Preliminary Findings and Observations

SELN Project Team Visit

June 19 -20, 2008

<u>State</u>: Maryland

<u>Participants</u>:

Maryland DDA staff
Maryland Stakeholders

<u>SELN Project Team</u>
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I.   Strategic Goals and Operating Policies.

A. <u>Key Findings</u>.
- Employment and workforce creation is one of the governor's top three priorities

- For FY2007 Maryland reports supporting 38% of individuals in integrated employment, above the national average.
  - Many state policies and goals are not in writing, leading to a lack of clarity and differences in interpretation across regions.
  - Numerous comments were received from DDA staff and stakeholders about regional and local inconsistencies in understanding and interpretation of policy and practice with respect to employment and other services. Related was a concern expressed several times that prior administrations had been unwilling to put policy or goals in writing.
  - Integrated employment has been a goal of the state for some time and is represented in the self determination initiative, the waiting list initiative and adjustments in the funding rate structure.
  - Maryland Developmental Disabilities Administration (DDA) staff feel the agency does not set an expectation for families to prefer supported employment, nor does it provide enough training to families to educate them on the benefits and opportunities of employment.

- Historically (1987) there were employment coordinators in the regions and transition funds were only available for supported employment. The Attorney General ruled that other day services had to be provided as an alternative.
- DDA has a policy that individuals receiving support cannot be employed by their provider agencies.
- Some discussion suggested the need to engage other resources and stakeholders, such as residential services, in an employment initiative to make employment more accessible. The suggestion was made that a framework is needed that gives all stakeholders a role and responsibility for success.
- A concern was expressed in the stakeholder group that there is a prevalent view that "some people can't work" that is daunting when combined with systems issues. One stakeholder expressed the goal that "we not come out of this figuring out more of the same. We want good jobs, outside of 9-1, for people who have been in the system a long time." "We have spent a lot of time creating something new and abandoning it much too early."
- DDA staff in expressed concern that the regulations and requirements regarding the delivery of employment services were convoluted and that supported employment definitions should be revised to more accurately target the services to be provided and remove reference to unpaid volunteer work.
- DDA has received positive feedback from CMS regarding new waiver program service definitions regarding employment.
- Stakeholders reported that the self-direction waiver allowed people to engage in more creative activities, including employment, than the other programs.

B. Potential Focus Areas.

- Develop an employment first policy that clarifies DDA's position regarding the need for integrated employment and expectations with respect to service delivery and individual support plan development.
- Review state policies and practices with respect to integrated employment. Revise as needed to clarify expectations, address inconsistencies and improve clarity. Communicate changes to providers, families, and stakeholders as well as other state agencies, such as DOR and Education and DDA central and regional office staff. Establish a mechanism for identifying and resolving future questions regarding the interpretation and implementation of employment related rules and regulations.
- Clarify service roles and expectations between DDA and DORS regarding payment and support of employment services (DRS pays short term employment services/DDA pays long term).

II. Leadership.

    A. <u>Key Findings</u>.

- Concern was expressed regarding the lack of focus on employment within DDA's organizational structure and the need for designated personnel at both the central and regional offices who could focus on advancing the employment agenda.
- Limited planning and policy resources are committed to employment. Employment development is 25% of the Statewide Coordinator for Transition and Employment Service's job. There are no dedicated personnel resources at the regional level, although each region does have an identified contact person for employment issues.

    B. <u>Potential Focus Areas</u>.
- Review current DDA staffing patterns and responsibilities to ensure adequate resources /staff dedicated at state and regional level to implement employment service systems change.
- Stakeholders suggested that policy needs to be developed and implemented that creates an expectation for employment for all service recipients.
- Establish an employment committee or workgroup with key providers, and stakeholders to advise DDA on: (a) steps the Administration can take to improve employment outcomes, expand services and improve training and support to employment staff, (b) strengths, needs and barriers existing in the current system that facilitate or impede the delivery of employment supports and, (c) implementing the statewide employment policy and focus.
- Develop a strategy for informing key stakeholders and others of the plan to improve employment outcomes statewide, the accomplishments that are made and the activities that are taking place.
- In collaboration with providers, stakeholders and relevant state agencies implement an agenda and plan for emphasizing employment throughout the developmental disabilities service delivery system. Focus on raising expectations that all individuals can work, sending clear messages to families, individuals, schools, resource coordination, vocational rehabilitation, providers, employers, and the community at large. (Rather than spend time educating employers and doing a massive public awareness campaign, change culture from within the system.)

III. Financing and Contracting Methods.

A. Key Findings.

- When rates changed it was easy to call the same service by different names. Respondents felt it is hard to tell who is working and who not based on service descriptions.
- Out of a $750 million budget only $1.7 million is allocated to program management.
- Maryland uses an advance payment system for providers (4, 3, 3, 2) once a person's plan is established.
- Funding is portable, and consumers do move between providers.
- Maryland briefly (for one fiscal year) implemented a cash incentive payment to providers for new job placements. Only 30 incentive payments were claimed statewide, and the initiative was not in place long enough for providers to figure out.
- Theoretically additional funds can be allocated to an individual based on individual support needs through an exception process.
- There is a perception that it is difficult to bill out the full allocation for supported employment compared to other service models. Respondents reported that attendance is easier to manage in traditional and non-work services, and providers push people back to group models to make income more consistent. DDA staff reported that billing per person for supported employment is about $1800 less per year than day services despite the day rate being the same for supported employment and day.
- Rates and Billing:
  - ✓ Individual rates are based on the person's level of need based on a matrix. Annual maximum obligations start at about $12,500, and the mean annual budget is about $16,000.
  - ✓ Payment rates are the same for day and supported employment services. Persons can receive different services day to day, but providers can only bill for one service (day or supported employment) each day. Very few people are authorized for a split day.
  - ✓ Billing: Providers bill for a day of supported employment based on four hours of work regardless of staff contact, unless it has been documented that the person cannot work that much.
  - ✓ Although no differential payment exists for job development activities, providers can bill at the same rate for long term follow-up when support needs are comparatively much less. Providers remained concerned that the policy does not address their job development costs. Job development is not paid as a separate service but rather incorporated in day habilitation rates. There is a mechanisms to fund job development and related employment activities under the day habilitation rate however this is not consistently implemented across the state.

- ✓ Provisions in the code do allow providers to bill for individuals as "absent" or "vacation" if out of work.
- ✓ Billing for job development is not well understood by provider agencies and may be interpreted differently across regions. One provider noted, "I put the majority of my resources in finding the job." "It's easier to [provide employment services] under day hab…there is no pressure and you are paid if the person loses their job." DDA noted that they wanted to avoid individuals being in long term job development.
- ✓ Providers indicated that although they could bill for supported employment and day habilitation services in the same week but not on the same day. People who work for less than four hours per day are typically funded under day habilitation. This approach is believed to offer less administrative burden than attempting to mix funding streams and allows billing for five consecutive days. One respondent put it this way, "A lot of people in day hab are working." "Day hab gives you the flexibility to find a job."

- Pending waiver changes will add employment discovery and customization and community learning services as new services.
- Volunteer work is included in the service definition for supported employment because of provider feedback during the regulation comment period. This makes it difficult to account for the number of people who are actually working for paid wages under this funding stream.
- DDA's capital budget includes a preference for "…projects that promote and enhance supported employment opportunities in inclusive settings where the provision of traditional day activities is reduced or not present." Currently there is a request for funds to pave the parking lot of a drop-off center.
- Transportation costs/requirements are included in individual rates but are "not well defined." There are supplemental payments for transportation in some cases. Day hab providers provide a formal transportation service by vans. More frequently people receiving supported employment services use other modes of transportation such as pubic transportation or individual transported to and from work by job coaches.
  One provider reported that the cost of transportation for supported employment is extreme, approaching $7,000 per year between staff mileage and vans.
- (this section needs verification)A self directed waiver is in place that provides a more flexible way to finance creative outcomes. Currently only 70 individuals participate in this waiver (it is approved for up to 300 participants). Stakeholders expressed concerns that although the self-directed waiver may be effective for self employment, the program is not flexible enough to meet person's needs; services cannot be separated to enable the purchase of different components. One stakeholder described a

friend who was discouraged by staff from joining the self directed waiver. It was described as a cumbersome option (lot of forms and paper).

- The Division of Rehabilitative Services (DORS) pays hourly, and is not currently using a benchmark approach. There are three hourly rate levels ($25, $31, $38) and most providers are paid $38/hour.
- Many providers do not appear to utilize employment funding from DORS. Concerns were expressed over difficulty in accessing DORS funding and the need to sequence funding from DORS and DDA to avoid billing both agencies for the same service.
- A stakeholder indicated that the cost formula for calculating the cost of direct support staff is based on a presumed wage of $8.50/hour, and that a rate of at least $12/hour is needed for employment.
- (needs clarification with MD training coordinator) Nursing support costs are increasing for programs. Rates do not include funding for nursing services, but requirements for medication administration and other medical supports are increasing. Regulations for self administration of medication requires that staff be present to watch for a reaction to medication for "some period of time."
- Many providers have expressed concern over the adequacy of funding for supported employment. Two providers with very strong employment outcomes indicated that funding level is not an issue in part because they use DORS funding and natural supports aggressively. Other providers feel funding is insufficient and point to a provider association study suggesting that supported employment is the largest source of financial loss for provider agencies, averaging 8%. Respondents reported that the problem is that funding is geared toward maintenance (long term support) and more intensive costs related to job development and placement are not generally reimbursable. (needs clarification)

B. Potential Focus Areas.

- A clear distinction in reimbursement rates and service expectations does not exist between day habilitation and supported employment services. Providers report significant numbers of employment supports are furnished under day habilitation, and the approved services under the two funding streams overlap. Supported employment service delivery would be strengthened by developing a clear difference between the two services in policy, practice and funding.
- Develop a strategy for supporting the intensive job placement phase through more effective use of DORS funds by the development and implementation of interagency initiatives and policy guidance. Address provider concerns about double dipping through guidance and policy.
- Address concerns about funding adequacy by developing, with SELN assistance, a document reviewing supported employment rates and funding levels in other states. Compare other states' costs and outcomes with those

of Maryland providers agencies. Analyze differences in funding as well as policy and practice.

- Consider the development of mechanisms for funding outcomes/milestones (i.e., job development, job placement, 6 months job retention), improving individual planning and expanding exploration to find the right job match.
- Consider staff qualification requirements and their relationship to service expectations.
- Review the definition of a billable day for supported employment. Review other state models for defining billable days (cf. Tennessee).

IV. Training and Technical Assistance.

A. Key Findings.

- There is no required standard training for provider employment staff.
- The most successful providers hire staff that is skilled at integrated and customized employment instead of using direct support workers. Providers express concern that they are unable to afford staff with the background and qualifications necessary to operate successful placement programs.
- DDA staff identified a need to build demand through more outreach and education about options with families and self advocates, outreach to transition coordinators, and training for resource coordinators.
- DDA is fairly rich in training resources (150 training events per year), but none of the required training is specific to employment. There are perhaps 10 regional workshops per year that address employment. Some providers are committed and provide staff training privately. Benefits and work incentives training is provided every year in each region. DDA does maintain a relationship with the regional CRP-RCEP at Virginia Commonwealth University.
- Stakeholders indicated, "We send people out of state for training." Local in state training resources need to be developed for training provider agency staff.
- Families and self-advocates need training and technical assistance on:
  - ✓ The benefits of employment over segregated programs and the opportunities that exist among current service providers.
  - ✓ Methods of identifying and accessing providers with the best employment outcomes, the questions to ask and the terminology to use.
  - ✓ Contacting and utilizing benefits planners, accessing PASS plans, utilizing 1619 (a) and (b) and other programs.

B. Potential Focus Areas.

- Revise regulations to specify the need for staff training for supported employment

- Incorporate required training in employment for resource coordinators.
- Identify/develop a consistent program of in state training and technical assistance.
- Ensure that the Medicaid waiver renewal implementation and regulations include specific employment training requirements for staff providing employment services
Ensure that COMAR training regulations include specific employment training requirements for staff providing employment services
- Develop initiatives for improving access to benefits planners.
- Develop, in collaboration with the DD Council, the provider association and other stakeholders, programs to provide information and training on, for example, the benefits of employment for persons with intense needs, using the waiver and DORS funding to achieve employment outcomes, negotiating the adult service delivery system, common terms and definitions, and using the ISP process to the improve services and supports received.

V.   Interagency Collaboration.

A. <u>Key Findings</u>.

- A relatively small percent of providers bill DORS for services. There is limited use of the option of braiding funds. DDA regulations do not provide clear guidance to providers and state staff on appropriate methods of sequencing funding streams by accessing DOR dollars before attempting to bill the waiver program for the provision of employment supports. In the absence of such guidance, many providers forgo DOR funding resulting in increased waiver program costs. .
- A MOU is in place between DDA and DORS. Consumers eligible for services under DDA are deemed eligible for DORS services.
- DDA and DORS have a strong relationship at the state level. Regionally implementation varies, and locally there are complaints about service denials and the paperwork requirements. There are cases where individuals were deemed eligible under the MOU but after assessment found "not work eligible" by DOR. Stakeholders held conflicting views on eligibility and readiness.
- Some providers reported that the 8 month waiting period after referral before DORS funds makes it difficult to ensure a smooth transition form DORS to DDA and can be a barrier to continued employment.
- Concerns were expressed by stakeholders about use of DORS funds for assessment. One provider reported that DORS pays more for a comprehensive assessment, but that investment in situational assessments would be more useful. Another reported being told by DORS counselors that individuals could not be referred for assessment except to address eligibility. DORS reported the need for providers to be qualified for

situational assessment and concerns about receiving an adequate assessment report.

- A pilot project was developed in 2006 with DORS however implementation was delayed. The delay extended to a time period when funding was being cut to balance budgets hence resulting in resulting in a waiting list for employment services. The focus was on youth exiting school at 18 who were too young to be eligible for DDA transition funds. DORS agreed to serve until 21.
- One stakeholder described it as difficult to access benefits planning because it is a day out of work (or program). They suggested that benefits planning be an allowable activity.
- There is also a need for a stronger, more accessible benefits planning infrastructure. There are four WIPA counselors statewide, and the program has experienced turnover.
- School lack of focus on employment and transition is a concern. Schools are being held accountable for testing…not employment and transition outcomes.
- Broad arrays of stakeholders are engaged in the current employment initiative. A strong history of collaboration exists, and DDA maintains collaborative relationships with state DORS, Maryland Department of Disabilities (MDOD), and the Maryland Developmental Disabilities Council (DD Council).

B. <u>Potential Focus Areas</u>.

- Develop an action oriented partnership with DORS that sets goals for increased interagency referral. Address assessment, eligibility, and readiness issues with DORS services.
- Review the current MH-VR partnership as a model for interagency collaboration and braided funding.

VI. Services and Service Innovations.

A. <u>Key Findings</u>.

- Service availability varies by region. Respondents reported that DDA tends to be reactive – purchases the services that are available without regard to quality, model or approach. Providers appear to find it easier to provide group and non-work day services. The new directions waiver allows people to use resources beyond traditional DDA approved providers. This option seems to generate hesitancy on the traditional providers part to promote more individualized services, as reported by DDA staff.
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- An increase in the number of individuals receiving one-to-one supports has not resulted in increased employment outcomes. Staff noted that the problem was exacerbated by the lack of clear direction and expectations from DDA. The state appears to be too willing to accept whatever services are offered by providers without question.
- Overall there is no shortage of providers. .
- There is a significant investment in NISH and state set aside contract employment. Most of this work is in house (mailings, assembly).
- There are pockets of investment in employment. Many providers have experience in employment supports, but most offer only employment services to relatively few individuals.
- Twelve provider agencies have approached DDA with requests for assistance on closing their sheltered workshops. One provider agency did close the workshop and five agencies are serious about closing their workshop programs. One provider (Work Opportunity) has no building and staff work from home. Department of Health and Mental Hygiene has a capital grant is capital program is to fund projects that will promote and enhancing supported employment opportunities in inclusive setting where the provision of traditional day settings is reduce or not present.
- The stakeholders group indicated that support for integrated employment was driven by the provider agency's leadership, rather than (or in spite of) any activities of DDA.
- There is a need to expand services beyond Monday to Friday. Stakeholders reported that funding inflexibility and the separation of employment and residential services exerts pressure on staff to find jobs all within 9 and 3. One person described the difficulty supporting someone in a job from 1 to 5 from a transportation and home coverage perspective.
- Providers are concerned about finding/keeping staff. It is harder to find skilled staff and this creates pressure to retrench and just keep day services going. The state does not recognize a funding category specifically for placement specialists.
- Maryland has a self-employment initiative that has led to 35 individuals working in self-employment.
  Providers described the intensive startup supports required for self employment, and suggested that payment does not support this model well.
- One parent expressed a concern with the quality of job development, reporting, "It is still fast food. Are we training people with the right orientation?" She suggested a need to find better personnel and use job carving.
- Stakeholder comment: Few providers have enough volume of employment business to afford to do job placement year round.
- Staff turnover in provider agencies cause families to lose faith in the process
- The transitioning Youth Initiative served about 600 youth in FY2008. This is annually reallocated funds for serving 21-22 year old individuals.

B. Potential Focus Areas

- Develop a policy and strategy to address the need to support employment across expanded and non-weekday work hours.
- Enhance the initiative and develop clear policy for transitioning youth from school to adult services and employment.
- Close the gap in services for students between 18-21 (DORS currently has waiting list of 6 – 8 months and at this time will not consider moving the DORS/DDA pilot population (18-21 year olds) on a fast track for services.
- Revisit how transitioning youth fairs are used. The current focus inadvertently encourages people to choose day services rather than employment (day providers attend fairs and advertise their services; not enough emphasis placed on what is possible…).
- Begin Resource Coordination Services within the school context before transition age to begin discussions of expectation of work (i.e., in Central services begin around age 19; Prince George's County not RC available until services begin). Look at transitioning youth eligibility regulations and develop initiatives for shifting funding to supported employment consistent with the state's employment goals.

VII. Employment performance measurement, quality assurance, and program oversight

A. Key Findings.

- There is no outcome reporting in place. There are currently no quality indicators other than the data collected through the "ask me" project. Service providers with a high level of segregated services tend to score well on the Ask me survey.
- There is no data available that indicates the number of people receiving supported employment who are in volunteer positions.
- Some regions do QA visits for supported employment and some do not. The Office of Healthcare Quality looks at program files and does program site visits to assure regulation compliance.
- The Central region does have a quality checklist for supported employment.

B. Potential Focal Areas

- What you count matters. Set up a committed group of individuals including key DDA and provider agency staff to begin the process of developing a plan for gathering meaningful data on employment outcomes

(i.e., wages, hours, group vs. individual job) in order to measure quality of services, achievement of provider/individual outcomes, etc…

- Publish provider employment outcomes data (competitive services/individual informed choice of provider)