

Additional Questions Asked of Candidates

"We are united in our belief in the dignity of every individual and that our government should protect rights equally for all" —Governor O'Malley

Education

Questions 13 and 45: What are your plans to increase the effectiveness of inclusion in our public schools? How are we going to implement UDL.RTI and evidence based practices? What are your plans to increase the effectiveness of inclusion in our public schools? How are we going to implement UDL, RTI, and evidence based practices?

Our administration secured record funding for K-12 public education helping to create the #1 ranked public school system in the country for the past two years in a row. Our elementary school students are scoring the best they ever have on their MSA tests and our high school students are leading the nation with the highest Advanced Placement participation rates and scores in the country. As accountability and expectations are raised for all, students with disabilities will benefit with improved test performance and greater accomplishment in the classroom

We will continue to support the evidence-based strategies in education and among the other child serving agencies. We are eagerly looking forward to the recommendations of the Task Force to Incorporate the Principles of Universal Design in Learning. The Maryland State Department of Education and the Governor's Office of the Deaf and Hard of Hearing are among the agencies represented on the taskforce, as well as an array of stakeholders and representatives from the community. Maryland's exemplary public education system can always improve in making learning more accessible to students with diverse learning styles and give students more innovative ways to express the knowledge that they have learned.

Question 19: The federal law provides the right to a free appropriate public education to all students with disabilities. The law requires that students be educated with their age-typical peers in local communities unless their team finds that supplementary supports and services cannot provide a quality education in the local school. Yet, Maryland ranks far behind other states in its inclusion of students with intellectual disabilities in their local schools. Clearly, this is a broad systems issue that needs to be addressed throughout teacher preparation and training, funding support to local schools, etc. If elected, what do you see as the issues to ensure that students with disabilities have their rights met in regard to quality education?

Our administration has invested \$1.3 billion into schools construction and renovation projects—the largest investment of any governor in Maryland history—and we have committed to increased school construction funding (\$1 billion over the next four years) which helps expand the options available at community-based school programs. We also

support the role of higher education in addressing teacher preparation and training to ensure that our students with disabilities can be included in classrooms with their peers.

Question 30: What is your view on inclusion in Maryland schools?

We believe that all students with disabilities are entitled to a free public education in the least restrictive environment. Each student must receive special education and related services as determined by their IEP Team. Students with disabilities should receive those services with their typical peers and more restrictive and segregated environments should be used as infrequently as possible.

Employment

Question 7: How do you propose to help to remove the financial disincentives to employment for the disabled community?

The Ticket to Work and Work Incentives Improvement Act signed by President Clinton in 1999 has a number of work incentives for people with disabilities, including the opportunity for states to create a Medicaid Buy-In. I've charged our Department of Disabilities with doing outreach to let people know about these work incentives, and their efforts have resulted in an over 200% increase in the enrollment in Maryland's Medicaid Buy-In known as the Employed Individuals with Disabilities Program. We will continue this work during a second term.

Question 8: Unemployment numbers among people with disabilities have not changed since the passage of the ADA in 1990. What proposals do you have to produce different results?

Because we believe that there is no such thing as a "spare Marylander", we include people with disabilities in all employment initiatives, including Skills2Compete. We have set a goal to increase the skill levels of Marylanders by two years of additional education or training by 2012. The Division of Rehabilitation Services (DORS) and MD Higher Education Commission have established targets that will move Marylanders with disabilities toward this goal. Our Department of Disabilities helped to develop a national marketing campaign targeted to employers called "Think Beyond the Label". The ads have been running on TV, radio, in newspapers and online during October, Disability History and Awareness month in MD.

Question 38: We have the Medicaid buy in. But what else would you do to help people with disabilities get medical benefits and keep them even if they go to work?

Between the Employed Individuals with Disabilities Program (Medicaid Buy-In) for which we continue to do outreach and enrollment assistance and the Affordable Care Act, people with disabilities should be able to work and keep/obtain health insurance.

Question 42: Would you support and pursue creation of a job placement fee to pay for direct job placement for people with disabilities?

We are interested in creative approaches that will lead to improved employment outcomes for people with disabilities and will consider this possibility.

Question 44: What would you do to decrease real or perceived liability for employers who hire people with disabilities?

I am not aware of any increased liability in hiring people with disabilities. We have been doing extensive employer outreach through a joint effort by the Departments of Disabilities and Labor, Licensing and Regulation. We will make inquiries of employers to determine if this is a concern and ask that, as people encounter this issue, they report it to the Department of Disabilities for follow-up.

Question 46: Do you support the expansion of the Employment Works Program to place state contracts with non-profit service providers and consumer owned businesses? What would you do to expand those opportunities?

We will certainly look into this possibility as it is our goal to expand employment opportunities and business ownership to people with disabilities.

Health Care

Question 3: Many states are suing the federal government to get out of "Obamacare". Will you have Maryland join them? If not, why?

Over the last four years, the State of Maryland has added more than 200,000 individuals – including 100,000 children – to those who have access to healthcare in our State. And even before the federal government passed health care reform, Maryland led the nation by allowing children to stay on their parent's healthcare until age 25.

We worked with key stakeholders to make sure our most vulnerable citizens have access to healthcare and fought to expand healthcare coverage to our children, including dental care. We created an innovative partnership to allow small businesses to provide healthcare to their employees and reduced prescription costs for our seniors by working to close the donut hole. We also signed legislation prohibiting health insurance companies from increasing premiums more frequently than once a year.

We recognizes that people with disabilities are among those who benefit through removal of restrictions concerning pre-existing conditions, removal of lifetime caps on services, and broader opportunities to gain access to healthcare that might otherwise be denied on the basis of a disability. Moving forward, we will continue to expand affordable, quality health coverage to more Marylanders.

Question 6: Re: The Community Support Act (CSA). CSA is part of the national health care bill- CSA has the potential to end the waiting list but states have to opt into it. Would you be willing to have our state opt in?

The Community First Choice Option (Section 2401 of the Affordable Care Act) which would be an opportunity to re-design home and community based attendant care services statewide to people of all ages and disabilities, with a 6 percent increase in Federal match, requirement is being reviewed by the Long Term Care Reform Workgroup, chaired by DHMH. There are also other options under the ACA, including: 1915(i) to target services based on specific population needs.

Question 34: What can be done to assist persons awarded SSDI to obtain adequate health coverage while they are in their two year waiting period before Medicare Part A&B become effective?

I urge you to contact our disability benefits expert at the Department of Disabilities to discuss several options including the Employed Individuals with Disabilities Program (Medicaid Buy-In), the MD Health Insurance Program and COBRA coverage.

Question 41: Dental care for children with Disability often requires a special setting; that is not covered by Dental Plans. Would you change that?

We established the Deamonte Driver Project to expand access to dental care for more Maryland children. In the course of implementing healthcare reform in Maryland, our administration is committed to improving access to insurance and care for adults and children with disabilities including improving available insurance options around the State.

Housing

Question 2: How can we find accessible housing near metro stops for workers with disabilities?

We have designated 14 sites near Metro stops or MARC rail lines for "transit oriented development". These sites will include rental housing and home ownership opportunities, as well as restaurants, grocery stores, banks and other businesses. They will be built as livable and inclusive communities, well suited for people with disabilities, many of whom do not drive. To locate accessible rental units, you can use the website created by our Department of Housing and Community Development: www.mdhousingsearch.org.

Question 4: How would you create more accessible and affordable housing? I would love to be a homeowner again but most are priced out of my income.

One of the guiding principles of the O'Malley-Brown administration is that individuals with disabilities can live independent, productive and full lives in their communities when provided with the right supports.

We will continue to work with local jurisdictions that receive HUD funds to prioritize people with disabilities for rent subsidies while also involving disability advocates in developing additional subsidized rental units.

I encourage all people who wish to become home owners to contact our Department of Housing and Community Development to discuss home ownership opportunities. We have a number of programs that can assist home buyers. Since many of our local jurisdictions have their own home ownership programs for middle income residents, contact should be made with the local Departments of Housing, as well.

Question 14: Many landlords and property managers are basically denying making the sidewalks in the apartment complex accessible for walkers, crutches, canes, wheelchairs, power-chairs and mobility scooters. How can the disabled community enforce the laws already in place or are new laws required?

Every landlord and property owner should be following the law. If you have problems with individuals violating the law, please contact your local Department of Housing. The Department of Disabilities is also available to assist.

Our administration allocated \$6.4 million over the last four years to make State buildings and properties more accessible, compared to \$6.1 million under the previous administration.

Question 25: Housing is a critical issue for individuals and families struggling to recover and reintegrate into the community. What solutions do you propose to address the lack of affordable housing for individuals with disabilities? Do you support, and would you fund in the budget, more programs such as the innovative and successful Housing First program in Baltimore City?

I've asked the Department of Disabilities to lead the State's efforts to increase the supply of affordable housing for people with disabilities in areas of the State with long waiting lists for rent subsidies. We have identified upcoming opportunities from the federal government and local housing authorities are prepared to apply. The opportunity to apply for vouchers designated for people with disabilities last summer resulted in 260 new vouchers in Carroll and Montgomery Counties.

Question 47: What can a disabled person do when their need/accommodation is not addressed? (For example, Section 8 choice voucher- Disability program- requested an apartment with walk in shower; which affects my quality of living; I had to accept my current apartment to avoid losing my voucher.

This is an issue best addressed by the local housing authority. If advocacy assistance is needed, our State's network of local centers for independent living or our Department of Disabilities may be able to assist.

Behavioral Health and Substance Abuse Services

Question 10: Will you preserve funding for mental health wellness and recovery centers run by consumers?

We will continue to support self-directed services and wellness recovery and resiliency efforts particularly through the growth and expansion of Consumer Quality Teams. My Administration has also expanded these services for youth through funding for Youth M.O.V.E. activities in regional and local chapters throughout the State to empower young people who have received services through MHA, DHR, and DJS.

Question 20: Health care reform will bring more individuals into the public behavioral health system, particularly those who are newly eligible for Medicaid. How will you ensure that the budgets for mental health and addictions are adequately resourced to meet this demand?

We will continue to look for every opportunity to reduce fraud and waste within the Medicaid and public mental health system and partner with the federal government to leverage state resources in such a way as to maximize federal contribution to the services that are provided to citizens in need.

Question 21: Community Services - For decades, Maryland has been a national leader in developing community-based services to replace costly and unnecessary institutional care. However, institutional savings have not remained in the behavioral health system, community services have been historically underfunded, and individuals throughout Maryland lack consistent access to the array of community services that is needed to prevent emergency room utilization and other costly forms of care. What is your strategy to address this problem and ensure the full continuum of behavioral health services is available to those in need?

We envision that all citizens with need for behavioral health services have access to a system of high quality behavioral health services and supports. Maryland ensures that,

within the health care system, people with disabilities are treated with dignity and respect. Under our administration, the number of individuals receiving community based services for mental health needs has significantly increased.

Question 22: What are your behavioral health priorities for children and youth?

We envision that our children in need of mental health services will have access to a system of high quality behavioral health services and supports and are protected from abuse, neglect, or other harm. Our priority is to work with schools and local providers to enhance those existing services where possible. One of the key ways this is being accomplished is through high-fidelity wraparound services available through the three regional care management entities (CME) administered through the Governor's Office for Children and the Children's Cabinet.

Our administration has also addressed the early childhood mental health consultation as an approach to identify and address the needs of young children with mental health needs. MSDE, MHA, MDOD and stakeholders have also been working on addressing the needs of students with emotional disabilities to reduce the stigma with seeking services and improve educational outcomes for these children and youth. We have also looked to address the needs of transition-aged youth with mental illness as well as those with co-occurring disorders of substance abuse and developmental disabilities and that work will continue in the next four years.

Question 23: Co-occurring Needs - Maryland continues to operate a fractured system of care for children and adults who have multiple challenges, such as mental illness, substance abuse, trauma and/or developmental disability. What steps will you take to ensure an integrated approach and access to services across different systems and funding streams?

During our first term, we created a Deputy Secretariat for Behavioral Health and Disabilities within the Department of Health and Mental Hygiene to coordinate the needs of people with developmental disabilities, mental health and substance abuse.

Accordingly, Maryland is better positioned to integrate funding and services to individuals with co-occurring disorders.

Question 24. What is your plan to improve outcomes for youth and adults with mental illnesses and substance use disorders who are involved in the criminal justice system?

We support using existing programs to provide treatment and support as well as options for employment post-incarceration to improve probability of recovery. The Administration will continue its dialogue with the courts and representatives of Public Safety and Corrections and Juvenile Services to improve access to treatment and medication during and after periods of incarceration.

Question 26: Substance Abuse - How will your administration improve substance use disorder prevention, treatment, and recovery services?

We support programs to educate our youth in particular about the dangers of substance use. Funding spent on prevention is well spent, in that it reduces the need for treatment and recovery services.

Question 27: Veterans - With BRAC implementation bringing thousands of new military families to Maryland, what are your plans to sustain Maryland's Commitment to Veterans or begin a new program to assist veterans and their families?

Through the leadership of Lt. Governor Brown, the highest ranking elected official in the U.S. to serve in Iraq, the administration has made great strides in supporting our veterans and their families. Lt. Governor Brown championed additional behavioral health benefits expansion for Maryland Veterans. Additionally, I have also enacted the Warrior to Work initiative by Executive Order because those who bravely protect our freedom should not face higher unemployment and difficult transitions when returning from their service.

Question 40: How would you enforce Mental Health and Substance Abuse Parity Law?

I will work with the Maryland Insurance Administration, Department of Health and Mental Hygiene, and other State agencies and stakeholders to ensure that insurance offered in Maryland builds in appropriate parity for substance abuse services.

Services for People with Developmental Disabilities

Question 5: There will be many people trying to save state money in many ways. Some may be tempted to limit funding (with federal assistance) for our most vulnerable citizens. What will happen to funding for transitioning youth?

Over the past four years, we've invested \$47 million into the Transitioning Youth Program—a 55% increase over the previous administration. This funding helps Maryland's young people with disabilities access quality employment, day activities or higher education opportunities after they leave the school system. We will continue to invest in our most vulnerable citizens.

Question 16: I believe that DDA should audit services given to each individual, after all they fund individuals. Such audits need to be shared with family each and every year. Why are the audits not done that way? Are you in favor of an audit of each non-government organization?

The Developmental Disabilities Administration requires each provider to have an annual audit completed by an independent auditing firm. The audits are then submitted to DDA and reviewed.

Questions 17 and 43: Maryland citizens with developmental disabilities (such as cerebral palsy, autism and Down syndrome) need community supports to live dignified lives in their community. Although Maryland is the richest state in the nation, thousands wait for needed services. How would you propose to address this need if elected? How will you pay for the needed expansion of services for adults who have developmental disabilities?

Even during this most difficult economic time, we have been able each year to expand DDA services to over 600 youth leaving the educational system and to some individuals in crisis.

We look forward to the economy improving and being able to fund services for additional people on the DDA waiting list. We are looking closely at new opportunities through the Affordable Care Act to address the needs of some of those on the DDA waiting list.

In 2009, we added more than \$2 million to the Maryland Division of Rehabilitation Services in order to take individuals with disabilities off of the waiting list. As a result of these important funds, the waitlist decreased from 4,703 to 1,304 and there is currently no waiting list for individuals with the most significant disabilities. The average time on the waitlist has also dropped from 18 months to 4 to 6 months.

Question 39: Maryland is the richest state in the country. Although we recognize the economic times in our state and country are facing, we also know states with less wealth are providing more fiscal support to people with developmental disabilities. Thousands of people are waiting for community services. What is your commitment to this population of Marylanders?

Over four years, we have included a \$60.8 million increase for the Developmental Disabilities Administration. As a result, an additional 2,329 people have received services. The total DDA budget is now over \$800 million and serves more than 25,000 Marylanders with disabilities.

Question 48: Would you reduce regulations that don't allow alternative staffing among community service providers?

Our Department of Disabilities is charged with examining the potential impact of proposed legislation and regulations on people with disabilities. They consider life/safety issues along with whether the legislation and regulations support community inclusion and promote independence and productivity, among other factors.

Other Services for Adults

Question 29: How would you address the institutionalization that occurs for people with adult onset disabilities? Would you pursue Medicaid changes to help people get out of nursing homes?

Our Money Follows the Person Grant from the Centers for Medicare and Medicaid Services has enabled over 500 Marylanders to move from nursing facilities to the community. This grant has been extended through 2016, therefore, many more people now in nursing facilities will be assisted with moving back to their communities and will receive all of the supports and services they need to live independently.

Question 31: How would you address the needs of ALL people with disabilities, including the many who are not DD or MH?

During this very difficult economic period we have been careful to preserve the programs that people with all disabilities depend on. We have even been able to expand some services, such as addressing the waiting list of the Division of Rehabilitation Services.

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Question 32: How would you propose Maryland finds funding to support desperately needed community supports for people with disabilities, so that people are not on waiting lists with no end in sight?

We will look at opportunities to address the long term care needs of people with disabilities through provisions of the Affordable Care Act.

Transportation

Question 36: How will you address inadequate transportation services for people with disabilities to get to work?

Our administration has made transit oriented development a priority and has identified 14 sites around the State for these projects. Transit Oriented Development presents a unique opportunity to create more livable communities that enrich the lives of people with disabilities by enabling them to access public transit options so that they can get to jobs and other places they want to go.

This year, our Mobility Paratransit enhanced its service and is now providing door-to-door service in the Baltimore area as opposed to curb to curb. The fleet is continually being upgraded with 48 new wheelchair vans and 55 new sedans being used in addition to replacement vehicles and expanded service. We look forward to continuing to expand our fleet.

Workforce and Wages

Question 15, 18 and 28: Would you support better wages for community service provider workers?

Maryland's community-based service delivery system supports nearly 20,000 people with developmental disabilities throughout the state. However, direct support staffs are paid low wages in comparison to other states and in comparison to other human services in Maryland. How would you ensure a strong community support system so people can live in the community instead of institutions?

Workforce - What steps will you take to resolve a severe and worsening workforce crisis in public behavioral health, one that will likely become even more severe with the increased service demand health care reform will produce?

Together with our leaders in the General Assembly we enacted S.B. 633/H.B. 1034 during the 2010 Session. These bills tie wage increases for direct support staff in community based developmental disabilities and mental health providers to future cost of living adjustments of state employees.

Miscellaneous

Questions 1 and 33: Can you find a way to inform the public that disabled people should not be excluded from family celebrations? How else would you make people aware about disability issues?

All of the communication sent by our State agencies to the public underscores my vision of One Maryland, a place where all people are included and valued. I encourage all of you to share this vision with everyone you meet.

Over the past two years, we worked with families and advocates to remove the "R" word from our policies and laws, reducing the negative stigma against our citizens with disabilities.

At the State's celebration of the 19th Anniversary of the Americans with Disabilities Act, I signed an Executive Order proclaiming October each year as Disability History and Awareness Month. As a result many activities are being held in October to promote awarenss in the public schools, our colleges and universities and within State agencies.

Question 9: What is being done to make solar energy more affordable to disabled persons?

One of our priorities is to increase the availability of renewable energy, thus, we have funded grants for home owners for solar or geothermal installation. Information about these grants is available on the Maryland Energy Administration's website: www.energy.state.md.us.

Question 11: I would like to know if you will keep the Office for Deaf/Hard of Hearing instead of closing this agency.

I have preserved the Office of Deaf and Hard of Hearing through multiple rounds of budget cutting because I understand its importance for our citizens who are deaf, deaf/blind and those with significant hearing loss.

Question 12: Many Maryland agencies help the disabled financially, why are these programs so wasteful with the funds they manage? Also why is it so hard to find out about and enroll in them?

Information about a wide array of resources will soon be readily available on the new Maryland Access Point website and through the expanding network of Aging and Disability Resource Centers.

Question 35: What are your views on stem cell research and funding?

I fully support stem cell research and have provided funding for it in every budget that I have prepared.

Question 49: Why won't you support an increase to the Alcohol Tax?

I support the goals that the proposed increase in the alcohol tax would address but have no plans to increase taxes next year. I will continue to work to support important health services.

As a State and as a nation, we have faced the most serious economic crisis since the Great Depression. Every family and every small business in Maryland has felt the impact of this global downtown. But throughout this downturn, our Administration has remained laser-focused on creating jobs and protecting our core priorities—including protecting our most vulnerable citizens.

I still believe that our best days are in front of us and I look forward to being able to do more in the future.

Question 50: Would you support a "disability slot section" at gambling parlors where proceeds will support disability wait list, etc?

Decreasing the disability wait list is important and we will consider all options when addressing this matter.

Question 51: Would you support stiffer penalties for crime against persons with disabilities?

The MD Human Relations Commission has authority to address crimes against people with disabilities where the disability was the basis for the crime. We will review the crime data available to determine if additional penalties are needed.

