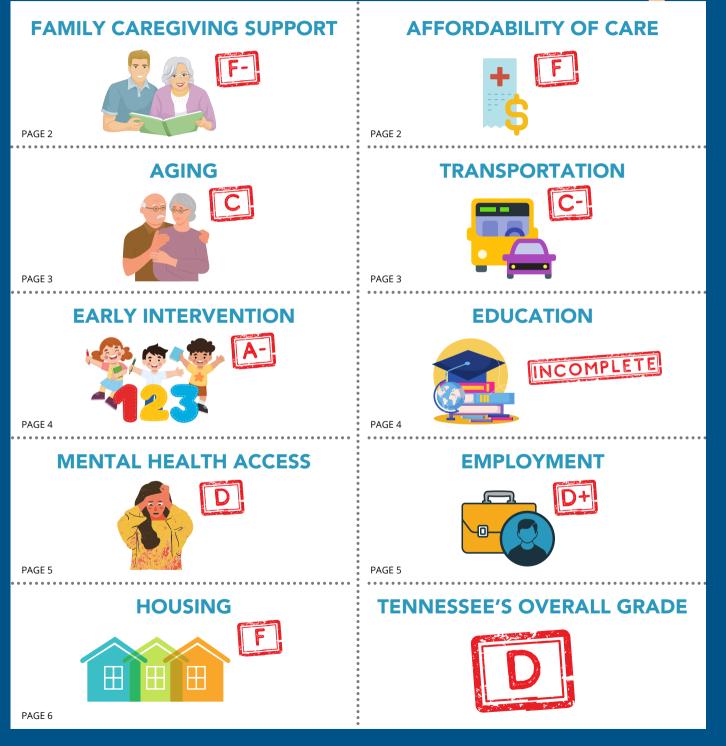
2023 TENNESSEE DISABILITY SCORECARD

Tennessee receives a D for its policies, practices, opportunities, and outcomes for residents with disabilities.





The Tennessee Disability Coalition is an alliance of organizations and individuals across Tennessee who work together to improve the lives of Tennesseans with disabilities.

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FAMILY CAREGIVING SUPPORT

THE PROBLEM	TENNESSEE'S HOMEWORK
System Failure: AARP ranked	Compensation : Establish a statewide
Tennessee last – 51st out of 51 – in	Paid Family Caregiving policy that
supporting family caregivers in 2023.	ensures caregivers receive
This was due to the absence of 100%	compensation for providing services
of caregiver-friendly policies they use	that the state fails to provide
to score this metric.	themselves.
Protect Spouses: The state fails to	Invest: Increase reimbursement to
exceed the minimum federal	providers, including those for DSP
requirements for protecting spousal	wages, to ensure an adequate and
caregivers from impoverishment in	stable network of agencies providing
order to secure health care for their	supports and services to Tennesseans
loved one.	with disabilities.
DSP Wage: Despite several consecutive years of increases, the average wage for a Direct Support Professional remains below average, ranking 33rd in the United States.	Transparency: Implement policies requiring TennCare to report on service utilization percentage, rather than exclusively on time and distance standards, to demonstrate network adequacy and density.

AFFORDABILITY OF CARE

THE PROBLEM

Insurance Cost: Tennessee private insurance plans have the 2nd most expensive deductible for family plans and 7th highest cost for single plans in the United States.

Medical Debt: Tennessee has the 8th highest percentage of residents carrying medical debt in the country.

Drug Cost: Tennessee has the 3rd highest prescription drug cost per household in the United States.

TENNESSEE'S HOMEWORK

Improve Access: Submit a waiver to expand TennCare to those earning up to 138% of the Federal Poverty Line (FPL).

Lower Cost: Establish a Drug Affordability Board tasked with lowering prescription drug costs.

Control Growth: Implement a health care cost growth benchmark policy that sets reasonable cost-limiting goals and holds entities accountable for meeting appropriate thresholds.



THE PROBLEM	TENNESSEE'S HOMEWORK
Financial Peril: 52.5% of Tennesseans aged 65+ live below the ALICE (Asset- Limited, Income-Constrained, Employed) threshold, meaning they cannot afford the basics where they live.	Increase Housing Access: Establish an alternative Supportive Housing licensure category to increase the number and quality of housing options available to aging Tennesseans.
Supported Housing: Tennessee ranks 34th in the number of assisted living and residential care units per 1,000 adults aged 75+.	Commit Resources: Establish a Department of Aging and Disability to ensure that the needs of aging Tennesseans are well-understood, taken seriously, and adequately resourced.
Home Health Care Quality: Tennessee ranks 50th in the percentage of home health care patients who require a hospital admission.	Expand HCBS : Invest state funds in AAAD's to expand capacity to deliver direct client services including intake, eligibility screening and case management



THE PROBLEM	TENNESSEE'S HOMEWORK
Capacity: Tennessee ranks 38th in the United States in the number of demand-response (paratransit) rides per person with a disability, due to low capacity and investment.	More Vehicles: Make state and local investments to increase the state's stock of accessible vehicles.
Quality: The 2023 AARP State Disability Scorecard ranks Tennessee 47th in composite "Transportation Livability Index."	More Routes: Provide state funds to municipalities to increase the density and frequency of fixed route transit over expanded service hours.
Improvement: In 2020, the state passed legislation to establish the Office of Accessible Transportation and Mobility in an attempt to improve access and quality of transportation services for Tennesseans with disabilities.	Increased Staffing : Increase paratransit driver pay to ensure that resources are used most effectively and efficiently.

EARLY INTERVENTION A-

THE PROBLEM	TENNESSEE'S HOMEWORK
Service Continuity: In 2022, Tennessee became the first state to extend early intervention services to age 5, eliminating the possibility of gaps in service.	Commitment : Secure a recurring state funding stream to ensure the long-term stability of the TEIS extension to age 5.
Quality: Last year, 99.72% of TEIS participants received a timely Individualized Family Service Plan.	Scope of Service: Adopt and implement literacy and numeracy curriculum and establish skill development metrics for annual evaluation.
Improvement: As a whole, the state is meeting half of skill- and progress- based state targets for children in TEIS.	Expand: Increase reimbursement rates to improve the adequacy of the TEIS provider network.

EDUCATION INCOMPLETE

THE PROBLEM

Graduation : Tennessee children with disabilities graduate at a rate of 13.7 percentage points lower than their non-disabled peers.	Transparency: Establish metrics to document and report on the use of informal exclusionary discipline practices and policies against children with disabilities in Tennessee schools.
Quality: A 2022 survey of Tennessee teachers found that 46% of licensed General Education teachers say they have difficulty differentiating instruction for students with disabilities.	Address Shortages: Invest in occupational pipelines for Special Education teachers and related services professionals. Dedicate recurring funding and resources for retention policies.
Post-Secondary Access: Tennessee maintains dedicated funding streams for disability-specific post-secondary programs that increase the population of students with disabilities at the state's colleges and universities.	Common Sense: Accept federal funding for special education and recommit to providing the rights and protections of IDEA to Tennessee students with disabilities.

TENNESSEE'S HOMEWORK

TENNESSEE'S "INCOMPLETE" GRADE IS DUE TO THE STATE'S LACK OF DATA TRANSPARENCY AND IT'S ONGOING ATTEMPT TO REFUSE FEDERAL SPECIAL EDUCATION FUNDING.

MENTAL HEALTH ACCESS D

THE PROBLEM	TENNESSEE'S HOMEWORK
Availability: In 2022, Tennessee met only 16.3% of its need for psychiatric services, compared to the national average of 27.7%.	Stability : Invest in permanent supportive housing for individuals with mental health needs and/or Substance Use Disorder (SUD).
Access: In 2022, only 74.4% of Tennessee adults with any mental health need had private insurance or TennCare, as compared to 81.2% nationally, making care inaccessible for a large portion of those in need.	Increase Access: Invest in school- based mental health care and supports, including expanding the behavioral health liaisons program to every school.
Youth Access: Tennessee had the 15th lowest student-school psychologist ratio in the country, limiting access to free mental health care.	Increase Availability: Establish school psychologist caseload maximums similar to the national best-practice standard of 1:500.

EMPLOYMENT



THE PROBLEM

Access and Quality: Tennessee has the 8th worst employment rate for people with disabilities while working adults with disabilities earn the 12th lowest average wage.

Effort: In 2022, the state returned over \$28 million to the federal government for Vocational Rehabilitation (VR) services meant to provide job training and placement for Tennesseans with disabilities.

Model Employer: In 2022, the General Assembly passed legislation establishing the Tennessee "State as a Model Employer" (SAME) program, which enacts hiring and retention reforms meant to increase the number of state employees with disabilities.

TENNESSEE'S HOMEWORK

Increase Effort: Ensure that the state is not required to remit federal funding for VR by appropriating adequate funds to meet its Maintenance of Effort (MOE) obligation.

Build Opportunity: Establish a pathway to TennCare for working adults with disabilities that allows working-age adults with disabilities to obtain and keep well-paying jobs without jeopardizing their access to care.

Prepare Workers: Fund the reopening of a Training Center for the Blind to ensure that Tennesseans with visionrelated disabilities have access to their communities and gainful employment.



THE PROBLEM	TENNESSEE'S HOMEWORK
Purchase: Only 5 counties are affordable for people with disabilities to purchase a home, down from 15 counties in 2022.	Build Affordable Housing: Repeal the state's 2018 preemption law preventing municipalities from using even voluntary zoning policies to build affordable and/or accessible housing.
Rental: The state lacks approximately 14,165 affordable AND accessible rental units for low-income individuals with mobility disabilities	Prevent Discrimination: Establish Source of Income (SOI) protections for Section 8 Housing Choice Vouchers.
Support : The state has the 5th lowest percentage of people with disabilities receiving Housing Choice vouchers in the country.	Maintain Existing Housing: Dramatically increase the General Assembly's investments in the THDA Tennessee Housing Trust Fund, prioritizing acquisition and rehabilitation.

Sources:

- 1. Family Caregiving Support: <u>Ranking 2023 AARP Report</u>; Spousal Impoverishment Protections: <u>CMS Requirements</u>, <u>Tennessee rules</u>; <u>Average DSP Wage</u>
- 2. Affordability of Care: Deductible Cost; Medical Debt; Prescription Drug Cost per Household
- 3. Aging: 2023 Tennessee ALICE Report; Supportive Housing Units and Home Health Quality 2023 AARP Report
- 4. Transportation: Demand Response Rides per Person with a Disability by State; Transportation Livability Index 2023 AARP Report; Office of Mobility and Accessible Transportation
- 5. Early Intervention: <u>TEIS Extension to Age 5</u>; <u>Individualized Family Services Plan Timeliness TEIS 2023 Report</u>; <u>Skill and Progress-Based Goals TEIS 2023 Report</u>
- 6. Education: Graduation Rate Gap; 2022 TN Teacher Survey Differentiating Instruction; Post-Secondary Funding Streams
- 7. Mental Health Access: <u>Availability Met Need for Psychiatric Services KFF; Access Private insurance rate KFF;</u> <u>School Psychologist – Student Ratio - NASP</u>
- 8. Employment: Employment Rates; Poverty Rates; VR Remitted Funds; SAME TCA 4-46-101-103
- 9. Housing: Housing Data; Housing Choice Data Original Source (HUD); Rentals: Affordable Units and Need; Accessibility Metrics; Disability Numbers Data



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