



WISCONSIN BOARD FOR PEOPLE
WITH DEVELOPMENTAL DISABILITIES

Governor's Budget Includes Positives for Disability Community, But Falls Short on Some Key Issues

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(MADISON) – The Wisconsin Board for People with Developmental Disabilities supports the Governor's proposed elimination of the children's wait list for long-term supports, additional funds for public schools that will benefit all students, and important reforms to the Medicaid-Work Incentive Program in his biennial budget.

“Wisconsin has invested in critical community supports that have eliminated wait lists for adults with full expansion of Family Care/IRIS set to happen in 2018,” said Beth Swedeen, BPDD Executive Director. “The only wait list we have left is for children's supports. The Governor's budget would eliminate that wait list for 2,200 families, allowing them access to critical supports that keep children with significant disabilities out of institutional care and connected to their communities.”

BPDD also supports the Governor's proposed increase in K-12 education, including additional mental health resources and the inclusion of two specific youth transition initiatives that support and reward schools that place students with disabilities in jobs or post-secondary education. However, BPDD continues to have significant concerns about the need for increases in special education funding, which was not included in the proposed budget.

BPDD has also worked with advocates, the Governor's office and other state agencies on the proposed changes to Wisconsin's Medicaid Work Incentive Program (MAPP). The proposed budget makes needed changes to create a fair premium structure incentivizing work, ensures that worker's savings workers accumulate are retained after retirement, and ensures people who lose their jobs have supports toward re-employment.

Swedeen said two top issues critical to the disability community, the direct care worker shortage and accessible transportation, begin to be addressed in the budget but need further attention and resources.

“While a 2-percent increase in personal care rates are a start, that amount does not go far enough to address the direct care crisis Wisconsin is facing statewide, particularly in rural areas,” Swedeen said. “A survey of more than 500 long-term care participants showed that 43% go without supports for 7 shifts or more per month because they can't find workers. We are hearing dire stories of people stuck in bed with no food or water because multiple shifts of workers didn't show up. State labor data shows this crisis will get only more acute in the next 5-10 years.”

Swedeen noted that direct care providers in nursing homes are set to receive a more than three-times higher increase in the budget than workers coming into people's homes. “All direct care staff need a raise. But the folks coming into people's homes to provide critical cares like helping people get out of bed, get dressed, and prepare meals at \$9 to \$11 an hour are especially in need of significant wage increases.”

BPDD also appreciates the modest increase in paratransit, but had hoped to see a more significant investment in all types of public transit, since few in the disability drive or own cars.

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“Accessible, reliable, affordable transportation is repeatedly the top concern we hear from people with disabilities. Transportation is the critical link that gets people to their jobs, to medical care, and connect to family and friends,” Swedeen said.

“Innovative solutions and funding are needed in the years ahead to address both the direct worker crisis and the transportation barriers that are necessary to allow people with disabilities to stay in their homes and participate in community life,” Swedeen said.

Swedeen said BPDD and the disability community will work with the Governor and Legislature in the months ahead on these and other issues.

“Both the Governor and Legislature acknowledge the important contributions the disability community make in our state, and have been supportive of many of the programs that allow people with disabilities to remain in their homes and communities as contributing members,” she said. “We will continue to work with state policymakers in the months ahead on critical issues, including potential changes in multiple public benefits programs at the federal level, including potential changes to Medicaid.”