

APRIL 18, 2024 / 1-3 PM / HARTFORD

Join us, tell a friend, bring a friend, we will start gathering at 12 pm on Capitol Southside Lawn, Parking At 300 Capitol Ave

"AWAY WITH THE GUARDRAILS" DENYING US...

- Mental Health Peer-Run Respites
- Husky C Without Forced Poverty
- Timely Wheelchair Repairs At Home
- Accessible Medical Exam Equipment



(A Facebook Live Event / Rides May Be Available)
Press Contact: jsigworth@morethanwalking.com

SCAN or CLICK to SIGN UP bit.ly/disability_rally_4_18

By <u>Keep The Promise Coalition</u>, <u>Stop Husky Health Discrimination Coalition</u>, <u>CT Wheelchair Reform Coalition</u>, & <u>Citizens Coalition For Equal Access</u>

SB 370: Mental Health Peer-Run Respite

A peer-run respite is a voluntary, short-term program that provides 24/7 community-based, non-clinical (non-medical) mental health crisis support as an alternative to inpatient hospitalization. It is operated in a home-like environment by peer support specialists, who have lived experience with mental distress, crisis, and life-altering challenges. Peer Support is recognized by the U.S. Center for Medicaid & Medicare Services (CMS) as an evidence-based model of care. 15 other states have peer-run respite programs, Connecticut currently has none. This needs to change. SB 370 will create 8 peer-run respites in Connecticut, including three affinity-specific respites for BIPOC, Transgender, and Spanish-speaking communities to best support mental health in a voluntary, person-

centered, and culturally informed manner. It will also create a technical assistance center to support CT's peer

respites and other peer services in program implementation and training. **Keep The Promise Coalition contact: jordan@ktpcoalition.org**

HB 5053 / SB 306: Husky C Without Forced Poverty

Connecticut's Medicaid program currently discriminates against people with disabilities in favor of able-bodied people. HUSKY C, the Medicaid program only for those who are disabled/blind or over 65, currently has an income limit of \$1234/month, far below any of the other Medicaid programs (including for families and non-disabled, non-elderly adults). HUSKY C also has the lowest asset limit; most Medicaid programs have no asset limits at all. Last year the legislature voted to end the income eligibility discrimination, increasing HUSKY C's Income limit to \$1829/month, effective 10/1/2024. But before this even goes into effect, the Governor now proposes a massive cut to dramatically lower the income limit for HUSKY C to \$1318/month, still the lowest income limit compared to other Medicaid programs, and perpetuate discrimination against disabled people. Support the Human Services Committee substitute language for HB 5053 (rejecting the Governor's cut proposal) and SB 306 (ending asset limit discrimination).

Stop Husky Health Discrimination Coalition contact: rick@cdr-ct.org

SB 308: Timely Wheelchair Repairs At Home

CTWRC

KEEP THE PROMISE

National and private equity-owned wheelchair repair companies are forcing wheelchair users stuck at home to wait an average of nearly 30 days for an assessment and another 30 days for an actual repair even after all the paperwork and parts have been received. On February 1st, the Human Services Committee's CT Wheelchair Repair Task Force issued a final report with these findings and proposed solutions, resulting in SB 308, which would require all wheelchair repairs to be completed within 10 days, and modify Medicaid to eliminate the need for most repair prescriptions and prior authorizations, and cover annual maintenance of a consumer's primary wheelchair and backup wheelchair. However, several additions, among others, are needed: 1) Establish a wheelchair advisory council of community stakeholders to monitor the effectiveness of and adherence to wheelchair repair reform, 2) Provide Medicaid coverage as needed for a) repairs to backup wheelchairs, b) consumer transportation for repairs, and c) overnight and expedited delivery of wheelchair parts.

CT Wheelchair Reform Coalition contact: jsigworth@morethanwalking.com

HB 5200: Accessible Medical Exam Equipment

Many people who use wheelchairs struggle to get an x-ray or mammogram, or find doctors with accessible exam tables and scales, and suffer the consequences of this inadequate medical care. In 2017, the US Access Board published Accessible Medical Diagnostic Equipment Technical Standards, and recently the Department of Health and Human Services adopted all of these standards in proposed rulemaking, with nothing finalized. Connecticut only requires facilities "to consider" buying accessible equipment. HB 5200 can resolve this with two proposed changes: 1) Include an affirmative duty for healthcare facilities to buy two relatively inexpensive pieces of accessible equipment recognized by the proposed federal rule: an exam table and a weight scale, 2) Include the three reasonable exceptions to compliance outlined in the federal rule-making, including for small practices and where acquisition is an "undue burden." Citizens Coalition For Equal Access contact: ruthgrobe@gmail.com





























