<u>Colorado Developmental Disabilities Council</u> <u>Health Care Principles</u>

Individuals with developmental disabilities are more likely to experience early death, chronic conditions, and preventable health conditions, compared to persons without disabilities. Even with access to care, people with developmental disabilities often have difficulty recognizing and communicating their own health care needs. Moreover there is a significant shortage of qualified, trained health care professionals who are prepared and willing to treat them.

CDDC believes that comprehensive health care must provide affordable health, dental and vision coverage, improved quality, and better cost control, while addressing the significant health and health care disparities faced by individuals with developmental disabilities. In addition to improving access to quality medical care for persons with developmental disabilities, the health care system must improve the way our nation provides long term services and supports related to health care (such as assistance and supervision with activities of daily living, taking medication, and preparing meals).

Policy Recommendations:

Comprehensive health care must adequately address the following:

- Access to affordable health care coverage for Americans with developmental disabilities, removing any bias based on pre-existing conditions, congenital impairments, or whether the intervention is habilitative or rehabilitative in nature.
- Assure greater access to quality care by health care providers trained to treat individuals with disabilities, including individuals with intellectual and other disabilities. This training needs to include pre-service training (in college, medical school, etc.) as well as ongoing training and professional development options for practicing health care providers.
- Increase the development of specific quality measures to improve primary and preventative care for individuals with disabilities.
- Provide appropriate, accessible, and equivalent health care for individuals with disabilities at all levels of service.
- Ensure the equal treatment of individuals with disabilities in all policies, programs, and research designed to decrease health disparities. This includes: adding individuals with disabilities in the definitions of "medically underserved populations" and "cultural competence"; incorporating individuals with disabilities in all data collection and reporting required for racial, ethnic, gender, or geographic health disparities, in a manner that can facilitate identification and reduction of disparities associated with physical, mental health, cognitive, sensory, intellectual, and/or developmental disabilities; and the inclusion of "disabilities" and "sign language interpreters" in the United States Department of Health and Human Services Office of Minority Health National Standards on Culturally and Linguistically Appropriate Services (CLAS).

- Include of individuals with disabilities in prevention and wellness programs.
- Further develop and strengthen the "medical home" model to meet the health care needs of individuals with disabilities.
- Improve the private health insurance system to ensure coverage for ALL Americans so that Medicaid and Medicare are not the only affordable coverage for people with disabilities.
- Fully fund and modernize the Medicaid program so that it is fully aligned with evidenced based standards of care for beneficiaries, has a reimbursement rate that is competitive with private insurance and eliminate the current institutional bias to allow individuals with disabilities to receive the needed services at home or in the community along the lines of the Community Living Assistance Services and Supports (CLASS) Plan and the Community Choice Act, so that it provides accessible, high-quality health care services to people with disabilities enrolled in the program.
- Create a national long term care insurance program that is affordable and contains incentives to prepare the general population to better meet the need for long term care.
- Remove the two-year waiting period for Medicare for individuals with disabilities eligible for Social Security Disability Insurance (SSDI).