

## E. Program Data Development and Research and Evaluation

November, 2005

2003, 2004 and 1<sup>st</sup> & 2<sup>nd</sup> and 3<sup>rd</sup> Quarter 2005

2005 additions in **Bold** in endnotes

Prepared by Allen Jensen

Activity	States with Experience	States Planning or Beginning Activity	TA Tools, Policy Analysis and/or Multi-State Analysis
<b>1. Evaluation of Comprehensive Employment Infrastructure<sup>1</sup></b>	Alaska <sup>2</sup> Kansas <sup>3</sup> Maine <sup>4</sup> Utah <sup>5</sup> Vermont <sup>6</sup> Oregon <sup>7</sup>	California <sup>8</sup>	
<b>2. Development of Multiple-Agency Data &amp; Evaluation System to Determine Effectiveness of Employment Initiatives<sup>9</sup></b>		Alaska <sup>10</sup> Massachusetts <sup>11</sup> Oregon <sup>12</sup> Utah <sup>13</sup> Connecticut <sup>14</sup> Vermont <sup>15</sup>	
<b>3. Evaluation of Operating Medicaid Buy-In Program &amp; New Options Studies<sup>16</sup></b>	California <sup>17</sup> <i>Iowa</i> <sup>18</sup> <i>Maine</i> <sup>19</sup> Minnesota <sup>20</sup> Nebraska <sup>21</sup> New Mexico <sup>22</sup> Wisconsin <sup>23</sup> Vermont <sup>24</sup> Washington <sup>25</sup> Wisconsin <sup>26</sup>	Michigan <sup>27</sup> North Dakota <sup>28</sup> Pennsylvania <sup>29</sup> Rhode Island <sup>30</sup> South Carolina <sup>31</sup>	
<b>4. Evaluation of Personal Assistance Services (PAS) programs<sup>32</sup></b>	Oregon <sup>33</sup> Virginia <sup>34</sup> <i>Vermont</i> <sup>35</sup> <i>Utah</i> <sup>36</sup> <i>Massachusetts</i> <sup>37</sup>	Alaska <sup>39</sup> <b>Connecticut</b> <sup>40</sup> Kansas <sup>41</sup> New Hampshire <sup>42</sup> <i>Washington</i> <sup>43</sup>	Center for Personal Assistance Services University of California, San Francisco Supported by the US Dept of Education's National Institute for Disability and Rehabilitation Research (NIDRR) PAS Center Website

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	<i>Maine</i> <sup>38</sup>	Wisconsin <sup>44</sup> <u>California</u> <sup>45</sup>	<a href="http://www.pascenter.org">www.pascenter.org</a>
<b>5. Evaluation of the Process of Disability Determination for Medicaid Buy-In Enrollees</b> <sup>46</sup>	Wisconsin <sup>47</sup>	Nevada <sup>48</sup>	
<b>6. Medicaid Buy-In Participant Characteristics, and Satisfaction Studies</b> <sup>49</sup>	<i>Alaska</i> <sup>50</sup> <i>Massachusetts</i> <sup>51</sup> Connecticut <sup>52</sup> Iowa <sup>53</sup> Kansas <sup>54</sup> <i>Louisiana</i> <sup>55</sup> Maine <sup>56</sup> Minnesota <sup>57</sup> <i>New Jersey</i> <sup>58</sup> New Mexico <sup>59</sup> Pennsylvania <sup>60</sup> Utah <sup>61</sup> Vermont <sup>62</sup> <i>Washington</i> <sup>63</sup>	<i>Indiana</i> <sup>64</sup> Nevada <sup>65</sup> New York <sup>66</sup>	
<b>7. Data Collection Capability Development &amp; Development of Medicare- Medicaid linked data base</b> <sup>67</sup>	Indiana <sup>68</sup> Kansas <sup>69</sup> Massachusetts <sup>70</sup> New Hampshire <sup>71</sup> <i>Rhode Island</i> <sup>72</sup>	Alaska <sup>73</sup> Maine <sup>74</sup> New Mexico <sup>75</sup> South Dakota <sup>76</sup>	

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<b>8. SSDI Demonstration Projects Activities</b> <sup>77</sup>		Wisconsin <sup>78</sup> Vermont <sup>79</sup> Connecticut <sup>80</sup> Utah <sup>81</sup>	Resource material developed by Allen Jensen, Work Incentives Project, George Washington University and Bobby Silverstein, Center for the Study and Advancement of Disability Policy at <a href="http://www.uiowa.edu/~lhpdc/work/VIII_document.html">http://www.uiowa.edu/~lhpdc/work/VIII_document.html</a>
<b>9. Economic Impact of Medicaid Buy-In Programs</b> <sup>82</sup>	New Hampshire <sup>83</sup>	Connecticut <sup>84</sup> South Carolina <sup>85</sup>	
<b>10. Evaluation of Employer Outreach Initiatives</b> <sup>86</sup>		<i>Wisconsin</i> <sup>87</sup> <i>New Hampshire</i> <sup>88</sup>	
<b>11. Evaluation of Benefits Planning</b> <sup>89</sup>	<i>Alaska</i> <sup>90</sup> <i>California</i> <sup>91</sup> <i>Kansas</i> <sup>92</sup> <i>Maine</i> <sup>93</sup> <i>New Hampshire</i> <sup>94</sup> <i>Utah</i> <sup>95</sup> <i>Vermont</i> <sup>96</sup>	Connecticut <sup>97</sup> North Carolina <sup>98</sup>	
<b>12. Evaluation of Youth Transition Employment Programs</b> <sup>99</sup>	<i>Vermont</i> <sup>100</sup> <u>Virginia</u> <sup>101</sup>		
<b>13. Evaluation of Ticket Program's Impact on Employment</b> <sup>102</sup>	<i>Maine</i> <sup>103</sup>		

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<b>14. Consumer surveys and focus groups on barriers to employment &amp; adequacy of supports<sup>104</sup></b>	Louisiana <sup>105</sup> Maine <sup>106</sup> Missouri <sup>107</sup> <i>Iowa<sup>108</sup></i> <i>Oregon<sup>109</sup></i> <i>110</i>  New Hampshire <sup>111</sup> Wisconsin <sup>112</sup> Wyoming <sup>113</sup>	New Mexico <sup>114</sup> <i>South Carolina<sup>115</sup></i> Hawaii <sup>116</sup>	
<b>15. Monitoring and evaluation of Section 1619 program and work activity of SSI recipients<sup>117</sup></b>	<i>Louisiana<sup>118</sup></i>		
<b>16. State studies on health needs of persons with disabilities &amp; characteristics and earnings of VR clients<sup>119</sup></b>	<i>Massachusetts<sup>120</sup></i> Rhode Island <sup>121</sup> <i>Virginia<sup>122</sup></i>		
<b>17. Direct involvement of persons with disabilities in designing evaluation of programs intended to assist employment<sup>123</sup></b>	Iowa <sup>124</sup> Utah <sup>125</sup> Vermont <sup>126</sup>		

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### <sup>1</sup> 1. Evaluation of Comprehensive Employment Infrastructure

<sup>2</sup> Alaska – 1<sup>st</sup> Q 2004 – Developing a study with survey questions of those recipients who have transitioned to employment since the project began to determine employment supports and services that are working and areas of need. Finding will be used to inform continued systems change and development.

<sup>3</sup><sup>rd</sup> Q 2004 – Survey has been redesigned and will be a user-friendly Likert survey mailed to targeted recipients.

<sup>4</sup><sup>th</sup> Q 2004 - The survey was finalized and mailed out; an additional survey was also mailed to all recipients of benefits counseling. Findings and recommendations will be used to inform the comprehensive strategic planning session scheduled for March 30-31, 2005. Since the initial response rate was low (10%), project staff are making personal contact with provider staff to increase the response rate to 30-35%.

<sup>3</sup> Kansas 1<sup>st</sup> Q 2005 - One Benefit Specialist is placed at a Kansas Workforce Development Center (WDC) one afternoon per week to act as a "Disability Navigator", assisting consumers with disabilities, and providing technical assistance for WDC staff. Under evaluation activities at Kansas University "Mystery Customers" with disabilities will evaluate services at a KWDC prior to a Disability Navigator being placed there and will evaluate the same KWDC six to nine months later. KWDC staff will self-assess.

**Kansas 3<sup>rd</sup> Quarter 2005 - "Mystery shoppers" will follow-up in the final quarter of 2005 to determine whether services to people with disabilities improved during the past year when a Disability Navigator worked with staff at the Shawnee County WDC.**

<sup>4</sup> Maine 1<sup>st</sup> Q 2005 - The CHOICES CEO project is conducting a series of focus groups with professionals who provide job development and placement services to workers with disabilities, and who have been nominated by their peers as particularly successful and accomplished in this service. Will conduct evaluation of current state of the benefits counseling services in Maine. Will develop report on results of current work with 8-10 providers of benefits counseling services in Maine, including telephone interviews, follow-up group discussion, and collaborative resource mapping efforts.

<sup>5</sup> Utah – A Comprehensive Utah Work Incentive Evaluation Plan was developed in November 2003. Available at <http://www.workabilityutah.org/uwin/webpage/products.htm>.

*2<sup>nd</sup> Q 2004 – Involving individuals with disabilities in the designing, implementing and evaluating of state policy changes through a participatory action research process. Focus at this point is on evaluating the Buy-In, PAS, and other infrastructure changes. Consumers are advising evaluators on the final project evaluation efforts.*

<sup>6</sup> Vermont – A Research and Evaluation Unit is funded to support evaluation of Medicaid Buy-In, benefits counseling and other work incentive programs. University of Vermont has completed second year evaluation of Jump On Board for Success (JOBS) program which is an intensive case management/supported employment program for youth ages 16 -22. Ongoing research project is to evaluate the effect of benefits counseling on earnings for people with disabilities.

*2<sup>nd</sup> Q 2004 – Draft evaluation report prepared on employment program for transition youth ages 16 – 22*

*4<sup>th</sup> Q 2004 - MIG Work Incentive website maintained with a posting of research products to date* [http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5\\_reports.htm](http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5_reports.htm)

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<sup>7</sup>Oregon 3<sup>rd</sup> Q 2004 – An evaluation of Oregon’s MIG grant was conducted by the Oregon Health Policy Institute.

<sup>8</sup> California 2<sup>nd</sup> Q 2005 - Report "Employment & Health Status of Californians with Disabilities" completed; sets baseline for examining disabled employment statewide; will assist w/ strategic planning. Summarized the disability rate of working aged adults w/ dis. in each county of CA and then examined the employment gaps by county. Report recommends that an appropriate indicator to gauge success in the employment of PwDs over time would be a “health-adjusted” employment rate.

Report can be accessed at [http://www.chiip.org/pdf/LaPlante\\_Kave\\_report\\_6-29-05.pdf](http://www.chiip.org/pdf/LaPlante_Kave_report_6-29-05.pdf)

### <sup>9</sup> 2. Development of Multiple-Agency Data & Evaluation System to Determine Effectiveness of Employment Initiatives

<sup>10</sup> Alaska 1<sup>st</sup> Q 2005 - Plan to develop an integrated data system to track employment and service outcomes based on existing internal and external information systems. Strategy is to identify mechanisms for different state agencies to track outcomes given the varying ability of key state agencies to do so and 2) develop a database to extract aggregate data across systems. Waiting until performance indicators were developed during the Alaska Works Initiative Think Tank IV March 30-31.

**Alaska 2<sup>nd</sup> Q 2005 - An information technology specialist is developing a matrix to collect and monitor performance standards for Adult Public Assistance recipients who go to work. The Division of Behavioral Health has configured its new data collection system, AKAIMS, to collect employment outcome data.**

**Alaska 3<sup>rd</sup> Quarter 2005 - The Adult Public Assistance work request has moved to a number 1 priority along with several other number 1 priorities. Strategic planning partners identified potential data sources, which appear to be readily available. Access to those data will be discussed when the 5-year plan is “shopped.”**

<sup>11</sup> Massachusetts 2<sup>nd</sup> Q 2005 – “ Employment Snapshot Report” completed and presented at Employment Summit, leading to active dialogue among stakeholders on defining outcomes & data collection methods.

<sup>12</sup> Oregon 2003 - Contract has been executed for development of computer system to document Employment Initiative, Medicaid Buy-In program, and provision of PAS in the workplace. Discussions regarding cost benefit analysis of Medicaid Buy-In program.

**Oregon 1<sup>st</sup> Q 2005 – Goal is to establish an Outcomes Tracking System. An Information Systems and Outreach Workgroup to be established to connect indicators to data systems and methods and propose/affirm indicators for desired outcomes.**

**3<sup>rd</sup> Quarter 2005 - Implemented client cost tracking system for Medicaid Buy-In Program.**

<sup>13</sup> Utah 1<sup>st</sup> Q 2005 - Agencies in Utah will develop methods of data sharing to track effectiveness of the major publicly-funded employment services for people with disabilities. Convening a work group representing major state service agencies (Dept of Workforce Services, State Office of Rehabilitation, Dept of Health, and Dept of Human Services) to develop methods for data sharing re: employment services and outcomes.

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<sup>14</sup> **Connecticut 2<sup>nd</sup> Q 2005 - Project to define successful employment outcomes. This research will answer essential questions that will drive the decision making for the MIG strategic plan. Should success be measured by full time status or by money?**

<sup>15</sup> **Vermont 2<sup>nd</sup> Q 2005 - Research & Evaluation Unit in MIG project provides program evaluation, IT support, data mgmt, and outcomes analyses to inform and improve the Medicaid Buy-In, benefits counseling, Ticket, and other disability-related employment-support programs. Website at <http://www.vwii.org>**

### <sup>16</sup> 3. Evaluation of Operating Medicaid Buy-In Program & New Options Studies

<sup>17</sup> California Working Disabled Program Prepared by the Lewin Group May 2003.

<http://www.medi-cal.org/topics/view.cfm?itemid=20684>

California 4<sup>th</sup> Q 2004 – MIG project goal is to compile data on Medicaid Buy-In program and new PAS program (IHSS/Work) enrollment and other info and evaluate adequacy of current data systems to provide data and make recommendations for improvements. Contracted with University of California – San Francisco (UCSF) for report on adequacy of existing data resources for appropriate indicators of movement toward stated goals.

California – 1<sup>st</sup> Q 2005 - Draft report on 'The Employment and Health Status of Californians with Disabilities' presented by Mitch LaPlante & H. Stephen Kaye of U of California – San Francisco See Power Point presentation of report under Documents at MIG web site at <http://www.chiip.org/publications.html>

<sup>18</sup> *Iowa – 2<sup>nd</sup> Q 2004 – MIG project is developing an evaluation of the Medicaid Buy-In program utilizing MIG advisory Committee to develop questions. 3<sup>rd</sup> Q 2004 – Surveys of 700 Medicaid Buy-In recipients were completed to determine improvements needed. Evaluation still in process. Purpose of survey is to determine why Medicaid Buy-In recipients don't work more, what their barriers to work are and what their attitudes towards work are and needed improvements.*

4<sup>th</sup> Q 2004 - Work continued on the MEPD evaluation report, the advisory committee reviewed drafts of the report to provide input for the final version. Data analysis of the report to determine changes will continue for the next year, the advisory committee continues to meet to provide input. Report available at [http://www.dhs.state.ia.us/dhs2005/dhs\\_homepage/docs/MEPD-04\\_report-master.pdf](http://www.dhs.state.ia.us/dhs2005/dhs_homepage/docs/MEPD-04_report-master.pdf)

Iowa 1<sup>st</sup> Q 2005 - Final 1st evaluation report was completed and distributed, sub committee has thoroughly reviewed results and have developed a work plan on changes to increase employment and self sufficiency of enrollees, initial work done on 2nd evaluation.

**Iowa 2<sup>nd</sup> Q 2005 - 2nd Medicaid Buy-In evaluation will use a longitudinal study design.**

<sup>19</sup> *Maine – 2<sup>nd</sup> Q 2004 – Assisted Governor's Office of Health Policy and Finance in their implementation of the Dirigo Health Initiative, to help understand how the new individual and group health coverage in that initiative will work with the Medicaid Buy-In and what outreach and education the MIG can support. Information on Maine's Dirigo Health Initiative is at <http://dirigohealth.maine.gov/dhlp01.html>. DirigoChoice is health care coverage*

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*designed to give Maine businesses with 50 or fewer employees, the self-employed, and individuals an affordable, high-quality option for health coverage.*

<sup>20</sup> Minnesota – Study of Medicaid Buy-In enrollees since 7/1/99. Two comparison groups of 700 (Medicaid Buy-In and Section 1619 enrollees).

4<sup>th</sup> Q 2004 – Examples of preliminary information: Paid approx. \$2.4 million in state income taxes, paid buy-in premiums of \$8.4 million, had a decline in hospitalization rates, lower monthly Medicaid costs, & were slightly more likely to have third party insurance

<sup>21</sup> Nebraska – Contracted for study on the Fiscal Estimates of Changes in Eligibility and/or Premium Requirements for Medicaid Buy-In Program. Report available on Nebraska page under Program Development section at <http://www.uiowa.edu/~lhpd/work/States/Ne/Nebraska.html>.

<sup>22</sup> New Mexico – 1<sup>st</sup> Q 2004 – Four focus groups of participants in Buy-In conducted by State VR on satisfaction with program.

4<sup>th</sup> Q 2004 - Survey being conducted by University of New Mexico, Bureau of Business & Economic Research Survey (BBERS). This survey has a heavy emphasis on employment history, current employment as well as assisting in an attempt to glean some of the information NM MIG staff will include in coming analysis and reports. Final report will be completed by end of Jan 05. Summary of Findings will be included in 1st qtr report for 2005.

<sup>23</sup> Wisconsin – State developed analysis of alternative policies for Medicaid Buy-In program. State organized focus group for discussion of four Medicaid Buy-In policy areas and then produced issue papers in the following areas: Eligibility/ Premium Structure, Independence Account Portability, Treatment of Spousal Income and Financial Eligibility Caps. State analyzing Disability Determination process for Medicaid Buy-In program.

<sup>24</sup> Vermont – A Medicaid Buy-In Chart Book was prepared in 2003

2<sup>nd</sup> Q 2004 - Available at [http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5\\_reports.htm](http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5_reports.htm).

<sup>25</sup> Washington – 1<sup>st</sup> Q 2004 – Employment Monitoring Data Project (EMDP) produces reports on employment outcomes, demographics, and service utilization rates of those enrolled in the Medicaid Buy-In program.

3<sup>rd</sup> Q 2004 – Attempting to develop data on individual job longevity. Want to use this indicator to determine whether Medicaid service event impacts job tenure of Medicaid Buy-In enrollees, and, if so, develop policies accordingly.

**Washington 2<sup>nd</sup> Q 2005 - Goal was to develop additional data variable for the state's Employment Monitoring Database that measures individual job longevity. In this quarter, data variable was integrated into the state's database for tracking job longevity.**

<sup>26</sup> Wisconsin – Annual evaluation conducted of Medicaid Buy-In program.

2<sup>nd</sup> Q 2004 – 2003 evaluation report available at <http://dhfs.wisconsin.gov/WIpathways/pdf/MAPPAnnualReport2003.pdf>. Conducted analysis of Medicaid Buy-In enrollee costs under managed care versus fee-for-service.

<sup>27</sup> Michigan – 1<sup>st</sup> Q 2005 – MIG project plans to conduct evaluation of effectiveness of Medicaid Buy-In which will include: 1. gathering data on participant's experiences, 2 Gather financial data, 3 Analyze program needs and barriers, 4 Analyze expansion options.

2<sup>nd</sup> Q 2005 – Ad Hoc Evaluation team has met three times to develop evaluation plan.

Michigan 3<sup>rd</sup> Quarter 2005 - Evaluation survey designed in late August. Contracts completed to conduct evaluation. Tested pilot survey late September. Focus groups determined. Anticipate mid-October to begin surveys with 12/31 date of completed surveys.

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<sup>28</sup> North Dakota – Developing plans for evaluation of Medicaid Buy-In.

<sup>29</sup> **Pennsylvania – 2<sup>nd</sup> Q 2005 - Medicaid Buy-In program evaluation study is being used by a recently organized committee to respond to recommendations from the study. The committee has developed a list of short-term goals and long-term goals.**

<sup>30</sup> **Rhode Island 1<sup>st</sup> Q 2005 - Reconstituted the MIG Data and Evaluation Workgroup in support of data collection, research and evaluation of the Medicaid Buy-In program and complete changes to RI's automated eligibility determination and information systems. A Resource Directory subcommittee of the Data and Evaluation Workgroup was formed. Initiating effort to develop a Strategic Plan to implement in 2006 measuring employment outcomes for Persons with Disabilities including numbers who become employed, of hours working & change in income levels for those who are currently working.**

**Rhode Island 2<sup>nd</sup> Q 2005 - Data reporting needs have been identified. MIG is a partner with Department of Human Services in developing a web-based resource directory to ensure comprehensive information for people with disabilities. MIG will bring together consumers, advocates, et al. to identify services / resources that should be on the website.**

<sup>31</sup> South Carolina 3<sup>rd</sup> Q 2004 – State has begun surveying current Medicaid Buy-In participants to determine primary barriers to participation in the program. **South Carolina 1<sup>st</sup> Q 2005 - Interviews and focus groups have been completed Study on barriers in eligibility determination for Medicaid has been completed and presented to the MIG Advisory Committee.**

### <sup>32</sup> 4. Evaluation of Personal Assistance Services (PAS) programs

<sup>33</sup> Oregon – 1<sup>st</sup> Q 2004 – Personal Assistance Services (PAS) survey completed and results correlated.

4<sup>th</sup> Q 2004 - Personal Assistance Services/In-Home Services Survey Description: The two main objectives of the survey are: 1) to evaluate consumer satisfaction with PAS in Oregon and 2) to find out how to improve PAS to it can better meet the needs of persons with disabilities who are employed. Report Location: report is pending post to the Oregon DHS website. Oregon ACCESS enhancements released 12/20/04. Staff training on updated Oregon ACCESS will continue to occur.

<sup>34</sup> Virginia – 1<sup>st</sup> Q 2004 – MIG contracted with VCU to conduct a survey of recipients in Virginia Home and Community Based Services waivers regarding utilization and need for services, availability of PAS providers, use at home and at work. Report available at [http://www.dmas.state.va.us/mb-real\\_choice\\_starter\\_grant.htm](http://www.dmas.state.va.us/mb-real_choice_starter_grant.htm).

<sup>35</sup> *Vermont – PAS evaluation reports available at [http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5\\_reports.htm](http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5_reports.htm).*

<sup>36</sup> *Utah – 2<sup>nd</sup> Q 2004 – Conducting and evaluating demonstration project on use of PAS to support working people with mental illness. 18 persons with mental illnesses are employed and receiving EPAS services. Evaluation data shows demographic characteristics and types of services they receive. Average age is 45 and mean years receiving mental health service is 15.*

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4<sup>th</sup> Q 2004 - Employment Personal Assistance Services (EPAS) Evaluation Report Evaluated the EPAS program through a review of administrative data (35 recipients), 15 in-person semi-structured interviews & interviews with service brokers. Goal was to gather recipients' view of program effectiveness in relation to their employment situations, health, well-being & quality of life. Completed Report to be posted on <http://www.uwin.org/uwin/webpage/products.htm>  
**Utah 3<sup>rd</sup> Quarter 2005 - 15 individuals with serious mental illness received assistance with Instrumental Activities of Daily Living (IADL) through consumer directed personal assistance. Assessment tools, planning tools, consumer training procedures were tested, refined and adopted by the EPAS program. Report available at [www.workabilityutah.org](http://www.workabilityutah.org) under "products."**

<sup>37</sup> *Massachusetts – 2<sup>nd</sup> Q 2004 – Utilization of PAS Personal Care Services by Masshealth Consumers with Disabilities: A Four Year Study of PAS Users in MA Medicaid .*

<sup>38</sup> **Maine 3<sup>rd</sup> Q 2004 – MIG project conducted survey, conducted other data and prepared case studies related to the use of PAS by Medicaid Buy-In enrollees and utilized material in preparing document "Using Personal Assistance Services to Support Work."** The Report can be found at <http://choices.muskie.usm.maine.edu/PASreport.doc>

<sup>39</sup> Alaska – 1<sup>st</sup> Q 2004 – A survey of all PAS recipients of working age is underway to determine their interest in working, barriers to employment and the specific mix of services they would require in the workplace. Findings will be used to identify needed policy changes and target outreach to recipients and employers.

*2<sup>nd</sup> Q 2004 – PAS survey has been completed and being analyzed. 36 % response rate to survey*

*3<sup>rd</sup> Q 2004 – 25 % of survey respondents (primarily younger) are interested in work. In depth analysis of those interested to determine needed policy changes and outreach activities.*

4<sup>th</sup> Q 2004 - Project staff participated in a December 3 Think Tank to streamline the program and make it more cost-effective.

**Alaska 2<sup>nd</sup> Q 2005 – PAS survey available at [http://www.alaskaworkinitiative.org/reports/emp4/emp4\\_0.html](http://www.alaskaworkinitiative.org/reports/emp4/emp4_0.html)**

<sup>40</sup> **Connecticut 1<sup>st</sup> Q 2005 - Analysis to determine why home health services are more commonly used than the PAS option for individuals with disabilities in Connecticut**

<sup>41</sup> Kansas – 1<sup>st</sup> Q 2004 – Developing with U of Kansas surveys and data collection mechanisms necessary to evaluate planned PAS Section 1115 Independence Plus waiver.

<sup>42</sup> **New Hampshire 1<sup>st</sup> Q 2005 - Conducting a policy analysis of HCBC-Elderly and Chronically Ill (ECI) Waiver and State Plan for personal assistance services (PAS) to meet MIG's Full Eligibility status under the CMS criteria. Will involving review, data collection, and cost analysis of strategies to access personal care services in ECI Waiver and State Plan. Work plan being developed for data, policy, and rules information needed**

<sup>43</sup> *Washington – 2<sup>nd</sup> Q 2004 – Evaluation of Personal Assistant Recruitment and Retention Project (PARR). Over 600 new PAS providers now trained to provide services in and out of home. Enhanced training for consumers as employers and PAS plan managers.*

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4<sup>th</sup> Q 2004 - Evaluation of the Personal Assistant Recruitment and Retention (PARR) pilot is comparing and evaluating two PARR pilot programs; one in an urban setting and one in a rural setting. Report not yet available

<sup>44</sup> Wisconsin – Planning to conduct an analysis of self directed PAS.

*2<sup>nd</sup> Q 2004 – PAS in the Workplace study. Survey of existing funding and arrangements for workplace PAS under way.*

4<sup>th</sup> Q 2004 - Despite very wide publicity, survey and funding pilot found little unmet need for workplace PAS funding. Completed workplace PAS issue paper demonstrating probable low cost of including workplace PAS under MA state plan.

**Wisconsin 1<sup>st</sup> Q 2005 - Evaluated implementation of self directed services in Family Care pilot project which was based on interviews with stakeholders Report identifies barriers to implementation of self directed services in Wisconsin's reformed long term care system**

<sup>45</sup> California 4<sup>th</sup> 2004 - Contracted with University of California – San Francisco (UCSF) for report on adequacy of existing data resources for appropriate indicators of movement toward stated goals related to PAS in the workplace IHSS services in California..

### <sup>46</sup> 5. Evaluation of the Process of Disability Determination for Medicaid Buy-In Enrollees

<sup>47</sup> Wisconsin – 1<sup>st</sup> Q 2004– A study is underway through an analysis of disability determination decisions related to Medicaid Buy-In enrollees to determine whether eligibility determination is a barrier to employment.

*2<sup>nd</sup> Q 2004 – Reviewing early cases on Medicaid Buy-In.*

4<sup>th</sup> Q 2004 - Process of reviewing cases has taken longer than planned. Report will be completed by 6-05

**Wisconsin 1<sup>st</sup> Q 2005 – Report on disability determination process for Medicaid Buy-In participants is partly written.**

**MIG project is exploring testing feasibility of automating the disability determination process so that people with disabilities can more easily predict their eligibility and make earlier decisions about employment, as measured by the employment behavior of pilot participants. Logic model for several stages have been produced.**

**Wisconsin 2<sup>nd</sup> Q 2005 – Analysis of disability determination process for Medicaid Buy-In program completed.**

<sup>48</sup> **Nevada 2<sup>nd</sup> Q 2005 - Meetings were held with the Disability Adjudicator's office to explore options for disability determinations for individuals that have never gone to social security as a way of addressing the barrier of access to health insurance for the working disabled. Investigation of more options are underway.**

### <sup>49</sup> 6. Medicaid Buy-In Participant Characteristics, and Satisfaction Studies

<sup>50</sup> *Alaska – 2<sup>nd</sup> Q 2004 – MIG project staff surveyed 1000 people on Medicaid of working age and all Medicaid Buy-In recipients and the results are currently being analyzed.*

4<sup>th</sup> Q 2004 - The surveys of 1,000 people on Medicaid of working age and Medicaid Buy-In recipients have been completed and analyzed.



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4<sup>th</sup> Q 2004 – Examples of findings from longitudinal evaluation: Most enrollees maintain steady employment and continuous eligibility. 74% of enrollee survey respondents report being in their current job at least a year; 47% had been on the same job for more than two years. To date, 2/3 of enrollees remain in the program continuously for at least a year.

**Kansas 2<sup>nd</sup> Q 2005 - KU sends Working Healthy enrollees a consumer satisfaction survey every six months. A dis-enrollment survey is also sent to enrollees who have not been enrolled for more than two months. Satisfaction surveys were mailed to the 834 enrollees in June, 2005. Questions regarding Part D, as well as reasons for not increasing work levels were included. With a return rate of 33.3%, early results indicate that 87% of dually-eligible enrollees are aware that their drug coverage will change.**

<sup>55</sup> Louisiana – 1<sup>st</sup> Q 2004 – MIG Advisory Council Evaluation Work Group has identified a number of evaluation tools to track evaluate outcomes and impact of Medicaid Buy-In program to measure consumer satisfaction and employment success of enrollees – Will be piloted in July 2004.

*2<sup>nd</sup> Q 2004 – MIG has contracted with Louisiana State University (LSU) to provide analytical support in tracking evaluating outcomes and impact of the Buy-In to measure customer satisfaction and employment success of enrollees. Will include customer satisfaction surveys and other monitoring tools. Program evaluation work group developed and MIG advisory council approved satisfaction survey to those enrolled and those not approved.*

4<sup>th</sup> Q 2004 -Initial surveys mailed to 96 certified individuals & 99 who were not; 45 recipients and 26 persons who were denied responded; 32 individuals agreed to participate in follow-along surveys; follow-along & 2nd round survey instruments were finalized & approved.

Results are available at [www.LaMPP.org](http://www.LaMPP.org)

**Kansas 1<sup>st</sup> Q 2005 – February 2005 survey instruments were mailed to 267 persons certified between 05 & 10/04, 473 persons who had been denied between 05 & 10/04, and 28 individuals who agreed to participate in on-going evaluation efforts.**

<sup>56</sup> Maine –2003- Conducted Buy-In participants survey in 2001 and 2003. Will do comparison of data. The MaineCare Option for Workers with Disabilities: A Survey of Past and Present Enrollees. Link to report <http://choices.muskie.usm.maine.edu/survey>. MaineCare: Services for Workers with Disabilities Chart Book May 2003 <http://choices.muskie.usm.maine.edu/chartbook.pdf>.

1<sup>st</sup> Q 2004 – Results of comparison – 2003 respondents average fewer work hours per week but have higher wages

*2<sup>nd</sup> Q 2004 – Maine Medicaid Buy-In Cost Analysis Study – Average Medicaid costs (PMPM) of Medicaid Buy-In participants are significantly less than other disabled Medicaid recipients.*

4<sup>th</sup> Q 2004 – MIG Project completed study of claims and enrollment patterns of Buy-In enrollees. Completed final report of the third and last major Buy-In survey conducted in 2003. Report available at

[http://choices.muskie.usm.maine.edu/enrollment\\_cost.htm](http://choices.muskie.usm.maine.edu/enrollment_cost.htm)

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<sup>57</sup> Minnesota – Prepares extensive quarterly reports on characteristics of Medicaid Buy-In participants. Download most recent reports at <http://www.uiowa.edu/~lhpdc/work/States/Mn/Minnesota.html>.

*2<sup>nd</sup> Q 2004 – Completed contract for qualitative study of Medicaid Buy-In consumers. Draft is completed of multi-year evaluation.*

4<sup>th</sup> Q 2004 - Survey of Minnesota Medicaid Buy-In Enrollees Survey Report at:

[http://www.dhs.state.mn.us/main/groups/disabilities/documents/pub/dhs\\_id\\_029455.pdf](http://www.dhs.state.mn.us/main/groups/disabilities/documents/pub/dhs_id_029455.pdf)

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<sup>58</sup> *New Jersey – 2<sup>nd</sup> Q 2004 – Evaluation through telephone surveys and focus groups of past and current Medicaid Buy-In participants .*

*3<sup>rd</sup> Q 2004 – Survey has been completed and in process of completing analysis of data and writing the report. First of four focus groups conducted.*

*4<sup>th</sup> Q 2004 Completed comprehensive employment study of people with disabilities on the NJ Medicaid Buy-In program. Research and evaluation of past and current Medicaid Buy In participants through telephone surveys, focus groups and administrative data from NJ WorkAbility program files, Medicaid eligibility and claims data, and employment and earnings records from New Jersey’s Wage Reporting System. .*

<sup>59</sup> **New Mexico – 1<sup>st</sup> Q 2005 – The Bureau of Business & Economic Research at the University of New Mexico conducted a study of Medicaid Buy-In participants to examine the employment situations of program participants at three various points: Present, Since Joining & When Joining Buy-In. Study available from MIG staff.**

<sup>60</sup> Pennsylvania – 1<sup>st</sup> Q 2004 – Developing an RFP for an evaluation of the Medicaid Buy-In program.

*2<sup>nd</sup> Q 2004 – Scope of survey and data collection and other issues resolved related to an evaluation of the Medicaid Buy-In program.*

*3<sup>rd</sup> Q 2004 – Contract awarded and contractor has met with Advisory Task Force.*

*4<sup>th</sup> Q 2004 – Medicaid Buy-In Evaluation report is completed and available from the MIG project staff*

<sup>61</sup> Utah – State has developed a Comprehensive Work Incentive Evaluation Plan. Includes a “Self Reported Survey of Consumers Experience in Medicaid Buy-In Program”. *Evaluation at web site - <http://www.uwin.org/uwin/webpage/products.htm>*

*3<sup>rd</sup> Q 2004 – Through a Participatory Research process consumers are involved in developing evaluation surveys of consumers experiences with Medicaid Buy-In program . Another consumers survey is scheduled for November 2004.*

*Utah – 4<sup>th</sup> Q 2004 - Study of Patterns of Quarterly Wages Of Utah Medicaid Buy-In Participants - Sample was 459 people enrolled in Buy-In at some point between July 2001 and June 2003. Wage data are from SSA Unemployment Insurance file maintained in Utah by the Department of Workforce Services.*

*Analysis indicates 9.4% of participants show substantial increase in wages (over \$1000/quarter) & 14% show more modest gains (\$100 to 1000/quarter).*

*Aggregated analysis obscures these gains. Additional research being completed involves interviewing individuals with in/decreased wages.*

*4<sup>th</sup> Q 2004 Utah Medicaid Work Incentive (MWI) Focus Group Study - The goal of the focus group was to: obtain information from enrollees on how program was working for them; determine how enrollees might use a case manager if available; and obtain information to guide development of telephone survey of MWI enrollees. Brief Summary of Findings Confusion between MWI & Medicaid spend-down exists. Medicaid workers need to clearly communicate what MWI is & its advantages. The use of case managers could increase awareness of all programs including Work Ability. Positive impacts of MWI both tangible & intangible were reported. Report Location <http://www.uwin.org/uwin/webpage/products.htm>*

*4<sup>th</sup> Q 2004 - Survey and Interviews of Recipients of the Medicaid Work Incentive (MWI) Program (2004) Analyses are being conducted of 115 respondents to a telephone survey and 16 follow-up in-person interviews. The goal is to clarify the degree to which, and the reasons why, some participants have increased work effort and greater earnings after enrollment and others do not. When completed the report will be posted on <http://www.uwin.org/uwin/webpage/products.htm>*

*4<sup>th</sup> Q 2004 - Employment of Utah Medicaid Disability Recipients - Analysis of employment and poverty status of all recipients of Medicaid disability assistance in two months that are roughly four years apart, January 2001 and December 2004.*

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<sup>62</sup> Vermont – Developed and administered a survey of Medicaid Buy-In participants with final report received in October 2003. Includes reports provided to MS on Medicaid Buy-In enrollees, survey results and focus group reports.

*2<sup>nd</sup> Q 2004 – Reports available at [http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5\\_reports.htm](http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5_reports.htm).*

<sup>63</sup> *Washington – 2<sup>nd</sup> Q 2004 – Developing additional data variable for the state's Employment Monitoring Database that measures individual job longevity at aggregate level. Use this indicator to determine whether Medicaid service event impacts job tenure for MBI enrollees and, if so, develop policies accordingly.*

<sup>64</sup> *Indiana – 2<sup>nd</sup> Q 2004 – MIG project has developed a working relationship with the Benefits planning organizations (BPAOs) in which the BPAOs help identify trends as related to the issues in the Medicaid Buy-In program.*

<sup>65</sup> Nevada – 1<sup>st</sup> Q 2004 – Will develop a Medicaid Buy-In participant survey to evaluate effectiveness of Buy-In and of outreach activities.

<sup>66</sup> **New York 3<sup>rd</sup> Quarter 2005 - A survey instrument will be developed that is suitable for mailing to all Medicaid Buy-In participants to determine consumer satisfaction with Buy-In.**

### <sup>67</sup> 7. Data Collection Capability Development & Development of Medicare- Medicaid linked data base

<sup>68</sup> Indiana – State is beginning to use administrative data that is available as a means of evaluating current employment-related services utilization in health and long-term care programs.

*2<sup>nd</sup> Q 2004 – State MIG is working with a number of state agencies to develop means to access data which could help in evaluating the Medicaid Buy-In program.*

*3<sup>rd</sup> Q 2004 – MIG project participated in the development of an improved data infrastructure for the Medicaid agency which now has a “cube” devoted to Medicaid Buy-In and employment and which is being phased in October, 2004.*

<sup>69</sup> Kansas – U of Kansas worked with State contractor EDS to improve data on Medicaid Buy-In program.

<sup>70</sup> Massachusetts – Development of methodology for using Medicaid claims data to identify disabling condition. Web site

<http://www.massmig.org/AccessDocument.cfm?document=Commonhealth%20Vol>.

**Massachusetts 1<sup>st</sup> Q 2005 - Goal is to build a data infrastructure and develop research methodologies to inform local and national policy related to Medicaid Buy-in programs and their impact on employment outcomes. Acquired MassHealth eligibility data (MA-21) which provides verified employment wages, self-employment wages, and type of employment information.**

<sup>71</sup> **New Hampshire – 3<sup>rd</sup> Quarter 2005 - Established active database provided by New Hampshire Voc Rehab; converted data of job seeker occupational goals; analysis of job goals among VR underway. Data obtained on patterns of self-employment. Identification of partnerships underway with community based programs and job training programs.**

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<sup>72</sup> *Rhode Island – 2<sup>nd</sup> Q 2004 – Continuing the development of the Rhode Island Medicare-Medicaid linked longitudinal database which provides basic data for research on costs of services, utilization and trend analyses for this population.*

4<sup>th</sup> Q 2004 - MIG Project Director and College of Pharmacy Faculty continued the analysis of the database with particular attention to epidemiological implications for the pre-dual population. Though research for 2004 has technically ended, it will be ongoing through 2005 and beyond.

**Rhode Island 1s Q 2005 - Reconstituted the MIG Data and Evaluation Workgroup in support of data collection, research and evaluation of the Medicaid Buy-In program and complete changes to RI's automated eligibility determination and information systems. A Resource Directory subcommittee of the Data and Evaluation Workgroup was formed.**

<sup>73</sup> Alaska – 1<sup>st</sup> Q 2004 – MIG staff developing a website with internal data collection tools and external information targeted toward persons with disabilities, state agencies and service providers as a means to collect, maintain and report evaluation data.

4<sup>th</sup> Q 2004 - A request to reconfigure the Adult Public Assistance computer system to collect outcome data on-line is now 11th on the Division of Public Assistance's priority list.

**Alaska 1<sup>st</sup> Q 2005 - Although an APA information technology specialist has been assigned responsibility for developing a database to track and report needed data, the work request was assigned as a number two priority.**

**Alaska 1<sup>st</sup> Q 2005 - Plan to develop an integrated data system to track employment and service outcomes based on existing internal and external information systems. Strategy is to identify mechanisms for different state agencies to track outcomes given the varying ability of key state agencies to do so and 2) develop a database to extract aggregate data across systems. Waiting until performance indicators were developed during the Alaska Works Initiative Think Tank IV March 30-31.**

<sup>74</sup> Maine – Defining data elements and related parameters to show enrollment and cost patterns.

<sup>75</sup> New Mexico – 1<sup>st</sup> Q 2005 – MIG has plans to develop a tracking system to evaluate the Medicaid Buy-In Program with emphasis to increase employment outcomes by 25% on an annual basis. Will hire a person to compile statistics on program to apply statistical theory & methods to collect, organize, interpret & summarize numerical data. Design spreadsheets, graphs, tables & other technical reporting methods to process complex statistical data.

<sup>76</sup> South Dakota 1<sup>st</sup> Q 2005 - State MIG has adopted goal of developing strategies for collecting data regarding the number of persons with disabilities who become employed in South Dakota and their relationship to the grant activities.

2<sup>nd</sup> Q 2005 - The initial design for obtaining data from the VR database has been drafted and approved for testing by mid-August 2005.

3<sup>rd</sup> Quarter 2005 - The testing for the design of the VR database was accomplished in August; will begin collecting data October 1, 2005

### <sup>77</sup> 8. SSDI Demonstration Projects Activities

<sup>78</sup> Wisconsin – 1<sup>st</sup> Q 2004 - State is actively planning with SSA for Pilot project for SSDI \$1 for \$ 2 benefit offset.

<sup>79</sup> Vermont – 1<sup>st</sup> Q 2004 - State is actively planning with SSA for Pilot project for SSDI \$1 for \$2 benefit offset.

*2<sup>nd</sup> Q 2004 – MIG staff is involved with consumers around Medicaid Buy-In and consumer communication related to the 1 for 2 demo which is being planned*

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**3<sup>rd</sup> Quarter 2005 – Benefit Planners are counseling Medicaid Buy-In participants regarding the planned \$1 fo \$2 SSDI demonstration project**

<sup>80</sup> Connecticut – 1<sup>st</sup> Q 2004 – State is actively planning with SSA for Pilot project for SSDI \$1 for 2 benefit offset.

<sup>81</sup> Utah – 1<sup>st</sup> Q 2004 - State is actively planning with SSA for Pilot project for SSDI \$1 for \$2 benefit offset

**Utah 3<sup>rd</sup> Quarter 2005 Utah began implementation of Social Security Benefit Offset Pilot for SSDI beneficiaries. 2 new benefits specialist were hired by the BPAO program to provide benefits counseling services to pilot participants.**

### <sup>82</sup> 9. Economic Impact of Medicaid Buy-In Programs

<sup>83</sup> New Hampshire – Study of fiscal impact of full first year of the Medicaid Buy-In program to be completed in June 2004.

*2<sup>nd</sup> Q 2004 Report to be completed in September 2004.*

*3<sup>rd</sup> Q 2004 – Report completed in draft form and expected to be released in November or December of 2004.*

4<sup>th</sup> Q 2004 Report completed November 2004 – “Evaluation of the Medicaid for Employed Adults with Disabilities (MEAD) Program: February 1, 2002 through June 30, 2003” This report evaluates the impact of NH's Medicaid for Employed Adults with Disabilities (MEAD) on participants' employment earnings and health care utilization, and on state expenditures for the program. This report extends the previous evaluation to include state fiscal year 2003 (July 1, 2002 through June 30, 2003. Available at [http://www.nchsd.org/file\\_library/index.cfm](http://www.nchsd.org/file_library/index.cfm)

<sup>84</sup> **Connecticut 2<sup>nd</sup> Q 2005 - Beginning research effort to attempt to measure the economic impact of employment for persons with disabilities. This research will provide Connecticut with a comprehensive analysis and the tools and methodology to continue tracking economic impact as part of the strategic plan.**

<sup>85</sup> **South Carolina – 2<sup>nd</sup> Q 2005 – MIG has contracted to conduct an economic impact study. University of South Carolina has completed first draft of the study. Results will be shared with the MIG Advisory Committee on October 5, 2005.**

### <sup>86</sup> 10. Evaluation of Employer Outreach Initiatives

<sup>87</sup> Wisconsin – 2<sup>nd</sup> Q 2004 – Developing survey to give to employers at presentations regarding hiring people with disabilities

<sup>88</sup> New Hampshire – 3<sup>rd</sup> Q 2004 – State MIG plans to evaluate employer satisfaction with Assistive Technology Toolkit.

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### <sup>89</sup> 11. Evaluation of Benefits Planning

<sup>90</sup> *Alaska – 2<sup>nd</sup> Q 2004 – Survey is being redesigned to determine the extent that benefits counseling was useful and whether it resulted in recipients going to work.*

<sup>91</sup> *California – 3<sup>rd</sup> Q 2004 - Subcontracted with World Institute on Disability and San Diego State University to conduct and post benefits planning training assessment of participants in training programs related to knowledge of benefits programs. Will be used to determine needed adjustments in training.*

<sup>4<sup>th</sup> Q 2004</sup> - Draft report for San Diego submitted; includes post-training data on fact-based question. re: benefits programs, perceptions of benefits programs & additional training needs. Report on L.A. trainings is being finalized. Began evaluation. for Northern-Tri-County trainings.

<sup>92</sup> **Kansas 2<sup>nd</sup> Q 2005 – Earlier surveys of Medicaid Buy-In participants indicated that eligibility workers and other front line staff were the first point of contact for people who become eligible for the program. Therefore, a survey of “frontline staff” as to their perceptions and understanding of the Medicaid Buy-In program and its participants was conducted as a means to evaluate the efficiency and effectiveness of the Medicaid Buy-In program from the perspective of staff who are involved in the day-to-day operation of the program. The survey included demographic questions, general questions about their experiences with and the perceptions of people with disabilities and their ability to work, and questions specific to the operation and administration of the Medicaid Buy-In program. The results of the survey can be found at [www.workinghealthy.org](http://www.workinghealthy.org) under “Working Healthy Policy Briefs” August 2005**

<sup>93</sup> **Maine 2<sup>nd</sup> Q 2005 - Surveys of benefits counselors, and benefits counseling service managers in two provider agencies, have been completed. Additional surveys of 2-3 agencies that fund counseling are underway and will be included in the final report. Logic model is completed. Maine 3<sup>rd</sup> Quarter 2005 - The MIG project has collected performance reports from the two provider organizations which offer benefit counseling services. Current discussions are engaged in merging MIG and VR performance reports into one, and using this data as the baseline for analysis throughout the MIG**

<sup>94</sup> New Hampshire – Four Benefits Specialists provided 699 individuals with information and referral and assisted 65 with one-on-one benefits counseling and assisted 460 service providers in the 4<sup>th</sup> quarter of 2003. To determine outcome of work by benefits specialists working with persons with disabilities at the One-stops, a survey was developed and sent out in January 2004 to track outcome data.

<sup>95</sup> *Utah – 2<sup>nd</sup> Q 2004 – Evaluation of benefits planning program at web site - <http://www.uwin.org/uwin/webpage/products.htm>.*

<sup>4<sup>th</sup> Q 2004</sup> - Data show a 30 percent increase in employment by individuals who received benefits planning.

<sup>96</sup> *Vermont – 2<sup>nd</sup> Q 2004 – Evaluation of Benefits Planning program. Reports at web site [http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5\\_reports.htm](http://www.dad.state.vt.us/dvr/vocrehab/vwii/s5_reports.htm). Published in *Journal of Rehabilitation*, 70 (2), 5-11, 2004.*

<sup>4<sup>th</sup> Q 2004</sup> – Evaluation of impact of specialized benefits counseling for people with psychiatric disabilities who receive SSA benefits. Participants with a psychiatric disability who received specialized benefits counseling achieved significantly greater improvements in earnings

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<sup>97</sup> **Connecticut 2<sup>nd</sup> Q 2005 - - Outreach campaign with youth and adults in community designed, developed, implemented. Evaluation methodology developed; Evaluation tools designed and implemented.**

<sup>98</sup> *North Carolina – 2<sup>nd</sup> Q 2004 – MIG project staff working with Benefit planner organizations with intent of increasing use of work incentives by SSI recipients. Intend to use to identify data sources and outcome measures for monitoring and evaluation of outreach and education efforts*

### <sup>99</sup> 12. Evaluation of Youth Transition Employment Programs

<sup>100</sup> Vermont – University of Vermont has completed second year evaluation of Jump On Board for Success (JOBS) program which is an intensive case management/supported employment program for youth ages 16 -22.

*2<sup>nd</sup> Q 2004 – Draft evaluation report prepared on employment program for transition youth ages 16 – 22.*

*4<sup>th</sup> Q 2004 - Final report received from contractor 10/8/04. Copy available at:*

*<http://www.dad.state.vt.us/dvr/vocrehab/vwii/assets/docs/JOBS2004CostStudy.pdf>*

<sup>101</sup> Virginia 4<sup>th</sup> Q 2004 - Development of local demonstration models of coordination and referral between youth in transition school programs and BPAOs, One Stops and Employment Networks in supporting youth with disabilities in planning/obtaining employment upon leaving school. Status Completed Report to be placed at [http://www.dmas.virginia.gov/mb-additional\\_reports.htm](http://www.dmas.virginia.gov/mb-additional_reports.htm)

### <sup>102</sup> 13. Evaluation of Ticket Program's Impact on Employment

<sup>103</sup> *Maine – 2<sup>nd</sup> Q 2004 – Developing research design on how the Ticket roll-out is impacting overall employment services and incentives with the intent that results can guide additional outreach on Ticket.*

*Maine – 3<sup>rd</sup> Q 2004 – State was unable to develop, at this point in time, specific Ticket research and evaluation activities.*

### <sup>104</sup> 14. Consumer surveys and focus groups on barriers to employment & adequacy of supports

<sup>105</sup> Louisiana 1<sup>st</sup> Q 2004 – Interviews and Surveys for People living with disabilities on needs met and unmet needs– 1099 surveys completed. Report at <http://www.dhh.state.la.us/offices/reports.asp?ID=136&Detail=71>.

<sup>106</sup> **Maine 2<sup>nd</sup> Q 2005 – The MIG project is conducting a series of focus groups with professionals who provide job development and placement services to workers with disabilities, and who have been nominated by their peers as particularly successful and accomplished in this service.**

<sup>107</sup> Missouri – Consumer survey by consumer organization “People First” to determine primary barriers to employment.

<sup>108</sup> *Iowa – 2<sup>nd</sup> Q 2004 – A focus group with consumers was held to determine why employment supports are not used and what needs changed.*

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4<sup>th</sup> Q 2004 - A report was done on the findings of focus groups and surveys with consumers/case managers to see why available employment supports are not used. This report will be reviewed to see what changes are needed. Report not yet complete

<sup>109</sup> *Oregon – 2<sup>nd</sup> Q 2004 – Conducted focus groups and completed surveys of field staff knowledge and attitudes related to employment of people with disabilities as part of MIG grant development for 2005. MIG staff will research activities which will support the development of policies, systems change and programs to encourage higher level of employment by persons with disabilities. Partnering with Protection and Advocacy advisory council for conduct of employer- employee survey. Survey has been drafted.*

<sup>111</sup> New Hampshire – 3<sup>rd</sup> Q 2004 – Developing Policy Briefs on barriers to employment by people with disabilities for the Governor’s Committee on Employment of People with Disabilities. To be conducted by Franklin Pierce Law Center through regulatory and consumer perspective analysis.

<sup>112</sup> **Wisconsin 2<sup>nd</sup> Q 2005 – MIG is conducting study of the introduction of person centered planning for vocational goals in the state’s Family Care Medicaid Waiver project. Will involve qualitative study of barriers and problem solving. Information on Family Care pilots at <http://dhfs.wisconsin.gov/LTCare/> Wisconsin 3<sup>rd</sup> Quarter 2005 – Determining employer resources on workplace accommodations for people with sensory impairments. 106 employer interviews completed**

<sup>113</sup> Wyoming – 3<sup>rd</sup> Q 2004 – Wyoming Children and Families Initiative mirrors MIG objectives. Wyoming Institute on Disabilities (WIND) sent 20,000 surveys to determine primary goals and 3500 returned.

4<sup>th</sup> Q 2004 – Attempting to develop and implement a system of PAS data collection and analysis to assess use and need for increased PAS services by people with disabilities (PWD) who desire to obtain or maintain employment. Focus Group meetings scheduled and held in 20 towns across WY. 29 respondents participated. Summary report of findings & trends completed. Mail survey instrument reproduced and mailed to 1706 persons. 299 completed surveys returned. Data extracted and summary report of findings and trends created. Data too general for action plans. Follow-up surveys will occur in 2005.

<sup>114</sup> **New Mexico – 3<sup>rd</sup> Quarter 2005 Strategic Planner Contractor will be conducting Focus Groups & interviews w/program participants, family members, agency officials, medical providers, peer assoc.'s & benefits planners from around the state gathering information & different points-of-view re: barriers to employment for those w/disabilities. Findings should be available by January 2006.**

<sup>115</sup> *South Carolina – 2<sup>nd</sup> Q 2004 – Will conduct a survey or focus group on barriers to employment and factors for success that enabled work.*

4<sup>th</sup> Q 2004 - Fifty-eight individuals, representing 70 disabling conditions, have been interviewed thus far. Interviews are still ongoing  
**3rd Quarter 2005 – Reports I-IV have been completed. Meetings will be held on Oct. 19 and Nov. 2 to share findings with disability organizations and state agencies. The findings of the survey of employers will be completed by the end of Oct. Short and long term recommendations are contained in the reports.**

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<sup>116</sup> **Hawaii 2<sup>nd</sup> Q 2005 – Planning to conduct a needs assessment from information gathered from persons with disabilities, family members, providers and employment community regarding access to employment opportunities. Will gather data on job seekers with disabilities; Gathering Department of Education data on class of 2000; Will interview 50-75 people with disabilities.**  
**Hawaii 3<sup>rd</sup> Quarter 2005 - Completed 10 consumer-led focus groups statewide, incorporating diverse viewpoints across consumers, advocates, providers and families across all identified disability groups. Analysis of data underway.**

### <sup>117</sup> 15. Monitoring and evaluation of Section 1619 program and work activity of SSI recipients

<sup>118</sup> *Louisiana – 2<sup>nd</sup> Q 2004 – State uses Medicaid eligibility files to develop monthly report of Section 1619 Medicaid recipients to monitor work activity of SSI recipients.*

### <sup>119</sup> 16. State studies on health needs of persons with disabilities & characteristics and earnings of VR clients

<sup>120</sup> *Massachusetts – 2<sup>nd</sup> Q 2004 – Collaborated with Massachusetts Medicaid Policy Institute to produce a report that highlights major trends and policy questions that the Commonwealth faces in addressing health needs of MassHealth members with disabilities. [www.massmedicaid.org/briefs.html](http://www.massmedicaid.org/briefs.html).* 4<sup>th</sup> Q 2004 - Prescription Drug Use: Impact on Medical Service Use and Spending and Work Status. Continued analysis of Medicaid buy-in pharmacy claims and survey data. 4<sup>th</sup> Q 2004 - Participated in an evaluation of the Medicaid Prior Authorization Unit to determine if the process results in health- services- related barriers to employment.

<sup>121</sup> Rhode Island 4<sup>th</sup> Q 2004 - Prepared report on “Health Care Gaps in Rhode Island for Children with Disabilities: Challenges and Proposed Strategies” Intent was to identify the health benefits available for children with disabilities, those available for adults with disabilities, the "gaps" between the two, and to develop strategies to bridge these gaps. A health care gaps' chart has been completed based on a draft of the report)

<sup>122</sup> Virginia – 1<sup>st</sup> Q 2004 – Research on Vocational Rehabilitation client’s earnings by disability type as means to develop information for development of Medicaid Buy-In program.

*2<sup>nd</sup> Q 2004 – Acquired appropriate data from SSA and use of State VR data for use in describing employment patterns of individuals with disabilities. Also using earnings reported to Virginia Employment Commission. Reports to include: sustainability of employment, extent of health insurance coverage, and earnings above or potentially above SGA.*

*3<sup>rd</sup> Q 2004 – Additional delay in acquiring SSA data. SSA requiring confidentiality agreement with Medicaid agency.*

**2<sup>nd</sup> Q 2005 – A study has been completed on applicants for state vocational rehabilitation services to determine the employment patterns of persons with disabilities who achieve various levels of earnings. A description of the study can be found at**

## E. Program Data Development and Research and Evaluation

November, 2005

2003, 2004 and 1<sup>st</sup> & 2<sup>nd</sup> and 3<sup>rd</sup> Quarter 2005

2005 additions in **Bold** in endnotes

Prepared by Allen Jensen

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[http://www.dmas.virginia.gov/mb-additional\\_reports.htm](http://www.dmas.virginia.gov/mb-additional_reports.htm). A complete copy of the study can be obtained from the Virginia MIG staff by emailing to [buyin@dmas.virginia.gov](mailto:buyin@dmas.virginia.gov) :

<sup>123</sup> **17. Direct involvement of persons with disabilities in designing evaluation of programs intended to assist employment**

<sup>124</sup> **Iowa 3<sup>rd</sup> Quarter 2005 MIG Advisory Committee with major representation from consumers have been extensively involved in redesigning the second Medicaid participant program evaluation survey as part of the effort to plan toward redesign of the Medicaid Buy-In program.**

<sup>125</sup> Utah 4<sup>th</sup> Q 2004 – MIG project involves individuals with disabilities in designing, implementing and evaluating state policy changes through a participatory action research process (PAR). The PAR process adopted by Utah MIG project over the 4 years of the project resulted in significant and meaningful involvement by people with disabilities

<sup>126</sup> **Vermont 1<sup>st</sup> Q 2005 - Conduct quarterly participatory action research meetings with consumers.**