

Glidepath Guidelines

1. Program Basics

1.1 Overview and purpose

Unemployment is a Social Determinant of Health (SDOH) that if not addressed can impact someone's overall well-being, mental, and physical health. Individuals who are chronically unemployed tend to have a shorter lifespan than individuals who are typically employed. Its intentional services support individuals with behavioral health concerns, including people experiencing substance use disorder, physical impairments, and a variety of other co-occurring disorders. Gaining and maintaining employment is also an important factor in community reintegration for people with justice involvement or leaving inpatient settings.

We also know that.

- Many times, the system unintentionally disincentivizes individuals from going back to work by decreasing or removing public benefits when program enrollees return to work.
- There is a lack of benefit planning resources available in communities throughout the state to assist program enrollees in strategically planning a transition from public assistance to earned income.

Proviso 92 state Appropriation for fiscal year 2023-2025 is provided solely to support the creation of a bridge period for individuals enrolled in both HEN and the Foundational Community Supports initiative who are transitioning from HEN benefits (under RCW 74.04.805) due to increased income or other changes in eligibility. The Health Care Authority, Department of Social and Health Services, and Department of Commerce shall collaborate on this effort.

This program has two separate contracts:

- One is through the WA State Dept. of Commerce with each county's contracted HEN provider for additional rental assistance for the FCS SE priority population to counter losing HEN benefit due to increased income or other eligibility criteria.
- One through the HCA/ DBHR awarded to up to 10 agencies (one in each region) to provide region-wide Benefit Planning and FCS Supported Employment services, as well as to distribute the support funds for this same FCS SE priority population.

1.1.1 Evidence Based Practice of Individual Placement and Support (IPS)

8 Principles of Supported Employment

- **Systematic Job Development**

- **Rapid job Search**
- **Benefit Counseling and education**
- **Client Preferences are honored.**
- **Zero Exclusion**
- **Supported Employment is integrated with treatment.**
- **Competitive Employment is the goal.**
- **Time Unlimited Supports**

1.2 Fund Source

- **Dept. of Commerce- HEN Funds**
- **Health Care Authority- General Funds**

2.Program Eligibility

2.1 Eligibility Criteria

FCS SE Eligibility-

FCS Supported Employment Program:

- 16 or older
- Medicaid-eligible
- Must meet at least one assessed health needs-based criteria and is expected to benefit from supported employment services:

Health criteria

- Mental health need for improvement, stabilization, or prevention of deterioration of functioning resulting from the presence of a mental illness.
- Need for outpatient SUD treatment.
- Need for assistance with three or more ADLs or Hands-on assistance with one or more ADL.
- Objective evidence of physical impairments, and because of this, the individual needs assistance with basic work-related activities

Must meet at least one risk factor:

- Unable to be gainfully employed for at least 90 consecutive days due to a mental or physical impairment.
- SUD with repeated inpatient treatment episodes (Two or more instances of inpatient substance use treatment in the past two years)
- Diagnosed mental health and/or SUD that is at risk of deteriorating without intervention Factors resulting in deterioration may include the following: Social isolation resulting from criminal justice involvement, homelessness, poverty, etc. Care for conditions requires multiple provider

types. A history of psychiatric treatment that requires continuation. Cannot maintain roles in employment or education, resulting in past terminations/expulsions.

- An inability to obtain or maintain employment resulting from age, physical disability, or traumatic brain injury.

HEN Eligibility-

HEN Household Eligibility Criteria for Glidepath Bridge Funding

- HEN households that no longer have a HEN Referral from DSHS. This includes:
 - Households who:
 - Are currently receiving HEN rent assistance.
 - Homeless and at-risk¹ households who:
 - Received a HEN Referral within the last six months but were not able to identify permanent housing.
OR
 - Received rent assistance in the past but exited the program within the last six months.

AND

- Head(s) of households enrolled in FCS supported employment should be prioritized.

AND

- Household income is at or below 80% Area Median Income.

At risk of homelessness means:

- ✓ Have a missed rent payment and currently owe all or part of a rent payment (current month or past months); OR
- ✓ Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR
- ✓ Is living in the home of another because of economic hardship; OR
- ✓ Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance: OR
- ✓ Lives in a hotel/motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals, OR
- ✓ Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room: OR
- ✓ Is a publicly funded institution or system of care.

2.1.2 Priority Population

Target population:

- FCS Supported Employment enrollee reporting income.
- FCS Supported Employment enrollees losing HEN due to other changes in eligibility.
- If there is insufficient priority population for which to expend all funds, remaining funds can then be used to support HEN recipients who are enrolled in FCS Supportive Housing services.

*The legislative intent is to focus on FCS SE enrollees to ensure we are not disincentivizing going back to work by providing a benefit planner to support understanding of how benefits are affected and allowing for HEN to be extended while transitioning back into workforce.

2.2 Benefit Planning

*****Glidepath Benefit Planning services are specifically for individuals enrolled in FCS Supported Employment losing their HEN benefit due to increased income or other eligibility requirements. The priority population receiving Glidepath Benefit Planning services are individuals enrolled in FCS Supported Employment in danger of losing HEN benefits due to increased income or failure to meet other eligibility requirements. Other individuals enrolled in FCS SE services in need of benefits planning will be considered to receive planning when funding permits.**

Benefits counseling, also called work incentives planning, is part of the employment decision-making process. IPS specialists ensure that people are offered comprehensive and personalized benefits planning, including information about how work may affect their disability and government benefits. The purpose is to help people make informed decisions about job starts and changes. In all situations people are encouraged to consider how working and developing a career may be the quickest way to self-sufficiency.

2.3 Referral

- FCS SH/ SE
- Benefit Planning
- Glidepath HEN rental assistance

3. Glidepath HEN rental assistance enhancement

3.1 maximum spending amount

- Participants will be offered up to 9 months of additional rental assistance (HEN). Amounts will be determined on a case-by-case basis and individual needs. This could be subject to change per county administering HEN.

4 Glidepath Support funds –

4.1 Eligibility for funds

- Glidepath Support Funds are available to individuals enrolled in FCS Supported Employment. Individuals receiving the Glidepath (HEN) benefit must be prioritized for Glidepath Support Funds.

4.2 Recipient agreement

- Agencies are encouraged to create a recipient agreement to ensure individuals accessing the Glidepath support funds agree to the terms stated below. These agreements should be signed and dated by the participant and placed in their file.

4.3 Duration of FCS SE Glidepath Support funds for an enrollee

- Individuals who are eligible for the SE Glidepath support funds can access if they are eligible for the benefit. The timeline for duration coincides with maintaining eligibility requirements.

4.4 Allowable Expenditures

Glidepath Support Funds can only be spent on work-related goods and services.

Allowable expenditures include:

- Interview clothing and shoes or clothing for employment. This includes uniforms and protective gear.
- Hand tools required for employment with verification from employer related to tools needed. Expenses over \$1500 will be reviewed and decisions will be made per individual call.
- Training/tutoring/ certifications/ apprenticeship.
- Laptop (up to \$600)
- Transportation funding (bus passes, Car registration, Car maintenance such as oil change, battery replacement, and tire repair.
- Documentation (driver's license, birth certificates, food handlers' card, etc.)
- Laundry (This does not include the purchase of a washer or dryer units)
- Court fines (This would have to be tied to a barrier to employment) Expenses over \$1500 will be reviewed and decisions will be made per individual call.
- Purchase/ file of forms for vacating, sealing, or expunging criminal record.
- Hygiene items
- Haircuts
- Background checks done by the job seeker to verify justice involvement history and credit checks costs.
- Textbooks

- Other as identified on a case-by-case basis. (If an item is not listed in the above, contact the contract manager on whether the expenditure is allowable.)

Items may be purchased with Glidepath Support Funds if and only if a provider checks ProviderOne to ensure an individual is:

- 1) actively receiving FCS-eligible Medicaid at the time of the proposed transaction, and
- 2) they are authorized by Amerigroup to receive FCS services on the date of the proposed spending of Glidepath Support Funds.

Once a person's Medicaid status is confirmed to be FCS-eligible and FCS services are confirmed authorized, then a provider must review the Glidepath Support Funds Reference Guide to identify if the good or service is covered by Glidepath support funds, and up to what amount may be covered. Payments using Glidepath Support funds must be made directly to a third party on behalf of the enrolled individual.

***Please Note: All expenditure should include a receipt and be filed away for auditing purposes.**

4.5 Number of times FCS SE Support funds can be accessed by an enrollee.

- If accessed more than twice, additional review will need to occur.

4.7 Requirement to spending FCS SE Support Funds

Active FCS-eligible Medicaid providers within the FCS Supported Employment network must confirm that Medicaid is active, and the individual is FCS-eligible before making a payment on behalf of the FCS Supported Employment enrollee. To do this, providers must access ProviderOne. If you are an FCS provider seeking access to ProviderOne, please review the [Foundational Community Supports ProviderOne Access Guide](#), which can be found on the Amerigroup [FCS provider page](#).

Upon aforementioned confirmation providers can spend up to the amount listed on the FCS SE support funds reference Guide on behalf of the enrollee.

5. Administrative requirements

5.1 Termination or denial of service policy

Providers must develop and implement a termination procedure and a funding denial policy that also align with the policy that are underlined in HEN guidelines. When crafting these policies, it is essential to remember the intent and design of flex funds, and the priority population we are serving within this proviso.

This policy must:

- 1) Describe the reasons an individual would be denied funding and/or terminated from program participation,

- 2) Describe the notification process, and
- 3) Ensure individuals are made aware of the grievance procedure.

5.2 Reporting Requirements

Staffing and Services Model

- Contractor will submit a staffing and service model within 60 days of contract execution.

Program Development Report

- Implementation
- Hiring
- Marketing
- referral development
- Partnership development

*Contractor will complete and submit the quarterly reporting document on program development and updates. Include information on: Staffing, training, partnerships, marketing, etc.

Project Summary

Contractor will also submit quarterly the reporting document providing a program summary. It will include the project activities for the period. Providers are encouraged to include a participant success story with a signed media release.

Report shall include:

- Staffing updates
- Training updates
- Expansion updates
- Building fidelity to the model.
- Success story

*Project Summary should include detailed measurable goals and strategies, timelines for goals, and indicate any additional progress for all aspects of work done under this contract.

Training attendance/ Certification

There is a mandate to attend training as in the provider contract.

Details include:

- Glidepath teams attend required HCA & Commerce trainings.
- Registration verification of attendance of required training is submitted post-training to HCA staff.
- Provide registration verification for Benefit Planning certification training and provide verification of certificate upon completion to HCA Program manager.

Glidepath Support Funds Expenditure Report

Agencies will be mandated to track and document flex fund expenditures and details.

Submit Glidepath flex fund expenditures Monthly Glidepath Participant Excel Log Report to HCA Program Manager via secure process or encrypted email. (are you saying that there is an approval process—that the report must have approval or that the method of transmission needs approval?)

Providers must provide details concerning purchases made on behalf of FCS Glidepath enrollees. Monthly expenditure reports are to be submitted on the FCS Glidepath flex fund spreadsheet, which includes the following fields (all fields with asterisks are required):

- **FCS supported Employment provider**
 - Agency name*
 - Agency contact name*
 - Agency contact email address*
 - Agency phone number*
- **FCS Supported Employment enrollee:**
 - Name*
 - Date of birth*
 - Age
 - ProviderOne ID No.*
 - RAC Code*
 - Gender
 - American Indian/Alaska Native tribal membership
 - Employment Status
 - Housing status
 - County*
 - Region*

- Support need
 - FCS Supported Employment authorization start date*
 - FCS Supported Employment authorization end date*
 - **Expenditure information:**
 - Date of expenditure*
 - FCS SE support funding category*
 - Description of expenditure*
 - Notes
- Quarterly report with results of the project activities for the period including a participant success story with a signed media release. Report shall include.
 - Any other project activities or events, including meetings with local Continuums of Care, Coordinated Entry Programs, Peer Bridgers, Employment providers and/ or housing and housing services providers meetings.

5.2.1 Data Quality

Providers are responsible for tracking all expenditures, If any portions of the report are left blank or contain errors, HCA will return the report with instructions for resolving errors.

See 5.2 Reporting Requirements

5.3 Program monitoring

HCA will monitor the program through a fidelity lens. This will include a review of client files to verify appropriate spending and file documentation. Client files should include signed and dated copies of the following:

- Participant Agreement
- Documentation related to purchases (i.e., receipts)

If file documentation is out of compliance and/or previously paid expenditures do not meet the requirements for an approved expenditure, the provider will be notified. The provider will work with HCA to clarify any discrepancy in spending and documentation. If there is a suspicion of fraud, waste or abuse, HCA reserves the right to take corrective action. Corrective action may include recoveries of funds deemed out of compliance or termination of the FCS Glidepath contract by HCA.

5.4 Fiscal administration

5.4.1 Budget caps

- Providers are permitted to spend money on specific items on behalf of FCS Supported Employment enrollees who are transitioning back into the work force. Costs for the following FCS SE support funding categories can be covered more than once in a 12-month period but certain expenditures will be capped.

6. Best Practices

Use of evidence-based practice

Foundational Community Supports Supported Employment programs are encouraged to follow the evidence-based practice of Individual Placement and Support.

Individual Placement and Support (IPS)

Individual Placement and Support (IPS) is an Evidence-based practice that research has shown is more effective than other types of employment programs for helping individuals who have behavioral health challenges succeed in obtaining and maintaining employment. When the legislature approved the Foundational Community Supports program, they mandated that evidence based and promising practices be used in service provision.