



National Assistive Technology Act Data System
State Plan - Full Report
Missouri 2021

General Information

Statewide AT Program (Information to be listed in national State AT Program Directory)

State AT Program Title	Missouri Assistive Technology
State AT Program URL	www.at.mo.gov
Mailing Address	1501 N.W. Jefferson
City	Blue Springs
State	Missouri
Zip Code	64015
Program Email	info@mo-at.org
Phone	816-655-6700
TTY	816-655-6710

Lead Agency

Agency Name	Missouri Assistive Technology
Mailing Address	1501 N.W. Jefferson
City	Blue Springs
State	Missouri
Zip Code	64015
Program URL	www.at.mo.gov

Implementing Entity

Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf? N/A	
Name of Implementing Agency	
Mailing Address	

City	
State	
Zip Code	
Program URL	

General Information (Continued...)

Program Director and Other Contacts

Program Director for State AT Program (last, first)	Baker, David
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Program Director at Lead Agency (last, first)	Baker, David
Title	Director
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Primary Contact at Implementing Agency (last, first) - If applicable	
Title	
Phone	
E-mail	

Person Responsible for completing this form if other than Program Director

Name (last, first)	
Title	
Phone	
E-mail	

Certifying Representative

Name (last, first)	Baker, David
Title	Director
Phone	816-655-6707
E-mail	dbaker@mo-at.org

Module A: Change in Lead Agency or Implementing Entity

- Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf (From General Information)?** No
- 2. Is the Lead Agency named in this State Plan a new or different Lead Agency from the one designated by the Governor in your previous State Plan?** No
- 3. Is the Implementing Entity named in this State Plan a new or different Implementing Entity from the one designated by the Governor in the previous State Plan?** No

Module B: Advisory Council

1. How many representatives of the designated State agency for Vocational Rehabilitation are members of the advisory council? 1
2. How many representatives of the designated State agency for Vocational Rehabilitation for individuals who are blind are members of the advisory council (when there is such a separate VR agency for individuals who are blind)? 1
3. How many representatives of a state Center for Independent Living are members of the advisory council?. 1
4. How many representatives of the State workforce development board established under the Workforce Innovation and Opportunity Act are members of the advisory council? 0
- 4.1 Please provide the reason(s) the Advisory Council does not have this required agency representative member and describe the actions that will be taken to become in compliance for Question 4.
 MoAT has traditionally had representation from our Workforce development board, as an ad hoc member. This position is currently open. Efforts to identify a new member are underway.
5. How many representatives of the State educational agency are members of the advisory council? 1
6. How many additional representatives of other agencies and/or organizations are members of the advisory council? 7
- 6.1 Description of additional representatives of other agencies and/or organizations are members of the advisory council.
 State Medicaid Agency Developmental Disabilities Council State Mental Health Agency State Insurance Agency State Health and Senior Services Agency State Senator State Representative
7. How many individuals with disabilities who use assistive technology or their family members or guardians are members of the advisory council? 12

Advisory Council Calculation

Description	Number
Individuals with disabilities that use AT or their family members or guardians on the advisory council	12
Total number of individuals on the advisory council	23
Percentage	52.17%

8. In accordance with section 4(c)(2) of the AT Act of 1998, as amended our state has a consumer-majority advisory council that provides consumer-responsive, consumer-driven advice to the state for planning of, implementation of, and evaluation of the activities carried out through the grant, including setting measurable goals. This advisory council is geographically representative of the State and reflects the diversity of the State with respect to race, ethnicity, and types of disabilities across the age span, and users of types of services that an individual with a disability may receive. Yes

Module C: Actual Expenditures and Budgeted Allocations

1. Actual Expenditures Carryover Year Close-out

In the following table provide the actual expenditure data for the closed-out carryover fiscal year AT grant award (liquidated the previous December 31). Please note, this data is for a specific year AT Act grant award amount, NOT any specific 12 month period of time as funds from a grant award can be obligated over more than that initial 12 month period.

For the State Plan submitted in the spring of 2022, you will report the closed-out grant award for FY19. The grant began 10/1/2018 with the first year ending on 9/30/2019, the first carryover year ended on 9/30/2020 and the second carryover year ended on 9/30/2021 with the 3 month liquidation period ending 12/31/2021.

Actual Expenditures for Closed-out Carryover Year Award	Final Expenditures	Percentage	Requirements
a. All State Level Activities	\$468,160.00	79.92%	The AT Act required state level expenditures to be at least 60% of grant award. If flexibility is claimed, at least 70% is required.
b. All State Leadership Activities	\$117,643.00	20.08%	
c. Total Expenditures	\$585,803.00		
d. Total Award	\$585,803.00		
e. Lapsed Amount	\$0.00	0.00%	
f. Transition Training & Technical Assistance Set Aside	\$7,907.00	6.72%	The AT Act requires at least 5% of state leadership expenditures to be spent on transition activities.

Module C: Actual Expenditures and Budgeted Allocations (Continued...)

2. Actual YTD Expenditures and Budgeted Allocations for Preceding Year Award

In the following table provide year-to-date (YTD) obligated and liquidated expenditure data for the preceding fiscal year AT grant award along with planned budget allocations for the unobligated remainder of that award. Please note, this data is for a specific year AT Act grant award amount, NOT any specific 12 month period of time as funds from a grant award can be obligated over a 24 month period.

For the State Plan submitted in the spring of 2022, you will report the closed-out grant award for FY20. The grant began 10/1/2019 with the first year ending on 9/30/2020, the first carryover year ended on 9/30/2021 and the second carryover year ended on 9/30/2022 with the 3 month liquidation period ending 12/31/2022.

The total grant award for was **\$603,736.00**

Actual & Planned Immediate Preceding Year Award Expenditures	YTD Obligated not Liquidated Expenditures	YTD Liquidated Expenditures	Planned not yet Obligated Expenditures	Total
All State Level Activities	\$0.00	\$444,091.00	\$0.00	\$444,091.00
All State Leadership Activities	\$0.00	\$159,645.00	\$0.00	\$159,645.00
Total	\$0.00	\$603,736.00	\$0.00	\$603,736.00
Transition Training & Technical Assistance	\$0.00	\$0.00	\$0.00	\$0.00

Module D: State Level Activity Summary

1. Which State Financing Activities do you conduct?

- Financial Loan
- Other State Financing that directly provides AT (telecommunications programs, etc.)

2. Which Reutilization Activities do you conduct?

- Device Exchange
- Device Reassignment or Open Ended Loan

3. Do you conduct Short-term Device Loans?

Yes

4. Do you conduct Device Demonstrations?

Yes

Module E: Financial Loan

1. Select the one option that best describes who conducts this activity.

The Statewide AT Program (State AT)

2. Select the one option that best describes from where this activity is conducted.

One central location (Central)

3. Do you charge a fee for this activity? (This fee is separate from and addition to the financial loan made.)

No

4. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module E: Financial Loan (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

5. This activity offers the following types of assistance. (select all that apply – at least one is required)
Identify all types of loans the Statewide AT Program offers, regardless of whether any loans of that type are currently outstanding.

- Revolving loans

6. The lowest interest percentage for loans as established by the policies of the activity. 2.0000%

7. The highest interest percentage for loans as established by the policies of the activity. 4.0000%

8. The lowest loan amount (in dollars) provided as established by the policies of the activity. \$100.00

9. The highest loan amount (in dollars) provided as established by the policies of the activity. \$50000.00

10. Describe the activity.

Missouri Assistive Technology operates four types of revolving loan options all under the umbrella of Show Me Loans. These include General AT Loan for financing most types of AT devices and services. Loans for this option range between \$500 to \$15,000 and can be used for such needs as hearing aids, adaptations to a home the family or individual own, adaptations to a vehicle the family or individual own, seating and positioning devices, communication devices, adaptive recreational devices, or other items. The second option are the Microloans for AT or durable medical equipment under \$500. MoAT also offers Accessible Vehicle Loans for financing up to \$50,000 for an accessible or converted driver or passenger access vehicle and a Workability loan that provides financing for employment-based and related equipment and devices. Workability loans range from \$500 to \$15,000.

11. The online page for this specific activity can be found at: <https://at.mo.gov/show-me-loans/>

Module F: Other State Financing Activities that Directly Provides AT

1. Which of the following activity/activities are conducted? (select all that apply)

Identify all types of other state financing programs that directly provide AT that are conducted.

- Telecommunications Equipment Distribution Program (EDP)-State
- Deaf/Blind Telecommunications EDP-Federal
- Last Resort Fund
- Other (Describe)

Provide a description of the other activity/activities conducted.

Assistive Technology Reimbursement Program for K-12 Public Schools & Money Follows the Program AT Assistance Program

2. Select the one option that best describes who conducts this activity/activities.

The Statewide AT Program (State AT)

3. Select the one option that best describes from where this activity/activities is conducted.

One central location (Central)

4. Do you charge a fee for this activity/activities? (select one)

No

5. Identify the types of collaborations you have in place to conduct this activity/activities.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module F: Other State Financing Activities that Directly Provides AT (Continued...)

Local/Community Entities (select any/all)
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Private Entities (select any/all)
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Other (select any/all)

6. Describe the activity/activities.

Missouri's Telecommunications Access Program (TAP) provides adaptive equipment that assists qualified individuals who have problems making phone calls, sending texts and/or emails or experience difficulty accessing the internet. There are three elements of the program: TAP for Telephone (TAP-T) provides access to basic voice telephone calling (both sending and receiving); TAP for Internet Program (TAP-I) provides adaptive computer devices to individuals who cannot use a traditional computer; TAP Wireless (TAP-W) provides accessible wireless devices. DeafBlind (iCanConnect) is available to individuals with combined hearing and vision. The program covers a variety of assistive devices to enhance an individual's ability to engage in distance communications. The Kids Assistive Technology Program (KAT) provides limited funding for assistive technology, vehicle access modifications, and some types of home access modifications. The program is available for children under 21 when no other funding source is available. The Assistive Technology Reimbursement Program (ATR) is available to public schools, charter schools and state schools for the severely disabled and helps them to offset the cost of purchasing assistive technology for students who have AT in listed in their IEP. The AT Assistance Program enhances Missouri's Money Follows the Person Program by providing up access to funds for assistive technology, home modifications and vehicle modifications to individuals transitioning to the community from a nursing home.

7. The online page for this specific activity can be found at:

Telecommunications Access Program:
<https://at.mo.gov/telecom-access-program/>
Deaf/Blind Equipment Distribution Program:
<https://at.mo.gov/deaf-blind-equipment-distribution/> KAT: <https://at.mo.gov/kids-assistive-technology/> ATR: <https://at.mo.gov/at-reimbursement-for-schools/> MFP AT Assistance: N/A

Module H: Device Exchange

1. Select the one option that best describes who conducts this activity.

The Statewide AT Program (State AT)

2. Select the one option that best describes from where this activity is conducted.

One central location (Central)

3. Do you charge a fee for this activity?

No

4. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module H: Device Exchange (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

5. Select the option that best describes what happens when a device is exchanged. (select all that apply)

- The transaction is direct consumer-to-consumer

6. Describe the activity.

MoAT matches individuals wishing to purchase AT and DME up with those that have items to donate or sell through our Swap 'n Shop Program. The exchange program has recently been revamped to generate interest and to improve its ease of use.

7. The online page for this specific activity can be found at: <https://at.mo.gov/recycle-reuse/#SwapnShop>

Module I: Device Refurbish and Reassignment and/or Open-ended Loan

1. Select the one option that best describes who conducts this activity.

Other entities e.g. contractors (Others)

2. Select the one option that best describes from where this activity is conducted.

Regional sites (Regional)

3. Do you charge a fee for this activity?

No

4. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

- Have written agreement with this entity
- Provide financial support to this entity

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

- Have written agreement with this entity
- Provide financial support to this entity

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module I: Device Refurbish and Reassignment and/or Open-ended Loan (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

5. Select the option(s) that describe how a reutilized device is provided to a recipient. (select all that apply)

- Device ownership is transferred to the recipient
- Device is loaned for as long as the recipient needs it with no ownership transfer

6. Describe the activity.

Through partnerships with 10 organizations across the state, Missouri Assistive Technology provides device reutilization services. These sites collect, refurbish, sanitize and put back out to the community at little to no cost an array of durable medical equipment (i.e. walkers, wheelchairs, bath benches, etc.), as well as other forms of assistive technology (electronic enlarging, AAC, computers, etc.).

7. The online page for this specific activity can be found at: <https://at.mo.gov/recycle-reuse/index.html#MORecyclingLocations>

Module J: Device Loan

1. Select the one option that best describes who conducts this activity.

The Statewide AT Program (State AT)

2. Select the one option that best describes from where this activity is conducted.

One central location (Central)

3. Do you charge a fee for this activity?

No

4. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module J: Device Loan (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

5. Select the option that describes how the majority of devices loaned are delivered to and returned from a borrower. (select one)

The majority of devices are shipped via mail or other delivery service

6. Describe the activity.

An extensive loan library is available to school districts, state agencies, disability organizations, and increasingly direct to consumers. The loan program, called ETC, provides borrowers with free access to over 1,000 devices divided among 9 assistive technology categories. Loans are for 5-weeks at a time with no limit to the number of devices individuals can borrow.

7. The online page for this specific activity can be found at: <https://at.mo.gov/device-loan/>

Module K: Device Demonstration

1. Select the **one option** that best describes who conducts this activity.

Other entities e.g. contractors (Others)

2. Select the **one option** that best describes from where this activity is conducted.

Regional sites (Regional)

3. Do you charge a fee for this activity?

No

4. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

- Have written agreement with this entity
- Provide financial support to this entity

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

- Have written agreement with this entity
- Provide financial support to this entity

Module K: Device Demonstration (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

5. Describe the activity.

Hands on exploration of assistive devices to help individuals make an informed decision is available across Missouri via MoAT's 14 demonstration locations. Predominately located in Centers for Independent Living, the demonstration centers emphasize computer adaptations, aids to daily living, environmental adaptations, vision and hearing equipment. The demonstrations centers also help connect individuals to additional AT resources, such as other MoAT programs, funding opportunities, and provide appropriate referrals to vendors, etc. MoAT staff meet monthly with demonstration center staff to provide updates on assistive technology, to help troubleshoot issues and to improve the quality of information being disseminated.

6. The online page for this specific activity can be found at: <https://at.mo.gov/device-loan/>

Module L: Training

1. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module L: Training (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

2. Provide a short description of at least one and no more than three planned training activities. One of the activities described must be planned Information and Communication Technology (ICT) accessibility training that will provide the required ICT Training performance measures. If the Statewide AT Program is meeting the transition requirements of the AT Act through training, please describe that planned activity. If the Statewide AT Program sponsors or co-sponsors a statewide conference please include that event as one you describe.

Planned ICT Accessibility Training (required)

Missouri Assistive Technology will continue to develop and deliver a topic-specific series of ICT focused trainings targeted primarily at web designers and those responsible for web content within state government, school district and disability focused agencies. Topics planned for the training included accessible web content design (i.e. PDF, Word, PPT accessibility), accessible conference preparation, accessible educational materials, and introduction to accessibility checkers. Training topics are also solicited from attendees based on their specific needs.

Planned Transition Training or Other Training Activity (optional)

MoAT has collaborated with the state's UCEDD to host the Missouri Open Door (MOD) AT Series. Each session focuses on one barrier commonly experienced by people with disabilities in the state and reviews possible technology options. The series is part of No Wrong Door efforts currently underway in the state, as well as designed to enhance the state's Technology First initiative.

Planned Statewide Conference or Other Training Activity (optional)

Each year, MoAT hosts the Power Up Assistive Technology Conference. The conference seeks to provide attendees with approximately 40 sessions covering several assistive technology themes which are selected based on their need and/or timeliness. A vendor expo is held in conjunction with the conference. The conference is well-regarded for its selection of sessions, quality of presenters, array of exhibitors and the network opportunities available.

3. The online page for this specific activity can be found at: ICT Training: N/A MOD Training: N/A Power Up: <https://at.mo.gov/power-up-conference/>

Module M: Technical Assistance

1. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module M: Technical Assistance (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

2. Provide a short description of at least one and no more than two planned technical assistance activities. If the Statewide AT Program is meeting the transition requirements of the AT Act through technical assistance, please describe that planned activity.

Planned Transition Technical Assistance or Other Technical Assistance Activity (required)

Technical assistance is planned on the subject of incorporating technology into employment services. The technical assistance will be provided to Missouri's Division of Developmental Disabilities and to employment providers statewide. In addition, representatives from Massachusetts have joined the project. Besides developing strategies for greater inclusion of technology as a tool to enhance independence on the job for people with I/DD, the assistance initiative will develop materials on the subject for broad dissemination.

Planned Other Technical Assistance Activity (optional)

Technical assistance on Accessible Educational Materials (AEM) is planned through the development of a monthly webinar series that will address the foundational aspects of identifying who should receive AEM, sources of AEM, implementation of AEM and the related delivery of AEM through assistive technology. It is also planned that the webinar series will provide the springboard to develop regional communities of practice among school districts on a regional basis.

Module N: Public Awareness

1. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

Module N: Public Awareness (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

2. Provide a short description of at least one and no more than two planned major public awareness activities. If the Statewide AT Program conducts a major ongoing public awareness activity such as an annual AT awareness day with a Governor's Proclamation, please include that activity.

Major Annual Planned or Other Public Awareness Activity (required)

In conjunction with Missouri's Developmental Disabilities Council, an activity to help bridge the digital divide for people with disabilities will soon be launched. Intended outcomes of this effort include greater awareness of various assistance programs (i.e. Affordable Broadband Program), connectivity with programs that can provide assistive technology to improve or enable digital access, and connection between individuals and organizations that provide digital skills (i.e. how to access the internet, basic email skills, etc.)

Planned Other Public Awareness Activity (optional)

Module O: Information and Assistance

1. Identify the types of collaborations you have in place to conduct this activity.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

Module O: Information and Assistance (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

2. Describe the activity

Coordinating in-house information and assistance requests with better development of informational materials is planned. For example, developing better and more "Getting Started" sheets to accompany device loans so as to reduce calls for technical assistance and/or to provide materials borrowers can share in-house.

Assurances and Measurable Goals

Section 4(d) of the AT Act prescribes the duties of the Lead Agency receiving a grant under section 4 of the AT Act and requires the State to provide a number of assurances in its application for funds. 34 CFR part 76 also requires that any State Plan include certain assurances. The Statewide AT Program certifying representative will attest to these assurances and other requirements below and by submitting the State Plan, will affirm that to the best of his or her knowledge and belief all information provided in the State Plan is true and correct and the State Plan fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of the information.

Assurances

As the Certifying Representative of the Lead Agency for the State of , I hereby assure the following:

1. The Lead Agency prepared and submitted this State Plan on behalf of the State of Missouri .
2. The Lead Agency submitting this plan is the State agency that is eligible to submit this plan and if an Implementing Entity is identified it is designated to implement the required AT Act activities.
3. The State agency has authority under State law to perform the functions of the State under this program.
4. The State legally may carry out each provision of this plan.
5. All provisions of this plan are consistent with State law.
6. A State officer, specified by title in this certification, has authority under State law to receive, hold, and disburse Federal funds made available under the plan.
7. The State officer who submits this plan, specified by title in this certification, has authority to submit this plan.
8. The agency that submits this plan has adopted or otherwise formally approved this plan.
9. The plan is the basis for State operation and administration of the program.
10. The Lead Agency will maintain and evaluate the program under this State Plan.
11. The State will annually collect data related to the required activities implemented by the State under this section in order to prepare the progress reports required under subsection 4(f) of the Act.
12. The Lead Agency will submit the annual progress report on behalf of the State.
13. The State will prepare reports to the Secretary in such form and containing such information as the Secretary may require to carry out the Secretary's functions under this Act and keep such records and allow access to such records as the Secretary may require to ensure the correctness and verification of information provided to the Secretary.
14. The Lead Agency will control and administer the funds received through the grant.
15. The Lead Agency will make programmatic and resource allocation decisions necessary to implement the State Plan.
16. Funds received through the grant will be expended in accordance with Section 4 of the Act, and will be used to supplement, and not supplant, funds available from other sources for technology-related assistance, including the provision of assistive technology devices and assistive technology services.
17. The Lead Agency will ensure conformance with all applicable Federal and State accounting requirements.
18. The State will adopt such fiscal control and accounting procedures as may be necessary to ensure proper disbursement of and accounting for the funds received through the grant.
19. Funds made available through a grant to a State under this Act will not be used for direct payment for an assistive technology device for an individual with a disability.
20. A public agency or an individual with a disability holds title to any property purchased with funds received under the grant and administers that property.
21. The physical facility of the Lead Agency and Implementing Entity, if any, meets the requirements of the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.) regarding accessibility for individuals with disabilities. Section 4(d)(6)(E)
22. Activities carried out in the State that are authorized under this Act, and supported by Federal funds received under this Act, will comply with the standards established by the Architectural and Transportation Barriers Compliance Board under section 508 of the Rehabilitation Act of 1973 (20 U.S.C. 794d). Section 4(d)(6)(G)
23. The Lead Agency will coordinate the activities of the State Plan among public and private entities, including coordinating efforts related to entering into interagency agreements.
24. The Lead Agency will coordinate efforts related to the active, timely, and meaningful participation by individuals with disabilities and their family members, guardians, advocates, or authorized representatives, and other appropriate individuals, with respect to activities carried out through the grant.