

MEETING MINUTES
HUMAN SERVICES SUBCOMMITTEE
FEBRUARY 13, 1987

The meeting of the human services subcommittee was called to order at 8:00 a.m. on February 13, 1987 in room 108 of the state capitol building by Chairman Cal Winslow.

ROLL CALL: All members were present.

DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

(40b:000) Peter Blouke, LFA, covered the issue sheets and the modified requests for the Vocational Rehabilitation Division budget.

(40b:112) Maggie Bullock, administrator the Vocational Rehabilitation Division (VR) and the Visual Services Division (VSD), presented an overview of the delivery system for services in the state, and distributed exhibit 1, which describes the Vocational Rehabilitation and Visual Services programs, including services provided in fiscal year 1986 by service delivery and disability. Exhibit 2 describes services for Independent Living (IL) and Special Populations (SP).

She stated the VR program operates under the Rehabilitation Act of 1973 and amended through 1986 and the Social Security Act as amended through 1986. The VSD serves only the blind and visually impaired, and is organized into four (4) districts throughout the state. In the past year this division has served approximately 600 people.

Mrs Bullock continued with the Rehab Division, which is organized into three (3) bureaus and 11 field offices throughout the state, and the Disability Determination Bureau (DDB), which is centrally located in Helena and operates strictly under the authority of the Federal social Security Administration. DDB adjudicates disability claims for the Social Security Administration. The state office consists of the Management Operations Bureau which manages the budget, expenditures, regulations and implementation in both divisions and the Field Services Bureau, which provides Voc Rehab services to 7,800 people. Most of the funding for the programs is from Title I section 110 of the Rehab Act of 1973. Mrs Bullock stated the main mission of these two (2) divisions is stated in federal statute and reinforced in the state statute.

Mrs Bullock stated the main purpose of the divisions is to develop and implement comprehensive and coordinated programs

of rehabilitation for individuals with disabilities to maximize their employability, their independence, and their integration into the community and the work place. She stated for every dollar Montana invests in this program approximately \$10 is returned to the economy. She stated a rehabilitated individual who begins working is able to pay back the tax dollars that were spent on their rehabilitation in one (1) to two (2) years, with the cost per individual for rehabilitation at \$1,100. She added since 1985 the SP/IL part of the Montana VR program has brought in 90% federal matching funding requiring only a 10% state match. She noted the general fund match is not included in the LFA budget because during the 1985 legislative session the department stated the congressional intent at that time was that the program would only be a one year grant. However, the legislature thought the program was so important that they appropriated general fund for both years of the biennium for this program. During the congressional hearings that were held during mid 1985 through early 1986, testimony from consumers with especially severe disabilities and professionals alike overwhelmingly supported the continuation of this program. She noted that people served by these dollars are those who are not traditionally eligible for Voc Rehab, Medicaid Waiver, of the Developmental Disabilities programs in the state. Mrs Bullock stated during the first year of the grant, \$96,000 was received and 105 people were served. The second year of the grant, which the program is into now, it is estimated the program will serve 450 people, triple the number served the first year with only double the amount of increased federal dollars.

(40b:241) Mrs Bullock covered exhibit 1 describing the program summary. She noted that a large number of people served are on Medicaid or some form of public assistance, and once rehabilitated become tax payers instead of tax users. She continued with areas of services and other benefits provided by the divisions.

Mrs Bullock highlighted exhibit 2 on the IL/SP program. This group of disabled individuals is increasing because of advancements in technology and medical science able to keep people alive after traumatic accidents.

Mrs Bullock continued and covered the budget differences between the LFA and the executive and the modification requests.

(40b:403) Chairman Winslow asked if the VR program could help special education graduates with the federal supported work funding. Mrs Bullock stated the division could, with their emphasis in services targeting chronically mentally

ill, head injured, and students coming out of high school with the VR supported work emphasis.

(40:441) Peter Blouke then covered the Visual Services Division (VSD) and the Disability Determination Bureau (DDB) budget issues and modified requests.

(40:568) Mrs Bullock noted that if the divisions had the ability to transfer dollars from VSD over to VR, the division's benefits budgets would not be a problem for them. Peggy Williams, chief, Management Operations, noted the problem with benefits was with the LFA funding based on the appropriations in 1986 and 1987. This was based on a modification that the division's had received in benefits that was placed in VR with the idea that it would be used for both VR and VSD. When a modification was requested last year, the divisions did not want to ask for two (2) modifications, one for each division, as the funding and purpose was the same, and the only difference was in the individuals served. Ms Williams stated the divisions were concerned that with HB 357 they may not be able to have this transfer freedom, and are asking in the executive budget to have the funds already allocated to visual services. Ms Williams stated the divisions could go with either budget if there was the freedom to transfer money back and forth.

PUBLIC TESTIMONY

(41a:000) Jim Smith, Montana Association for Rehabilitation (MAR), noted for every dollar invested in the rehabilitation programs, over \$10.00 is returned to state and local economies, and spoke in support of the programs.

(41a:033) Kathy Collins, Helena, read her prepared text (exhibit 3) in support of VR, VSD, VR-EE, and IL. She described the services she received under the VR programs to become self sufficient and secure employment.

(41a:084) Mike Mayer, Missoula, was involved in the Priorities for People (PFP) process representing disabled individuals. He stated PFP had identified SP and IL programs as a priority, as well as encouraged support of the VR and VSD programs. He spoke on the benefits he received as a recipient of the programs. He is able to live independently, has gone to college and received a bachelor's degree, and is working full time. He stated he is able to contribute his talents, abilities, and pay taxes to the state. He urged support of the rehabilitation programs.

(41a:103) Annette Lyman, Kalispell, spoke in support of VR services, and explained the services she has received after a spinal cord injury from a car accident. She is attending

Carroll College majoring in social work. She stressed the importance of the programs and their ability to help disabled people to realize their fullest potential and that their lives don't have to be that different from people without disabilities, people she refers to as temporarily able bodied.

(41a:139) Virginia Sutich, Sand Coulee, spoke in support of VSD. She stated she received help when she needed it from Visual Services and asked for support of the budget and an increase if at all possible. She stated some of the money best spent in the government is for rehabilitation. She added she has personally paid back in taxes every penny she received in benefits and services from the VSD program. She also expressed support for the Independent Living program.

(41a:186) Scott Wheat, MSU student, read his prepared braille testimony (exhibit 6) in support of VSD services. He stated he is a senior in computer science at MSU in Bozeman and will be graduating in June of this year. He said he felt it would have been impossible, or at least very difficult to get a college degree of any kind without services. He said the most valuable equipment VSD has bought for him was a braille embrosser, which is a braille line printer for computers. He stated this gives him braille copies of any programs, and can he can keep up with classwork and perform on an equal basis with his peers. He stated VSD also helped pay for reader services and for transcribing books into braille. He urged support of VSD and VR because he stated they help people like himself to get the education that is necessary to become responsible taxpayers.

(41a:228) Tim Harris, representing Michael G White, secretary treasurer of the Montana Independent Living Project (MILP), read Mr White's prepared testimony (exhibit 4) in support of promoting and funding the IL programs of Montana. Mr White is a 100% service connected disabled veteran due to injuries received in Viet Nam in April, 1969.

(41a:270) Mr Harris, speaking personally, related his varied working career and his current employment as an example that disabled people can do about anything. He asked for support of the VR programs.

(41a:293) Bob Liston, Missoula, related how he had been injured when he was a high school senior and the services that he had received through the years from the VR program. He supported VR at the current level as a cost effective program. He stated affirmative action does not work for the disabled individual, but equal access to opportunities gained through adaptive equipment needed to go out and be

equal with the normal population does. He added he believed that it was cheaper to fund the education and adaptive equipment needed than to keep the disabled on welfare all of their life. He asked support for the disabled individuals through the funding of VR programs.

(41a:367) Tom Masterson, MSU senior in computer science, described his appreciation for the services he had received the last two (2) years he has been going to college. He stated he had been going for five (5) years, three (3) without assistance. He said he had received reader services, braille books, and that without help he doubted his ability to get a degree. He stated reference books, highly important to his education, and which are regularly \$20 at the college bookstore, cost him up to \$200. VSD has provided a braille embrosser for his computer, and he stated that for 18 months he had only a speech module on his computer where he had to go through and memorize every line of a program. He stated VSD services are making it possible for him to become a wage earning taxpayer, which is is willing and anxious to do.

(41a:406) Kathy Biscup, Great Falls, presented her prepared written testimony in support of the VR programs (exhibit 7). Ms Biscup was involved in a car accident in 1983 that resulted in a severe closed head injury. She described her struggle with rehabilitation, and her goal that she will become successfully and competitively employed and be able to live independently in Great Falls.

(41a:506) William Boharski also spoke in support of VR services as being cost effective. He stated the programs allow disabled individuals to become functioning members of society.

(41a:544) Owen Gorman spoke in support of the Voc Rehab Extended Employment Program (VR-EE). He stated he has a 26 year old brother who is handicapped and does not want to live on Social Security disability all his life. Through VR-EE, he is able to live a productive life, and he asked for consideration of full funding for this program.

(41a:571) Joyce Steele, League of Women Voters, stated she has a brother who had sustained a brain stem injury, and spoke in support of Voc Rehab for the League and personally. She then covered her prepared written testimony (exhibit 5) in support of services for this disability group.

(41b:010) Bob Frazier submitted an article (exhibit 8) from the MSU news service on students helping disabled students. He stated VR services are the best value for the dollar, and encouraged support of the rehabilitation programs.

(41b:034) Kay Jauron spoke in behalf of her 28 year old son who has a learning disability. She read her prepared testimony (exhibit 9) in support of rehabilitation programs.

(41b:095) Jane Haynes stated her son sustained a brain stem injury, and that she wants rehabilitation services to be available for him when he needs these types of programs. She urged continued funding for Vocational Rehabilitation.

The meeting was adjourned at 10:03 a.m. (41b:110)

A handwritten signature in cursive script, reading "Cal Winslow", is written above a horizontal line.

Cal Winslow, Chairman

cw/gmc/2.13

DAILY ROLL CALL

HUMAN SERVICES SUB COMMITTEE

50th LEGISLATIVE SESSION -- 1987

Date Feb 13, 1987

NAME	PRESENT	ABSENT	EXCUSED
Rep. Cal Winslow, Chairman	X		
Sen. Richard Manning, Vice Chair	X		
Sen. Ethel Harding	X		
Sen. Matt Himsl	X		
Rep. Dorothy Bradley	X		
Rep. Mary Ellen Connelly	X		
Rep. Dean Switzer	X		

PROGRAM SUMMARY--FISCAL YEAR 1986
Vocational Rehabilitation Program
Visual Services Program
Disability Determination Program

I. VOCATIONAL REHABILITATION AND VISUAL SERVICES PROGRAMS

A. INTRODUCTION

The Vocational Rehabilitation (VR) and Visual Services (VS) Programs provide services to handicapped persons with the intent of returning them to gainful employment. During fiscal year 1986, 7,876 persons were served by the two programs, 727 of whom were rehabilitated. A total of 564 clients were placed in competitive employment and 78 were restored to their roles of homemakers or unpaid family workers. Nationally, the investment of one tax dollar returns ten dollars to the economy.

A federal priority of the rehabilitation programs is serving the severely disabled. Fifty three percent of the clients served in 1986 were severely disabled.

Funding for the VR and VS programs is provided mainly by federal Section 110 funds. Other funding sources include Job Training Partnership Act (JTPA), Independent Living, Social Security, Inservice Training, Workers Compensation, and General Fund.

This summary discusses both the regular program (Sec. 110) and the special programs run by VR/VS.

B. SECTION 110 BENEFITS

Table 1 displays the types of services provided during the year.

Table 1
VR Services Provided
Fiscal Year 1986

<u>Service</u>	<u>Number of Clients</u>
Counseling & Placement	7,876
Diagnosis & Evaluation	2,653
Physical/Mental Restoration	395
College or University	738
Other Post Secondary	474
High School	72
Personal & Vocational Adjustment	184
Maintenance	653
Post Employment	13
Other Services	691

Table 2 displays rehabilitation statistics for selected disabilities. The number of clients served, number of clients rehabilitated, and the cost per client are listed for a few of the more common disabilities.

Table 2
Rehabilitation Statistics by Type of Disability
Fiscal Year 1986

<u>Disability</u>	<u>Number Served</u>	<u>Number Rehabilitated</u>	<u>Avg. Cost per client</u>
Blind/Visually Impaired	558	81	\$1,493
Deaf	297	30	1,505
Orthopedic Amputations	4,584	397	947
Mental Illness/Behav. Prob	101	6	1,800
Alcoholism	832	80	1,361
Mental Retardation	234	7	503
Epilepsy	410	58	1,817
Cardiac	117	8	894
Other	128	9	542
	615	51	1,017

The overall cost per client for benefits was \$1,092. The cost per severely disabled client was \$1,696.

C. OTHER BENEFITS

Job Training Partnership Act (JTPA) - The JTPA Program provides classroom training for disabled adults. A total of 361 clients were served under the JTPA grant. 78 clients were placed in gainful employment at an average hourly wage of \$6.37.

Workers Compensation - A total of 1,754 industrially injured clients were served in the VR program, 138 of whom were rehabilitated. These benefits are funded by a one percent assessment on the compensation paid to injured employees during the previous fiscal year.

Independent Living/Special Populations (IL) - A total of 105 persons received independent living services in fiscal year 1986. To be eligible for independent living services, individuals could not be receiving services from Vocational Rehabilitation, Visual Services, Developmental Disabilities, or the Medicaid Waiver. Types of disabilities of persons receiving IL services included head injury, visually challenged, spinal cord injuries, amputations and multiple sclerosis.

Extended Employment - This state funded, VR administered, program provides sheltered employment and work activity services to severely disabled persons not capable of competitive work in the community. During state fiscal year 1986, a total of 66 persons received extended employment services in seven rehabilitation facilities.

Visual Services Medical (VSM) - This state funded, VR administered program is designed to restore vision or prevent blindness. The program serves all age groups. A total of 73 persons were served under VSM in state fiscal year 1986.

II. DISABILITY DETERMINATION PROGRAM

The Disability Determination Program has statewide responsibility for adjudications involving both the Social Security Disability Insurance Program (SSDI--Title II) and the Supplemental Security Income (SSI--Title XVI) Program. Under both programs the definition of disability and blindness states, "the inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or has lasted or can be expected to last for a continuous period of not less than twelve months".

The disability decision is made by a team composed of a disability examiner and a physician. They secure and review reports from treating physicians, hospitals, and other sources in reaching each decision. When necessary, additional medical findings are requested to resolve the issue of medical severity. These are obtained through special medical examinations at no expense to the applicant.

In fiscal year 1986, 7,264 cases were adjudicated. The Montana Disability Determination Program achieved a review accuracy rate of 97.5 percent, compared to 93.4 percent nationwide.

2-13-87

INDEPENDENT LIVING/SPECIAL POPULATIONS
Vocational Rehabilitation Program, Department of SRS
January, 1987

In 1985, the Legislature responded to the needs of Montanans with severe disabilities by passing the Physical Disabilities Legislation 53-19-101-113 MCA. This legislation was designed to aid severely disabled persons who were not being adequately served by traditional services or programs, and were thus "falling through the cracks". These were individuals who were presented with limited life options of institutionalization or dependency on family support services because their employment potential and ability to live independently in the community were not recognized or were underestimated. This group is increasing, in part by benefiting from improvements in technology and advancements in medicine by way of surviving injuries or disease historically fatal. This has placed demands on the need for new orientation and attitudes in the innovation of service delivery to the handicapped.

To be eligible for independent living services, individuals could not be receiving services from traditional Vocational Rehabilitation programs, Developmental Disabilities, or the Medicaid Waiver. In FY 86, the Vocational Rehabilitation Program (VR) spent \$12,000 state funds and \$96,000 federal funds. A total of 105 persons received independent living rehabilitation services in FY 86, drawn from all disabling groups including head injured, visually challenged, spinal cord injuries, amputations and multiple sclerosis. Many services provided were targeted at six basic independent living goals - self-care, communication, mobility, residential, education and vocation. Specific services included ramping homes, adapting vans, and respite care. Many no-cost benefits were realized due to the degree of coordination between VR and Independent Living Centers in Montana (Summit Independent Living Center, Missoula; Montana Independent Living Project, Helena). After the first year, it was very apparent that there was a considerable need in Montana since all programmed dollars were exhausted within six weeks.

In FY 87, Montana received \$200,000 in federal funds to be used with \$28,000 in state funds. The Independent Living Advisory Council recommended that VR provide direct services rather than do needs surveys. Seven contracts were signed which will provide independent living services for 450 persons; 250 of those persons will receive services similar to FY 86 and 200 will be informational answers to a computer based inquiry system targeted at providing resources for independent living problems. Other contracted services include the development of 8 instructional video tapes by Missoula Community Hospital targeted for use by families and professionals associated with the head injured; a grant with Montana Independent Living Project to continue 5 day live-in treatment and training seminars for the severely disabled; and stipends for 40 severely involved multiple sclerosis patients or significant others to attend a 6 day educational and therapeutic camp sponsored by the Multiple Sclerosis Chapter of Montana.

In October, 1986 Congress reauthorized the Rehabilitation Act which provides for funding to be matched through 1991 (these funds require a ten percent state match). The past two years of services in Montana have improved our understanding of what the severely disabled can accomplish. These demonstration projects have highlighted the expansive need of severely disabled and shown how innovative responses can prove very successful. Independent living services prove to be effective at dependency reduction creating a bridge from family dependency and institutions to self sufficiency in the family, home, community and work place.

February 13, 1987

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2-13-87

TESTIMONY FOR THE HUMAN SERVICES SUBCOMMITTEE

My name is Kathy Collins and I live at 834 Eighth Avenue, in Helena.

Ladies and gentlemen of the Human Services Subcommittee, I'd like to thank you for giving me the opportunity to speak to you this morning. I am pleased to be able to SUPPORT the Governor's Budget for funding for Vocational Rehabilitation, Visual Service, Independent Living, and Vocational Rehabilitation Extended Employment.

Being born with Osteogenesis Imperfecta doesn't make a person the most saleable employee on the market. My physical health has always been a problem, and as a child, life was one long hospital stay after another, bone fracture after bone fracture, surgery upon surgery. Yet as other children dreamed of being doctors, lawyers, smeltermen, and ballet dancers, I did, too.

I don't believe anyone ever thought I'd work, but in high school I was funneled into the secretarial program, partly by my choice and partly by the choice of those who felt these courses held my only hope of future gainful employment. But by my Senior year I'd had enough--enough of typing, enough of shorthand, enough of White Out, and enough of the prospects of a dead-end employment future. And so in 1974 I began to explore the costs of higher education. It was soon too clear that these costs would be yet another obstacle in my life.

My parents were divorced and my mother could not work: my care was a full time job, and any income she might have made would have ended my Medicaid coverage. We had no assets, no rich uncle, and tuition seemed an expense we could NEVER manage. Then things began to fall into place.

I can't recall exactly how I became involved with Vocational Rehabilitation, but the differences in my life that it has made since are tremendous. After I'd moved from Anaconda to Helena to attend Carroll College, my Vocational Rehabilitation Counselor and I sat down to map out my educational career. The Basic Grant took care of tuition, and living expenses, books, etc., were taken care of by Voc. Rehab. funds. My counselor kept track of my progress and encouraged me every step of the way. Even after graduating in 1979 with a B.A. in English, Voc. Rehab. has continued to ensure my employability and assisted me in purchasing an electric typewriter, accessible desk, and a lift for my van.

Vocational Rehabilitation is a successful program and I am living proof. Today I am independent, have my own house, and drive my own van. I teach seventh grade English at C. R. Anderson Middle School. I am Chairperson of the Governor's Independent Living Advisory Council, Vice-President of the Board of Directors of the Montana Independent Living Project, and a member of the Northern Rocky Mountain Easter Seals/Goodwill Industries Board. I am a published poet and an ardent writer. And, I am an advocate for my disabled brothers and sisters who cannot speak up for themselves.

Without the financial support and guidance of Vocational Rehabilitation, I would not be where I am today. I urge you to support full funding for Vocational Rehabilitation, Visual Services, Independent Living, and Vocational Rehabilitation Extended Employment.

Please, keep the door of opportunity open to Montana's disabled citizens.

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2-13-87

INDEPENDENT LIVING

My name is Michael G. White. I am a 100% service-connected disabled veteran due to injuries received in Viet Nam on April 20, 1969.

This is a statement in support of the services provided by independent living centers of Montana. Montana Independent Living Project in Helena and Summit Independent Living Center in Missoula have joined forces with the traditional rehabilitation programs to aid disabled people in realizing their true potential and value in our society.

In the past the capabilities of those recognized as disabled were grossly underestimated. The disabled were sent to institutions to vegetate, to their homes where they were encouraged to open cottage businesses such as bowling ball drilling and gunsmithing. Today the disabled are shedding the cloak of helplessness and pursuing careers such as medicine, law, and classical music.

This ever increasing, high profile view of successful people who happen to be disabled is a double edged sword. On one hand, we see that disability is not necessarily synonymous with handicapped or helpless. On the other hand, it gives the erroneous impression that these individuals represent all disabled people and there is no help needed. For each disabled person we see pursuing a successful and productive life, there are ten who wait in their homes, needing help from those of us who can.

These independent living centers provide services to those disabled individuals who do not fall within the specific eligibility parameters of traditional programs. These services, which include peer counseling, equipment supply, and the training necessary for a severely disabled person to live independently, treat the whole problem; from providing support and encouragement to the families of the disabled person to the establishment of recreational programs to develop and self esteem.

Think of independent living programs not as an expense, but as an investment. We of the independent living movement are not working to rehabilitate the disabled so that they can continue to be wards of the state or their loved ones. We provide services that develop fully participating members of our society. People who can contribute both time and productivity, in a special way, to our way of life.

We ask you, our representatives, to join with us in promoting and funding the independent living programs of Montana.

Michael G. White

Michael G. White
Secretary Treasurer
Montana Independent Living Project

TESTIMONY IN SUPPORT OF RETENTION OF FUNDING FOR VOCATIONAL REHABILITATION
SERVICES DIVISION OF THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

PREPARED BY: JOYCE ANN WULF STEELE
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453-4377 (w)
761-0731 (h)

1. VOCATIONAL REHABILITATION SERVICES DIVISION IS COST EFFECTIVE...it gets people back in the workforce so they can be taxpayers rather than tax drawers.
2. THE PROGRAM IS A BARGAIN FOR THE STATE OF MONTANA...with 80% federal monies going toward the program and the state only having to contribute 20%, the concept of Vocational Rehabilitation is much less expensive than it would be to support full funding of the brain injured via the welfare system. I AM WILLING TO PAY FOR THIS PROGRAM THROUGH INCREASED TAXES!!!
3. THERE IS NO PROGRAM IN PLACE IN MONTANA NOW THAT WOULD ASSIST THE BRAIN INJURED...the closest rehabilitation centers for Montanans is Colorado or Washington State.
4. THE MEDICAL ADVANCES WE HAVE MADE HAVE PROVIDED THESE INJURED PEOPLE TO BE SURVIVORS...we being in a technologically developed society need to be willing to provide for the cost of these advances through Vocational Rehabilitation.
5. THE TRAUMATICALLY HEAD INJURED KNOWS NO CLASS, AGE, SEX...it could happen to you or your loved ones.
6. ANALOGIES OF THE TRAUMATICALLY HEAD INJURED...it could be likened to dropping a computer and not being able to replace the printed circuit boards... the circuits must be redirected...the rational order is disrupted and it takes times to redirect the commands. (for family members it is like having your loved one die and having this person replaced with an incompetent stranger initially.)
7. THE TRAUMATIC HEAD INJURED ARE SURVIVORS...Vocational Rehabilitation aids in helping these people redirect their "new selves", gaining acceptance of where they are and looking forward...to persevere, rebuild their self-esteem through helping them give the patient/victim stage of life up and to take up citizenship.
8. ASIDE FROM BEING EMOTIONALLY DRAINING ON THE FAMILY THE EFFECTS OF THIS IMPAIRMENT ARE FINANCIALLY EXHAUSTIVE...in many cases the family, federal, state and local monies are drained but we do not live in a state of throw away people.

Crash Victim's Recovery Builds on Prayer, Hope

By Al Frisbie
World-Herald Staff Writer

Mark Wulf knows he was badly injured in an accident. He doesn't remember when, and he doesn't remember how. But he realizes he has a long way to go before he returns to the 28-year-old man he was last Oct. 20.

Wulf was driving alone that night, when he lost control of his car on a Lincoln street. The auto slammed into a telephone pole and firefighters had to pry him from the wreckage. He suffered multiple injuries, including those to the head which for a time caused some paralysis to his arms and legs.

He was rushed to Lincoln General Hospital in critical condition with hemorrhaging of brain and liver. Brain surgery was performed and in the touch-and-go weeks following, Wulf suffered pneumonia three times and remained in a coma.

Constant Vigil

For a month and a half, Wulf's family maintained an around-the-clock vigil at his bedside. It was an especially traumatic time for his parents, Mr. and Mrs. Harold Wulf of Lincoln. The elder Wulf is a teacher and program supervisor at the Southeast Community College's machine shop. His wife is an employee at Norden Laboratories.

Mark is the youngest of four children and a graduate of Lincoln Northeast High School, where he was a swimming team letterman.



Ms. Pribyl and Wulf... "I know I have a way to go."

Richard Janda/World-Herald

After high school, he attended classes at Southeast Community College campuses in Milford and Lincoln.

He was married and divorced, and at the time of the accident was a shop foreman at a Lincoln auto dealership.

Wulf remembers much of that and recalls having dinner the evening before the accident, his father said. But he has little or no

recollection of anything between the accident and Jan. 3, when he seemed to rouse from what was then described as a semicomatose state.

He was transferred to Omaha's Immanuel Hospital Dec. 27. At the time, a hospital spokesman noted that Wulf "is unable to speak and seems unable to understand verbal commands but is awake."

Before that, Wulf's family had

been told he might not survive and that if he did, he might exist mindlessly.

"But we never gave up hope as a family," Harold Wulf said. "We believe there is a lot of power in faith and prayer. A lot of people prayed for Mark."

Those prayers have been and are being answered. Early this year, Wulf began to break the bonds of blankness.

"He first was able to sit up," a hospital spokesman said. "Now he can stand and walk between parallel bars without braces. His recall and recognition are returning. He can move all his limbs and his balance has improved. His speech is better oriented."

Physicians, his family and even Mark realize much lies ahead. But hope now has been replaced by confidence.

"I feel there is a very good opportunity for him to have a complete recovery," said Dr. Dwight Frost, director of Immanuel's Rehabilitation Center. He warned that the prognosis is "speculative. Mark's brain is still in the process of repairing and he is going to require a lot of therapy."

'A Way to Go'

Recently, as Mark worked with Immanuel speech therapist Julie Pribyl, he sometimes struggled with words he was reading and frequently corrected himself.

"I know I have a way to go," he said. "But I'm happy with the way they are treating me."

TAKING COURSE
AT VOCATIONAL
SCHOOL - WORKING
TOWARD AN
ASSOCIATES DEGREE
IN MACHINE TOOL
TECHNOLOGY. HAS
TAKEN SOME COURSES
5 TIMES BEFORE
ADVANCING

VOC REHAB WILL
PLACE IN JOB
THIS SUMMER TO
HELP WITH COPING
IN WORK ENVIRON-
MENT & SCREEN
THROUGHOUT.

LIVES AT HOME

FINANCIALLY
SUPPORTED BY
PARENTS (68 years
of age) and
family

STATISTICS EXCERPTED FROM "Long Term Treatment of the Adolescent and Adult With Traumatic Head Injury" by Cheryl C. Citron, J. B. Murphy, Claire Ducker, Anita Coker Lenny Hawley, John B. Williams. Presented at the 5th Annual Post-Graduate Course on the Rehabilitation of the Brain Injured Adult Revised September, 1982.

The present population at the Ranch Treatment Center in South Austin, Texas with a population at the time of the report being 36 in number.

AVERAGE POPULATION: Male

AGE OF POPULATION: 9 - 58 2/3 are 18-24 years of age, median age is 21

AVERAGE AGE OF INJURY: 15 years old, 2/3 between the ages of 14 and 21 years old

CAUSE OF BRAIN INJURY: Motor Vehicle accidents cause 75% of the injury (of this group 19 were in auto accidents, 4 hit by an auto while riding a bike, 3 hit by a car while walking...other causes include, brain surgery, electrocution, explosion, fall, gunshot wound, sports related

COMATOSE PERIOD: from 0 to several months (average are comatose for 5 weeks)

POST TRAUMA PERIOD: from 14 - 178 months, or 1 year to 14.8 years (median 3.6 years)

COMMON SYMPTOMS OF BRAIN INJURED: recent memory lapses, loss of concentration, shortened attention span, sensory perceptual or motor impairment, poor impulse control, physically aggressive behavior, lack of initiative, poor social adjustment, poor self esteem, poor acceptance of attempts to arouse interest or attention

EXHIBIT 6
DATE 2-13-85

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EXHIBIT

6

DATE

2-13-81

EXHIBIT 7
DATE 2-13-87
HP

TO: HUMAN SERVICES JOINT SUBCOMMITTEE
MONTANA STATE 1987 LEGISLATIVE SESSION

FROM: KATHI (KATHLEEN M.) BISCUP
602 BETH DRIVE
GREAT FALLS, MT 59405

SUBJ: APPROPRIATIONS FOR VOCATIONAL REHABILITATION DIVISION of S.R.S.

DATE: FEBRUARY 13, 1987

I will briefly update you on my background so my reason for testifying this morning is more clearly understood. Almost four years ago now, (May 15, 1983) I was involved in a car accident that resulted in a severe closed head injury and left me comatose for twelve weeks. It was not only questionable, but doubtful, that I'd even survive the physical trauma for those three long months. Since then, it has been a long, difficult rehabilitative struggle, both physically and mentally, to regain as normal and useful a life as I had before this accident. Rehabilitation is defined as 'the restoration of a handicapped or delinquent person to useful life through education and therapy', and in that definition, the use of the adjective 'useful' clearly distinguishes 'rehabilitation' from custodial care.

I am a college graduate and was quite successfully employed at the time of my accident. I was forced to face the fact that I'd likely become a cost to society, or at best, be not nearly the useful, productive member of society that I'd worked very hard to become. That was extremely tough for me. However, with a lot of time, hard work, medical expertise and the aid of Vocational Rehabilitation Services in Great Falls, my rehabilitation has gone quite successfully. Most cases of severe neurological injuries like mine end up becoming a further burden to society, depending on the state for subsistence and in nursing homes, whether they want to or not. It becomes not a matter of choice because of the many mental and physical deficits such an injury leaves you with. It deprives you of the ability to lead an independent life. At one point, my doctor and rehab. team had a reservation for me at the county nursing home. It was at this point that Vocational Rehabilitation entered the picture and sponsored a year-long cognitive retraining program for me that did interact with my physical and speech therapies, as they claimed it would, although I initially had my doubts. It greatly improved my balance, enabling me to 'store' all wheelchairs, walkers and canes. My speech is still far from perfect, although this is a far cry from the girl who was initially taught to swallow about four years ago now. It also restored and sharpened many other cognitive areas, like short- and long-term memory, attention span, and concentration, which are areas that are critical to be competitively employable in this day and age. Vocational Rehabilitation is currently sponsoring some further college education for me - a masters program so that I will be gainfully and competitively employable here in Montana.

I am now speaking for my family, too, in saying the cost of a rehabilitation is staggering - absolutely astronomical. I am very thankful for the excellent medical insurance policy I was covered with, or it would have been that much worse. As it is, this rehabilitation has quite effectively deleted what savings I had and gone through my parents' lifelong savings as well. Without the aid of Vocational Rehabilitation, my folks sincerely doubt they could have afforded the year-long cognitive retraining program, much less additional college education at this point.

EXHIBIT 7
DATE 2/13/84

It is critical for the state of Montana to continue to fund and support those causes which involve vocational rehabilitation and independent living services. I am fortunate enough to have a family that has been as supportive and helpful as possible, but that is not always so. Even in my case, without Vocational Rehabilitation, I am sure that my recovery from this catastrophic injury would not have been nearly as successful. Vocational Rehabilitation and I have set a goal that I will become successfully and competitively employed and be able to live independently in Great Falls. What better return for your dollar could you ask for your investment - I urge you to support appropriations for this program.

Thank you!

Sincerely,

Kathi Biscup

Kathi Biscup

Engineering students custom design easel to enable student to earn master's

MSU News Service

Ernice Pepion's dream to complete a master's degree will come true—but not without some help from his friends.

Pepion, confined to a wheelchair for the past 15 years, is back at Montana State University this year working on his master of fine arts degree. But if a group of students in mechanical engineering had not designed and built a special easel to accommodate his painting, Pepion's chance to continue developing his art would merely have been a dream.

Harold Schlotzhauer, associate professor of art at MSU, was instrumental in getting the project off the ground. While Pepion was an undergraduate at MSU, Schlotzhauer made an easel and other tools for him, but decided he needed something which would allow Pepion to become even more independent in his work. He obtained a grant from the Montana Department of Social and Rehabilitative Services to cover the cost of building an easel that would be designed by undergraduate students in the Department of Mechanical Engineering at MSU.

A group of senior mechanical engineering students took on the project. Larry Bigler of Hamilton, a member of the group and currently a graduate student at MSU, said they spent a quarter designing and refining the easel to develop an instrument that was of the best use to Pepion.

"When you work on a project like this, as opposed to a textbook project, you have to know which questions to ask," he added. "It was amazing how much we didn't know. But there was a lot of satisfaction on working on the project and to see the difference it made to Ernie."

The students worked closely with Pepion to understand his needs. The design had to be altered and refined several times to come up with

a workable device.

"We had some complicated devices at first," Bigler said. "I really learned the value of simpler designs and how to adjust the designs to meet the user's needs. We used a lot of imagination."

Safety factors had to be considered so the easel would not injure Pepion, and the level of his strength was a major factor.

But what the group ultimately designed and constructed is an amazing piece of equipment. The easel can hold a canvas ranging in size from two feet to five feet on a side. By operating a lever, Pepion can move the canvas into any position, including turning it upside down to allow him to work at the top of even the largest canvas.

Pepion, a native of Browning, readily supports the work the students did for him.

"I probably wouldn't have been able to come back to school," he said. "Now I can work on my own and I don't have to rely on students to help me out. My range (for painting) is really limited. With the easel, I can work at my own pace and don't have to rely on someone to help move the canvas to a different position."

Pepion began painting following his injury. Most of his work features themes from Native American culture with modern aspects and ranch work.

The work on his master's is helping him fine tune his art as well as develop as an artist.

"I have more freedom in what I do in terms of the master's program," he said. "And with the easel I don't have to rely on other people. Some of the original designs looked really complex, but this is really simple to operate."

Pepion has only worked with the easel for about three months and said he is still learning its different aspects.

"I was so excited when it was finished, but I was also intimidated," he laughs. "I didn't know if I would be able to master it or not. I am still learning how to use it and find myself moving my chair when I don't need to."

To go with the easel, Bigler is currently designing a palette that will have a cover with a seal to preserve the paints that Pepion uses.

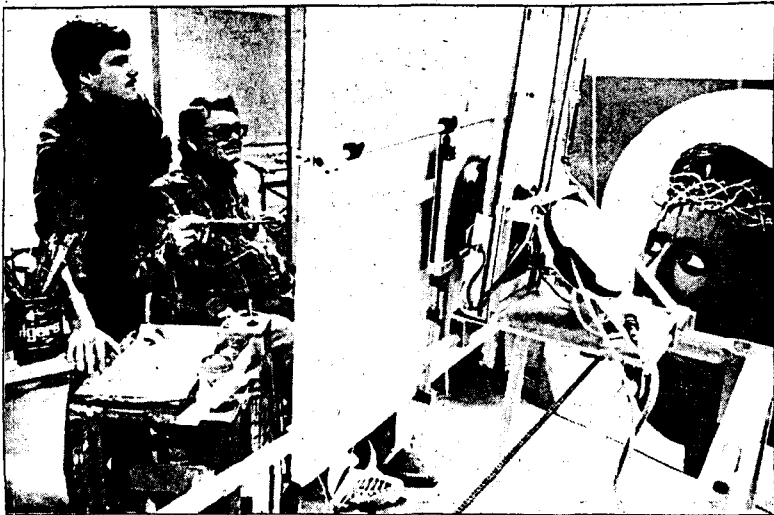
Schlotzhauer said the easel has made a big difference in Pepion's work:

"He did a lot of work previously, but it wasn't as ambitious. Ernie understands that art is mind over matter. Ninety percent of it is using what you have. But the easel has opened up so many more doors for him and it is important to him because of what he does. He wants to simply be known as an artist and not let his disability get in his way."

The project benefited the engineering students, too, said Michael Wells, head of mechanical engineering.

"I think it was a very broadening experience for them to gain an appreciation of the needs of disabled people," he said. "I think projects like this that are open-ended put demands on students in terms of their creative skills."

Wells has a personal interest in the areas of biomedical engineering and rehabilitation design. Two other groups of students were involved in similar projects designing a feeding aid for a child with cerebral palsy and a force duration tester for use by local therapists. He hopes to incorporate a section of rehabilitation engineering and design into the department's curriculum. It would utilize students working with people throughout the community and region to design equipment that is custom fit to meet the needs of the disabled.



Ernie Pepion shows his latest painting to Larry Bigler, a graduate student in mechanical engineering from Hamilton. Pepion, a parapalegic, is able to paint different sections of the painting because a special easel moves and rotates the canvas. Bigler and other ME students constructed the easel specifically for Pepion.

Ladies & Gentlemen.

I have a 28yr. old son that has a disability. A learning disability.

On the Dictionary it reads;
Disability - ① a disabled condition ② that which disables or disqualifies.

In Rick's case disabled condition is he can't get a job because he was not taught properly how to read or spell.

So this disabled him from getting a job.

The word disqualifies upsets me because do we make this word mean disqualifies him from work or from life?

Disable - To make unable or unfit;
Rick is unable to read or spell does this mean he is unfit to learn? unfit to make a good life because he is unable to get the help he needs?

Disadvantage - ① a unfavorable situation - drawback; handicap, ② loss, injury

Believe me I believe any person that has a disability does not want to be in a unfavorable situation.

Drawback - It is a drawback because they are at a disadvantage when it comes to being a productive person.

When a person is disable he has to be taught the right way, so they can get the knowledge of or skill. Only when they are learned will they be able to build there own Character so they can be a person of there own.

If you stop this Grant you will be putting these human beings into a state of limbo. You will be disqualifying them from a good life. You will be stating them as unfit.

No one person can afford to pay for the program it takes to help these people to become a productive person.

They need this grant of money so we can take the UN out of UNFIT and the DIS from DISQUALIFIED. This money can make a difference.

You allow money for roads you allow money to send things up into space and people to the moon.

What good is a road if we leave some of the people behind that can't travel the roads??

What good is sending things into space if we close our eyes to the people we have on earth that can't find there space in life's everyday living???

What good is it to send people to the moon if we are going to ignore the fact we have people who can't even enjoy looking at the Moon. They will become another name on the list of homeless, jobless, Welfare Case Ect.

My son was willing to learn and he graduated, he is willing to work. So I am willing to fight for him and anyone that has a disability to get help.

The Fed. Gov. gives 80% of the Cost State gives 20%. That to me seems a very small % amount to help a person

Become a productive person so we may
get 100% back in Profit.

Are you willing with a stroke of a
pen to dismiss a Life???

Thank you
Ray Jauron

a Mother of a very Qualified and Fit son.

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2.13.87

TO: The Health and Human Services Subcommittee
FROM: The West Mont Elderly & Handicapped Recipient/PCA Advisory Council
RE: Home based health care (e.g. the Personal Care Attendant Program and the Medicaid Waiver).
DATE: February 12, 1987

We support an increase in funding for the Medicaid Waiver program, a program which ensures a much higher quality of life for the disabled and elderly and is unquestionably cost effective for the taxpayer (please refer to the Home and Community Services Program Annual Report of 1986). Although in order to have a Medicaid Waiver program or a PCA program operate successfully, there needs to be assurance that high quality care is available. We believe that in order to ensure this quality of care, the most vital member of the program, the Personal Care Attendant, must be reimbursed a fair wage for his services.

The Advisory Council has come up with a plan to ensure a higher quality of care. Some possible private, internal funding changes would be incorporated to see that from April 1st to July 1st of 1987, the PCA wage would be \$3.85 an hour (the existing SRS wage for 1986), at which time the Legislative budget will determine the PCA wage and consequently, the quality of care.

We support the concept of a work incentive plan to ensure continued quality of service and to lower the turnover rate of PCA's. This plan would consist of the following:

(a) After completion of 260 hours of PCA work, a training program and satisfactory reports from recipients served and nursing supervisors, we propose a PCA wage increase to \$4.10 per hour.

(b) After completion of another 260 hours of PCA work, continuing education and satisfactory reports from recipients served and nurse supervisors, the PCA wage would increase to \$4.50 per hour.

At the present rate of 400,000 units per year, the above-mentioned plan would call for a maximum increase of 86.25 cents per unit x 100,000 units consumed from July 1st to October 1st of 1987 = \$86,250.00 plus \$1.322 x 700,000 units consumed to the end of the biennium = \$924,000, for a total of 800,000 units of \$1,010,250.00. Of this amount, the State share would be \$303,075.00.

This maximum amount is based on a maximum number of employees working a maximum number of hours and receiving maximum increases. Since figures are unavailable as to the exact amount of funding, we propose a line item format of this optional Medicaid budget. This format involves directing these funds to this specific program. This proposed line item is used to alleviate as much waste as possible.

Although this may sound like a large expenditure, when divided among the recipients using this money, this equates to approximately one to two days of hospital care or one week of nursing home care per Medicaid recipient.

In conclusion, in order to ensure the highest quality of care for the maximum amount of Medicaid recipients, please seriously consider our aforementioned proposal.

Attached please see the minutes from the first Advisory Council planning session.

MEETING CONCERNING THE ESTABLISHMENT OF A PCA ADVISORY COUNCIL

February 11, 1987

Present: Bob Frazer (MSU Coordinator for handicapped student services), John Patrick (SRS), Nancy Ellery (SRS), Joyce DeCunzo (SRS), Bill Boharski (handicapped PCA services recipient), Bob Maffit (Staff member, Independent Living Advisory Council), Mary Beth Linder (Medicaid Waiver Supervisor, Lewis & Clark City-County Health Department), Mike Ray (PCA), Barbara Larson (Summit), Sister Elizabeth Henry (Administrator, West Mont), and Gerry Chasse (Executive Assistant, West Mont).

Sister Elizabeth began the meeting by stating that the purpose of calling together this particular group was to discuss the formation of an Advisory Council for the Personal Care Attendant Program. Sister referred to a listing of the kinds of membership which could comprise the group (please see attached). Members of the group suggested others who might be a part of the Council: somebody from the Independent Living Advisory Council, a physician, a rehabilitation specialist (physiatrist) etc. Joyce DeCunzo cautioned that though it is a good idea to have this group, it is important not to make it too large, while at the same time making sure that there is equal representation for both the elderly and the handicapped. Sister stated that one of the purposes is to get the right information to the right people, particularly those who appropriate funding. Joyce DeCunzo wondered if there would be enough time to get information together, or whether that was one of the purposes of an advisory body. The unanimous conclusion of the group after discussion was that one of the most important accomplishments of this gathering would be to present to the Legislature and to others concerned with this program the fact that a good faith effort is being undertaken by a group of concerned people. Mary Beth Linder suggested that the Council could also be a channel for PCA concerns and input. Bill Boharski added that the Council could monitor contract compliance. On the other hand, Bob Maffit mentioned that an Advisory Council would be a vehicle which could speak as well as listen. John Patrick clarified that the first contact for complaints, suggestions and problems should be West Mont, not the Council. There was unanimous agreement. Nancy Ellery added to this clarification that monitoring of standards is the responsibility of SRS, not an Advisory Council. A suggestion was made that a Council could be added on to an already existing conciliar body, or barring that, an independent Council could be later dovetailed with another Council. After a period of discussion concerning the clarification of an Advisory Council's mission, Bill Boharski's statement was accepted by the group as the most accurate: to demonstrate through work as a committee that an "optional" Medicaid program can remain successful. Nancy Ellery suggested that if an Advisory Council is formed, perhaps one of its first tasks would be to look at the Request for Proposal and discuss it. Joyce DeCunzo further elaborated on the mission of the group stating that it should say to those concerned, "Yes, we are all in philosophical agreement with the issue that the wage for a Personal Care Attendant is inadequate, but that it is a good optional program and we as a group are willing to work together to save it." The group then talked about different aspects of the current PCA program. The members then decided that the next steps would be to introduce to the Legislature the fact that this group met, and that membership in it should be nailed down. Following these decisions, discussion turned to cost containment and cost shifting, the possibility of levels of PCA services, clarification of the parameters of PCA job responsibilities, training and liability.

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VISITORS' REGISTER

HUMAN SERVICES SUBCOMMITTEE

BILL NO. _____

DATE February 13, 1987

SPONSOR _____

DEPT SRS - Vocational Rehab
Visual Services

NAME (please print)	Representing	SUPPORT	OPPOSE
Joyce Steele	Voc Rehab Program	✓	
Kay Jauron	Voc Rehab Program	✓	
JANE Haynes	Voc Rehab Program	✓	
Kathy Collins	MILP, Indep. Liv. Council	✓	
Jim Narrifor M. & Whit	MILP, Ind. Living	✓	
Mark WEGGEMAN	Mt. Assoc. for Rehab	✓	
Chuck Kengate	Mt. Assoc. for Rehab	✓	
JOE MATHIEWS	Mt. Assoc. for Rehab	✓	
Mike Bullock	Helena Industries	✓	
Cris Volikachy	DD	✓	
Steve Waldron	Mental Health Center	X	
Lana Smith	Montana Independent Living	X	
Virginia Antick	M.A.B.	X	
Bob Lison	MSU Student/MILP	✓	
Laurie L. Brill	M.A.B.		
Alice Brill	M.A.B.		
Bob Furrer	PEP	✓	
Scott Wheat	MSU Student	-	
Tom Scott	MSU Student	-	

IF YOU CARE TO WRITE COMMENTS, ASK SECRETARY FOR WITNESS STATEMENT FORM.

PLEASE LEAVE PREPARED STATEMENT WITH SECRETARY.

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VISITORS' REGISTER

HUMAN SERVICES SUBCOMMITTEE

BILL NO. _____

DATE February 13, 1982

SPONSOR _____

DEPT SRS - Vocational Rehabil
Visual Services

NAME (please print)	Representing	SUPPORT	OPPOSE
<u>Brian H Rogers</u>	<u>Consumer</u>	✓	
<u>James Marks</u>	"	✓	
<u>Keith Dove</u>	"	✓	
<u>Mark Meyer</u>	"	✓	

IF YOU CARE TO WRITE COMMENTS, ASK SECRETARY FOR WITNESS STATEMENT FORM.

PLEASE LEAVE PREPARED STATEMENT WITH SECRETARY.