

National Council on Independent Living

Legislative



Advocacy

Priorities

Spring 2011



A Message from the Executive Director

Dear Advocates and Allies,

I am pleased to announce the release of the Spring edition of National Council on Independent Living's 2011 Policy Priorities. This publication will introduce you to a sample of the many legislative issues NCIL is currently pursuing in order to secure full inclusion and equality for people with disabilities in our great nation.

I would like to draw particular attention to issues surrounding Independent Living funding and the creation of an Independent Living Administration. Considering the substantial work left to be done in order to secure the civil and human rights of people with disabilities, NCIL is acutely aware that funding for Centers for Independent Living and Statewide Independent Living Councils is of the utmost importance to our Movement.

CILs and their statewide counterparts are the only organizations directly working to address the issues outlined in this publication. They use shoe-string budgets to successfully advocate for individuals with disabilities facing discrimination while fighting to win an even playing field and ensure the civil and human rights of all Americans.

It is crucial that we secure appropriate funding for the Independent Living Program while advancing its agenda of full participation, equality, and freedom of choice for all.

I am very proud of our community's hard work to bring these issues to Congress. Together we will see the passage of our legislative priorities, the restoration of our civil rights, and a world in which people with disabilities are truly valued equally and participate fully.

Sincerely,



Kelly Buckland
Executive Director, National Council on Independent Living



Table of Contents

The Independent Living Program	4
Civil Rights and the <i>Americans with Disabilities Act</i>	5
Judicial Nominations <i>ADA Notification Act</i>	
Reauthorization of the <i>Rehabilitation Act</i>	7
Independent Living Administration	7
Healthcare and Ending the Institutional Bias	8-9
Healthcare Reform Process <i>Community Choice Act</i> <i>Ending the Medicare Waiting Period Act</i> <i>Medicare Independent Living Act</i> Healthcare and Long Term Care Choices	
Employment and Economic Empowerment	10-11
Accessible, Affordable, Non-Toxic, Integrated Housing	12-13
Appropriations National Housing Trust Fund <i>Inclusive Home Design Act</i> <i>Section 8 Voucher Reform Act (SEVRA)</i> <i>Achieving a Better Life Experience (ABLE) Act</i>	
Transportation: The Lynchpin to Independence	14
Education	15
Available and Accessible Technology	16
<i>Twenty-first Century Communications and Video Accessibility Act</i> Health Information Technology <i>Assistive Technology Act</i>	
Veterans' Issues	16
U.N. Convention on the Rights of Persons with Disabilities	17

The Independent Living Program

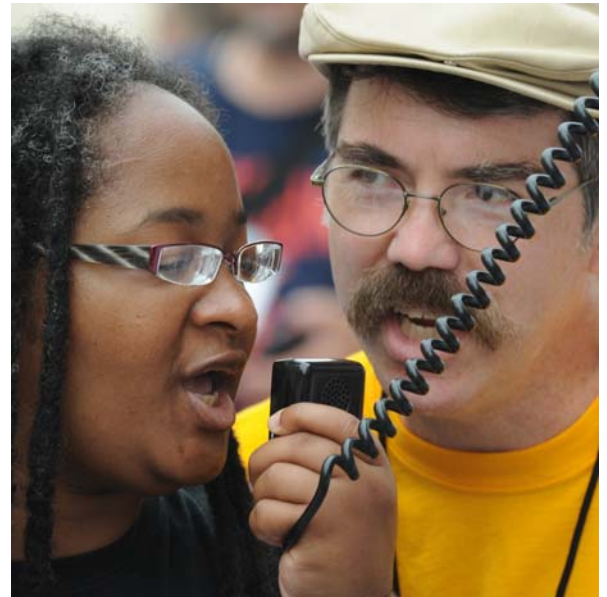
The National Council on Independent Living is the oldest cross-disability, national grassroots organization run by and for people with disabilities. NCIL's membership includes people with disabilities, Centers for Independent Living, Statewide Independent living Councils, and other disability rights organizations.

As a membership organization, NCIL advances Independent Living and the rights of people with disabilities through consumer-driven advocacy.

Centers for Independent Living are community-based, cross-disability, non-profit organizations that are designed and operated by people with disabilities. CILs are unique in that they operate according to a strict philosophy of consumer control, wherein people with all types of disabilities directly govern and staff the organization.

Centers for Independent Living Provide:

- Peer Support
- Information and Referral
- Individual and Systems Advocacy
- Independent Living Skills Training



America is home to:

- 403 Centers for Independent Living (CILs)
- 330 branch offices
- 56 Statewide Independent Living Councils (SILCs)

In Fiscal Year 2010, Centers for Independent Living:

- Moved 3,752 people out of nursing facilities and institutions, saving state and federal governments millions of dollars;
- Provided Information and Referral services to 997,082 people with disabilities;
- Served 49,761 consumers over the age of 60; and
- Helped 37,904 people with disabilities complete all goals set.



Civil Rights and the *Americans with Disabilities Act*

On July 26th, 2010 people with disabilities celebrated the 20th anniversary of the signing of the *Americans with Disabilities Act* with great fanfare and joyous events all around the country. As the celebrations were taking place, the Department Of Justice finally issued long overdue revisions to the *ADA* Title II and III Regulations, and followed up with the adoption of the 2010 ADAAG as the revised Standard for Accessible Design under the *ADA*. For a couple of years now, NCIL has witnessed a stepped-up effort by the Department to enforce the law in a way that sets an example with each settlement agreement they make public, and by their increased willingness to pursue not only injunctive relief, but meaningful penalties from those who more than 20 years after the signing of our civil rights law, still discriminate against people with disabilities. However, NCIL sees room for improvement in the rulemaking process, and would recommend examination of the regulatory process for updating the *ADA* Regulations and Standards for Accessible Design, so that revisions can be made in more of a timely manner than has happened in the past.



NCIL also applauds the recent efforts of the Department to gather input regarding four areas of additional accessibility, including access to medical equipment and exam room furniture. However, unaddressed barriers to full access for many people with disabilities still exist, despite the new *ADA* regulations, and revisions in 2010 ADAAG. While the Department of Justice is enforcing the known requirements for accessibility in the built and communication environments, our lawmakers must pass legislation to address barriers that still exist, or are developing as a result of a changing world, through additional research and accessibility standards development.

Judicial Nominations

At a time in history when so many vacancies exist for judicial appointments, it is more important than ever that the most qualified candidates be nominated by the President and affirmed by Congress. NCIL supports the nomination and confirmation of federal judges with disabilities and those who respect the *ADA* and the civil rights of people with disabilities. NCIL urges the Senate to ask nominees tough questions on judicial philosophy on the civil rights of people with disabilities.

ADA Notification Act

Yet to be Introduced in the 112th Congress

As we have seen in the past, some form of an *ADA Notification Act* bill may be introduced with less support each session. This bill would impede *ADA* enforcement by forcing people to provide written notice to a public entity 90 days prior to filing a complaint. More than twenty years after the passage of the *ADA*, it is unacceptable for public entities to seek safe haven from our most important civil rights law. NCIL has vehemently opposed each introduction of this bill on the grounds that civil rights are intrinsic to all Americans; a violation of which cannot require 'notification' prior to occurrence. States should address problematic issues within state law; not create additional Federal law that cannot be enforced.



Independent Living and Reauthorization of the *Rehabilitation Act*

The Rehabilitation Act is an important civil rights law that prohibits discrimination on the basis of disability in all activities of the Federal government and any entities receiving funding from the Federal government. The Act has not been reauthorized since 1998.

The Act establishes the Independent Living Program, an exceptionally unique solution to persistent obstacles facing the disability community and the nation as a whole. Centers for Independent Living and Statewide Independent Living Councils are grassroots, advocacy-driven organizations run by and for people with disabilities that focus on civil rights, empowerment, and inclusion.

The Rehab Act needs to be reauthorized immediately with amendments that maximize the impact and potential of the Independent Living Program. Based on recent trends toward conservative interpretation of the *Rehabilitation Act*, it is imperative that the following provisions be included in reauthorization.



NCIL proposes to redirect funds that support the IL Unit at RSA to the Independent Living Administration. This would elevate the Independent Living Program from its current subordinate role by establishing an autonomous, independent, consumer-controlled administration with the purpose of building the Independent Living Program at the federal level so that it can more effectively support the Independent Living network nationally. The infrastructure of the Independent Living Administration would be grounded in the Independent Living philosophy of consumer control so that a majority of individuals involved would be people with disabilities who have experience in Independent Living services.

Suggested Amendments for Centers for Independent Living:

- *Funding Formula Change*: Part C dollars are the funds funneled through RSA that support Centers for Independent Living. S. 1021 (109th Congress) included legislation that would enable all new Part C dollars to be shared among all states and territories. States with the largest populations would receive more funding proportionally. NCIL suggests changing the funding formula to equally distribute some funds and proportionately distribute others.
- *Carryover*: CILs should be allowed to carry over unspent Part C funds into a second year, despite the fact that CILs are “forward funded”.
- *Grandfathered Centers*: Centers that receive Part C funding and meet the standards and assurances should not need to re-compete for grants if they received Part C funding prior to the first year of reauthorization, but should be grandfathered into the system.
- *5th Core Service*: Creation of a fifth core service to transition people with disabilities from institutions into the community.
- *Satellite / Branch Offices*: Allow for the utilization of satellite/branch offices to meet the need of providing services statewide.
- *Transitional Living*: Clarify transitional living to expand from 60 days to six months.

Independent Living and Reauthorization of the *Rehabilitation Act*

Modify the language regarding Statewide Independent Living Councils (SILCs) to address the lack of clarity about:

- The Council appointment process
- The autonomy of the SILC within the State
- Who has voting rights
- Who elects the chairperson
- Ex-officio non-voting members

The functions of the SILC should include:

- Facilitating the improvement and coordination of services provided to individuals with disabilities by Centers for Independent Living, the Designated State Unit, and other agencies and organizations;
- Giving SILCs and CILs co-signatory authority over the SPIL to ensure consumer control;
- Providing leadership and support to maximize the empowerment, leadership, independence, and productivity of individuals with disabilities through systems advocacy, resource development, training and technical assistance, and other strategies outlined in the SPIL;
- Collaboratively supporting and facilitating the development of the statewide network of Centers for Independent Living through the implementation of the SPIL;
- Promoting the IL philosophy at the state level in collaboration with the CILs;
- Resource development activities to obtain funding to support the activities of CILs and SILCs, and;
- Other functions, *including but not limited to systems advocacy.*

Independent Living Administration (ILA)

People with disabilities are the best equipped to oversee programs that assist them. Consumer control works effectively at the state and local level and should now be implemented at the federal level by giving people with disabilities governance of the Independent Living Program. NCIL proposes the creation of an Independent Living Administration (ILA) that will administer and monitor the IL Program in America. The Administration should consist of a consumer controlled Commission and would:

- Direct the Commissioner to coordinate with NCIL, CILs, and SILCs to promote Independent Living;
- Have a Commissioner hired by the consumer controlled ILA Commission;
- Establish an appeal process for the State Plan for Independent Living;
- Establish a “career ladder” to facilitate movement of qualified CIL and SILC staff to the ILA;
- Provide for direct funding of SILCs unless specified otherwise in the SPIL;
- Utilize a “Peer Review” process for quality improvement for SILCs and CILs; and
- Fund a training and technical assistance division.

Healthcare and Ending the Institutional Bias

The Healthcare Reform Process

NCIL has been very involved and supportive of the healthcare bill. We strongly support legislative efforts to vote against repealing the *Patient Protection and Affordable Care Act (PPACA)*. We will continue to advocate ending discrimination in the insurance market, creating affordable, comprehensive insurance options that meet the needs of people with disabilities, and finally addressing the long-term care crisis in our nation. NCIL strongly supports the following provisions:

- Prohibition of pre-existing condition exclusions from coverage
- Prohibition of discriminatory premium rates based on health status
- Guaranteed issuance and renewability of coverage; all who apply must be accepted and maintained
- Prohibition of discrimination in coverage; no eligibility requirements can be made by health insurers based on disability, health history or status, genetic information or claims experience

Community Choice Act

Yet to be Introduced in the 112th Congress

NCIL strongly endorses the *Community Choice Act*. The Community First Choice Option is a step toward ending the crisis the institutional bias in Medicaid has created, but it is not enough.

Currently, every state that receives Medicaid is required by law to provide nursing facility services, but community-based services remain optional, leaving them open to funding cuts year after year as institutions remain prosperous. As a direct result, millions of seniors and people with disabilities are forced into institutions to receive medical or personal assistance services.

The *Community Choice Act* requires states to offer community-based supports for Medicaid-eligible consumers who want to stay in or return to their homes and communities. It will provide a real alternative to institutional care that many states lack and save Medicaid billions of dollars per year.

Genworth Financial recently released its 2009 Cost of Care Survey, which analyzed data from more than 14,000 nursing facilities and other long term care providers. In 2009, the average rate for nursing facilities increased 4.5%, while the rate for personal care assistance only increased by 0.5%.

NCIL urges Congress to pass the *Community Choice Act* immediately in order to stop the shameful pillaging of taxpayer dollars and the civil rights of Americans with disabilities by the nursing home lobby.



Healthcare and Ending the Institutional Bias

Ending the Medicare Waiting Period Act

Yet to be Introduced in the 112th Congress

NCIL supports elimination of the 24-month Medicare waiting period. If a person qualifies for Social Security Disability Insurance, they are by definition disabled and usually in need of medical attention. This bill will immediately eliminate the two year waiting period for those that need immediate, life-saving medical attention. For those without a life-threatening condition, the waiting period will be eliminated within 10 years of enactment. Currently, there are about 600,000 Americans with significant disabilities who have no insurance and go without healthcare. Many go into debt, are forced into bankruptcy, or die while waiting the required two years for Medicare coverage to begin after they are deemed eligible for Social Security Disability. Twelve percent of people in the Medicare waiting period die each year while waiting for coverage to begin. This practice must stop. Death and illness do not wait on bureaucracy.



Medicare Independent Living Act

Yet to be Introduced in the 112th Congress

The *Medicare Independent Living Act* will eliminate an incorrect and devastating interpretation of the “In-Home Rule” by the Centers for Medicare and Medicaid Services (CMS). Medicare’s mobility device benefit has never been generous. In fact, Medicare will only provide wheelchairs and scooters to those beneficiaries who need them to eat, bathe, groom, dress, or use the bathroom *inside* their home. In many communities, CMS takes a hard line on the issue and insists that if the provided medical device is used outside the home, the recipient is no longer entitled to the device.

The current rule prevents beneficiaries from living independently by returning to work or school, regaining self-sufficiency, accessing their place of worship, the voting booth, and the homes of family and friends. Medicare continues to pursue such myopic and irrational policies that genuinely harm beneficiaries in the name of reducing fraud and abuse. NCIL calls on CMS to address Medicare’s restrictive “In-Home Rule” policy, which was originally meant to define durable medical equipment as devices provided outside an institution, hospital, or nursing facility, which therefore warranted separate reimbursement under Medicare Part B.

Healthcare and Long Term Care Choices

NCIL was very involved in the passage of the *Affordable Care Act*. We strongly oppose any effort to repeal ACA. NCIL also opposes any waiver from the maintenance of eligibility requirements of the Affordable Care Act. NCIL supports equitable coverage, deductibles, and co-pays between mental health, medical, and surgical insurance coverage. NCIL supports automatic payroll deductions that will create a system to help people pay for care that enables them to stay in their homes.

NCIL supports change to America’s long term care system. People should not be forced into institutions to receive supportive services. National long term care policy should increase the incentives to states to offer and expand home and community-based Medicaid services. Services should be based on an assessment of the individual’s functional need. NCIL supports an overhaul of America’s long term care services and supports that would allow people with disabilities and their families to choose how and where they receive services.

Employment and Economic Empowerment

The Obama Administration's new budget proposal for Fiscal Year 2012 included a major proposal for a Social Security Work Incentives Simplification Pilot (WISP) to provide beneficiaries a simpler set of work rules that no longer terminate benefits based solely on earnings.

NCIL strongly recommends that any new work incentives overhaul include internal Social Security reform that finally stops chronic overpayments to Social Security disability beneficiaries, especially to beneficiaries who return to work or start work for the first time.

Social Security must seriously upgrade how it processes wage reporting on a monthly basis in the Title II (SSDI), Title XVI (SSI) and the Title XIX (Medicaid) programs in partnership with the Centers for Medicare and Medicaid Services.

NCIL members nationwide propose and request that the Social Security Office of Operations, in partnership with the Social Security Office of Employment Support Programs, establish a basic, thorough, and public set of guidelines by July 2012 that prescribes a business model partnership between local Social Security Field Offices, Social Security Work Incentives Planning and Assistance (WIPA) grantees and those who interact with processing Social Security Title II, Title XVI and Title XIX work incentive rules.

The new guidelines and procedures must be put into place in a manner that is efficient, accessible, easy to use, and creates a predictable process between WIPA Community Work Incentives Coordinators (CWICs), benefits planners, beneficiaries, Employment Networks, vocational rehabilitation counselors, employers, family members, and Social Security Field Office staff. NCIL members can assist SSA and CMS with shaping and implementing these critically needed guidelines and procedures.



NCIL seeks Administration and Congressional focus on the following:

- **Establish by Executive Order a Commission on People with Disabilities, Employment, Economic Empowerment and Social Security** that will present a concrete set of proposals to increase the employment rates and asset building potential of veterans and civilians with disabilities.
- **Reauthorize Medicaid Infrastructure Grants (MIGs)**, which promote support-infrastructures and increase Medicaid Buy-Ins for workers at the state level, and take new steps to develop a single, easy to use national Medicaid Buy-In with a minimum threshold set of worker earnings and asset-building provisions.

Employment and Economic Empowerment

National public policy on employment and disability remains stuck in a morass of confusing program rules and conflicting objectives. The high rate of poverty linked to disability is unacceptable on moral and economic grounds. We must work to uncouple and demystify the conflicting goals of today's disability benefit and health coverage programs.

NCIL continues to support the creation of an Employment Support Insurance (ESI) program that would provide health coverage through new models of Medicare, benefits planning services, and referrals to employment support services. Employment Support Insurance is the missing policy link between breaks in employment, worker's compensation and today's Social Security disability programs. ESI would be similar to the social insurance model SSDI uses now, with FICA payroll deductions to fund some of its services. ESI would provide needed supports that are now missing between jobs, or when seeking employment and receiving SSI or SSDI.

For those who show they are unable to work, the current SSDI program would maintain its earnings replacement components under an improved Earnings Replacement Insurance (ERI) program. Medicare coverage would be available right away in a new ERI program. The ESI program would provide income support, health coverage, benefits planning, and referral services to people transitioning off the ERI program when returning to work.

This ESI and ERI two-plan model protects the life-saving aspects of current disability insurance systems while addressing their gross deficiencies.



- Reauthorize by October 2011, improve, and **double the funding for the Work Incentives Planning and Assistance (WIPA) grants** to include their increased use of online tools. Each current WIPA benefits counselor has a potential caseload of 5,000 Social Security disability beneficiaries who are taking concrete steps to seek work, an impossible caseload by any standard.
- **Continue to Expand the Disability Program Navigator initiative** at One Stop Career Centers through the Department of Labor and work towards permanent codification of the DPN initiative via reauthorization of the *Workforce Investment Act of 1998 (WIA)*.

Protecting and Expanding Our Housing Opportunities

NCIL supports initiatives to increase accessible, affordable, healthy / non-toxic, decent, safe and integrated housing.

NCIL is a cross-disability organization and applies the term accessible broadly, emphasizing physical accessibility, accommodations for persons with sensory (visual or hearing), emotional, developmental and intellectual disabilities, and for persons with chemical and electrical sensitivities.

The need for housing that accommodates a wide-range of disabilities is increasing due to community living options replacing costly and unjust institutionalization, many veterans returning with disabilities, the high rate of homelessness among people with disabilities, and the aging of the population.

Appropriations

NCIL believes that programs serving communities have been enormously beneficial to people with disabilities, and is opposed to cuts in programs such as:

- Community Development Block Grants and HOME
- Housing Choice Vouchers for persons with disabilities
- Project-based Vouchers
- Public Housing

In addition, NCIL supports the efforts of the Department of Housing and Urban Development to transform its programs and create sustainable neighborhoods with input from NCIL and other organizations.

In the 111th Congress several pieces of legislation were introduced, and we anticipate similar bills being introduced again.

National Housing Trust Fund

Congress created the National Housing Trust Fund in 2008 with directed funding to come from Fannie Mae and Freddie Mac. Unfortunately, the economic crisis has suspended the funding, with no prediction on when the funding will finally happen.

President Obama has proposed in FY10 to fund the Housing Trust Fund at \$1 billion. NCIL applauded this proposal, which would have allowed the Housing Trust Fund to create and preserve housing for the lowest income people in our country, which disproportionately includes households with a member who has a disability.

NCIL urges Congress to support funding efforts. Please consult www.nlihc.org for further information.



Protecting and Expanding Our Housing Opportunities

Inclusive Home Design Act

Yet To Be Introduced in the 112th Congress

The Inclusive Home Design Act requires that newly constructed, federally assisted single family houses and town houses include at least one level that complies with accessibility features for persons with disabilities including: accessible entrance, accessible interior doors, accessible environmental controls, and accessible habitable space and an accessible bathroom.

These features will make this housing available to persons with disabilities, prevent unnecessary expenses for renovations and will allow seniors to age in place, negating the need for costly institutionalization.

Section 8 Voucher Reform Act

Yet to be Introduced in the 112th Congress

NCIL understands the need to simplify the Section 8 program in a manner that is cost-effective for the federal government and does not result in increased rental payments for a majority of tenants. *SEVRA* is intended to simplify the rules concerning the Section 8 Housing Choice Voucher program. There are too many provisions and changes to include in this summary, and while NCIL supports many of the reforms, we are very concerned that some changes previously proposed would have a negative impact on people with disabilities.

Our government is focused on getting people back to work and yet there were several work disincentives in the *SEVRA* bill, including replacing the Earned Income Disregard for people returning to work after receiving benefits for at least 12 months. In addition, the reductions in the income adjustments for unreimbursed medical expenses and the expansion of the unproven Moving to Work program has the potential of making subsidized rent unaffordable for many seniors and persons with disabilities. Please watch www.ncil.org for updates.

NCIL believes that while this bill was well-intentioned and had the potential to achieve many of its stated goals, the people who can least afford it would be impacted negatively by the proposed work disincentives and income adjustments. Our analysis shows that some people with disabilities receiving housing assistance will see their portion of the rent increase.

We urge members of Congress to improve *SEVRA* by addressing our concerns.

Achieving a Better Life Experience (ABLE) Act

Yet to be Introduced in the 112th Congress

NCIL supports provisions of the *ABLE Act*, which would permit ABLE accounts to be used for housing expenditures such as home modifications, assistive technology and other tools that empower persons with disabilities to remain in their homes.



Transportation: The Lynchpin to Independence

Transportation is one of the most significant barriers facing people with disabilities, dramatically interfering with independence, full societal participation and proper implementation of the 1999 Supreme Court Olmstead decision.

In today's society, economic competitiveness and success in the 21st Century is dependent upon revolutionary ideas and solutions providing Americans, including individuals with disabilities, with accessible transportation options that connect our cities, regions, and rural areas. The goal of NCIL's Transportation Committee is to promote the inclusion of individuals with disabilities into society by designing accessible transportation systems and encouraging pedestrian safety.

When America honors the equal access intent of the *Americans with Disabilities Act* by ensuring accessible and affordable public and private transportation, people with disabilities will have the same travel options available to everyone else, allowing them to attend school, maintain employment, travel within any community of their choice such as rural America, and fully participate in the American Dream.

NCIL endorses legislation supportive of: pedestrian safety, accessible rights-of-ways, and a federal standard requiring all taxi fleets in America to be wheelchair accessible as soon as feasibly possible and encourages the Access Board to develop and adopt a minimum standard of universal design for all taxicabs and other vehicles utilized by the transportation industry.

The Transportation Committee supports:

- The Complete Streets legislation, which requires all federally-funded transportation projects to use the "complete streets principles," which provide safety and convenience standards. By establishing compliance standards, all users, including people with disabilities, will have better access to transportation and increased independence.
- Pedestrian Safety Enhancement legislation, which requires the Secretary of Transportation to study and report to Congress on the minimum amount of sound that should be emitted from a motor vehicle. Minimal sound requirements will help ensure the safety of pedestrians, especially those with visual impairments and other disabilities.
- The reauthorization of the *Safe, Accountable, Flexible, Efficient Transportation Equity Act (SAFETEA)*, which provides funds for highways, highway safety and transit programs, and paratransit, including fixed route and demand responsive services. Reauthorization of this legislation is critical to providing equal access to public transportation in accordance with the *ADA*.



Education

All students with disabilities have the right to an equal education.

Furthermore, students with disabilities must be assured a high quality education that provides the opportunity to acquire the same knowledge and skills as their peers through participation in the general curriculum and access to teachers qualified to teach students with diverse learning needs.

Implementation and enforcement of the *Individuals with Disabilities Education Act (IDEA)* and the *Elementary and Secondary Education Act (ESEA)* must be improved.

Reauthorization of *ESEA* provides Congress with the opportunity to reaffirm and strengthen provisions that will ensure that all students receive a quality education.

Specific items that need strengthening include:

- Empowerment of students with disabilities with information about education rights, services and expectations
- Integration of academic instruction, school activities, and planning to promote successful transition from school to adult life
- Accountability standards focused on improving the graduation rate of students with disabilities
- Integration of *IDEA*, *ESEA* and Section 504 of the *Rehabilitation Act* requirements
- Development of standards to ensure all students have full, meaningful access to quality instruction in the regular curriculum
- Assessment programs aligned with the curriculum and used as a means to make schools accountable to students and their families
- Requirements for disaggregation of assessment data and use of the data to improve educational opportunities



Available and Accessible Technology

NCIL strongly advocates for access to mainstream and assistive technologies (AT) that enable and enhance independence for people with disabilities through supporting the principles of universal design, inclusion, consumer control, and peer support as they apply to the use, development and delivery of technology. People with disabilities are best served by available and affordable “hands on” exposure to technology. NCIL encourages the use of universal design to make technology inclusive and accessible to people with disabilities and supports efforts that develop and enforce access standards.

Twenty-first Century Communications and Video Accessibility Act

P.L. 111-260

Monitor proposed regulations to comport with Congressional intent.

Health Information Technology

Ensure that federal and state deployment of health care technology systems are based on the fundamental principles of accessibility, usability, and affordability for people with disabilities.

Assistive Technology Act

NCIL supports funding of the *Assistive Technology Act* because it assists consumers in learning about, experimenting with, and acquiring assistive technology in pursuit of their independence. Six years after the 2004 amendments, 20% (10) of the State AT Programs, not including the territories, have yet to receive the \$410,000 minimum grant award authorized in the Act. Many states have limited or no alternative finance programs.

Veterans' Issues

NCIL supports efforts to provide all Veterans and their families with expanded services and benefits in the most expeditious, effective and efficient manner possible in recognition of their service and sacrifice. These efforts must create partnerships between the VA and community-based organizations like Centers for Independent Living in planning and providing services to veterans in their communities, in the location of the veteran's choice. Specifically, NCIL supports efforts in the following areas:

- The Department of Veteran Affairs (VA) and Congress must continue to reform the Veterans Benefits Administration (VBA) claims process to ensure consistency, true reforms with timely processing, and adjudication of claims.
- Continued focus by the Department of Defense (DoD), VA and Congress to provide proper services and supports for veterans and their families who have Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI) and Mental Health issues as a result of their military service.
- Transition from military service to civilian life often involves the veteran's ability to be competitive in the workforce; therefore, Congress must provide adequate funding for education, employment, and training programs to meet increasing needs.
- Congress must ensure that the Veterans Health Administration (VHA) receives appropriate and sufficient funding for veterans' healthcare while sustaining quality and satisfaction.

Convention on the Rights of Persons with Disabilities (CRPD)

The Convention on the Rights of Persons with Disabilities (CRPD) is an international treaty elaborating the human rights of people with disabilities. The treaty does not create new or different rights for people with disabilities, but rather addresses existing human rights in the context of disability. The treaty's standards exceed those currently found in many countries. However, for those countries with national laws that are stronger than the CRPD, the treaty cannot be used to weaken those laws.

Indeed, the CRPD fully encourages the strengthening of national protections where appropriate. The treaty addresses equality and non-discrimination, and the right of access for people with disabilities in such areas as education, healthcare, and community life. In the same way that groundbreaking U.S. laws such as the *ADA* and *IDEA* have achieved major societal changes domestically, the CRPD is changing the world for people with disabilities in countries around the world.

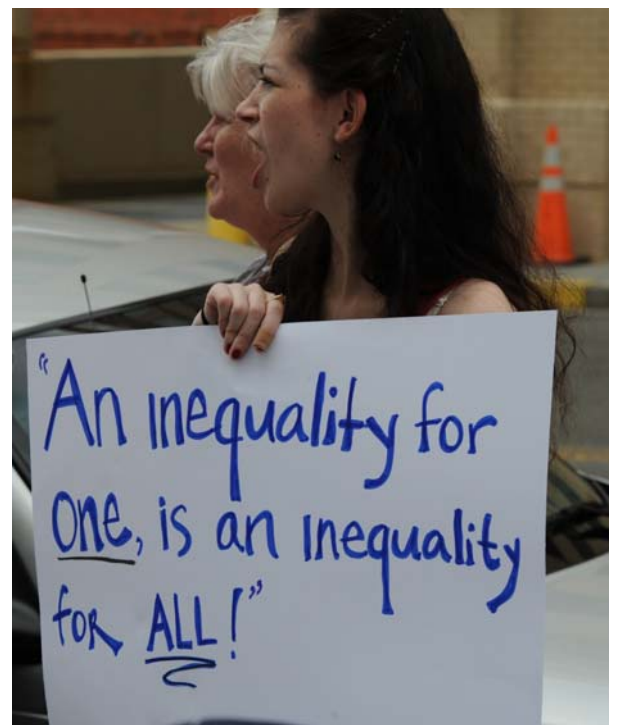
Ratification

President Obama ordered the United States to become a signatory to the treaty on the 19th Anniversary of the *ADA* in 2009. The next step is ratification, which would make the U.S. a full party to the treaty and legally bound to uphold its treaty obligations. The Administration has been studying the treaty in order to send it to the U.S. Senate for its advice and consent for U.S. ratification. The treaty will not be included in the Senate's agenda until it is formally submitted by the Administration in what is known as a "transmission package." That document will provide Senators with an analysis of how U.S. law and policy currently comply with the treaty, and identify any areas where the U.S. may need to file a "reservation, understanding or declaration" regarding its obligations. This period of study of the treaty by the Administration is occurring now, and treaty advocates hope to see announcement of its completion and movement forward toward ratification by the Administration soon.



The engagement of the U.S. disability community in the ratification process will become especially critical once the Senate has received the Administration's transmission package. NCIL supports United States ratification of the CRPD, and is working with disability organizations to raise awareness and understanding of this treaty.


NCIL and a number of CILs are members of the U.S. International Council on Disabilities, which is conducting an education and outreach campaign about the CRPD and provides CRPD resources on its website: www.usicd.org. The USICD education and outreach campaign provides a volunteer speakers bureau service connecting CRPD presenters to diverse audiences about the treaty via teleconference, in person, or in other venues. Those interested in partnering to host a presentation are encouraged to contact USICD at info@usicd.org.





Legislation NCIL Supports:

Bill names and numbers from the 111th Congress

- H.R. 1670 and S. 683 • Community Choice Act
- H.R. 1708 and S. 700 • Ending the Medicare Waiting Period Act
- H.R. 3184 and S.1186 • Medicare Independent Living Act
- H.R.1408 • Inclusive Home Design Act
- H.R. 1205 and S. 493 • Achieving a Better Life Experience (ABLE) Act
- H.R. 3101 • Twenty-first Century Communications and Video Accessibility Act
- H.R. 1443 and S. 584 • Complete Streets Act
- H.R. 734 and S. 841 • Pedestrian Safety Enhancement Act
- Reauthorization of: 
 - Rehabilitation Act, with increased funding for Independent Living
 - Safe, Accountable, Flexible, Efficient Transportation Equity Act
 - Twenty-first Century Communications and Video Accessibility Act
 - Assistive Technology Act

Legislation NCIL Opposes:

Bill names and numbers from the 111th Congress

- H.R. 2397 • ADA Notification Act



Founded in 1982, the National Council on Independent Living is one of America's leading and the oldest cross-disability, national grassroots organization run by and for people with disabilities. We represent Centers for Independent Living (CILs,) Statewide Independent Living Councils (SILCs,) and other disability rights organizations serving hundreds of thousands people with disabilities in every state and territory of the country.

Mission: As a membership organization, NCIL advances Independent Living and the rights of people with disabilities through consumer-driven advocacy.

Vision: The National Council on Independent Living envisions a world in which people with disabilities are valued equally and participate fully.

The National Council on Independent Living

1710 Rhode Island Ave, NW / Fifth Floor ▪ Washington, D.C. 20036

voice: (202) 207-0334 ▪ fax: (202) 207-0341 ▪ tty: (202) 207-0340

website: www.ncil.org ▪ email: ncil@ncil.org