



Legislative Fiscal Bureau

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Joint Committee on Finance

Paper #429

Office for the Promotion of Independent Living Programs (Health Services -- Services for the Elderly and People with Disabilities)

[LFB 2023-25 Budget Summary: Page 267, #7]

CURRENT LAW

The Department of Health Services (DHS) Office for the Promotion of Independent Living Programs (OPIL) is composed of three sub-offices: the Office of the Blind and Visually Impaired (OBVI), the Office for the Deaf and Hard of Hearing (ODHH), and the Office of Physical Disabilities and Independent Living.

By providing direct service supports and partner training and management, OPIL staff work to ensure that people with disabilities of all ages, abilities, and incomes have equal opportunities and access to programs and services that ensure a high quality of life, including helping people maintain their independence and the ability to live independently in the community of their choice.

DISCUSSION POINTS

1. DHS estimates that between 2020 and 2025, Wisconsin's population over the age of 85 years old will increase by 15%, which will increase the prevalence of visual impairment and hearing loss, as well as other age-related disabilities.

2. In an effort to meet the anticipated need for services for Wisconsin's elderly population, AB 43/SB 70 would: (a) fund 1.0 additional rehabilitation specialist for the blind position within the OBVI (\$59,000 GPR in 2023-24 and \$76,600 GPR in 2024-25); (b) increase funding for the telecommunications assistance program (TAP) by \$50,000 GPR annually; (c) increase funding for interpreter services by \$100,000 GPR annually; and (d) increase funding for WisTech grants DHS provided to independent living centers (ILCs) by \$624,000 GPR annually.

Office for the Blind and Visually Impaired (OBVI)

3. The Centers for Disease Control and Prevention (CDC) estimates that approximately 67 percent of adults with vision problems are older than age 65. Further, 2019 Census data report that 13.2% of people over the age of 85 experience vision difficulty, compared to 1.8% of the population overall, indicating that as the population ages, the need for vision related services will grow.

4. OBVI is currently staffed with 1.0 FTE supervisor, 10.17 FTE rehabilitation specialists, and 2.0 LTE special activity helpers. These positions are funded with a combination of GPR, Medical Assistance administrative federal matching funds, and grant funding the Department of Workforce Development receives from the federal Rehabilitation Services Administration and transfers to DHS to provide vision-related services to adults aged 55 and older.

5. AB 43/SB 70 would provide \$59,000 GPR in 2023-24 and \$76,600 GPR in 2024-25 to fund 1.0 additional rehabilitation specialist for the blind to increase number of rehabilitation specialists within the office to 11.17 FTE.

6. OBVI staff visit individuals in their homes, conduct group trainings, and teach techniques and technologies for use in daily living (home management, personal care, mobility, and communications). These specialized skills allow individuals to adapt and adjust to vision loss, enabling them to live as independently as possible. There is no charge for OBVI services.

7. The Department indicates that OBVI staff spend an average 9.5 hours with each person who receives services from OBVI. However, this time does not include staff time for travel to and from individual appointments, entering case notes and developing individual rehabilitation plans, identifying and ordering appropriate assistive technology devices, services provided by additional trainers, or follow-up information and technical assistance. Staff generally work with consumers for a few weeks at a time before closing their case. However, staff often work with the same individual over several years as their vision loss and rehabilitation needs change and thus need additional support or training to be able to live independently. On average, each OBVI position has an average active caseload of 35 individuals at a time.

8. While OBVI may prioritize services for individuals at risk of transitioning to a residential facility, the Department indicates that, based on current staffing individuals in need of services can wait several weeks for those services to be provided. However, actual wait times vary, depending on the specific services included in the individual's plan of rehabilitation training.

Telecommunication Assistance Program and Service Fund

9. According to the CDC, hearing loss is common in older adults, affecting 33 percent of people older than 60 and 50 percent of those older than 85. As with services for individuals who are blind or visually impaired, as the population ages, the need for programs providing assistance to individuals who are hearing impaired is anticipated to grow.

10. The statutes currently provide DHS with broad authority to provide assistance to hearing impaired persons to secure telecommunication devices capable of serving their needs, but limits this

assistance to individuals who: (a) are certified as deaf or severely hard of hearing by a physician or audiologist; and (b) live in families with adjusted gross income less than 200% of the federal poverty level (in 2023, \$39,439.92 for a family of two).

11. Base funding for the program that supports interpreter services (the Service Fund) and telecommunications aids for individuals who are hearing impaired (the telecommunications assistance program, or TAP) is \$178,200 GPR annually. DHS uses this funding to reimburse hearing interpreters and, subject to availability of funds, operate several financial assistance programs for telecommunication equipment for low-income people with hearing impairments, including the hearing aid assistance program.

12. TAP provides financial assistance to low-income deaf and severely hard of hearing individuals who need telecommunications equipment such as amplified telephones, mobile devices, signaling devices and hearing aids. Current funding for the program was set at \$80,000 GPR in 1995 and has not been increased since.

13. TAP provides two types of assistance: (a) a copayment program to provide \$100 for copay costs required by the telecommunications equipment purchase program (TEPP) available through the Public Service Commission; and (b) a hearing aid assistance program to provide up to \$250 towards the purchase of new hearing aids, telecoils, and Bluetooth-enabled hearing devices.

14. The Americans with Disabilities Act requires certain entities to provide communications assistance, at no cost, to individuals who are deaf, have hearing loss, or are deaf-blind. The Service Fund reimburses communication access service providers when such communication support is not required by state or federal law, with certain limitations, as well as in circumstances where the provider may encounter delayed payment from the liable entity (subsequently expenditures may be billed to the liable entity as program revenue).

15. Limited by available funding, ODHH operates both TAP and the Service Fund on a first come, first served basis. Once funding has been depleted, a waiting list for services may be established by the Department. Currently, there is no waiting list for the Service Fund. However, a waiting list has been in place for TAP since November 15, 2022. As of March 21, 2023, 65 individuals were either on the waitlist or were in the process of submitting an application. As of that same date, there are 40 applications that were eligible for approval once funding is available next fiscal year. These applications are requesting an estimated \$37,000 in TAP assistance.

16. The bill would provide \$100,000 GPR for the Service Fund and \$50,000 GPR for TAP to ensure ongoing, timely access to both of these services.

17. With the proposed increase in funding for the Service Fund, DHS estimates it could double the number of appointments and events it supports. DHS indicates that the average cost of interpreter or captioning services is \$100 per hour, plus travel to and from the assignment. This means that on average DHS can fund approximately 900 hours of services (including travel) annually from the current allocation of \$93,400. In 2021-22 the Service Fund was able to support 105 requests for interpreter or captioning services. Some of these requests were for one-time funding, and other requests were for ongoing services. As of March 31, 2023, the Service Fund had approved

communication access services for 137 events or appointments and as such estimates that the program will expend all of its budgeted funds before the end of the 2022-23.

18. As it pertains to TAP, DHS estimates that an additional 50 to 100 people could receive TAP services with the \$50,000 increase. However, the actual number of individuals served depends on the equipment requested and the cost of these telecommunication devices.

State Assistive Technology Program

19. Independent living centers (ILCs) are community-based, cross-disability, nonresidential, private nonprofit agencies that are operated within a local community by individuals with disabilities, and provide an array of independent living services. ILC services include: information and referral; independent living skills training; peer support; individual and systems advocacy; and services that facilitate transition from nursing homes and other institutions to the community, provide assistance to those at risk of entering institutions, and facilitate transition of youth to postsecondary life. Centers may also provide other services necessary to improve the ability of individuals with significant disabilities to function independently in the family or community and/or to continue in employment.

20. The Wisconsin Assistive Technology Program (WisTech) provides information on selecting, funding, installing, and using assistive technology devices and services. This includes device loans, demonstrations, and training offered through a network of partners primarily consisting of ILCs.

21. Assistive technology is any item, device, or piece of equipment used to maintain or improve the functionality of people with disabilities, allowing them to be more independent in education, employment, recreation, and daily living activities. Assistive technology includes the services necessary to get and use the devices, including assessment, customization, repair, and training.

22. There is currently no GPR funding budgeted for assistive technology. However, the WisTech program provides each ILC \$40,000 FED annually, supported by funding the state receives the Assistive Technology Act for this purpose. The Department indicates that this funding is insufficient to support both staff and the equipment necessary for training and loaning to people with disabilities.

23. Between 2018 and 2022 an average of 976 individuals annually received short-term device loans and 1,377 individuals received device demonstrations through the WisTech program. While services are available to people with disabilities, their families, employers, service providers, and other interested persons, the majority of both device loan and demonstration users are individuals with disabilities and their family members.

24. The WisTech program also offers a device reutilization and exchange program, which involves the refurbishment, recycling, and repair of assistive technology devices. Between 2018 and 2022, an average of 1,054 consumers used the device reutilization and exchange program.

25. AB 43/SB 70 would provide \$624,000 GPR annually for DHS to increase WisTech grants for the eight current independent living centers. The Administration's intent is to provide each ILC an additional \$78,000 annually, of which \$68,000 would fund a WisTech staff member at each of the eight ILCs and \$10,000 would fund equipment.

26. To address current utilization of services resulting in waiting lists and delayed services, as well as anticipated increases in utilization as the population ages, the Committee could provide \$833,000 GPR in 2023-24 and \$850,600 GPR in 2024-25 and 1.0 GPR position, beginning in 2023-24, to support programs within the DHS Office for the Promotion of Independent Living. [Alternative 1]

27. On the other hand, while each of the three programs discussed previously are administered by the DHS Office for the Promotion of Independent Living, the Committee could choose to provide additional funding for one or two of the programs, as operation of and funding for the programs is not interrelated. [Alternatives 2a, 2b, or 2c]

28. Finally, the Committee could choose to take no action on this item. [Alternative 3]

ALTERNATIVES

1. Provide \$833,000 GPR in 2023-24 and \$850,600 GPR in 2024-25 and 1.0 GPR position, beginning in 2023-24, to support programs within the DHS Office for the Promotion of Independent Living.

ALT 1	Change to Base	
	Funding	Positions
GPR	\$1,683,600	1.00

2. a. Provide \$59,000 GPR in 2023-24 and \$76,600 GPR in 2024-25 and 1.0 GPR position, beginning in 2023-24, to fund 1.0 rehabilitation specialist for the blind position within the Office for the Blind and Visually Impaired.

ALT 2a	Change to Base	
	Funding	Positions
GPR	\$135,600	1.00

b. Provide \$150,000 GPR annually to increase funding available for the Telecommunications Assistance Program and interpretation services through the Service Fund.

ALT 2b	Change to Base	
GPR	\$300,000	

c. Provide \$624,000 GPR annually to increase funding for WisTech Grants for the Independent Living Centers.

ALT 2c	Change to Base
GPR	\$1,248,000

3. Take no action.

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