

# Massachusetts Rehabilitation Commission

## 2008 Annual Report



### Building Stronger Networks: Improving Our Services

**DEVAL PATRICK**  
*Governor*

**TIMOTHY P. MURRAY**  
*Lieutenant Governor*

**JUDYANN BIGBY**  
*Secretary of the Executive Office of Health & Human Services*

**CHARLES CARR**  
*Commissioner of the Massachusetts Rehabilitation Commission*



# MASSACHUSETTS REHABILITATION COMMISSION (MRC)

## ***Mission & Vision***

The Massachusetts Rehabilitation Commission (MRC) promotes equality, empowerment and productive independence for individuals with disabilities. We achieve these goals by enhancing and encouraging personal choice in the pursuit of independence and employment in the community.

The MRC provides comprehensive services to people with disabilities in order to maximize their quality of life and economic self-sufficiency in the community.

Multiple programs in the MRC complement each other to assist individuals with disabilities, including: Community Living Services, Vocational Rehabilitation Services, and Disability Determination Services.

## ***Executive Management Team***

Charles Carr  
*Commissioner*

Kasper Goshgarian  
*Deputy Commissioner*

John Chappell, Jr.  
*Assistant Commissioner of Community Living*

Joan Phillips  
*Assistant Commissioner of Vocational Rehabilitation*

Barbara Kinney  
*Assistant Commissioner of Disability Determination*



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“The goal of our services is to promote dignity through employment and community living, one person at a time. All people with disabilities in Massachusetts must have opportunities to contribute as productive members of their communities and families as a result of services provided by the MRC.”

~ Charles Carr, Commissioner ~

**Cover Photo:** Stock photo from the Massachusetts Highway Department  
*Additional photos by Othuman Ntale.*

## MESSAGE FROM THE COMMISSIONER



I am pleased to present the Massachusetts Rehabilitation Commission's (MRC) Annual Report for federal fiscal year 2008 focusing on a stronger network across the agency's three divisions. This year was a period of structural and programmatic re-visioning and change in the organization. A talented senior management team is leading a successful paradigm shift towards an integrated vision of supporting persons with disabilities to live and work in the community. My objectives included reorganization of the senior management team, promoting staff diversity, streamlining and increasing the effectiveness of youth transition services across divisions, prioritizing integrated competitive employment and establishing the MRC's foundational role in the Community First Initiative (expanding community-based services for elderly and disabled individuals under age 65) and the Rolland/Hutchinson settlements regarding consumers with acquired brain injuries

and intellectual/developmental disabilities.

Advancing this new agency mission meant proactively working with people with disabilities without an "agency of tie" including those with adult onset disabilities and those who do not fit the eligibility criteria of other human service agencies within our Secretariat, and advocating for and acquiring the resources necessary to support these individuals in the community.

During this first year I visited every Disability Determination Services (DDS) and Vocational Rehabilitation (VR) office and listened to staff explain what they needed to do their jobs. As a result of their feedback, I reorganized senior management. Throughout my visits I looked for talent to promote from within and was very impressed with the diversity and depth of staff in our agency. I selected Kasper Goshgarian as Deputy Commissioner to oversee the day to day operations of all three divisions. Joan Phillips, who was successful in leading the Roxbury office for 4 years, was chosen as the Assistant Commissioner for Vocational Rehabilitation; and Barbara Kinney, an effective and hands-on manager overseeing the Worcester DDS office, was chosen as the Assistant Commissioner of Disability Determination Services.

The MRC has historically recognized the value of a diverse workforce and has fostered diversity at all levels of the agency. The promotions of Joan Philips and Barbara Kinney, and the hiring of Ruth Paulson as Director of Contracts, enabled us to achieve greater diversity within our senior managerial ranks. We are also developing the foundation for a new MRC Diversity Council that will report directly to me, ensuring the agency's vision of diversity is realized and sustained.

The MRC continued to work toward the objective of providing effective youth transition services when the agency was awarded a five year federal grant to collaborate with selected school districts to promote and facilitate the transition of students with disabilities from school to work. The program, Transition Works, will bring together vocational rehabilitation and community living staff, school personnel, and students with disabilities in three targeted areas of the state. We also began a process of defining, counting, and tracking youth in transition across the agency's three divisions to develop a management tool for planning and budgeting current and future service needs.

We have aligned ourselves with Governor Patrick's and the Executive Office of Health and Human Services' (EOHHS) "Community First" goals, the principles of which I have spent my entire life working to pursue for people with disabilities. First, the MRC helped lead the process of launching the state's Community First Olmstead Plan which provides a framework for expanding independent living supports across the lifespan. We have also worked collaboratively with the Office of Medicaid, and the Executive Office of Elder Affairs to develop a comprehensive plan for community-based services, the Community First 1115 Waiver, under review by CMS. Through this and other mechanisms, including the new waivers for people with acquired brain injury, the MRC will take the lead in defining, developing and administering Community First services for people with disabilities who are under age 65 and provide a pathway out of nursing homes.

In the area of employment, we have prioritized and built on employment programs that support the practice of competitive integrated employment and are bringing innovation to the field through VR program development

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efforts and through our regional collaboratives and other activities funded under the Medicaid Infrastructure Comprehensive Employment Opportunities grant.

A year with many challenges brought the MRC programs closer together. As a result, the agency is better prepared to work with the full strength of all its divisions to create opportunities for innovation and excellence. Our constituents deserve nothing less, and I am proud to be a part of this ongoing mission.

Sincerely,

A handwritten signature in black ink, appearing to read "Charles Carr". The signature is fluid and cursive, with a long horizontal stroke at the end.

Charles Carr  
Commissioner

## TRANSITION WORKS! HEADED TOWARD A HOME OF HIS OWN

On October 1, 2007 the Massachusetts Rehabilitation Commission was awarded a \$2.7 million five year grant called "Transition Works." The grant is a demonstration project sponsored by the US Department of Education, Office of Special Education and Rehabilitation Services, Rehabilitation Services Administration. The funding allows the MRC to work with the underserved population of youth with disabilities here in Massachusetts.

The goal of the Transition Works Grant is to increase postsecondary and employment outcomes for youth with disabilities. To help reach this goal, three Transition Specialists (TS) were hired to work at the Brookline, Worcester, and Springfield area offices. Each TS is assigned to work with two high schools focusing on transition aged youth with disabilities. Their approach to working with these students is entirely holistic -- working with students on more than vocational goals, working with their families, and collaborating with non-profits and other MRC programs based on the students' personal goals. This approach has led to some strong partnerships across the Commonwealth and right here in our own agency.

### *Reaching Across Divisions to Improve Service*



Emily Aframe, the Brookline TS, works at the Urban Science Academy at the West Roxbury Educational Complex where she met Gio, a then 19 year old young man who sustained a spinal cord injury while in high school in 2005. After his injury, he was placed at Franciscan Hospital for Children and was recently placed at Radius Rehab, a specialty hospital where he received tutoring services but was still considered a West Roxbury student.

Before meeting with Gio, Emily called MaryEllen MacRae in the MRC Turning 22 Program since Gio would soon need some independent living services to move from a rehab facility into the community. Emily and MaryEllen met with Gio to discuss the different types of MRC services available to him. Since Gio wants to continue toward his goal of becoming a graphic artist and live on his own in an accessible apartment, Emily and MaryEllen are partnering to make Gio's transition as smooth as possible. Emily is working closely with Gio and his school system to explore his vocational options. MaryEllen continues to coordinate various services for Gio. Her first effort was to match his needs to the services provided by the Boston Cen-

ter for Independent Living. MaryEllen also assisted Gio with identifying a skills trainer who will listen to his needs and concerns, help maintain his PCA program, locate housing, and continually explore new interests with him.



Gio, Emily Aframe and MaryEllen MacRae

Gio will continue to work with MaryEllen on services provided through the MRC Supported Living Program, and they will begin to seek a Community Case Manager to assist him with the various responsibilities that come with living independently in the community, such as Personal Care Assistance and financial management.

This collaboration is one of many to be expected with our new Transition Specialists on board. They are doing tremendous work in supporting and empowering youth with disabilities.

***The Transitions Works Team:***

Lorraine Barra, Grant Director

Roger Thomas, Grant Coordinator

Sandra Jones, Administrative Assistant

Emily Aframe, Transition Specialist, Brookline

(Brighton High School & West Roxbury Education Complex)

Amy Duarte, Transition Specialist, Worcester

(Doherty Memorial High School & North High School)

Kristen Blackmer, Transition Specialist, Springfield

(High School of Commerce & High School of Science and Technology)

## OVERCOMING ADVERSITY: A RETURN TO INDEPENDENCE WITH ASSISTANCE FROM MRC'S COMMUNITY LIVING DIVISION

In 1992, Julia Forest was living independently in her own apartment in Boston pursuing a vocational goal in the computer field. She was a consumer of MRC's Vocational Rehabilitation (VR) program and the Boston Center for Independent Living (BCIL). Julia, who has cerebral palsy, which affects her speech and necessitates the use of a walker and more often a wheelchair, was managing well.

Life then threw Julia a curve ball. She accidentally burned herself while home alone. Her injuries were severe, and she needed several months of hospitalization.



Clockwise: Cindy Wentz (MRC), Linda Lawrie-Pfeil (MRC), Ingrid Worrell (UCP), and Julia Forest.

Julia was originally referred to the MRC Supported Living Program by her hospital discharge team. At that time she did not wish to return to her own apartment to live alone. Group living opportunities were scarce and in 1993, she ended up in a Department of Mental Health (DMH) group home. While the group home may have been a good option for Julia at the time, she ultimately did not feel it was a good 'fit' for her. By 2000, Julia felt she was ready to live more independently and was able to move to a shared living situation operated by United Cerebral Palsy (UCP) of Metro Boston. The MRC Supported Living Program, through a contract with UCP, provided Personal Care Assistant (PCA) surrogacy and other case coordination services. The DMH funded additional staff support, while an assessment for the MassHealth PCA program was completed by BCIL. Julia soon moved into a four-bedroom home with other individuals who had mobility impairments.

Both UCP staff and PCAs whom the residents hired were there to meet Julia's needs. By the end of 2001, Julia was ready to move to an apartment in a small complex next door that she would share with one roommate. MassHealth PCA's and UCP

supported living staff funded by the MRC continued, but the DMH's participation was no longer needed, as Julia's support needs had decreased. For most of 2003, Julia was without a roommate, but she still wanted the shared living experience and welcomed a roommate in 2004. This arrangement remains in place and is working well. Both women use PCAs as well as UCP's case management services to assist with PCA management and dealing with the myriad other challenges and responsibilities of living independently with a disability. While Julia is quite capable

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and independent in managing many aspects of her life, these services make it possible for her to maintain stability and still have some energy available for other pursuits.

Julia continued her education with the help of her then MRC Vocational Rehabilitation Counselor Linda Lawrie-Pfeil. Julia now attends the University of Massachusetts at Boston, where she is only a few courses away from a Bachelor's degree. She already holds an Associate's Degree in Computer Programming. UCP has helped Julia become engaged with her community through volunteer positions, and classes, and she takes advantage of her community for shopping, banking, general life needs and recreation.

Julia has come a long way since 1992. A team effort of several agencies and organizations working together, with Julia as 'captain,' has facilitated her success, and we all look forward to a successful future for Julia.

## HARD WORK PAYS WITH ASSISTANCE FROM MRC'S VOCATIONAL REHABILITATION DIVISION

Douglas Bates came to the MRC Pittsfield office in search of assistance with vocational counseling and guidance services. He had a work history included time working as a roughneck in the oil fields of Oklahoma and on the crew of a local highway department. Needless to say, Doug has a work history of heavy physical labor and long work shifts, at times up to 12 hours per shift. Doug was the “outdoors” type, and enjoyed leisure activities such as fishing and hunting.

Unfortunately, after one of Doug's frequent hunting trips to Maine, he became seriously ill. Doug's team of physicians determined that he had contracted viral encephalitis. It left him with right-sided hemi paresis, and, as if that wasn't enough, he was also diagnosed with sarcoidosis, which severely compromised his ability to breathe.

Not wishing to sit around idly, Doug applied to the MRC for assistance with finding “something to do.” He wanted some type of activity to help him feel and be productive again. In consultation with his pulmonologist, who completed a physical capacities evaluation, it was determined Doug could work up to 3 hours a day on sedentary tasks. Using that as our starting point, we began exploring possibilities. Doug explored working at home, going so far as to attempt a trial period assembling angel pins as a home subcontract possibility. He gave it his best effort but found he did not have the fine motor control needed for the job. As an avid fisherman, he was also inter-



Doug Bates MRC Consumer at his modified workstation.

ested in investigating fly tying for all his trout-fishing buddies, but this was also ruled out due to the fine motor skills and coordination required. Doug still had a valid driver's license, so the MRC sent him for an adaptive driving evaluation at Berkshire Medical Center's Rehabilitation Department and driver training with Dave's Driving School in Pittsfield. After several sessions of adaptive driver training with Dave Coco, Doug decided to purchase adaptive equipment for his vehicle which allows him to use his left foot for braking and acceleration. Now, Doug uses his own vehicle to drive himself to and from work. Doug's vocational potential was assessed with one of the MRC's local community rehabilitation providers. The results indicated that, while he had some competitive work capacity, they could not place him in any of their current work opportunities.

That is when Cindy Bucier, MRC Pittsfield's job development and placement specialist, entered the case. Cindy met with Doug, and in her usual enthusiastic style, convinced him he would be a perfect candidate for an assembly/packaging position available at Brazabra in Lee, MA. Brazabra is an employer (our 2006 Exemplary Employer nominee) that manufactures, packages and distributes men's and women's undergarment accessories to retail outlets. Cindy has a long-standing working relationship with Brazabra, and they are always willing to accommodate MRC consumers in any way they can. Since 2000, Brazabra has hired five MRC consumers in various capacities. Doug toured the facility, met the production supervisor and some of his future co-workers, and was offered part-time employment as a product assembler. In response to Doug's need for a workstation he could access by wheelchair, Brazabra lowered the work table he would use. Cindy, knowing that United Cerebral Palsy (UCP) in Pittsfield provides adaptive equipment on loan, obtained a wheelchair that Doug could leave at work, rather than transport it back and forth. Brazabra provided further accommodation by bringing work materials to Doug, instead of requiring him to replenish his own supplies.

Since he started at Brazabra on September 30, 2008, Doug has now successfully completed his seventh month of employment. Initially starting off at nine hours per week, Doug's hours soon increased to 12 hours a week, with his attending physician giving approval. This employer has offered Doug up to 30 hours per week, should his work capacity increase. By all accounts, he is doing well on the job, and his prospects for continued employment are excellent. The MRC was not only able to match a worker to a local business need but also helped to facilitate Doug's growth and independence. His part-time job has had a ripple effect in his life, restoring important social opportunities and friendships, assisting him to regain independence in transportation and restoring his sense of contribution to life. In this case, Doug's desire to be productive again and the collaboration of MRC staff (Vocational Rehabilitation Counselor and Job Placement Specialist) with multiple local resources led to a highly successful employment outcome.



Cindy Bucier will soon be wrapping up her work with Doug but states that "having the privilege to know him and work with him has truly been a pleasure for me."

## WOUNDED WARRIORS: CONNECTING VETERANS TO THE MRC'S DISABILITY DETERMINATION SERVICES



Since August 2007, the Social Security Administration (SSA) has emphasized the need to follow special procedures in processing Military Casualty Cases (MCC). The SSA has designated MCCs as priority claims that are to be expedited in all areas from the initial interview with the SSA field offices to final determination at each individual state's Disability Determination Services (DDS) agency.

The MRC operates the DDS in the Commonwealth with locations in Boston and Worcester. The DDS is responsible for providing medical/vocational decisions for those making application for Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI) benefits.

The SSA's Deputy Commissioner of Operations, Linda McMahon, and the SSA's Associate Commissioner, Ruby Burell, pointed out that these cases provide "the opportunity to make a positive difference for our 'wounded warriors' when they need it." The need to expedite these cases was emphasized by using either the phone or fax instead of the mail to gather information, assigning a priority status to claims given to medical and psychiatric consultants, and giving these cases to specially trained MCC Examiners with the MRC's DDS division. The procedures to expedite disability claims apply to any military service personnel injured October 1, 2001 or later regardless of how or where the disability occurred, whether in the United States or on foreign soil, provided the individual was on active duty when injured.

The Massachusetts DDS moves immediately to collect medical evidence from the listed medical sources, as well as from the consumer. As soon as possible, the completed claims are submitted for review to one of our medical consultants utilizing a priority code that allows for faster processing.

Below is a real story of one of the many veterans we serve; to honor his privacy we will refer to him as Shawn M.

Shawn M. is a 28 year old man serving with the Massachusetts National Guard. He sustained multiple fractures and trauma to his left arm due to a military incident in Kosovo in 2007. Shawn stated his arm was completely detached, but he was able to have the limb reconnected. He had multiple operations and treatments at military hospitals and at the Beth Israel Hospital in Boston for non-union fractures in his arm and nerve damage.

Upon his arrival in Boston for care, he applied for SSA disability benefits. Shawn expressed to his MRC MCC Examiner Richard Bailey that he is a soldier and does not look for handouts; he explained that he only applied for disability to see if he may be entitled to anything. Shawn's will is so strong that, in spite of his physical limitations, he volunteers as a youth boxing coach.

Beth Israel Hospital has the technology to send their records to the DDS electronically, and the MCC Examiner received Shawn's medical review within days. Due to the speed of receiving the records from Beth Israel and the support of the SSA to expedite military cases, Shawn was approved to receive SSA financial benefits very quickly.

Despite suffering injuries serious enough to receive disability benefits, Shawn told his Examiner his main objective was "to return to his job as an infantryman." He is also planning to receive vocational and employment services through his local Veterans Affairs office.

Shawn received notification from the MRC DDS regarding his claim in an expeditious manner because of the joint initiatives of the SSA and the DDS to take care of our veterans with disabilities.

**The specialty trained MCC Examiners at the Massachusetts DDS are:**

**WORCESTER DDS**



Clockwise: William Adams, Kristine Robbins, Timothy Hebert, and Felix Reynoso.

**BOSTON DDS**



Clockwise: Tom Crossman, Rich Bailey, Joe Connors, and Marion Cooper. Not pictured - Bernie Conry.

*The MRC would like to thank all the men and women who are serving or have served in the United States Armed Services.*

## CONSUMER LIAISON SERVICES

The MRC has a staff member working within the Commissioner's Office as an Ombudsperson who serves as a consumer liaison, primarily to address concerns regarding delivery of services and to answer a variety of disability-related questions. People who typically contact the Ombudsperson include consumers, family members, advocates, legislators and their aides, other state government personnel and MRC staff members.

The Ombudsperson provides information and referral services and assists callers to better understand the services offered by the MRC. If a complaint is brought forward, the Ombudsperson promptly reviews the matter and works with consumers and MRC staff to find a solution. If this type of intervention does not bring about resolution, there is a formal appeal process. Mediation services are also available to MRC-VR consumers.

The Ombudsperson assists consumers across all service programs and may be contacted by telephone at (617) 204-3603 or (800) 245-6543 (voice and TTY), through the agency website at [www.mass.gov/mrc](http://www.mass.gov/mrc) or by writing to the MRC Administrative Office in Boston.

## STATE REHABILITATION COUNCIL FY'08

The mission of the MRC State Rehabilitation Council (SRC) is to advise the MRC about the delivery of effective rehabilitation services to promote employment and independence of people with disabilities (except those with blindness) in Massachusetts. Council members are appointed by and serve at the pleasure of the Governor. The membership reflects a diverse representation of people with disabilities and disability advocacy groups, current and former consumers of vocational rehabilitation and independent living services, people in business and industry, the medical profession, education and community rehabilitation programs. Members of the MRC State Rehabilitation Council are volunteers who donate their time to fulfill the mission of the SRC.

### SRC Council

#### *Executive Committee*

Youcef “Joe” Bellil  
*Chairperson*

Serena Powell  
*Vice Chairperson*

Warren Magee  
*Secretary*

Patricia Sheely  
*Member at Large*

Stephen Reynolds  
*Member at Large*

***Statutory Members:*** Yocef “Joe” Bellil, Jay O’Conner, Francis Barresi, Warren Magee, Lusa Lo, Mary Margaret Moore, Toby Fisher, Patricia Sheely, Owen Doonan, Serena Powell, Stephen Reynolds, Terry McLaughlin, Barbara Lybarger, Charles Vernon, Mark Bornemann, MRC Commissioner Charles Carr.

## Community Living: Facts at a Glance

### Consumers Served

Independent Living Centers:	10,101
Turning 22 Services:	349
Assistive Technology:	227
Housing Registry:	191
Supported Living Services:	123
Brain Injury Services:	1,659
Home Care Services:	1,937
Protective Services:	337

### Services Purchased

Independent Living Centers:	\$4,469,905
Turning 22 Services:	\$1,316,527
Assistive Technology:	\$1,063,357
Housing Registry:	\$88,888
Supported Living Services:	\$1,403,267
Brain Injury Services:	\$19,649,000
Home Care Services:	\$5,770,000
Protective Services:	\$675,568



### Competitive Employment in Massachusetts

MRC successfully placed 3,559 people with disabilities into employment based on their choices, interests, needs and skills in FY08.

These rehabilitated employees earned \$65.5 million in their first year of employment.

Estimated public benefits savings from people assisted by the MRC in MA were \$26.9 million.

The returns to society based on increases in lifetime earnings range from \$14 to \$18 for each \$1 invested in the MRC Vocational Rehabilitation program.

\$5 is returned to the government in the form of increased taxes and reduced public assistance payments for every \$1 invested in the MRC Vocational Rehabilitation program.

Average Hourly Wage: \$12.24

Average Weekly Hours Worked: 28.4

## VOCATIONAL REHABILITATION: FACTS AT A GLANCE

### Consumers Served

Consumers actively receiving services:	15,188
Consumers enrolled in training/education programs:	10,876
Consumers with significant disabilities employed:	3,559
Consumers employed with medical insurance:	93.8%
Consumers satisfied with services:	84%

### Who Are Our VR Consumers?

Psychiatric Disabilities:	36.3%	Average Age:	39
Learning Disabilities:	15.2%	Female:	46.2 %
Substance Abuse:	12.7%	Male:	53.8 %
Other Disabilities:	11.2%	White:	80.6%
Orthopedic Disabilities:	9.6%	Black:	17.2 %
Deaf and Hard of Hearing:	4.9%	Hispanic:	9.4 %
Mental Retardation:	4.0%	Asian/Hawaiian:	2.4 %
Neurological Disabilities:	3.9%	Native American:	0.8 %
Traumatic Brain Injury:	2.2%		

# MRC FINANCES: DISABILITY DETERMINATION SERVICES OCTOBER 1, 2007 – SEPTEMBER 30, 2008

## SSI/DI Claims Processed

Total MA Population:	6.5 M
Total Receipt of Cases:	67,516
Total Disposition of Cases:	63,499
Initial Claims Filed:	51,718
% Allowed:	45.7%
CDR Receipts:	5,273
CDR Dispositions:	5388

## Purchased Services

Consultative Examinations Purchased:	18,830
Consultative Examination Rate:	29.4%
Medical Evidence of Record Purchased:	53,215
Medical Evidence of Record Rate:	83.0%

Total Medical Costs:	\$6,968,569
Total Budget:	\$40,453,622
Cost Per Case:	\$630.75

## Disability Determination Services: Facts at a Glance

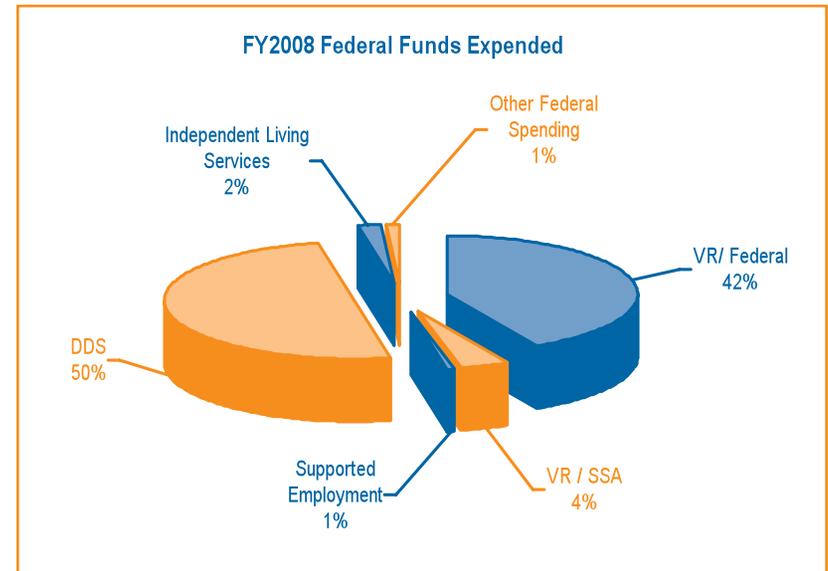
Total Disposition of SSI/DI Cases:	63,499
Accuracy of Decisions:	94.4%
Federal Accuracy of Decision Standard:	90%



# MRC FINANCES: IN SUM FOR STATE FY JULY 1, 2007 – JUNE 30, 2008 & FEDERAL FY OCTOBER 1, 2007 – SEPTEMBER 30, 2008

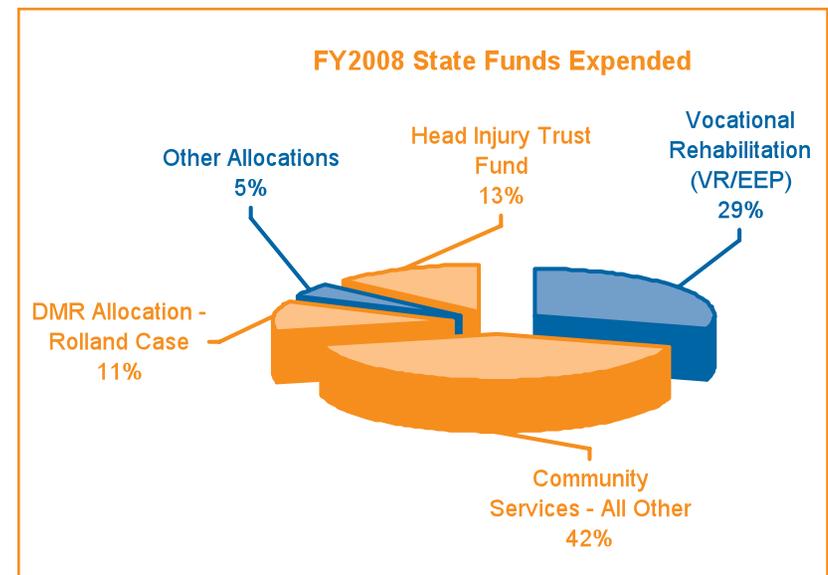
## Federal Funds Expended FY2008

Vocational Rehabilitation / Federal	\$33,004,270
Vocational Rehabilitation / SSA	3,257,419
Supported Employment	451,238
Disability Determination Services	39,120,691
Independent Living Services	1,637,773
Other Federal Spending	818,034
<b>Total</b>	<b>\$78,289,425</b>



## State Funds Expended FY2008

Vocational Rehabilitation (VR/EEP)	\$19,471,214
Community Services - All Other	27,963,300
DMR Allocation - Rolland Case	6,982,543
Other Allocations	3,003,030
Head Injury Trust Fund	8,947,009
<b>Total</b>	<b>\$66,367,096</b>



## IN MEMORIAM

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The Massachusetts Rehabilitation Commission would like to dedicate this Annual Report to the memory of Karen M. Fowles, a selfless woman who dedicated her energy to helping others any way she could. Karen worked for the MRC for over 35 years keeping things running smoothly behind the scenes, working her way up from Clerk to Facilities Manager. Her many years of service wearing different hats gave her insight into the workings of the agency, and state government in general, that few people will ever know. She had the answer to any question and was always available to lead her coworkers in the right direction. She was a tireless supporter of many Veterans' causes, and worked diligently volunteering her time and raising money for their programs. She was a hard worker, a great person, and friend to all.

She will be missed very much.

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## **THE MASSACHUSETTS REHABILITATION COMMISSION**

Administrative Offices

27 Wormwood Street, Suite 600

Boston, MA 02210-1616

617-204-3600 (voice) \* 617-204-3868 (TDD)

\* 800-245-6543 (toll free) \* 617-727-1354 (fax)

[www.mass.gov/mrc](http://www.mass.gov/mrc)