


Welcome Back!

Kristin Lupfer, Project Director
SAMHSA SOAR TA Center


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Agenda

- State Report-Out: Progress and Barriers
- Spotlight on Knoxville
- Spotlight on Sustainability
- Gathering Data for 6-month Report Out
- Open Q & A
- Wrap-Up and Adjourn


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State Report-Out: Progress and Barriers

State Pilot Representatives


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State Report-Out

- Arizona
- Colorado
- Connecticut
- Illinois
- Massachusetts
- Michigan
- Mississippi
- Nevada
- Ohio
- Tennessee
- Utah
- Wisconsin


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Spotlight on Knoxville

Matt Largent, CABHI Grantee Program Manager, Helen Ross McNabb Center, Knoxville, TN

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SOAR/IPS Pilot Implementation

Matt Largent
CABHI Program Manager - Helen Ross McNabb Center - Knoxville, TN

November 29, 2016

Process

- Cross-staff training – All agency staff are knowledgeable of IPS and SOAR principals alike.
- Case managers are encouraged to begin discussions with their clients about IPS and the program benefits early in their relationship and continue the conversation, even if the client is initially hesitant.
- Educate clients on the realities of working while receiving, or applying for benefits. Refer them to a "Benefits to Work Counselor" for more reassurance if needed.
- Encourage clients by reminding them that employment will result in faster income than the disability process. ☺

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Challenges

- It is a widely held myth that one cannot work while applying for or receiving benefits.
 - Case manager's job to dispel this myth
- Local referral sources discuss SOAR with clients, but have little knowledge of IPS so it's rarely mentioned.
 - Important for case managers to discuss all the services CABHI provides during their first client meeting.
- Clients fear they will be stuck at a job they do not like.
 - Important aspect of the IPS philosophy is securing jobs clients are interested in and will be successful at. This needs to be effectively communicated by case managers.

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Successes

- Clients are more open to employment after learning about IPS and all of its services and benefits.
- The IPS Specialist and SOAR Specialist working together in encouraging and supporting the client is very effective.
- Clients are more optimistic about their options after talking to a "Benefits to Work Counselor."
- In most cases clients start receiving income through employment before SOAR.
- Helen Ross McNabb has never had a client get turned down for disability because they were working with IPS.

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Questions??



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Thank you!



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**Spotlight on Sustainability:
Braided Funding and Sustainable Financing**

Bill Hudock, Senior Public Health Advisor, CMHS, SAMHSA
Darius McKinney, IPS Project Manager, Illinois Department of Human Services/Division of Mental Health

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SAMHSA
A Life in the Community for Everyone

Identifying And Braiding Funding Streams for Supported Housing and Supported Employment Services

Bill Hudock
Senior Public Health Advisor
Center for Mental Health Services
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240.276.1954

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The Employment Data Speaks Volumes

- The national unemployment rate for individuals receiving public mental health services is approximately 80 percent.
- 60-70% percent of the 7.1 million people receiving public mental health services nationwide want to work
- 1.7% receive supported employment opportunities provided by states

Source - <http://www.bazelon.org/LinkClick.aspx?fileticket=TWG5AElvqjs%3D&tabid=738>

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The Housing Numbers Also Speak Volumes


- Estimates of the extent of the problem vary:
 - 20-25% of homeless have some form of serious mental illness – SAMHSA
 - 26% of homeless were seriously mentally ill at any given point in time - HUD
 - 33% of homeless have serious mental illness – Treatment Advocacy Center
- ½ of mentally ill homeless also have substance use disorder

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Supported Housing and Supported Employment Services Work

- 75 percent of homeless people with mental illness or other serious disabilities (including those who have been homeless for long periods) who entered supportive housing as part of such a study remained through the study's end (usually 18 to 24 months).
- 11 Randomized controlled trials have shown that IPS supported employment achieves 60% employment levels, with close to half retaining employment for 10 years


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How To Pay For Services May Seem Complex

- Medicaid can pay for outreach and support services
 - States may choose to pay for some or all of this
 - Evidence demonstrates cost effectiveness
 - Remaining concerns over cost and entitlement
- HUD can pay for housing and some services
- SAMHSA grants can help
 - PATH for People at risk
 - Block Grant for people with SMI
- Private Grants provide start-up funding
 - Infrastructure development
 - Initial service delivery
- State appropriations can fill gaps


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Resources

- <http://www.csh.org/wp-content/uploads/2015/05/A-Quick-Guide-To-Improving-Medicaid-Coverage-For-Supportive-Housing-Services1.pdf>
- <http://www.cbpp.org/research/housing/supportive-housing-helps-vulnerable-people-live-and-thrive-in-the-community>
- <https://www.dol.gov/odep/pdf/FFSECEPMI.pdf>
- <https://www.medicaid.gov/federal-policy-guidance/downloads/smd10008.pdf>
- <https://www.medicaid.gov/federal-policy-guidance/downloads/CIB-09-16-2011.pdf>

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Funding in Illinois For IPS

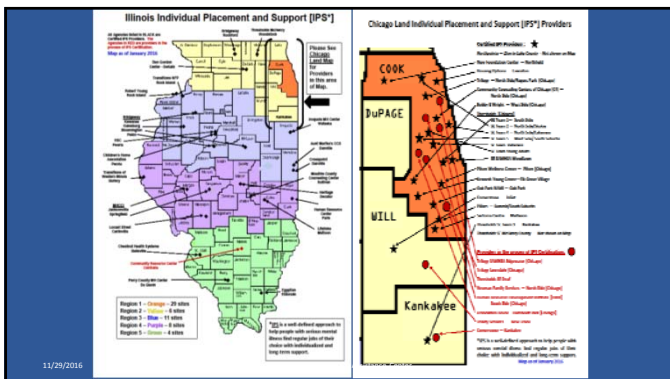
Darius McKinney
IL Department of Human Services
Division of Mental Health

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IPS-SE in Illinois

- Approximately 70 IPS teams geographically distributed.
- 2,430 consumers received IPS services in FY2016.
- Outcomes – 72% VR Closure rate. About 40% of the people work.
 - The DMH/DRS IPS Partnership now produces the best employment outcomes within DRS – better than any other disability group. Historically the DRS SMI population had amongst the lowest outcomes of any group.
- Penetration Rate: IL is 2.8%. National is < 2%.

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Current IL funding streams

- IL Medicaid Rehabilitation Option and IL Division of Rehabilitation Services [VR] Milestone Payments make up braiding/sequencing funding for individual IPS agencies
- SAMHSA Mental Health Transformation Grant
- Illinois Department of Commerce & Economic Opportunity [DCEO] Disability Employment Initiative Grant from U.S. Department of Labor [WIOA Title I]

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Current IL funding streams

- Current employment related services under IL Medicaid Rehabilitation Option [MRO] for IL Division of Mental Health Providers:
 - Community Support, ACT, Case Management cover all medically necessary interventions to help get and keep employment including building natural supports, developing skills to manage one's illness, helping someone learn to use community resources, linkage. The workplace is considered a natural setting.
 - As of 2014, about 25% of an IL employment specialist work activities can be billed under the IL MRO [interventions need to be tied to the client's treatment plan]:
 - Symptom Management
 - Independent Community Living and Integration
 - Independence in Activities of Daily Living
 - Socialization
 - Health and Nutrition
 - Economic Self-Sufficiency

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Current IL funding streams

- IL Division of Rehabilitation Services [VR] Milestone Payments:
 - IPS Providers with DRS Milestone Contracts will receive milestone payments from VR once a client starts a competitive job in the community. Current DRS rates are:
 - 15 day Milestone payment = \$1,354
 - 45 day Milestone payment = \$2,032
 - 90 day Milestone payment [successful closure] = \$3,386 [TOTAL = \$6,772]
 - If client still needs VR support because the job is still in jeopardy, two additional Milestone payments of \$700 at 120 day and \$700 at 150 day can occur. [Possible TOTAL payment of \$8,172]

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Potential Future IL Funding Streams

- Application submitted for an 1115 Research and Demonstration Waiver; Particular emphasis into housing and employment to address the larger needs of behavioral health consumers.
- Managed Care Organizations [MCO's]: IL moving to MCO's as the future payer of behavioral health services. MCO's may pay for Evidence-Based Practices -- IPS/SE. "Higher rates of unemployment cause more illness and premature death."**

**Social Determinants of Health: The Solid Facts, Richard G. Wilkinson, M. G. Marmot, World Health Organization, 2003


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**Spotlight on Sustainability:
Integrated Programming**

Missy Bogart-Starkey, Housing and Homelessness Coordinator, Kansas Department for Aging and Disability Services
Korrie Snell, CABHI Project Coordinator, Kansas Department for Aging and Disability Services

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**Gathering Data for the 6-month
Report Out**

Jen Elder, National Policy and Partnerships Coordinator

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What are we looking for?

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Evaluation Goals

Two-pronged evaluation:

- Process
 - What best practices and efficiencies can we identify through the new assessment and referral processes?
 - What systemic challenges do we need to address?
- Results
 - Measure increase in number of individuals exploring work while applying for or receiving SSI/SSDI
 - Measure increase in number of individuals receiving income from both employment and disability benefits
 - Housing stability of individuals served

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Key Data to Collect

- Number of individuals assessed for income support services
 - Number utilizing SOAR-only, IPS-only, and both services
- SOAR and IPS outcomes
 - SOAR: application outcomes including approval rates and days to decision
 - IPS: number of new job starts and number in competitive employment
 - Both: amount of monthly income (for those using SOAR and employment, specify pre- or post- award of disability benefits) and housing status
- Collaborative process: frequency of meetings between SOAR and IPS staff and case collaborations, challenges in the process you are working to overcome, success stories

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Data Tracking Process

- For the pilot, we'll be collecting data at 6 months (December 2016) and at 12 months (June 2017)
- Excel spreadsheet to compile key indicators for the pilot
- While we formally collect data at 6 and 12 months, each state will be informally reporting outcomes to the group on monthly check-in calls

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Outcome Tracking Systems

- Homeless Management Information System (HMIS)
 - Connection to income
 - Housing status of individuals served
- SOAR Online Application Tracking System (OAT)
 - SOAR application outcomes
 - Income received from employment before/after disability application
- Dartmouth Quarterly Outcomes Report
 - Number of IPS intakes, individuals accessing competitive employment, and new job starts

Utilize these tracking system reports to quickly compile pilot data

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Data Tracking Process

Reporting Form

	Jan 2016	Feb 2016	Mar 2016	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	Jul 2017	Aug 2017	Sep 2017	Oct 2017	Nov 2017	Dec 2017
General Practice Questions																								
What percentage of the SOAR and IPS population are pilots?												Smart narrative												
What barriers have you encountered with the SOAR and IPS integration in other areas on the SOAR and IPS implementation in your state?												Smart narrative												
How frequently do SOAR and IPS staff meet together?												Smart frequency												
What is the purpose of these meetings?												Smart narrative												
SOAR Specific Questions																								
How many individuals did you apply for SOAR on cases? (see below)												0												
How many individuals enrolled in SOAR received case number?												0												
How many complete SOAR applications have you identified?												0												
How many applications were approved for benefits?												0												
Of the applications that have been approved, what is the average time												0												

CABHI: SOAR and IPS Pilot Outcomes Form

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Whatever you have is okay!

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Submitting Data

- We understand you may not have detailed information or data for all of the questions
- Please try to fill out the data sheet as comprehensively as you can and provide explanations for any missing data
- Everything you provide will be useful for our evaluation!

Please submit your data form to Jen Elder at jelder@prainc.com by December 20th (3 weeks from today!)

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Open Discussion

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Wrap-Up and Adjourn

- Questions or Comments?
- Next call: January 31, 2017 3:00-4:30pm EDT
- Thanks for your participation!

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