

**\*\*\*Adopted\*\*\*  
AMENDMENT No. 1 PROPOSED TO**

**House Bill NO. 929**

**By Senator(s) Committee**

**Amend by striking all after the enacting clause and inserting  
in lieu thereof the following:**

9        SECTION 1. The State of Mississippi is committed to  
10 providing options to persons with disabilities and families that  
11 include members who are persons with disabilities for services to  
12 be provided in the most integrated setting appropriate. The State  
13 of Mississippi is further committed to developing a comprehensive  
14 plan to address needs, service options, opportunities and service  
15 settings appropriate for persons with disabilities and families  
16 that include members who are persons with disabilities so that  
17 they may participate in community life to the greatest extent that  
18 is possible and that they desire.

19        SECTION 2. The following state agencies shall organize a  
20 statewide work group to develop a proposed plan: the Department  
21 of Mental Health, the State Department of Rehabilitation Services,  
22 the Department of Human Services, the State Department of  
23 Education, the State Department of Health and the Division of  
24 Medicaid. The lead agency shall be the Division of Medicaid. The  
25 statewide work group shall include any other state agencies that

26 are responsible for providing services to persons with  
27 disabilities or to families that include members who are persons  
28 with disabilities and any advocacy groups, consumer groups,  
29 consumers, providers, provider groups, associations and any other  
30 persons, organizations or entities interested in the mission of  
31 the work group. The work group shall seek input from the public,  
32 particularly from persons with disabilities and families that  
33 include members who are persons with disabilities. The statewide  
34 work group shall submit a recommendation for the proposed plan to  
35 the Legislature no later than September 30, 2001.

36 SECTION 3. In developing the proposed plan, the following  
37 issues shall be considered:

38 (a) Expansion of home and community-based services;

39 (b) Prevention of premature or inappropriate  
40 out-of-home placement;

41 (c) Development of support services and networks,  
42 including, but not limited to:

43 (i) Communication services;

44 (ii) Counseling services;

45 (iii) Crisis intervention;

46 (iv) Day care;

47 (v) Dental and medical care that are not otherwise  
48 covered;

49 (vi) Equipment and supplies and other assistive  
50 technology;

51 (vii) Financial assistance;

52 (viii) Home and vehicle modifications;

53 (ix) Home health services;

54 (x) Homemaker services;

55 (xi) Parent education and training;

- 56 (xii) Personal assistance services;
- 57 (xiii) Recreation;
- 58 (xiv) Respite care;
- 59 (xv) Self-advocacy training;
- 60 (xvi) Service coordination;
- 61 (xvii) Specialized diagnosis and evaluation;
- 62 (xviii) Specialized nutrition and clothing;
- 63 (xix) Specified utility costs;
- 64 (xx) Therapeutic and nursing services;
- 65 (xxi) Transportation;
- 66 (xxii) Vocational and employment supports;
- 67 (xxiii) Alternative living arrangements, such as
- 68 group homes and supervised and supported living programs;
- 69 (xxiv) Housing;

70 (d) Appropriate maintenance of institutional services  
71 for those persons with disabilities who desire or need them.

72 The proposed plan shall consider any other issues pertinent  
73 to the goal of the plan in addition to the issues listed in this  
74 section.

75 SECTION 4. The following principles shall be considered in  
76 the development of the proposed plan:

77 (a) Individuals with disabilities and their families  
78 are best able to determine their own needs and should be empowered  
79 to make decisions concerning necessary, desirable and appropriate  
80 services.

81 (b) Individuals with disabilities should receive the  
82 support necessary for them to live as independently as possible at  
83 home, if recommended by their treatment team and if they choose.

84 (c) Family support should be responsive to the needs of  
85 the entire family unit.

86 (d) Supports should be sensitive to the unique needs  
87 and strengths of individuals and families.

88 (e) Supports should build on existing social networks  
89 and natural sources of support.

90 (f) Supports will usually be needed throughout the life  
91 span of the individual who has a disability.

92 (g) Supports should encourage the integration of people  
93 with disabilities into the community as much as possible and when  
94 recommended by their treatment team and if the consumer prefers  
95 that integration.

96 (h) Support services should be flexible enough to  
97 accommodate unique needs of individuals and families as they  
98 evolve over time.

99 (i) Support services should be consistent with the  
100 cultural preferences and orientations of individuals and families.

101 (j) Support services should be comprehensive and  
102 coordinated across the agencies that provide resources and  
103 services, or both, to individuals and families.

104 (k) Individual and family home-based support services  
105 should be based on the principles for sharing ordinary places,  
106 developing meaningful relationships, learning things that are  
107 useful and making choices, as well as increasing the self-esteem  
108 and status, and enhancing the reputation of the individuals  
109 served.

110 (l) Supports should be developed and expanded in the  
111 state that are necessary, desirable and appropriate to support  
112 individuals and families.

113 (m) Supports and services should enhance the  
114 development of the individual with a disability and the family.

115 (n) A comprehensive, coordinated system of supports to

116 families effectively uses existing resources and minimizes gaps in  
117 supports to families and individuals in all areas of the state.

118 (o) Services should be coordinated with other services.

119 (p) No individual who wishes to remain in, or requests  
120 services in, an institutional setting will be forced to receive  
121 support services in a noninstitutional or home-based setting,  
122 including any individual whose professional team determines that  
123 an institutional setting is the most integrated and appropriate  
124 setting.

125 SECTION 5. (1) The proposed plan shall provide the  
126 following:

127 (a) An estimate of the number of persons with  
128 disabilities in the State of Mississippi who need services or will  
129 need services;

130 (b) An estimate of the amount of appropriations  
131 necessary over the course of the proposed schedule to accomplish  
132 the proposed plan;

133 (c) A proposal for funding the proposed plan.

134 (2) It shall be the goal of the proposed plan that, not  
135 later than June 30, 2011, the State of Mississippi will have  
136 available community services for all persons with disabilities  
137 where their professional teams recommend those services and the  
138 persons request those services.

139 SECTION 6. Sections 1 through 6 of this act shall stand  
140 repealed on July 1, 2003.

141 SECTION 7. This act shall take effect and be in force from  
142 and after its passage.

**Further, amend by striking the title in its entirety and  
inserting in lieu thereof the following:**

1 AN ACT TO PROVIDE FOR THE DEVELOPMENT OF A PROPOSED  
2 COMPREHENSIVE STATE PLAN FOR THE PROVISION OF SERVICES TO PERSONS  
3 WITH DISABILITIES IN THE STATE OF MISSISSIPPI IN THE MOST  
4 INTEGRATED SETTING APPROPRIATE; TO PROVIDE ISSUES FOR  
5 CONSIDERATION IN THE DEVELOPMENT OF THE PROPOSED PLAN; TO PROVIDE  
6 PRINCIPLES FOR CONSIDERATION IN THE DEVELOPMENT OF THE PROPOSED  
7 PLAN; AND FOR RELATED PURPOSES.