State Disabilities Plan

Annual Progress Analysis

2015

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I. INTRODUCTION

The Maryland Department of Disabilities (MDOD) is the voice within Maryland's government for people with disabilities. Created in 2004, it is the only department in the United States that represents people with all disabilities at the cabinet level of state government.

MDOD works in partnership with many other agencies to create a State Disabilities Plan in order to ensure that government services used by people with disabilities meet their needs and promote long-term independence and inclusion in the community.

The Maryland State Disabilities Plan is the blueprint for disability support services in Maryland. The 2012 – 2015 State Disabilities Plan was developed in partnership with individuals with disabilities, families, providers, and State agency staff and approved by the Interagency Disabilities Board in January 2012. A new State Disabilities Plan will be developed for 2016-2019.

The Annual Progress Analysis is published each year to inform Marylanders of the accomplishments from the prior year and to identify areas where there is opportunity for improvement.

Section II of the Annual Progress Analysis examines the progress made in accomplishing goals and strategies. Section III presents performance data from agencies that provide services to people with disabilities.

II. GOALS AND STRATEGIES

The goals and strategies are organized around areas where there is opportunity for improvement and progress. Updates in the status of goals and strategies are a continuous process. This section of the Strategic Plan is divided into nine domains:

- **Employment**
- **Community Living**
- **Housing**
- **Education**
- **Children, Youth and Families**
- **Technology**
- **Transportation**
- **Health and Behavioral Health**
- **Access Maryland**

STATE AGENCY ACRONYMS

- BHA – Behavioral Health Administration (part of the Department of Health and Mental Hygiene)
- CMS – Centers for Medicaid and Medicare Services (federal)
- DBM – Department of Budget and Management
- DDA – Developmental Disabilities Administration (part of the Department of Health and Mental Hygiene)
- DHCD – Department of Housing and Community Development
- DHMH – Department of Health and Mental Hygiene
- DHR – Department of Human Resources
- DLLR – Department of Labor, Licensing and Regulation
- DORS – Division of Rehabilitation Services (part of the Maryland State Department of Education)
- GOC – Governor's Office for Children
- GWIB – Governor's Workforce Investment Board
- HUD - U.S. Department of Housing and Urban Development (federal)
- MDoA – Maryland Department of Aging
- MDOD – Maryland Department of Disabilities
- MEMA – Maryland Emergency Management Agency
- MHEC – Maryland Higher Education Commission
- MDTAP – Maryland Technology Assistance Program
- MSDE – Maryland State Department of Education
- MTA – Maryland Transportation Administration
- WMATA – Washington Metropolitan Area Transit Authority

EMPLOYMENT

Vision	Marylanders with disabilities will have a variety of meaningful employment and training opportunities, incentive to work, and will choose and control the individualized services which support their diverse careers in integrated settings.

Progress Updates:

Goal 1: Ensure implementation/achievement of disability-related items within Maryland's Skills to Compete Action Plan.

- **DORS Employment Outcomes.** In FY2015, DORS is projected to have provided employment training to 7,441 individuals with disabilities, helped 2,422 consumers find competitive employment and 178 find non-competitive employment. DORS was able to help 804 youth with disabilities (ages 14-22) obtain competitive employment and supported 748 youth in postsecondary education settings, including 305 in colleges or universities, 348 in vocational or occupational skills programs, and 87 in Career and Technology Training.

- **DDA Employment Outcomes Database.** DDA has developed the Employment Outcomes Information System to gather data on the employment outcomes for people with developmental disabilities who are receiving services funded by DDA. The goal of the database is to document that people with developmental disabilities are receiving competitive, integrated employment to the fullest extent possible. Snapshot data indicates that in FY2014, 3,847 people receiving supported employment services from DDA were in integrated individual or group employment, and FY2015 estimates indicate that 3,940 people will be in integrated individual or group employment.

- **Expanding Postsecondary Opportunities.** In August 2015, Maryland submitted a grant application to the U.S. Department of Education's Office of Postsecondary Education requesting funds to develop inclusive postsecondary education programs on several college campuses. The notice of awards will be released in the fall of 2015. Additionally, the Task Force to Study the Impact of Expanding Credit and Non-credit Courses for Students with Intellectual and Developmental Disabilities, chaired by MHEC, will conclude its study at the end of 2015.

Goal 2: *Increase access to and availability of quality work incentives, higher education and other resources to support individuals with disabilities in achieving their employment goals.*

- **EID Program.** The Employed Individuals with Disabilities Program, administered by DHMH, provides Medical Assistance to working Marylanders with disabilities who meet disability and income requirements. The program covers most medical services for individuals who have no other health insurance. The EID program saves participants $1,000 - $12,000 a year. In FY2015, an estimated 766 individuals were enrolled in this program, a slight increase from FY2014 enrollment of 743.

- **Benefits Counseling.** DORS and its contractors provide benefits counseling to jobseekers with disabilities who are interested in working while maintaining access to benefits. In FY2015, an estimated 2,638 jobseekers with disabilities received benefits counseling. This will be an increase of over 500 jobseekers receiving counseling from FY2014 (2,023 received counseling in FY2014).

- **PROMISE Grant Administration.** Maryland received a $31 million research grant from the federal Department of Education, Social Security Administration, Department of Labor and Department of Health and Human Services to study the impact of increased supports for at-risk youth. Over 2,000 Maryland youth on Supplemental Security Income (SSI) and their families will be recruited for this program, 1,000 of whom will receive intensive interventions to increase the educational and employment outcomes of both the youth and their families. Key interventions include coordinated, assertive community-based case management, benefits counseling and financial education, and unpaid and paid work experiences for the youth. As of FY2015, 559 students had been enrolled in the expanded services section of the PROMISE program.

Goal 3: *Create and replicate best practices that increase integrated, individualized employment outcomes for Marylanders with disabilities.*

- **Workforce Investment and Opportunities Act.** The work of Maryland's workforce development agencies, particularly MSDE, DLLR and GWIB, have been significantly impacted by the federal Workforce Innovation and Opportunity Act (WIOA), which was signed into law on July 22, 2014 and went into effect July 1, 2015. WIOA represents new opportunities to support jobseekers with disabilities by increasing the responsibility of Workforce Investment Boards and American Job Centers to be fully accessible and offer necessary accommodations to provide jobseekers with disabilities effective and meaningful participation in the use of skills training and career pathways for 21st century jobs. It also places increased priority on serving young adults with disabilities. Maryland is in the process of developing policies and procedures to ensure compliance with the requirements.

- **Employment First.** MDOD is working with agency partners on Employment First, a policy many states have adopted to make integrated, competitive employment the "first" service considered when serving individuals with developmental disabilities. MDOD is participating in workgroups to implement Employment First strategies.

- **QUEST Internship Program**. The QUEST Internship Program, a partnership of DORS, DBM and participating State agencies, affords State agencies the opportunity to provide mentoring services for persons with disabilities through unpaid part-time or full-time internships. In the past year, 33 individuals have participated in the QUEST Internship Program.

Goal 4: Promote awareness of the skills and abilities of job seekers with disabilities to large and small employers.

- **Summer Employment.** Over 160 Maryland PROMISE youth participated in paid employment experiences during summer 2015. PROMISE staff also engaged 1,130 people in direct employer engagement activities and provided youth and their families with 140 unpaid work experiences.

COMMUNITY LIVING

Vision	Promote the delivery of supports and services in the most integrated setting based on the needs and preferences of the individual, with an emphasis on self-direction and supported decision-making.

Progress Updates

Goal 1: People with disabilities will receive supports and services in the most integrated community setting based on the needs and preferences of the individual with an emphasis on rebalancing resource utilization and delivery of services in the community as opposed to institutional settings.

- **Money Follows the Person Demonstration Project.** Many of Maryland's efforts to help individuals with disabilities move from nursing homes to the community have been supported by the Money Follows the Person Demonstration Project, a federally-funded grant that ends in FY2016. DHMH submitted its sustainability plan to CMS for the Money Follows the Person (MFP) Demonstration Program on April 30, 2015. It identified which activities and staff positions DHMH will continue to fund until the conclusion of the demonstration and made recommendations on staffing and MFP activities that will extend beyond the expiration of the federal grant.

- **Money Follows the Person (MFP) Peer Outreach and Support Services.** DHMH and MDOD oversee eight regional contracts to organizations that provide peer outreach and support services under the MFP Demonstration Program. Contractors provide peer outreach and ongoing peer support services to nursing facility residents and other institutionalized residents who are interested in transitioning to community-based housing. In FY2015, contractors made visits to 214 of Maryland's 236 licensed nursing home facilities, and made a total of 1,600 contacts with nursing home residents.

- **Home and Community Based Waivers.** Maryland residents receiving services through Home and Community Based Waivers will have new opportunities for full integration into the community. In March 2015, DHMH submitted a 5-year transition plan to CMS to bring Maryland's Home and Community Based Waivers into compliance with new CMS regulations. The new regulations emphasize that individuals should not be isolated from the community, and that services must be provided in the most integrated settings possible. These changes will have significant impact on day programs and employment services offered to people with disabilities receiving services through these waivers.

Goal 2: *Benefit from Maryland policy initiatives that reflect the state's commitment to provide quality and more person-directed supports and services in community-based settings thereby offering individuals the opportunity to exercise greater control and choice.*

- **Task Force on ABLE Act.** SB761, which created the Task Force on Maryland's ABLE Program, was signed into law in 2015. This Task Force will make recommendations on the implementation of the federal ABLE Act, which creates tax-exempt accounts for qualified people with disabilities that will allow people to save money while retaining access to benefits such as Medicaid or SSI. The Task Force, a combination of Governor appointees and State agency representatives, will submit a report and recommendations for legislation on December 1, 2015. MDOD chairs and staffs the Task Force with support from DLS. DDA, the Office of the Treasurer, and the Office of the Attorney General have representation on this Task Force.

- **Community First Choice.** The Community First Choice Program, administered by DHMH, went through a programmatic change in FY2015. In the original "self-directed model" option, CFC participants were given the choice to hire independent contractors for their personal care needs. This arrangement positioned DHMH as a "joint employer" with the participant. In order to comply with the U.S. Department of Labor's new rules regarding payment to personal care assistants, however, DHMH changed CFC to an "agency only model." As a result, DHMH is now the sole "employer" of DHMH-licensed personal care agencies, and CFC participants must use personal care assistants employed by these agencies. This change goes into effect October 1, 2015 when all CFC participants will need to identify personal care services through an agency provider.

Goal 3: *Increase access to accurate information that promotes increased awareness of available public and private resource options.*

- **MAP Expansion**. Maryland's Aging and Disability Resource Centers, referred to as Maryland Access Points (MAPs), are information and referral centers for people with disabilities and seniors. MAPs have been previously funded by the federal Administration for Community Living and CMS. In Maryland, MAPs are located in the local Area Agencies on Aging (with the exception of the Worcester County Health Department) and the seven Centers for Independent Living. In FY2015, DHMH announced MAP Expansion Grant funding availability for another year to maintain the partnerships between the 20 MAP sites and the seven disability organization partners. Staff from MDOD, DHMH and MDoA have been reviewing application submissions.

- **Options Counseling.** CMS approved a cost allocation plan submitted by MDoA and DHMH which will allow the Area Agencies on Aging to receive federal funding reimbursement to provide options counseling and to administer the Level 1 screening tool to older adults and individuals with disabilities seeking supports in the community

at the MAP sites. Options counseling is a person-centered planning process that facilitates informed decision making about available supports and services in the community. The Level 1 screen is an assessment tool to help determine service needs, prioritize individuals based on their risk of institutionalization and make referral recommendations. Both of these services are key to streamlining access to long-term supports and services and for nursing facility diversion.

Goal 4: Increase access to resources and information that supports community living and addresses functional needs in response to emergency situations.

- **Ethan Saylor Alliance.** HB1161, creating the Ethan Saylor Alliance for Self-Advocates as Educators, was signed into law in 2015. This Alliance, named for a man with intellectual disabilities who died during contact with law enforcement, will focus on strategies to improve cultural competency among law enforcement and first responders when interacting with individuals with intellectual disabilities in routine and high-stress situations. MODD chairs and staffs this Alliance.

- **MEMA and MDOD Partnership.** MEMA and MDOD partnered to support a Director of Emergency Management position within MDOD that focuses on ensuring that the needs of people with disabilities are included in statewide emergency planning and management efforts. The position was filled on June 17, 2015.

Goal 5: Increase access to information and resources concerning the Americans with Disabilities Act (ADA).

- **ADA Anniversary.** July 26, 2015 marked the 25th anniversary of the Americans with Disabilities Act. MDOD and partner agencies participated in a number of events commemorating the signing of the ADA, culminating in a statewide event held In Baltimore on July 26th.

- **ADA Trainings.** MDOD staff participate in the Maryland Leadership Network, which is organized through the Mid-Atlantic ADA Information Center and provides free ADA trainings. Additionally, MDOD, in coordination with DBM, organizes three state agency ADA coordinator trainings each year, and ensures that ADA coordinators receive legal and policy updates from the Department of Justice, the Equal Employment Opportunity Commission and ADA Information Centers.

HOUSING

Vision   People with disabilities will have a full array of housing options similar to their non-disabled peers. People with disabilities will have access to affordable, accessible housing in their communities with linkages to appropriate support services.

Goal 1: Create strategies to increase affordable, accessible, integrated housing for individuals with disabilities

- **The State of Maryland and Harry and Jeanette Weinberg Foundation Affordable Rental Housing Opportunities Initiative for Persons with Disabilities ("Weinberg Apartments")** is a private-public collaboration among The Harry and Jeanette Weinberg Foundation, DHCD, MDOD and DHMH. The Weinberg Foundation has provided $2 million to support the designation of subsidized, accessible apartments that are offered to people with disabilities who have a very low income. As of September 1, 2015, there are 11 occupied Weinberg Apartments in four different properties located in Dorchester, Montgomery, Wicomico and Harford Counties. Another five Weinberg apartments are under construction or in review, with occupancy expected in 2016.

- **The HUD Section 811 Rental Assistance Project** is a federally-funded collaboration among MDOD, DHCD and DHMH. In February 2015, Maryland received a second award of HUD Section 811 Project Rental Assistance Funds totaling $9.8 million. The funding will augment the original $11 million award and will also enable the State to locate Section 811 units statewide. The original award limited units to the Baltimore and Washington metropolitan areas, the areas with the greatest need. DHCD and HUD are expected to sign the cooperative agreement for the new award in the fall of 2015. Implementation for the first award is underway with the first Section 811 units expected to be occupied in November 2015.

- **The MFP Bridge Subsidy Program,** also a collaboration among DHMH, DHCD and MDOD, helps expedite people with disabilities' access to subsidized rental housing. Through this $2.5 million program, people with disabilities and their families - who would otherwise be on a long waitlist for other subsidized housing programs - receive rental assistance for up to three years. At the conclusion of the three-year term, each participant will receive permanent assistance through the local Public Housing Authority's (PHA's) Housing Choice Voucher or in a public housing program. The program will serve approximately 89 participants. Fourteen PHAs have elected to participate in the program.

Goal 2: *Develop and implement access to housing in the communities where people with disabilities choose to live by increasing the availability of visitability and other accessibility features in newly constructed or renovated housing in Maryland.*

- **Homeownership for Individuals with Disabilities Program (HIDP)** is a statewide lending program offered by DHCD to people with disabilities or caretakers of people with disabilities. In FY2015, the HIDP made 17 loans to people to support home purchases, with loan amounts totaling $2,863,860.

- **Home Modifications.** MDOD's Assistive Technology Loan Program offers financial loans that allow people with disabilities to borrow money to make modifications for their homes. As of FY2015, the ATLP has made 145 loans totaling $1,597,167 since it first began lending in 2000. As of FY2015, there are 22 open home modification loans totaling $205,661. In addition, also in FY2015, DHCD made $359,471 in loans to seniors and people with disabilities to add accessibility features to their homes.

- **Rental Housing.** For FY2015, 63% of the rental housing projects financed by DHCD included a total of 168 units to be targeted and marketed to persons with disabilities. DHCD incorporates both visitability and universal design in the projects it finances through a mixture of incentives and requirements.

Goal 3: *Incorporate the needs of people with disabilities into transit oriented development (TOD) and the creation of livable communities.*

- **Development in TODs.** Eight units identified for the Section 811 Program are located in the TOD surrounding the Odenton MARC station in Anne Arundel County.

- **Strategic Planning Around TODs.** MDOD completed a *Strategic Plan for Improving and Sustaining Affordable and Accessible Housing Opportunities of Choice for People with Disabilities*. The Plan calls for increasing awareness of the benefits of incorporating housing for persons with disabilities in TOD.

EDUCATION

> ***Vision***   Students with disabilities will receive a free, high-quality public education in the least restrictive environment and emerge prepared and able to access employment or higher education. All youth with disabilities will have the necessary services and accommodations to succeed and experience a successful transition to post-secondary education or employment.

Goal 1: *Educate students with disabilities in the least restrictive environment with their nondisabled peers at a greater percentage.*

- **Developments in Education.** Several laws were passed during the 2015 legislative session designed to improve outcomes for students receiving IEP or Section 504 services in their schools. These include: HB535, requiring that orientation and mobility training be automatically considered for inclusion in the IEPs of students who are blind or visually impaired; HB278, creating the Task Force to Study the Implementation of a Dyslexia Education Program; and SB595, allowing public charter schools to give greater weight to the lottery status of students with disabilities.

- **Least Restrictive Setting.** During the 2013-2014 school year, an increased number of students with IEPs received a majority of their services in non-segregated education settings. During the 2013 – 2014 school year, 68.40% of students received services inside integrated education classrooms 80% or more of the day. Additionally, 13.26% of students received services inside integrated education less than 40% of the day. While 6.97% of the state's students with disabilities received services in separate schools – which exceeded the State's target of 6.69% - the percentage of children served in this type of placement continues to decrease.

Goal 2: *Provide preschool services to children with disabilities in settings with their nondisabled peers to facilitate entry into kindergarten ready to learn.*

- **Support for Early Childhood.** MSDE's Division of Early Childhood Development (DECD) has been awarded a one-year $494,370 grant from the Kellogg Foundation to provide resources, tools, and supports to early childhood service providers and families. The award is based on the goals and strategies outlined in *Maryland's Early Childhood Family Engagement Framework.* The Maryland Early Childhood Family Engagement Coalition and DECD developed the *Framework* to strengthen the relationship between families and service providers that include child care, libraries, home visiting, family resource centers, Head Start, local education agencies and other child and family serving agencies and organizations that work with children with and without disabilities.

- **Least Restrictive Setting.** In FFY2013, the State exceeded its target of having 92.0% of the children enrolled in the Infants and Toddlers Program receive services in home or community-based settings. All 24 local Infants and Toddler Programs (LITPs) achieved the State target. Progress was noted from FFY2012 (97.6%) to FFY2013 (97.81%). Achievement of the target was accomplished by requiring LITPs to complete improvement plans and by providing trainings for LITPs which emphasized increasing the inclusion of infants and toddlers with disabilities in community programs. Another strategy was the statewide promotion of content on the Maryland Learning Links website (marylandlearninglinks.org), including tutorials on evaluation and assessment.

- **School Readiness.** In the 2014-2015 school year, 5,683 Maryland kindergarteners had a disability (8.6% of the total kindergarten population). Of these, 20% were found to be fully ready for kindergarten.

Goal 3: Increase the number of students with disabilities scoring proficient or advanced on the MSAs and increase the number of students with disabilities scoring proficient or advanced on the HSAs and receive a high school diploma.

- **Changes to Testing.** Maryland began implementing a new standardized assessment, the Partnership for Assessment of Readiness for College and Career (PARCC) in the 2014-2015 school year. Meaningful data on the performance of students with and without disabilities was not yet available for the drafting of this report.

Goal 4: Support effective transition planning so students with disabilities will exit high school better prepared for employment and/or post-secondary education.

- **Supported Employment and Competitive Employment.**
  - In FFY2015, 9,303 consumers ages 14-22 received services through DORS; 804 consumers attained competitive employment.
  - In FY2015, BHA provided 366 transition-age youth with Supported Employment services.
  - DDA served 671 transition-age youth through the Governor's Transitioning Youth Initiative, which allows DDA, in collaboration with DORS, to provide supported employment and other day services for eligible graduating students who otherwise may not have received DDA services.

- **Postsecondary Supports.** DORS supported 748 students ages 14-22 in postsecondary education: 305 in College/University, 346 in Vocational and Occupational Skills Training; and 97 in Workforce Technology Center trainings.

- **Postsecondary Outcomes.** As reported by Maryland's local school systems and public agencies, there were 19,324 students with Individualized Education Programs (IEPs) age 16 and older in FFY2013. Of the 19,324 students, 19,316 (99.96%) had IEPs that were 100% compliant with federal guidelines. Maryland also met its target of having 82% of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school, or both, within one year of leaving high school (the exact percent for FFY2013 was 82.59%).

CHILDREN, YOUTH AND FAMILIES

> *Vision*   Children and youth with disabilities and their families will have equal access to an integrated support system that is self-directed, responsive, flexible and available.

Goal 1: Improve capacity that fosters individualized community-based services for children and youth with disabilities to remain in their communities and decrease reliance on out-of-state options.

- **Place Matters.** DHR continued to meet or exceed its goals in the Place Matters initiative. At the most recent reporting (March 2015), DHR had exceeded its goal of having no more than 5,174 youth in out-of-home placements, with only 4,859 youth in out-of home placements.

- **Youth with Disabilities in Out-of-Home Placements.** In FY2014, the most current year available, BHA had placed 418 youth in non-community based residential treatment centers and 196 youth in substance use treatment programs; DDA had placed 83 youth in community-based placements (17 youth in residential child care programs and 68 in community supported living arrangements); and MSDE had placed 47 youth in residential educational facilities. DHR had placed 1,541 youth in treatment foster care, 183 youth in residential treatment centers, and 9 youth in in-patient hospitalization and 8 youth in psychiatric hospitalization.

- **Youth with Disabilities in Out-of-State Placements**. The number of students with disabilities placed in out-of-state placements decreased between FY2014 and FY2015. In FY2014, Maryland agencies made 124 out-of-state placements; of these, 71 were youths with disabilities. In FY2015, there were 117 out-of-state placements, and of those, 64 were youths with disabilities.

Goal 2: Increase access to out-of-school time programs for children and youth with disabilities in settings with nondisabled peers.

- **Technical Assistance for Inclusive Programs.** MDOD, in partnership with the Developmental Disabilities Council, presented on the laws and policies of accommodating students with disabilities to providers of afterschool programs at the annual Maryland Out of School Time Conference, and continues to provide technical assistance on a case-by-case basis.

- **Unified Sports Participation.** The participation of students with disabilities in athletic programs continues to increase. In the 2014-2015 school year, 2,289 Maryland students participated in adapted sports programs, an increase from 1,572 in the 2013-2014 school year.

Goal 3: Increase access to transition planning information, supports and services for youth, young adults, and their families.

- **Transition Planning.** As reported by Maryland's local school systems and public agencies, there were 19,324 students with IEPs age 16 and older in FFY2013. Of the 19,324 students, 19,316 (99.96%) had IEPs that were 100% compliant with federal guidelines. Maryland also met its target of having 82% of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school, or both, within one year of leaving high school (the exact percent for FFY2013 was 82.59%).

- **Updated Transitioning Youth Handbook.** The Governor's Interagency Transition Youth Council for Youth with Disabilities (IATC) supported MSDE staff in updating the Transition Handbook, which is provided to all students receiving IEP services in Maryland's public schools and contains lists of resources and best practices for the transition process. The revised handbook is currently under review in preparation for statewide distribution.

- **Training and Resources.** MDOD and MDTAP staff continued to maintain the Maryland Transitioning Youth website (mdtransition.org) and share information about transition on the IATC Twitter and Facebook platforms. The website received 38,841 unique visitors. In addition, the 2014 Transitioning Youth conference, hosted by the IATC, trained 239 youth, parents and professionals on the transition process.

TECHNOLOGY

> **Vision**   Maryland citizens with disabilities will access State services and employment opportunities through the use of assistive technology and accessible information technology. People with disabilities will have increased options for assistive technology acquisition that is both accessible and affordable.

Goal 1: *Provide Marylanders with disabilities the information and training needed to make informed choices about selection, funding, acquisition, and operation of assistive technology.*

- **Outreach and Loans.** In FY2015, MDTAP reached over 35,000 people through training and outreach activities; provided 1,200 information and referral services; and provided 200 demonstrations and loans of assistive technology devices to Marylanders with disabilities.

Goal 2: *Reduce financial barriers to acquiring assistive technology for eligible Marylanders with disabilities who are seeking independent living and employment opportunities.*

- **Financial Assistance.** In FY2015, MDTAP's Assistive Technology Loan Program had 200 open loans for people with disabilities who needed financial assistance to purchase assistive technology for education, employment and independent living.

- **Cost Savings.** In FY2015, MDTAP helped Marylanders with disabilities save $36,795 on assistive technology purchases through cooperative buying programs and helping people locate recycled devices.

Goal 3: *Provide technical assistance and information to improve the accessibility of State agency websites and other information technology-based services.*

- **Computer Accessibility Task Force.** Maryland enacted legislation in the 2014 regular session requiring MDOD to establish a work group to examine higher education courses in computer science, information technology and computer information systems to determine the degree that concepts of technology accessibility are included in college curricula. The workgroup will evaluate the courses provided to technology specialists for their accessibility content, determine where accessibility content may be added and propose initiatives that encourage adding of necessary accessibility instruction. The workgroup must provide two reports to the General Assembly, one this December and

the final report in June 2017. MDTAP is facilitating this work group with support from the National Federation of the Blind.

Goal 4: Collaborate with responsible state and local agencies to help ensure uninterrupted access to assistive technology devices and services for eligible students including those who are transitioning from high school to work or higher education and individuals who receive services through DDA.

- **Technology for Postsecondary Training and Employment.** Currently, it is standard practice that DORS works with students to identify whether they would require assistive technology in their transition to post-secondary training or employment. In addition, some school systems have developed an "Assistive Technology Addendum" to their existing agreements with DORS.

- **Interagency Collaboration.** MDTAP holds a seat on the Governor's Interagency Transition Council for Youth with Disabilities and continues to make its technical assistance and technology library available to agencies that serve transitioning youth.

Goal 5: Develop a plan with key agencies and stakeholders to create environmentally responsible, medically safe and fiscally sound durable medical equipment and assistive technology reuse programs.

- **Loan Closet Networks.** MDTAP has developed a referral network of eleven loan closets, which are independent organizations, typically non-profits, which collect and distribute secondhand durable medical equipment at no cost. Consumers can contact MDTAP and receive referrals to their nearest available loan closet.

- **Equipment Link.** MDTAP maintains Equipment Link, a website that acts as an online marketplace for secondhand durable medical equipment and specialized technology. In FY2015, the value of equipment exchanged at no-cost or reduced-cost was $105,964, resulting in a savings to Maryland consumers of $78,364.

HEALTH AND BEHAVIORAL HEALTH

Vision	Citizens with disabilities will have access to a system of high quality health care, including behavioral health services and supports and people with disabilities are treated with dignity and respect and are protected from abuse, neglect, or other harm.

Goal 1: Ensure access to high quality, consumer-centered behavioral health services.

- **Behavioral Health Administration Integration.** During the 2015 legislative session, several bills were passed to assist with the ongoing integration of the former Mental Health Administration and the Alcohol and Drug Abuse Administration into the Behavioral Health Administration. HB1109 was signed into law, which will eliminate inconsistencies in code provisions related to mental health and substance use disorders, repeal outdated language, and strengthen prohibitions preventing a denial of services or discrimination based solely on an individual's behavioral health disorder. Additionally, SB174 merged the Maryland Advisory Council on Mental Hygiene and the State Drug and Alcohol Abuse council into a single Behavioral Health Advisory Council.

Goal 2: Improve access to behavioral health services for people with a wide range of non-psychiatric disabilities and co-occurring psychiatric disabilities.

- **Opioid Use Prevention.** In 2015, Governor Hogan signed into law SB516 / HB745, designed to reverse the increase in opioid deaths in Maryland by expanding overdose response training and increasing access to naloxone. Also passed was SB654 / HB1009, which expanded Maryland's Good Samaritan law so that those who call 911 when witnessing an overdose may get protection from potential prosecution for drug and alcohol offenses. The Governor issued Executive Order 01.01.2015.12, creating the Governor's Heroin and Opioid Emergency Task Force, an interagency council that will advise on plans to prevent, treat and reduce heroin and opioid use in Maryland.

- **Mental Health Benefit Exchange.** SB556 was signed into law in 2015 to help ensure compliance with the federal Affordable Care Act (ACA) and Mental Health Parity and Addiction Equity Act (MHPAEA). The Maryland legislation will address the selection of a new Essential Health Benefit (EHB) for Qualified Health Plans (QHP) available through the Maryland Health Benefit Exchange (MHBE) in 2017.

Goal 3: *Rebalance the State's behavioral health service delivery to ensure that people with disabilities have access to these services in the most integrated setting based on their needs and community living preferences.*

- **Community-Based Treatment.** Maryland continues to strive to serve people with behavioral health needs in community-based settings. In FY2015, of the 113,852 services provided by BHA, over 71% of those services were delivered in community-based settings.

Goal 4: *Improve access for children and adolescents with mental health disabilities to supports and services within their communities.*

- **1915(i) Implementation.** Over the past several years, Maryland has operated a special CMS demonstration project known locally as the Residential Treatment Center (RTC) Waiver, which was authorized by the federal government under Section 1915(c) of the Social Security Act to provide home and community-based services for children and youth with emotional disturbances and their families. The demonstration project ended, and Maryland applied for the 1915(i) State Plan Amendment to serve a similar population of youth and families, with the services further developed based on knowledge gained by the initial demonstration process. CMS approved Maryland's application on October 1, 2014 and implementation of 1915(i) is underway. As part of this new program, Maryland created a new Mental Health Targeted Case Management service specifically designed to address the needs of children and youth

- **Healthy Transitions.** Maryland was one of seven states awarded a "Now is the Time" Healthy Transitions grant from the federal Substance Abuse and Mental Health Services Administration. This grant will build on the work done under a previous iteration of this grant, which expired in 2014. Through the Healthy Transitions grant, BHA will provide wraparound services for transition-age youth with serious behavioral health needs in Howard, Calvert, Charles and St. Mary's counties.   It is projected that 380 youth will be served through this initiative.

Goal 5: *Improve access to care for people with disabilities and ensure Healthcare Reform efforts incorporate the needs of people with disabilities.*

- **Young Adult Access to Health Care.** The Office of Genetics and People with Special Health Needs is now chairing a Health Care Transition Council, which is designed to help ensure youth with disabilities are able to access health care as they transition to adulthood. As part of this work, the Office of Genetics and People with Special Health needs is planning statewide presentations to students, parents, and caregivers, including several webinars on health care transition as a form of development and resources.

TRANSPORTATION

> ***Vision*** Marylanders with disabilities will access an array of reliable, cost-effective transportation options, enabling travel to destinations of their choosing at the same rate as their peers without disabilities.

Goal 1*: Improve access to public and personal transportation for people with disabilities.*

- **Paratransit Rides.** MTA provided nearly 2,250,000 paratransit rides and WMATA provided over 1,300,000 paratransit rides to Maryland residents with disabilities.

- **MTA On-time Performance.** The on-time performance rate of MTA's Mobility decreased from 92% in FY2014 to a projected 87.5% in FY2015. MTA continues to work to work to improve the on-time performance of the paratransit services, including purchasing new vehicles for its fleet. In August 2015, the on-time performance of the MTA Mobility system once again was at 92%.

- **Accessible Taxis**. MDOD is working with the Public Services Commission to increase the number of accessible taxis available to people in the Baltimore metropolitan region. In FY2015 there were 12 wheelchair-accessible taxis operating in the greater Baltimore region, a number that is projected to double by FY2016.

Goal 2: *Increase use fixed route transportation by people with disabilities.*

- **Disability Pass Use in Fixed Route.** MTA continues to sell a large number of disability passes for its fixed route system, indicating a high level of ridership among people with disabilities. In FY2014, 202,950 passes were sold, and 205,000 passes are projected to have been sold in FY2015.

- **Travel Training.** MTA, supported by MDOD, continues to explore travel training as a means of helping people with disabilities learn how to use fixed route transportation, thus reducing reliance on the paratransit system. In June 2015, MTA released a Request for Proposals to receive bids from potential vendors of both the Call-a-Ride Services and travel training. These bids are currently being solicited and reviewed.

Goal 3: *Examine cross-regional transportation capacity in both the fixed route and paratransit systems to enable people with disabilities to travel across regions using multiple systems.*

- **Reciprocity.** The State Commission on Human Services Transportation, an interagency collaboration that looks at issues affecting transportation for people with special needs,

continues to work on streamlining cross-jurisdictional travel. The Commission has been exploring the potential creation of standardized forms to help facilitate reciprocity among paratransit systems in the state, which would give people certified to use one paratransit system automatic access to other paratransit systems without having to go through a separate certification process.

ACCESS MARYLAND

Vision *Ensure Marylanders with disabilities have access to state-operated facilities by using Access Maryland funds to support accessibility projects in State-owned facilities.*

At the close of FY2015, Access Maryland has encumbered $35 million in accessibility projects to improve access to Maryland's State-owned facilities. Projects have included things such as signage installation to accessible interiors and exterior accessible routes, restroom modifications, and construction of elevator towers.

At the close of FY2015, there were seven projects in design estimated to cost $1.9 million and six projects under construction for $1.3 million.

One exciting project is a new partnership between Access Maryland and Public Safety Works, a division of the Department of Public Safety and Correctional Services. After professional design, construction of the project at the Eastern Pre-Release Center was undertaken by Public Safety Works participants - inmates with a background in construction overseen by a knowledgeable DPSCS employee and professional monitoring. It is expected that the cost of the project will be one-half of the original estimated cost and provides documented work experience for participating inmates.

Performance Measure	FY14	FY15 estimate	FY16 goal
1. Projects in design.	12 projects	7 projects	11 projects
2. Projects under construction.	8 projects	6 projects	8 projects
3. Projects completed.	14 projects	8 projects	11 projects
4. *New measure:* Percent of total projects in design or under construction that belong to non-university facilities.	35%	40%	50%

III. STATE DISABILITIES SERVICE DATA

> The enabling statute for the Maryland Department of Disabilities requires MDOD to evaluate disability services and to develop performance measures of said services. The following seven charts show progress on key performance data currently available for several policy areas.[1]

Community Living

Chart 1   Proportion of People Receiving Long-Term Supports in Medicaid Community-Based Services versus Medicaid Institutional Long-Term Care (LTC) Services.

Chart 2   Proportion of People Receiving Developmental Disabilities Administration (DDA) Long-Term Supports in Community-Based Services (CBS) versus Developmental Disabilities Administration (DDA) Institutional Long-Term Care (LTC) Services by the Developmental Disabilities Administration.

Chart 3   Proportion of Adults with a Mental Health Diagnosis Receiving Behavioral Health Administration (BHA) Community-Based Services (CBS) versus Behavioral Health Administration (BHA) Long-Term Care (LTC) Institutional Services.

Employment and Training

Chart 4   People Served through Developmental Disabilities Administration (DDA) and Behavioral Health Administration (BHA) Supported Employment Services (SES).

Chart 5   People Served through the Division of Rehabilitation Services (DORS) and the Department of Labor, Licensing, and Regulation (DLLR) Supported Employment Services (SES).

Transportation

Chart 6   Level of Services and Performance Provided to Maryland residents by Maryland Transit Administration (MTA) and Washington Metropolitan Area Transit Authority (WMATA) Paratransit Services.

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[1] As of the writing of this report, adjusted actual FY2015 data was not yet available from any reporting agency; FY2015 estimates are reflected.

COMMUNITY LIVING – Chart 1

Chart 1 shows data for programs that provided Medicaid State Plan and waiver funding for long-term care for older adults and people with disabilities. Since FY2012, the percentage of people receiving supports via community-based settings versus in nursing home or other institutional settings will rise from 45% to an estimated 49% in FY2016. With continuation of the Money Follows the Person Project, this indicator is expected to show continuous improvement.

Chart 1

Proportion of People Receiving Long-Term Supports in Medicaid Community Based Services (CBS) versus Medicaid Institutional Long-Term Care (LTC) Services

	2012	2013	2014	2015 (est.)	2016 (est.)
■ Medicaid CBS	12,309	12,536	13,157	13,738	14,363
■ Medicaid Institutional LTC	14,737	15,489	15,470	15,199	15,019
Total Medicaid LTC	27,046	28,025	28,627	28,936	29,382
Percent served in CBS	45%	45%	46%	47%	49%
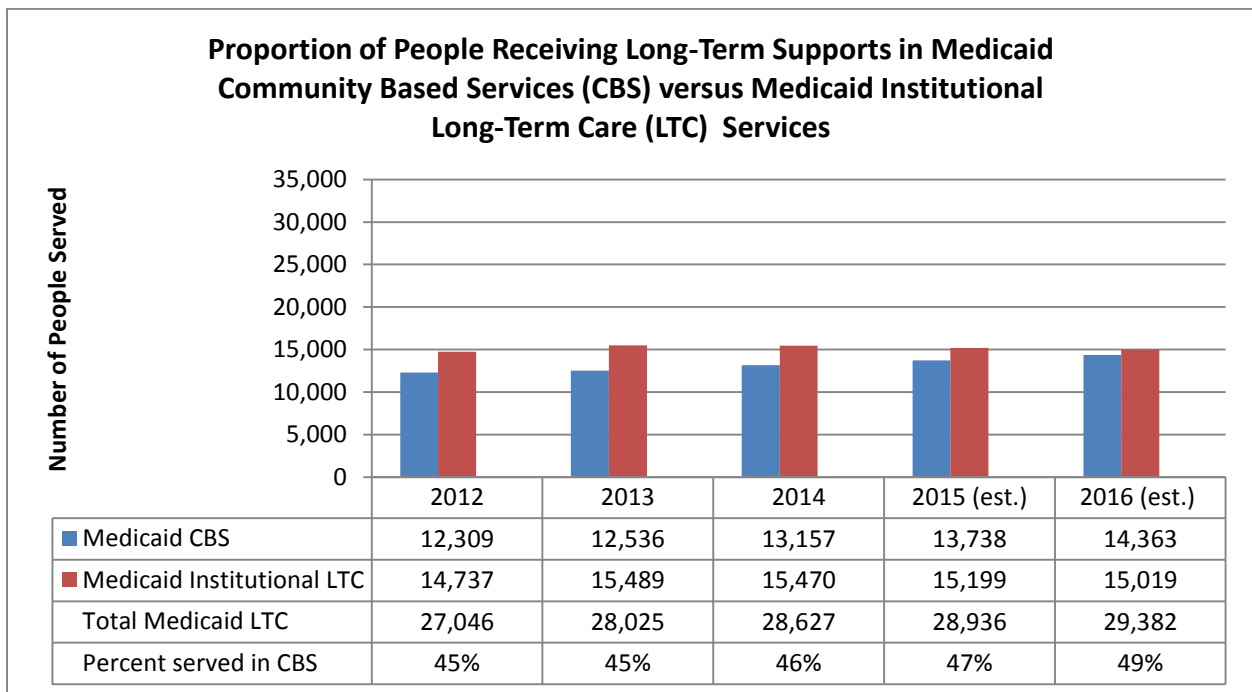
Source: MFR

COMMUNITY LIVING – Chart 2

In FY2012, the percentage of people receiving community-based services through the Developmental Disabilities Administration (DDA) reached 99.30% of the total individuals served. This indicator is expected to increase incrementally to 99.61% in FY2016.

Chart 2

Proportion of People Receiving Long-Term Supports in DDA Community-Based Services (CBS) versus DDA Institutional Long-Term Care (LTC) Servces

	2012	2013	2014	2015 (est.)	2016 (est.)
▪ DDA CBS	23,359	24,445	26,527	27,600	26,888
▪ DDA Institutional LTC	166	129	118	121	110
Total DDA LTC	23,527	24,574	26,645	27,715	28,810
Percent DDA served CBS	99.30%	99.48%	99.56%	99.59%	99.61%

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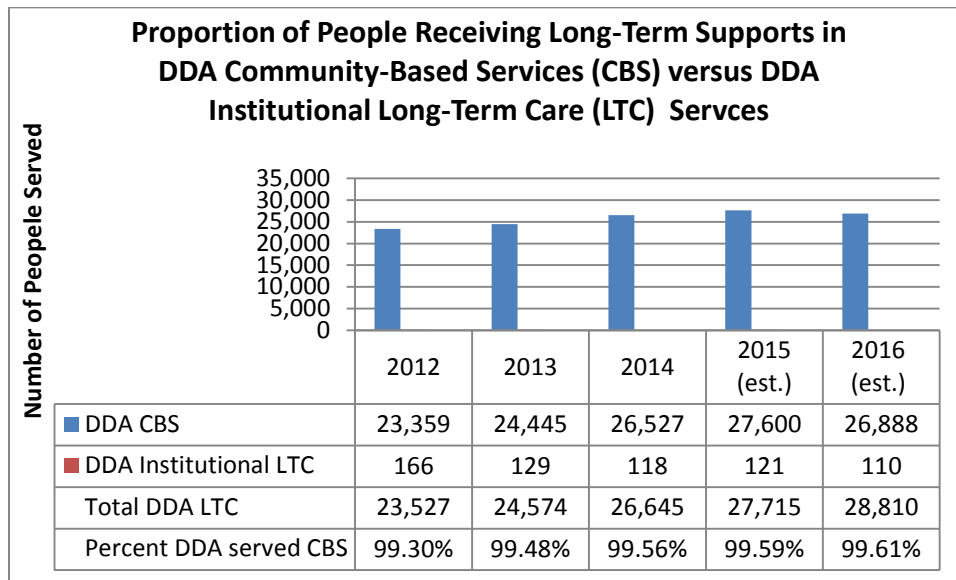
Source: MFR

COMMUNITY LIVING & HEALTH AND BEHAVIORAL HEALTH – Chart 3

Chart 3 shows that more than 94.40% of adults with a mental health diagnosis served by the Behavioral Health Administration received community-based services in FY2012. This progress is expected to continue through FY2016.

Chart 3

Proportion of Adults with a Mental Health Diagnosis Receiving BHA Community-Based Services (CBS) versus Institutional Long-Term Care (LTC) Services

	2012	2013	2014	2015 (est.)	2016 (est.)
■ BHA CBS	18,194	19,271	20,340	20,543	20,748
■ BHA Institutional LTC	1,076	1,775	1,718	1,695	1,705
Total BHA LTC	19,270	20,276	22,058	22,238	22,455
Percent BHA CBS	94.40%	95.04%	92.21%	92.38%	92.41%
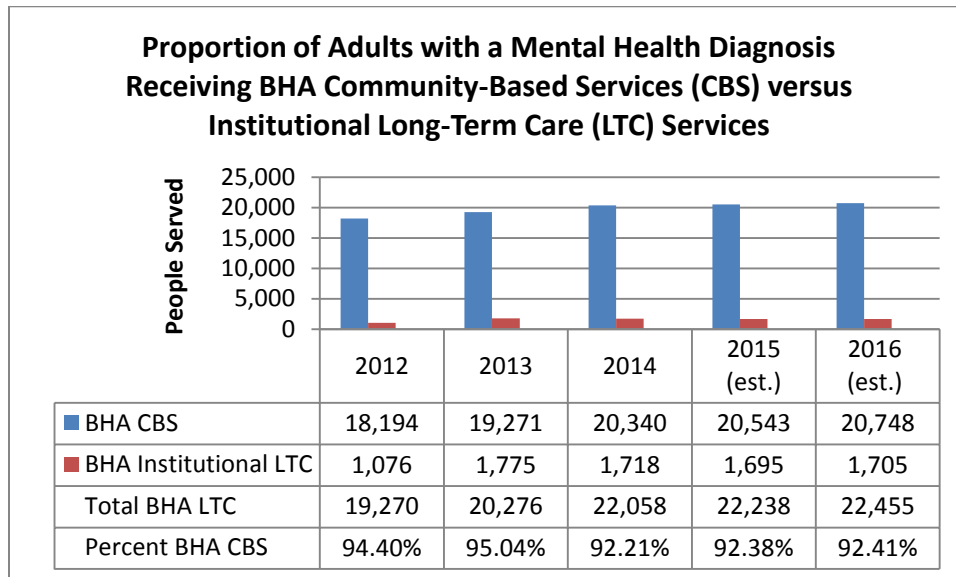
Source: MFR

EMPLOYMENT AND TRAINING – Chart 4

Chart 4 shows performance data for employment services and employment outcomes for Marylanders with disabilities served through two different DHMH agencies, the Developmental Disabilities Administration (DDA) and the Behavioral Health Administration (BHA). The number of people served through Supported Employment Services (SES) has climbed steadily, increasing 7,759 in FY2012 to 8,777 in FY2016, an increase of nearly 1,000 people.

Chart 4

People Served through DDA and BHA Supported Employment Services (SES)

	2012	2013	2014	2015 (est.)	2016 (est.)
DDA SES	4,715	4,765	5,087	5,187	5,287
BHA SES	3,044	3,105	3,384	3,435	3,490
Total SES	7,759	7,870	8,471	8,622	8777
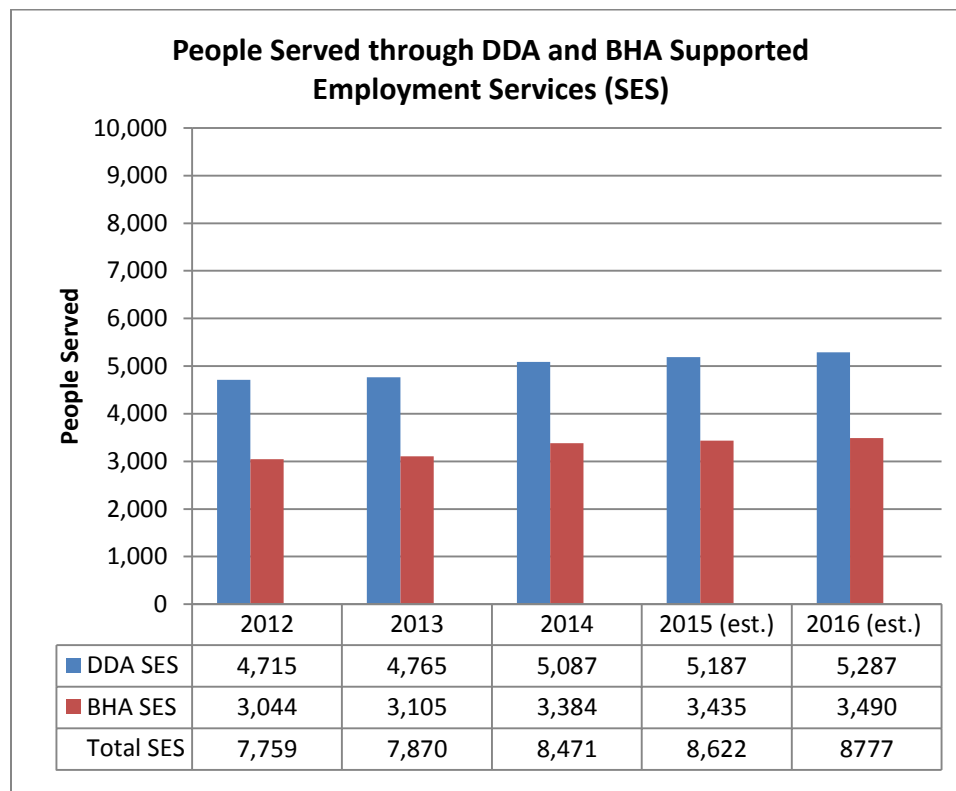
Source: MFR

EMPLOYMENT AND TRAINING – Chart 5
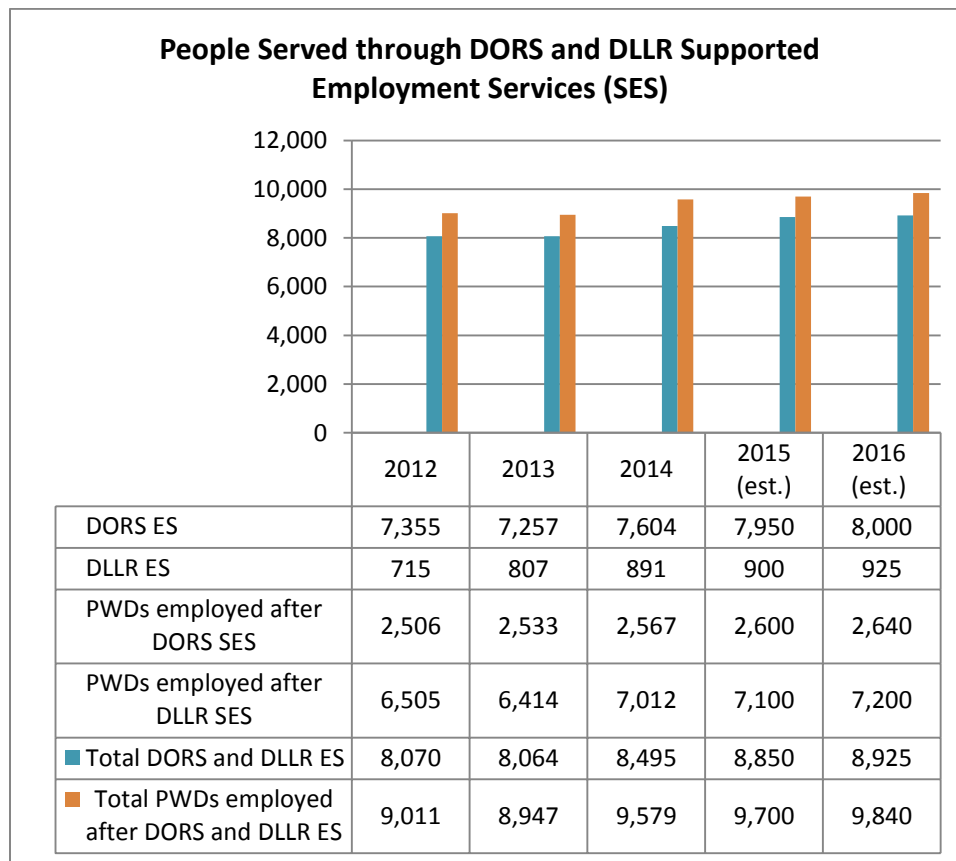
Chart 5 shows that the Division of Rehabilitation Services (DORS) and the Department of Labor, Licensing, and Regulation (DLLR) provided employment services to 8,070 people with disabilities in FY2016, an increase of over 855 people since FY2012. The employment of people with disabilities who have received employment training and/or who are seeking employment through the Maryland Workforce Exchange is expected to continue to increase to 9,540 in FY2016, up from 9,011 in FY2012.

Chart 5

People Served through DORS and DLLR Supported Employment Services (SES)

	2012	2013	2014	2015 (est.)	2016 (est.)
DORS ES	7,355	7,257	7,604	7,950	8,000
DLLR ES	715	807	891	900	925
PWDs employed after DORS SES	2,506	2,533	2,567	2,600	2,640
PWDs employed after DLLR SES	6,505	6,414	7,012	7,100	7,200
■ Total DORS and DLLR ES	8,070	8,064	8,495	8,850	8,925
■ Total PWDs employed after DORS and DLLR ES	9,011	8,947	9,579	9,700	9,840

*The DLLR data for training includes only Workforce Investment Act (WIA Customers) but not Labor Exchange customers. LE does not capture number of participants trained.
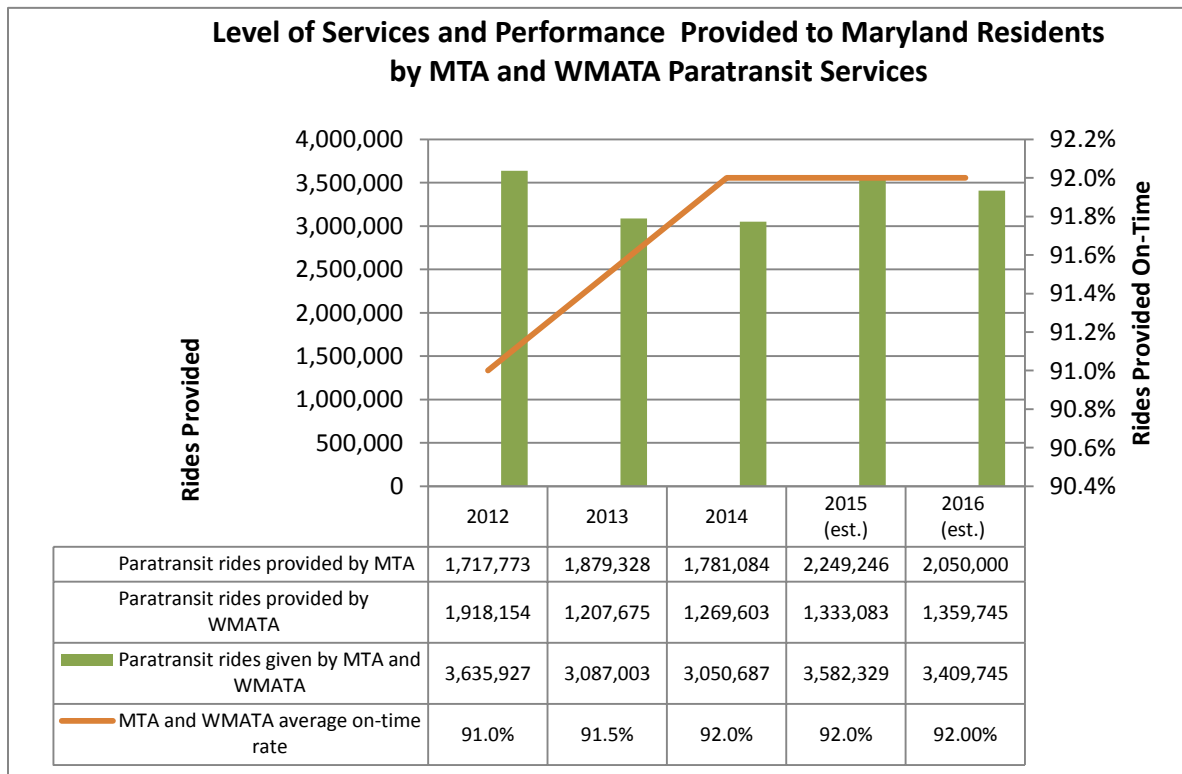
** DLLR data for employment includes both WIA and LE customers.

Source: MFR

TRANSPORTATION – Chart 6

Chart 6 shows the level of service and performance provided to Maryland paratransit riders by the Maryland Transit Administration (MTA) and the Washington Metropolitan Area Transit Authority (WMATA) (for services in Montgomery and Prince George's Counties.) MTA and WMATA provided over 3,000,000 rides to people certified for paratransit service in FY2012, and expects to provide over 3,400,000 in 2016.

Chart 6

Level of Services and Performance Provided to Maryland Residents by MTA and WMATA Paratransit Services

	2012	2013	2014	2015 (est.)	2016 (est.)
Paratransit rides provided by MTA	1,717,773	1,879,328	1,781,084	2,249,246	2,050,000
Paratransit rides provided by WMATA	1,918,154	1,207,675	1,269,603	1,333,083	1,359,745
Paratransit rides given by MTA and WMATA	3,635,927	3,087,003	3,050,687	3,582,329	3,409,745
MTA and WMATA average on-time rate	91.0%	91.5%	92.0%	92.0%	92.00%

Source: MFR