

From: [Sunset Advisory Commission](#)
To: [Dawn Roberson](#)
Subject: FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)
Date: Tuesday, June 24, 2014 4:04:49 PM

-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Tuesday, June 24, 2014 12:39 AM
To: Sunset Advisory Commission
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Tuesday, June 24, 2014 - 00:38

Agency: DEPARTMENT AGING AND DISABILITY SERVICES DADS

First Name: Martha

Last Name: Moyer

Title: Executive Director and parent/guardian

Organization you are affiliated with: Seth Moyer Support Microboard, Inc.

City: Elmendorf

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed: All I see is discussion about people transitioning out of SLCS with higher required needs as needing more funding assistance needs but I have a 40 year old man with autism and severe behavioral needs and also medical issues who is already out in the community and needs more help too! His bowels are paralyzed due to Institutional neglect, so we aren't even addressing those who have already transitioned out and are not getting adequate support. They should be considered too! My son has lived in his own apartment with foster care support for over 15 years now. Agencies who were only interested in money often don't take good care of the more severe individuals and want to get rid of them. I became an agency provider because he needs special bowel treatments requiring supplies not funded by any type of Medicare, insurance or Medicaid and I pay for his lifesaving care supplies with administrative funds. I receive no money as salary and neither does my billing nor accountant. We have little administrative funds and don't know how long we can continue this as I am age 75 now and a widow trying to keep this together. Also, my son is so medically involved that we have to pay extra funds out so he can have a day habilitation worker who takes him out in the community and works on socialization and money skills which are part of his person directed plan.

Any Alternative or New Recommendations on This Agency:

I recommend for the more severe to explore more individualized care such as apartments with a foster care. We also have nurses who come and go for treatment. We always seem to think of institutional like small group homes for those needing extra care. My son partners with section 8 to reduce the cost.

I like my individualized day care because it allows the nurse to come for his treatment and he gets out in the community to work on his personal directed plan along with recreation. He tends to get fatigued so it helps better to plan his day according to his medical needs but in order to do this we need more funding. We can not vie for CDS because we do foster care. We do not care for 3 or 4 people so we

don't qualify for the funding we need to continue and this should be taken into consideration for caring for those with severe behavior and medical needs. My son also has IDD and limited communication ability.

My Comment Will Be Made Public: I agree

From: [Amy Trost](#)
To: [Dawn Roberson](#)
Subject: FW: Sunset Input
Date: Thursday, July 10, 2014 2:14:19 PM

From:
Sent: Monday, June 30, 2014 9:57 PM
To: Skylar Wilk
Subject: Sunset Input

From Martha Moyer

Elmendorf, Tx.

I am adding input to a previous one sent. I am an HCBS Medicaid Waiver Provider; senior citizen; parent/guardian of Seth Moyer, my 40 year old son. So I wear 2 hats and the main reason I wear these hats is because my severely disabled son has gone through many years of anguish with providers who neglected him and an institution that also neglected him so today he has paralyzed bowels and requires a special cleanout procedure with a machine, operating like a vacuum to pull the feces from his bowels because a final impaction allowed at the institution made it impossible for him to ever permit him to normally toilet himself with his bowels. He urinates fine.

I want the Sunset Commission to know that severely disabled individuals like my son CAN live in their own apartment with one on one foster care and section 8 backup. Group homes do not provider care that my son needs. He has autism, IDD, minimal communications, OCD, intermittent explosive disorder and with the bowel issues and procedure would be a challenge for any agency group home. And no agency would want to pay for the supplies out of their administrative funds. They normally cost over \$1,000 a month. So far, we are given a price break but how long I do not know.

We need to not just address those coming out of institutions but those who have COME out and are not receiving the help and Crisis intervention services. We can not find speech therapists here willing to take our insurance and do assistive technology evals for adults. Psychiatrists are almost impossible to find who take Medicaid that most have. My son has had numerous crisis incidents while we worked hard at medication adjustments and there was no hospital prepared to treat his crisis incidents.

I hope STAR + will allow better options; however, since my son isn't eligible for Star + so I wonder how he will continue to receive nursing services. I wonder how he will get ABA that is not allowed through his insurance.

We should look into section 8 vouchers for the more severe to come out of institutions.

We don't have to send people to day habitation places, sheltered workshops or day programs. We need to develop funding so individuals can go with a one on one companion like my son does and experience community first hand; experience buying his own food with help; experience recreating with the normal community.

If they have medical needs then we need to provide for such needs. We are having to pay out of our tiny administrative funds for the bowel cleanout supplies because no insurance including Medicare, private insurance, Medicaid or DADS adaptive aids will pay for what is called PIE packs that are used with the machine to allow for his bowels cleanouts. You would not believe the before and after pictures of Seth when you compare letting him leak, trying to clean out the lower bowel with an enema and not using the treatment which cleans out not just the lower bowel but the upper bowel too at the same time, making him healthy.

I plead with you to look at the whole picture and not just people who are exiting institutions.

Martha Moyer
Executive Director
Seth Moyer Support Microboard, Inc.

Sent from Windows Mail