures	WYs
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-409,340	-9.4
FY11 CE Recommended	19,197,400	206.9

Notes: Miscellaneous adjustment includes the annualization of a Community Health Nurse, and a lapse adjustment.

Tuberculosis Services

This program involves testing persons for exposure to Tuberculosis (TB), treating active cases, identifying persons at risk of developing TB, performing contact studies to determine who may have been exposed to an infectious person, and the supervision of therapy. Each patient is diagnosed, has a treatment plan developed, and has supervised medication therapy. Special programs are provided to high-risk populations, such as the homeless, addicted persons, incarcerated persons, and persons living in high-density areas of foreign-born populations. The Refugee Health Program has shifted from Tuberculosis Services to Communicable Disease & Epidemiology, and coordination of Childhood Lead Prevention services has shifted from Tuberculosis Services to Community Health Services.

The Refugee Health Program, organizationally placed in TB control, involves screening all persons who enter the County with refugee status for communicable diseases. Refugees are medically assessed and are either treated or referred to the private sector. The Migrant Health Program is also provided in compliance with Federal laws governing migrant laborers.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Percentage of clients with active infectious tuberculosis who receive Directly Observed Therapy and successfully complete the treatment regimen ¹	99	99	95	95	95

¹ Tuberculosis data are for the calendar year in which the fiscal year began and differs from previously-published results due to use of a more accurate number in the denominator.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	2,145,970	19.8
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-320,210	-2.9
FY11 CE Recommended	1,825,760	16.9

Notes: Miscellaneous adjustment includes the shift of 2.5 workyears to Communicable Disease and Epidemiology.

Women's Health Services

This program provides services for women, including clinical prenatal health care and family planning services through public/private partnerships. Referral services are provided for individuals with specific health issues (i.e., sexually transmitted diseases). Screening for early detection of breast cancer and cervical cancer including gynecological examinations, clinical breast examinations, mammograms, ultrasounds of the breast and related case-management services are offered through the Women's Cancer Control Program (WCCP) to eligible women aged forty years and older. Nursing case-management services are provided for pregnant women, high-risk infants, and children birth to two years. Coordination of the Fetal Infant Mortality Board has shifted from Health Promotion and Prevention to Women's Health Services.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	4,236,080	16.2
Enhance: Center for Disease Control (CDC) Early Detection and Control Grant - Breast and Cervical Cancer	120,000	0.0
Reduce: Improved Pregnancy Outcome Grant	-20,000	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-1,524,820	4.2
FY11 CE Recommended	2,811,260	20.4

Notes: Miscellaneous adjustments include the shift of Project Deliver and Maternity Partnership Programs to Health Care for the Uninsured (9.6 workyears). In addition, the Dedicated Administrative Care Coordination Team (5.0 workyears) and grants shifted from Community Health Services (7.0 workyears) and Health Care for the Uninsured (1.3 workyears) as well as a lapse adjustment.

Public Health Emergency Preparedness & Response

This program is responsible for the planning and readiness to identify a bio-terrorism threat and to respond immediately if a disaster occurs. Planning efforts are in collaboration with the County Emergency Management Group, the Office of Emergency Management and Homeland Security, the Departments of Fire and Rescue Service, and Police, the Volunteer Center, hospitals and a variety of other County, State, Regional, and Federal agencies. Efforts are targeted at training and staff development; communication strategies; emergency response drills; partnerships; resources and equipment; the establishment of disease surveillance systems; mass immunization/ medication dispensing sites, and readiness.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	2,050,210	11.2
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-3,210	-0.2
FY11 CE Recommended	2,047,000	11.0

Service Area Administration

This program area provides leadership and direction for the administration of Public Health Services. Service Area administration also includes Health Planning and Epidemiology (previously included in the former Office of Health Partnerships and Health Planning), the Community Health Improvement Process and Special Projects, as well as oversight for medical quality assurance, contract, grant and partnership development.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,293,490	6.6
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	125,530	3.7
FY11 CE Recommended	1,419,020	10.3

Notes: Miscellaneous adjustment includes the shift of 0.5 workyear from Environmental Health Regulatory Services, and 5.0 workyears from Health Care for the Uninsured.

PROGRAM SUMMARY

Program Name	FY10 Approved		FY11 Recommended	
	Expenditures	WYs	Expenditures	WYs
Health Care for the Uninsured	11,874,930	15.5	12,857,150	15.0
Communicable Disease and Epidemiology	1,440,150	12.2	1,740,060	14.4
Community Health Services	12,949,300	133.0	11,592,150	115.7
Dental Services	1,977,080	14.0	1,905,120	14.6
Environmental Health Regulatory Services	3,104,050	29.7	2,980,100	28.2
Health Care and Group Residential Facilities	1,350,600	10.7	1,345,150	10.2
Health Promotion and Prevention	1,265,340	5.7	186,080	1.9
Cancer and Tobacco Prevention	1,288,590	4.0	981,840	3.0
STD/HIV Prevention and Treatment Program	6,257,120	43.1	6,705,410	40.8
School Health Services	21,255,590	240.1	19,197,400	206.9
Tuberculosis Services	2,145,970	19.8	1,825,760	16.9
Women's Health Services	4,236,080	16.2	2,811,260	20.4
Public Health Emergency Preparedness & Response	2,050,210	11.2	2,047,000	11.0
Service Area Administration	1,293,490	6.6	1,419,020	10.3
Total	72,488,500	561.8	67,593,500	509.3

Aging and Disability Services

FUNCTION

The staff of Aging and Disability Services shares the Montgomery County vision, where seniors, persons with disabilities, and their families are fully participating members of our Community. The mission of this service area is to affirm the dignity and value of seniors, persons with disabilities, and their families by offering a wide range of information, home and community-based support services, protections, and opportunities, which promote choice, independence, and inclusion.

PROGRAM CONTACTS

Contact Jay Kenney of the HHS - Aging and Disability Services at 240.777.4565 or Trudy-Ann Durace of the Office of Management and Budget at 240.777.2778 for more information regarding this service area's operating budget.

PROGRAM DESCRIPTIONS

Community Support Network for People with Disabilities

This program area provides supported employment for adults with developmental disabilities; service coordination; services for people with visual and hearing impairments and physical disabilities; summer camp for children with multiple disabilities; crisis management and intervention; school-to-work transition assistance, and the Home and Community Based Services Waiver for Children with Autism Spectrum Disorder (Autism Waiver). This program area also provides financial assistance to State-funded providers who serve adults with developmental disabilities.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Percentage of adults with developmental disabilities provided community living services who remain at the same level of independence after receiving supportive services	97	95	95	95	95

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	16,453,160	43.4
Shift: A Program Manager I Position from the Individual Support Services Grant to the Service Coordination Grant	19,750	1.0
Shift: A Program Manager I Position from the Individual Support Services Grant	-79,310	-1.0
Reduce: Individual Support Services (ISS) and Family Support Services (FSS) in the County Funded Supplement to Providers of Services to Developmentally Disabled Individuals (DD Supplement)	-253,240	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-354,460	-0.7
FY11 CE Recommended	15,785,900	42.7

Assessment and Continuing Case Mgmt Svcs

This program area provides multi-disciplinary assessments, care planning, and case management services to frail seniors and adults with disabilities to remedy and prevent abuse, neglect, self-neglect, exploitation, or inappropriate institutionalization. Services include Adult Protective Services, Adult Evaluation and Review Services (AERS), Statewide Evaluation and Planning Services, Social Services to Adults, and the Public Guardianship Program.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Number on Social Services to Adults (SSTA) waiting list ¹	284	300	200	225	250

¹ The SSTA waiting list dropped in January 2010 due to a thorough review of all individuals on the wait list. A large number of individuals were removed because services were no longer needed.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	6,157,480	54.2
Decrease Cost: Abolish a Full-time Principal Administrative Aide Position	-49,800	-1.0
Decrease Cost: Abolish a Full-time Office Services Coordinator Position	-88,500	-1.0

	Expenditures	WYs
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	138,090	-0.2
FY11 CE Recommended	6,157,270	52.0

Assisted Living Services

This program area provides subsidies and case management for low-income seniors who live in group homes for the frail elderly and adult foster care homes for frail seniors and adults with disabilities.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,972,680	6.8
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	32,140	-0.1
FY11 CE Recommended	2,004,820	6.7

Home Care Services

Home Care Services was previously titled In-Home Aide Services. This program area provides personal care assistance to seniors and eligible adults with disabilities who are unable to manage independently due to physical and/or mental impairments. In-home aide services prevent abuse, neglect, and exploitation of vulnerable adults, and enhance overall quality of life by providing personal care, chore assistance, therapeutic support, self-care education, and escorted transportation.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Number of clients served annually	489	473	469	473	473
Percentage of clients with no unmet personal care needs	96	95	95	95	95

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	4,614,760	16.9
Reduce: Home Care Services Personal Care Hours from 20 to 14 Hours Per Week, Per Client for Clients Receiving 16 to 20 Hours Per Week	-350,000	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	62,920	-0.5
FY11 CE Recommended	4,327,680	16.4

Home and Community Based Waiver Services

Home and Community Based Waiver Services was previously budgeted in Senior Community Services program. This program area administers and operates the Home and Community Based Waiver for Older Adults (Medicaid Long-Term Care Waiver) that provides a continuum of services designed to allow frail seniors to live in the community, rather than in nursing homes.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	0	0.0
Enhance: Shift Operating Expenses to Personnel Costs and Create a Full-time Social Worker IV Position in Medicaid Waiver for Older Adults Program	2,000	1.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	1,338,090	11.8
FY11 CE Recommended	1,340,090	12.8

Notes: Miscellaneous adjustment includes the shift of the Home and Community Based Waiver from Senior Community Services to the newly created program.

Aging and Disability Resource Unit

Aging and Disability Resource Unit was previously titled Information and Assistance. This program area assists seniors, persons with disabilities, and their families, in defining service needs, locating required services, and facilitating the application process to access services.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	994,490	9.8

	Expenditures	WYs
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	5,850	-0.1
FY11 CE Recommended	1,000,340	9.7

Ombudsman Services

This program area investigates and resolves complaints in nursing homes and assisted living facilities for seniors and people with disabilities made by residents, staff, and family members.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	663,680	6.3
Reduce: The Senior Ombudsman Grant and Abolish a Full-time Community Health Nurse II Position	-74,920	-1.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	44,500	-0.2
FY11 CE Recommended	633,260	5.1

Respite Care

This program area provides temporary, occasional care of frail seniors, adults and children with disabilities, and children with severe behaviors and/or medical issues to give relief to families and other primary caregivers.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Number of unmet requests for service in Respite Care ¹	430	428	700	750	800
Percentage of customers with disabilities that remain in the community	85	90	90	90	90

¹ Estimated and projected increase is reflective of macro changes influencing demand in the community and only minimally linked to budget cuts. Greater awareness of respite services, along with growing populations of families in need, is contributing to growth in gap between demand and capacity to serve.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	1,035,430	0.0
Decrease Cost: Eliminate Respite Home Contract Due to Underutilization	-159,000	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-70,050	0.0
FY11 CE Recommended	806,380	0.0

Notes: Miscellaneous adjustment includes the impact of department-wide contract reductions.

Senior Community Services

This program area provides funds for services that help seniors to remain independent in the Community including: legal services; representative payee services; health insurance counseling; "visitor" services; grocery shopping; transportation to senior centers; subsidized employment, and socialization for seniors with visual impairments. Home and community based waiver services for older adults are now budgeted in the newly created Home and Community Based Waiver Program.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	3,936,280	19.1
Eliminate: The Information Technology (IT) Grant	-3,540	0.0
Reduce: Bus Service for Seniors to Recreation Programming, Grocery Meals and Grocery Shopping (by 5 shopping sites, from 16 to 11)	-165,490	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-1,389,570	-13.5
FY11 CE Recommended	2,377,680	5.6

Notes: Miscellaneous adjustment includes the shift of the Home and Community Based Waiver from Senior Community Services to the newly created program.

Senior Nutrition Program

Senior Nutrition Program was previously titled Senior Food Program. This program area provides lunches to seniors at sites around the County and provides home-delivered meals, nutrition education, and physical fitness activities. It is administered in cooperation with a variety of public, private, and nonprofit organizations.

Program Performance Measures	Actual FY08	Actual FY09	Estimated FY10	Target FY11	Target FY12
Number of unduplicated customers served in Senior Food Program ¹	5,237	5,603	5,500	5,300	5,300

¹ Decline attributable to increased costs for meals.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	2,291,020	4.4
Enhance: Increased Senior Nutrition Meals for those Affected by HIV/AIDs, Cancer, and Other Life-Challenging Illnesses	36,000	0.0
Reduce: Senior Nutrition Meal Program Funds	-25,000	0.0
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	34,890	0.1
FY11 CE Recommended	2,336,910	4.5

Service Area Administration

This program area provides leadership and direction for the administration of Aging and Disability Services.

FY11 Recommended Changes	Expenditures	WYs
FY10 Approved	487,460	2.8
Miscellaneous adjustments, including furloughs, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting more than one program	-31,710	-0.1
FY11 CE Recommended	455,750	2.7

PROGRAM SUMMARY

Program Name	FY10 Approved Expenditures	WYs	FY11 Recommended Expenditures	WYs
Community Support Network for People with Disabilities	16,453,160	43.4	15,785,900	42.7
Assessment and Continuing Case Mgmt Svcs	6,157,480	54.2	6,157,270	52.0
Assisted Living Services	1,972,680	6.8	2,004,820	6.7
Home Care Services	4,614,760	16.9	4,327,680	16.4
Home and Community Based Waiver Services	0	0.0	1,340,090	12.8
Aging and Disability Resource Unit	994,490	9.8	1,000,340	9.7
Ombudsman Services	663,680	6.3	633,260	5.1
Respite Care	1,035,430	0.0	806,380	0.0
Senior Community Services	3,936,280	19.1	2,377,680	5.6
Senior Nutrition Program	2,291,020	4.4	2,336,910	4.5
Service Area Administration	487,460	2.8	455,750	2.7
Total	38,606,440	163.7	37,226,080	158.2

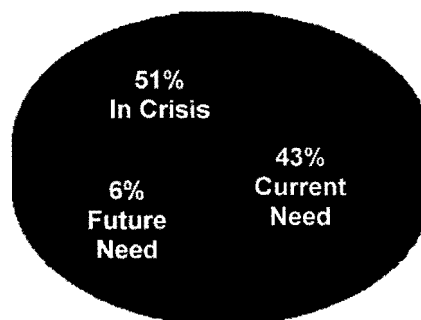
10

DEVELOPMENTAL DISABILITIES & MARYLAND MEDICAID WAIVERS

Developmental Disabilities Administration (DDA) Community Services Waiting List

As of June, 2009, there are **19,016** individuals waiting for one of three basic services (residential, day and support services). **12,603** of those individuals have never received services. The number of people on the Waiting List for Community Services grew by **992** children and adults between July, 2008, and June, 2009. From the 19,016 individuals requesting services:

- 94% of those individuals need services now
- 51% of those individuals are in crisis
- 43% of those individuals have a current need
- 6% of those individuals have a future need



DDA Community Services Waiting List
19,016 Individuals On The Waiting List



Thousands of families have already waited well over a decade for needed services and supports, and many caregivers are elderly. Families worry how much longer they can hold on. The number of people on the Community Services Waiting List has grown 96% between January 2004 and June 2009. From FY 2003 - FY 2010, there has been no substantial new funding for people on the DDA Community Services Waiting List, with the exception of funding for transitioning youth. As a result, the Waiting List has grown from 8,000 to over 19,000 children and adults.

Source: Developmental Disabilities Coalition

Maryland State Medicaid Waiver Waiting Lists

Waiver	March 2008	September 2009
Older Adult	11,314 - State 464 from Montgomery County	14,793 - State 1,330 from Montgomery County
Living At Home Community Choice	1,937 - State 45 from Montgomery County	2,776 - State 239 from Montgomery County
Autism	2,364 - State 45 from Montgomery County	3,065 - State 616 from Montgomery County
Developmental Disabilities	18,024 - State 2,840 from Montgomery County	19,016 - State 2,733 from Montgomery County

Source: Department of Health and Mental Hygiene

Developmental Disabilities Services: How Maryland Rates

Maryland ranks **43rd** in terms of spending on developmental disabilities services. Only eight states rank lower: Alabama, Colorado, Florida, Georgia, Kentucky, Nevada, Texas and Virginia. Maryland devotes **21% less** resources for community services than the average state and has one of the lowest Medicaid eligibility income limits in the country.

Source: Developmental Disabilities Coalition

Community Support Network

The Community Support Network (CSN) is a unit within the Department of Health and Human Services, Aging and Disability Services that provides services and support to children and adults with developmental disabilities ages 3 years through adulthood. CSN provides individuals with supports that enable them to fully participate in all aspects of community life by assisting them in making choices, securing natural supports and services. In addition, CSN provides community education through quarterly newsletters, educational seminars and resource fairs. To learn more about their programs and services go to www.montgomerycountymd.gov/ddcsn.

Montgomery County Infants & Toddlers Program

The Montgomery County Department of Health and Human Services administers the Infant and Toddlers Program, which provides early intervention services to families with children, birth to 3 years old, who have or are at risk of having developmental delays. Information reflects the number of children receiving early intervention services annually for FY2008.

Total Served in FY08	3,825
New Referrals	2,252

Source: Montgomery County Infants and Toddlers Program

WHO HAS A DISABILITY IN MONTGOMERY COUNTY, MD? AN OVERVIEW

The U.S. Census Bureau Census, 2000, estimated that there were 186,580 persons living in Montgomery County with a disability. Nationally, it is estimated people with disabilities make up 19.8% of the total population. According to a 2008 American Community Survey conducted by the U.S. Census Bureau, 12.1% of Americans self-reported as having a disability. These figures excluded individuals who reside in nursing homes or other institutions. The Census Bureau defines disability as a long-lasting sensory, physical, mental, or emotional condition or conditions that make it difficult for a person to do functional or participatory activities such as seeing, hearing, walking, climbing stairs, learning, remembering, concentrating, dressing, bathing, going outside the home, or working at a job.

Poverty, Unemployment & Disability Data Summary - Federal, State, Local

- In September 2009, the U.S. Department of Labor reported that the percentage of people with disabilities in the labor force was 22 compared with 70.5 for persons with no disability. The unemployment rate for those with disabilities was 16.2 percent, compared with 9.2 percent for persons with no disability, not seasonally adjusted.
- In October 2009, the Maryland Department of Disabilities reports that in Maryland approximately 850,000 individuals or 18% of the total population are classified as disabled, according to the 2000 Census. Unemployment for people with disabilities is approximately 60%.
- Among all adults age 21+, people with disabilities are almost 3 times more likely to be below the Federal Poverty Level (11.4% vs. 3.6%). In Montgomery County, 31% of working age adults (ages 18 - 54) with disabilities report that they are unemployed.

The discrepancy between data sources has to do with: a) definition of "unemployed" and b) age groups. Unemployed for Dept. of Labor statistics is defined in terms of those who are actively pursuing work. If someone is not attempting to work (i.e., voluntarily retired or infant/child), or has given up looking for work or are not legitimate candidates for work, then they do not show up in the percentages.

Social Security Recipients (SSI)

As of December, 2008, there are **12,283** people receiving Supplemental Security Income (SSI) in Montgomery County.

People under 18	1,063
People 18 - 64	4,553
People 65 or older	6,667
Total	12,283
Social Security Insurance recipients also receiving Social Security Disability Insurance (SSDI)	3,062
Total Amount of Payments	\$5,781,000

Source: Social Security Administration, 2008

2008 Disability Characteristics - Montgomery County

Subject	Total
Population under 5 years	66,211
With a disability	109
Population 5 to 17 years	162,246
With a disability	5,997
With a hearing difficulty	1,057
With a vision difficulty	764
With a cognitive difficulty	4,505
With an ambulatory difficulty	779
With a self-care difficulty	1,588
Population 18 to 64 years	598,557
With a disability	30,135
With a hearing difficulty	7,420
With a vision difficulty	4,244
With a cognitive difficulty	11,941
With an ambulatory difficulty	12,659
With a self-care difficulty	5,746
With an independent living difficulty	9,766
Population 65 years and over	114,056
With a disability	32,389
With a hearing difficulty	13,041
With a vision difficulty	7,220
With a cognitive difficulty	6,958
With an ambulatory difficulty	19,753
With a self-care difficulty	7,920
With an independent living difficulty	16,230
Total Population With A Disability	68,630

Source: U.S. Census Bureau, American Community Survey, 2008

12

MONTGOMERY COUNTY PUBLIC SCHOOLS SPECIAL EDUCATION

Number of Montgomery County Public School Students with Disabilities Ages 3 - 21 Receiving Special Education Services

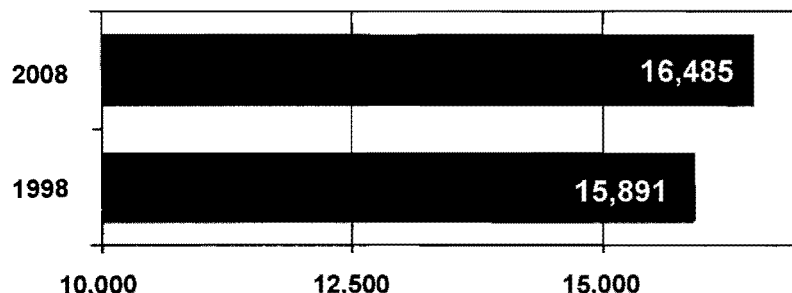
As of Oct. 31st, 2008, there were **16,485** students with disabilities enrolled in Special Education. This population makes up **11.8%** of the County's total school enrollment of 139,282 students.

Disability Type	# of Students 2007	# of Students 2008	% Between 2007 and 2008
Autism	943	1,308	+ 39%
Deaf	119	110	- 7%
Deaf-Blind	1	2	+ 100%
Developmental Delay	800	1,197	+ 49%
Emotional Disturbance	1,034	635	- 38%
Hearing Impairment	121	152	+ 26%
Mental Retardation	647	649	+ 0.3%
Multiple Disabilities	445	220	- 51%
Orthopedic Impairment	78	62	- 20%
Other Health Impairment	2,092	2,593	+ 24%
Specific Learning Disability	6,094	5,615	- 8%
Speech and Language Impairment	5,213	3,838	- 26%
Traumatic Brain Injury	46	31	- 33%
Visual Impairment	67	73	+ 9%
Total	17,700	16,485	

Source: Maryland State Department of Education - Special Education/Early Intervention Services Census Data 3/2009

Montgomery County School Enrollment - Special Education Ages 3 to 21

Special Education enrollment has increased by 594 students over the last ten years.



Source: Maryland State Department of Education - Special Education/Early Intervention Services Census Data 3/2009

Students with Disabilities By Race Compared with General Education Students by Race - Ages 3 to 21

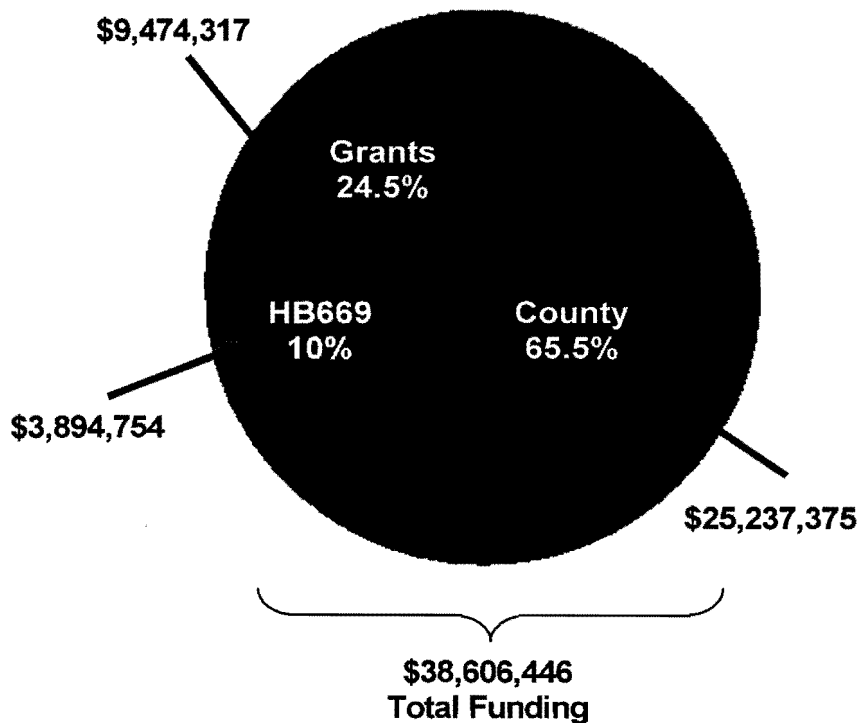
SWD = Students with Disabilities / GE = General Education

	Grand Total	American Indian/ Alaskan Native		Asian/Pacific Islander		African American		White		Hispanic	
		Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent
SWD	16,485	48	0.3%	1,293	7.8%	4,720	28.6%	6,494	39.4%	3,930	23.8%
GE	139,282	401	0.3%	21,549	15.5%	32,172	23.1%	54,413	39.1%	30,747	22.1%

Source: Maryland State Department of Education - Special Education/Early Intervention Services Census Data 3/2009

STATUS OF FY10 DHHS AGING AND DISABILITY SERVICES FUNDING

Program Area	Total Funding	From County	From HB669	From Grants
Service Area Administration	\$487,463	\$378,995	\$108,468	—
Community Support Network for People with Disabilities	\$16,453,163	\$11,476,588	\$5,775	\$4,970,800
Information and Assistance	\$994,491	\$375,302	\$75,810	\$543,380
Senior Community Services	\$3,936,279	\$2,925,232	—	\$1,011,047
Senior Food Program	\$2,291,021	\$689,925	—	\$1,601,097
Assessment and Continuing Case Services	\$6,157,478	\$3,416,466	\$2,019,992	\$721,020
Respite Care	\$1,035,430	\$823,589	\$211,841	—
In Home Aide Services	\$4,614,761	\$3,583,223	\$1,031,538	—
Assisted Living Services	\$1,972,684	\$1,256,607	\$441,330	\$274,747
Ombudsman Services	\$663,675	\$311,449	—	\$352,226
Grand Total	\$38,606,446	\$25,237,375	\$3,894,754	\$9,474,317



14

Montgomery County InterACC/DD

(Jubilee Assn) 10408 Montgomery Ave. Kensington, Md. 20895

Voice 301-949-8628, Fax 301-949-4628

Co-Chairs; Tim Wiens (twiens@Jubileemd.org) & Karen Lee (klee@seeconline.org)

Testimony before the Montgomery County Council
On the County Executive's Proposed FY11 Operating Budget
April 7, 2010

Agencies providing residential, day and support services for adults who have developmental disabilities in Montgomery County took a 7% cut in the County Executive's proposed FY11 budget. What does this look like and what does it mean to the 25 agencies that provide services to this population in Montgomery County?

- The DD Supplement/Match which is designed to pay a living wage for our direct service employees was cut by about \$580,000. This is on top of a Maryland State Developmental Disabilities Administration (DDA) cut of 2% in FY10 which cost our Montgomery County Agencies an estimated \$1,847,041. All DDA funded agencies are paid for service based on a rate system, so that we all get the same revenue per client, regardless of agency size.
 - Our direct service employees start at an average wage of \$9.50 to \$11. an hour and make an average of about \$12 an hour. The State of Maryland gives us \$8.97 in the rate they pay us.
 - Our agencies have almost all frozen employee salaries.
 - We have to pass onto to our employees increases in health care
 - We are increasing our employees work load.
 - We continue to cut administrative positions and supports.
- Each year more people come into our services. Since there is not additional funding in the proposed budget to pay for an expansion of services, the result means that the cuts per person served are more than 7%.
 - Based on estimates of expansion that has occurred in FY10 and will occur in FY11, the County would normally be budgeting about \$300,000 for the annualization of expansion that occurred in FY10 (less than a full year of services) and an average of 6 months of services to an additional 97 people to be served in FY11 for an additional \$300,000.
 - We are willing to accept the 7% cut, because we realize the difficult situation that the County is in and we feel that we need to bear the pain along with everyone else.
 - We are not willing to accept a 14% cut to our services, which is what this would result in. We respectfully request that you include the \$600,000 for the annualization of last year's new services and for coverage of services to new clients in FY11.
- We have no ability to reduce our services. We can not increase class size we can not decrease the number of people we serve. We have regulatory requirements to provide day, employment or residential services. We are the last stop, there is nothing after us or beyond us.

Abilities Network/EFCR, The Arc of Montgomery County, CALMRA, CHI Centers, Community Support Services, Inc., Full Citizenship, CSAAC, Head Injury Rehab and Referral, Jewish Foundation for Group Homes, J.P. Kennedy Institute, Jubilee Assn., MedSource, R.O.I., Secure Care, SEEC, TransCen, The Rock Creek Foundation, Treatment and Learning Centers and other providers and government agencies serving individuals with developmental disabilities.

Montgomery County InterACC/DD

(Jubilee Assn) 10408 Montgomery Ave. Kensington, Md. 20895

Voice 301-949-8628, Fax 301-949-4628

Co-Chairs; Tim Wiens (twiens@Jubileemd.org) & Karen Lee (klee@seeonline.org)

- These cuts will affect the quality of our services.
 - The people we serve are more at risk.
 - The values that our services are built on, values of honoring choice and control over services is threatened, because agencies have to make financial decisions that sometime undermine those values.
 - In the past two years, we have seen agencies struggle and fail for both programmatic and financial reasons and I expect we will see more of that.
- In addition to the DD Supplement/Match other contracts that our agencies have to do more specialized services have been cut 7%. Respite services provided by the Arc of Montgomery County will be drastically reduced. Some mitigation of these cut should be considered. Other specialized day and employment services and children's services have been cut 7%.

Tim Wiens, Executive Director
Jubilee Association of Maryland and
Co-Chair Inter ACC/DD

Abilities Network/EFCR, The Arc of Montgomery County, CALMRA, CHI Centers, Community Support Services, Inc., Full Citizenship, CSAAC, Head Injury Rehab and Referral, Jewish Foundation for Group Homes, J.P. Kennedy Institute, Jubilee Assn., MedSource, R.O.I., Secure Care, SEEC, TransCen, The Rock Creek Foundation, Treatment and Learning Centers and other providers and government agencies serving individuals with developmental disabilities.

16



COMMISSION ON AGING

BUDGET PRIORITIES FY11 – COUNTY COUNCIL TESTIMONY

Good Evening,

My name is Elaine Binder, Chair of the Commission on Aging. Thank you for the opportunity to meet with you today.

The Commission on Aging (COA) advises the County Executive, County Council and the Departments of the County, State and federal governments on issues related to seniors residing in Montgomery County. Additionally, the COA is the advisory body to the Area Agency on Aging, as required under the Federal Older Americans Act. Consistent with our emphasis on all aspects of senior concerns, we have liaison relationships with the Montgomery County Departments of Recreation, Transportation, Libraries, Fire and Rescue, and the Housing Opportunities Commission, as well as the Commission on Health and the Vital Living Committee.

The Commission believes it is critical to ensure that the quality of life of older adults is such that they are able to live with dignity, independence, and respect. Our concern is for both the vulnerable and the vital older adult. We actively monitor and support those programs and services that allow vulnerable, needy older adults to live in healthy and safe environments. In addition, the Commission is committed to the continuation of programs that enable the more than 80% of seniors who are healthy and active to be engaged in the civic and cultural life of the County. The Commission strives to assure that Montgomery County develops and implements programs and services that reflect the changing needs of seniors. We respond creatively to the desire of active adults to *age in place* in our community, with ready access to recreation, life-long learning, transportation, affordable housing, employment, and meaningful volunteer opportunities. In essence our vision is that Montgomery County is the “community of choice for mature adults”

17

While we recognize that budgets are related to specific programs, we want to focus attention on the interconnected nature of programs and the total impact of cuts in individual programs on the lives of a single older adult. For example, reducing the hours of Home Health services and reducing Respite Care which assists both the individual and his/her caregiver can lead to the inability of this senior to remain at home – to *age in place*. The alternative may be placement in assisted living or nursing homes, where cost is significantly higher and care can be compromised due to lack of Ombudsman oversight.

Isolated older adults are more vulnerable to physical and mental deterioration, which limits their ability to age well in our community. Reducing transportation of an able senior to a Senior Center where she/he can engage in both physically and mentally stimulating programs and enjoy a healthy congregate meal leads to a socially isolating life, where even transportation for grocery shopping may not be available. Another example of the potential for social isolation is the combination of reducing public transportation, eliminating access to volunteer programs and closing or reducing library hours for the more vital senior.

The Commission believes in the cost effectiveness of programs that prevent such decline in the quality of life for seniors. Enabling older adults to live safely and healthily in their homes for as long as possible reduces the need for expensive treatment and care. While we are in the midst of a difficult economic situation, we must not lose sight of the long-term impact of shortsighted budget cutting. We must maintain core programs and the knowledge base of vital staff so that we can more easily rebuild once more resources are available.

Budget Priorities FY11

The Commission supports the Recreation Department, whose programs are of great importance to the life and well being of seniors in our community.

Furthermore, the Commission is extremely concerned about the impact of proposed reductions in the Library budget, elimination of bus routes, and the virtual elimination of the Volunteer Center.

However, in this economic environment the Commission must focus attention and maintain its unqualified support for the critical programs of the Department of Health and Human Services (DHHS) which constitute the core safety net that sustains the vulnerable and needy seniors in our community. In this difficult period of budget crisis and spiraling costs for goods and services, it is essential that existing programs for the most vulnerable in our community be maintained at

current levels and, if reductions are absolutely necessary, that they are accomplished sparingly.

Our budget priorities are:

In-Home Care Program: Restore \$100,000 in the In-Home Care Program.

Restoring the \$100,000 to the In-Home Care Program would allow for the provision of more than 14 hours per week, on a case-by-case basis after an updated evaluation, for those 120 identified persons who would be adversely affected by the proposed reduction in hours per week from 20 to a maximum of 14.

This care would enable those seniors who are amongst the most frail and frequently have no other support mechanisms to remain at home safely rather than move to assisted living or nursing homes. This is actually a cost-savings measure. Comparing the savings derived from providing for these seniors at home with the expense of any single individual's institutional care clearly demonstrates the cost-effectiveness of this effort.

Transportation to senior centers and grocery shopping: Restore \$165,490 in the Department of Health and Human Services

The Commission supports restoring \$165,490 for transportation to senior centers and grocery shopping. Eleven (11) routes are under consideration for elimination to senior centers and community centers and five (5) routes are being considered for elimination of grocery shopping.

Given the demographics of a growing senior population, the recreational needs of seniors are currently at significant levels and will grow exponentially in the years ahead. The need for seniors to remain engaged in the community and avoid isolation is paramount to their health and ultimately, their ability to remain independent. By continuing funding for transportation to senior centers the County will enable these seniors to participate more fully and actively in social and physical fitness activities that are vital to their physical and mental health.

Even the physical act of grocery shopping enables seniors to assume some control over their lives as they age in place by directly shopping for groceries without reliance on others. In addition, this contributes to their having a "social experience" and remaining engaged on a consistent basis.

Senior Nutrition Services: Restore Senior Nutrition funds for congregate meals at \$25,000.

The Commission supports the restoration of \$25,000 to the Senior Nutrition Program for congregate meals. Doing so will provide the equivalent of 4,160 meals for congregate sites. The reduction will be spread out across the entire congregate meal program. Moreover, the senior nutrition program provides vital nutritional benefits and also counteracts the social and language isolation of seniors. Currently, 71% of congregate meal participants are from minority groups and many of them have limited English proficiency. Thus, in addition to its nutritional elements, this program contributes positively to the mental health and well being of seniors experiencing depression and loneliness.

Long Term Care Ombudsman Program: Restore funding of a full-time Nurse position for \$74,920 lost due to State grant funding reductions in FY10 that necessitated the elimination of that position.

Montgomery County's Long Term Ombudsman Program experienced the elimination of one full-time Community Health Nurse II position in October 2009. The program staff now consists of 3.5 professional ombudsmen, one Program Manager II, and one clerical position. The State of Maryland Long Term Ombudsman Program requires that all small group homes as well as large assisted living facilities are visited quarterly. The County has 193 group homes and 34 nursing homes, making such visits nearly impossible.

The Program also supplements the work of the staff by actively recruiting and training volunteers. There are a total of 58 volunteers, with each staff person directly supervising at least 12 or more volunteers in addition to their regular workload. The former full-time nurse, now assigned to a different unit, continues to conduct trainings twice per year for volunteers and has provided 10 consultations to staff and volunteers within the past 60 days.

Without this position, investigation of complaints will lapse; fewer volunteers will be recruited, trained and supervised; and fewer facilities would be visited with a diminished program presence.

Dental Services: Restore dental services for the 700 seniors (60 years of age and over) who receive these services annually.

Appropriate dental care is critical to an individual's ability to eat properly and to

sleep without pain. It is surprising to learn anecdotally about the number of seniors who are satisfied with the basics of their lives with the exception of access to dental care.

Seniors comprise approximately 16% of people served in the dental clinic. Staff hopes that the effect of the reductions will be minimal for these seniors since they could receive such treatment through Montgomery Cares. However, Montgomery Cares also is facing reductions and may not be able to provide these services. Therefore, the Commission supports the restoration of dental services to the 700 older adults who currently receive them.

As Chair of the Commission on Aging, I appreciate being able to speak to you about our priorities. We will continue to advocate for restoration of funds to programs we feel constitute basic safety net services to the most frail and vulnerable older adults in the community. At the same time we will continue to focus attention on issues affecting vital older adults so that they too may age successfully in the County.

3
LAM

**Montgomery County Commission on People with Disabilities
FY11 Operating Budget Forum –before the Montgomery County Council**

April 8, 2010

Mark Maxin, Chair | Aaron Kaufman, Vice- Chair

Good Evening, my name is Mark Maxin and I am speaking on behalf of the Commission on People with Disabilities. We recognize that these are severe economic times and request and trust that you will sustain or increase programs as possible. We ask for consideration of the following:

- Currently, it appears that the services provided by HHS are mostly serving people in crisis or adult protective services or what is known as the “safety net”. We ask that you consider persons who have developmental disability and who are on the Developmental Disabilities Administration Waiting list as being in crisis. The County’s “crisis” in serving this population is due to the State’s poor record of funding programs and services for this population. According to End the Wait Now, Maryland is the wealthiest state in the nation yet ranks 43rd in terms of state spending on developmental disability services. Only eight states rank lower: Alabama, Colorado, Florida, Georgia, Kentucky, Nevada, Texas and Virginia. Maryland devotes 21% less resources for community services than the average state. Children and adults with significant developmental disabilities throughout Maryland need essential services to remain with their families and in their communities. These services have not been adequately funded, so individuals with developmental disabilities and their families have been placed on a Waiting List for community services kept by the Developmental Disabilities Administration. The list has grown to crisis proportions with over 19,000 people statewide with over 3,300 being from Montgomery County.
- We encourage/need you to consider an intake and service coordination system to provide more preventative and maintenance versus crisis only services. There is a need for more service coordinators for people with developmental disabilities to serve as a Safety Net for those that do not and will not get services from the Developmental Disabilities Administration. As the County reduces In Home Aide Services, and Respite the DD waiting list number of people that need assistance getting through the system will increase, and there will be no one able to assist them while they wait for services.
- The Commission joins with Inter ACC/DD in requesting that you include the \$600,000 for the annualization of last year’s new services and for coverage of services to new clients who have a developmental disability in FY11. Agencies providing residential, day and support services for adults who have developmental disabilities in Montgomery County took a 7% cut in the County Executive’s proposed FY11 budget. The DD Supplement/Match which is designed to pay a living wage for direct service employees was cut by about \$580,000. This is on top of a Maryland State Developmental Disabilities Administration (DDA) cut of 2% in FY10 which cost our Montgomery County Agencies an estimated \$1,847,041. Since there is not additional funding in the proposed budget to pay for an expansion of services, the result means that the cuts per person served are more than 7%. InterACC/DD is willing to accept the 7% cut, because they realize the difficult situation that the County is in and feels that they need to bear the pain along with everyone else. DD providers are not willing to accept a 14% cut for services, which is what this budget would result in.
- Restore \$100,000 in the In-Home Aide Care Program which would allow for the provision of more than 14 hours per week, on a case-by-case basis after an updated evaluation, for those 120 identified persons who would be adversely affected by the proposed reduction in hours per week from 20 to a maximum of 14.
- Restore eliminated bus routes and cuts to Call N’Ride to Transit Services. Metro Access is currently considering cutting back and only providing service where there is a fixed route. If the bus routes are eliminated, it is very likely that Metro Access will be eliminated too along those routes.

22

- Continue funding for the Customized Employment Internship Program.
- Provide additional resources the Senior Nutrition program to provide additional home delivered meals for **people who have disabilities under age 60 years old** who have a difficult time leaving their home and need assistance with food preparation.
- Restore funding for the Library's Disability Resource Center and at minimum not cut anymore from the library. The library serves an important function for disabilities: On a basic level, the library provides computer/internet access to those who cannot afford it in their homes. Further, libraries have specialized assistive technology for people with disabilities. Much of this technology is necessary for people to access the computer but is too expensive for them to purchase on their own. The library also provides training on technology. The library also provides additional services, including a homebound service, for patrons who cannot physically get to the library. Moreover, books, whether hard copy, digital, audio, etc., are for everyone to enjoy. The library should be a place that everyone can access, regardless of ability or disability. Already due to the budget cuts, the talking books collection is being moved from the Rockville library to the Library for the Blind and Physically Handicapped, in Baltimore. People who use these books, such as people who are blind or have low vision, cannot no longer go to the Rockville library, browse and check out a book like everyone else can. Talking books are now ordered from Baltimore and mailed to the person's house. Further cuts would limit, and possibly even eliminate even more services for people with disabilities. We ask that the Council not overlook the fact that people with disabilities have the right to use the libraries and **DO** use the libraries. Services that allow people with disabilities equal access are important and need to be maintained.
- The Commission on Aging is requesting funding a Geriatric Mental Health Treatment Team for low-income seniors with mental health and substance abuse problems. We support their request for this much needed program, and request that you **extend** this program to also serve **people with disabilities who are under age 60** who have a difficult time or are unable to leave their home to receive needed mental health and substance abuse services.

The Commission worked with the Commission on Veterans Affairs, Office of Human Resources, Health and Human Services and the County Council to work to have Bill 46-09 Hiring Preference for People with Disabilities signed into law. We thank you for your outstanding leadership in unanimously supporting this milestone local legislation.

In closing, we recommend that you sustain or increase services as you can in County programs for people with disabilities, including the County's support for community based service providers who do so much to enrich the lives of so many. The County has had a long-standing, laudable policy that enables people with disabilities to live as independently, productively and safely as possible. In order to maintain this policy, the County needs to adequately fund disability programs. We thank HHS and the County for all you have done to make our community a better place to live for people with disabilities.

"A Community's Budgetary Choices and Policies Reflect its Values"

23

23

The Arc of Montgomery County
Testimony by Joyce Taylor, Executive Director
Request to Reinstate Partial Funding for the Respite House for
Continuation of Services
April 5, 2010

Good evening. My name is Joyce Taylor and I am the executive director of The Arc of Montgomery County. I am here to request that the County Council reinstate partial funding to support continuation of services for The Arc's Respite House. The contract and funding for the house was eliminated from the Executive's FY 11 budget. The Respite House has supported thousands of persons with disabilities ranging from infancy to the end of life for the past 23 years thanks to the County's financial support. During FY 08 and 09, a combined 750 families were served with a total of 240,000 service hours. The house is at capacity (3 people each night) nearly every weekend throughout the year and, from May to September, every night is filled. This July is already fully reserved but the contract has been canceled effective June 30.

I am here today to offer an alternative that will save the County thousands of dollars and enable it to continue the mission of supporting the most vulnerable families in Montgomery County. With the reinstatement of county dollars that will be ***used for staffing only*** (approximately \$70,000), The Arc will use residential group homes for respite care. This is easily achieved by dedicating bedrooms in existing homes for respite use only. Dedicated staff would be assigned to the respite residents. Without the expense of rent and utilities, the cost to the county would be half of the current contract with nearly the same # of persons being served.

As you consider this request, please keep in mind that the respite program is also compromised by reductions in the respite services contract. The respite services contract was reduced by \$180,000 last summer due to state and county cuts. An additional 7% (\$63,000) is being proposed in FY 11. This results in fewer available hours per family per year. If there is no Respite ***House***, the # of requests through respite services will dramatically increase. Most will not be met due to this high volume of requests. Respite service is being reduced or eliminated at a time when the need is increasing. For example, in FY 09, 57% of the persons using respite services ("frail seniors" or people with "functional disabilities") were over the age 80 (***over half!!***); and 2 individuals were over the age of 100! In FY 10, as of the end of February, 59% were over 80 and 3 were over 100. In FY 09, 34% of requests were unmet. In FY 10, (as of February), ***it is already at 54% due to the cuts last summer***. This will only increase over the next few months.

In conclusion, The Arc of Montgomery recognizes that the economy calls for many difficult and painful decisions. Compromise and negotiations remain an option with us to allow the continuation of these services – we hope the County is willing to do the same.

Bus Routes per Day to Recreation Sites

FY10 Service Level

Center	Mon	Tues	Wed	Thu	Fri
Long Branch	2	2	2	2	2
Schweinhaut	1	1	1	1	1
Holiday Park	1	1	1	2	1
Damascus	1	1	1	1	1
Gaithersburg	1	1	2	2	1
Germantown	2			2	
Potomac		1			
Ross Boddy			1	1	
East County		2			2
Longwood	1				
Praisner				1	

FY11 CE Recommended (11 routes eliminated)

Center	Mon	Tues	Wed	Thu	Fri
Long Branch	2	2	2	2	0
Schweinhaut	1	1	0	1	1
Holiday Park	1	1	1	1	1
Damascus	0	1	1	1	0
Gaithersburg	1	1	1	1	1
Germantown	2			2	
Potomac		0			
Ross Boddy			1	1	
East County		2			1
Longwood	0				
Praisner				1	