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## POSITION PAPER ON DOH/OPWDD MANAGED CARE INITIATIVE

The move to managed care for people with intellectual and other developmental disabilities (I/DD) will undo the almost 50 years of progress that we have made supporting people in the community. The apparent intent of this move is to deconstruct the Office of People with Developmental Disabilities (OPWDD) by giving the NYS Department of Health (DOH) full control over the budget and rate setting for services. In effect, with the loss of OPWDD, people with I/DD will lose their identity as a distinct group and the funding that has supported them will be eroded by the managed care organizations that will decide which (limited) services can be provided while maintaining their profit margin. We are asking you, our legislators, to insure through legislation, if necessary, that the funding that the OPWDD budget drives continues to be dedicated specifically to fund the long term care and other health related services needed by individuals with I/DD and not the MCOs or other DOH initiatives.

Given the experiences of other states, managed care is all too often dollar-centered rather than person-centered. It is incompatible with the I/DD self direction initiative as well. As noted above, people with I/DD have complex needs and often require very specialized medical, mental health and habilitation services, including customized durable medical equipment. Typically, managed health care organizations (MCO) only provide a limited number of specialists and hospitals and not all physicians are comfortable and trained to care for people with I/DD. Consequently I/DD individuals with extraordinary needs and/or expenses who opt to join an MCO may be prevented from continuing the care they presently receive. To ensure continued necessary medical, mental health and habilitation services, people with I/DD should be given their choice of medical care providers and not mandated to join an MCO which could compromise their health by limiting their access to appropriate experienced physicians, specialists, and therapists.

There have been several other states that have attempted to institute a managed care model for the delivery of combined long term and acute care services to people with l/DD and not one of them has succeeded. We realize that this is a multilayered and complex problem but the needs of people with l/DD are unique and they last a lifetime; this was one of the driving forces behind separating the Department of Mental Hygiene

into three separate Offices – Mental Health, Mental Retardation and Developmental Disabilities, and Alcohol and Substance Abuse many years ago.

People with intellectual as well as other disabilities have been the only group of people in the world who have been discriminated against from the beginning of time - no matter what their race, religion, ethnicity, gender or socioeconomic status and it continues to be true today with few exceptions. So we ask your support to protect and build on what we have tried to accomplish in recent decades by requiring the New York State Department of Health and the Governor to fully fund health care and long term supports and services for individuals with I/DD under the aegis of OPWDD, and that any independent advocacy group be fully trained and knowledgeable in the field of developmental disabilities.