

Employment to support behavioral health recovery

Background

Studies show that chronic unemployment contributes to poor health and may result in death decades earlier than individuals who are typically employed. People who experience chronic unemployment are at risk for physical conditions such as high blood pressure, stroke, and heart disease, and mental health conditions as well as substance use disorders.

Nearly 1 in 5 adults in Washington State has a behavioral health diagnosis, and 1 in 25 has Severe Mental Illness. About 1 in 11 adults has a substance use disorder, and, on any given day, more than 50,000 people in the state receive treatment.

Cumulatively, nearly 2.5 million individuals diagnosed with a severe mental illness (SMI) were absent from the U.S. labor force due to disability between 2014–2020. Assuming access to appropriate mental health treatment and a feasible rate of recovery, this study finds that 11–42 percent of these individuals could have been employed between 2014–2020; this recovery would have increased work hours by approximately 207–793 million and economic output by \$15–\$57 billion.

The Substance Abuse and Mental Health Services Administration's (SAMHSA) states that about 70 percent of adults with severe mental illnesses want to work (Mueser et al., 2001; Roger et al., 2001).

Overview

Supported Employment services

Supported Employment is a successful approach that has been used in various types of organizations to include community mental health centers, rehabilitation programs, supportive housing programs, in geographically different settings (urban/rural/frontier), and in different labor markets. Individual Placement and Support is an evidence-based employment model shown to be effective in helping people achieve competitive

integrated employment, and is the model used in the state of Washington.

Employment improves outcomes in many other areas, including quality of life, self-esteem, management of mental health symptoms, and financial well-being.

Other improvements associated with program participation included a slight reduction in transitioning into homelessness, a moderate reduction in the arrest rate, ED visits and acute hospital use, and a significant increase in antipsychotic medication treatment compliance.

Individual placement and support

SE services guided by individual choice, participants maintain employment, reduce the need for higher-cost services, reduce incarceration and recidivism and change the trajectory of vulnerable youth, and young adults away from cycles of poverty.

Eligibility requirements

To qualify for these services, individuals must be eligible for Medicaid, have a medical/functional need, exhibit a demonstrated need through an assessment, and meet one of the following risk factors:

- Individuals eligible for the Housing and Essential Needs (HEN) or aged, Blind, Disabled (ABD) program.
- Those experiencing significant mental illness, substance use disorder, or co-occurring conditions.
- Long-term care recipients with complex needs.
- Vulnerable youth and young adults with behavioral health challenges.

Enrollment

There are currently 13,389 people enrolled in the FCS program across Washington state.

There are currently 230 contracted providers with 543 service locations across Washington State.

Glidepath to supported employment

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.

The Washington State Legislature appropriated funding to support the creation of a bridge period for individuals enrolled in Housing and Essential Needs (HEN) and Foundational Community Supports 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 are collaborating on this effort.

The Glidepath program is available in the form of rental assistance (through the Department of Commerce) and targeted benefits counseling (through the FCS program). Benefits counseling are available in each of the managed care service areas across the state.

Partners

Aging and Long Term Services Administration, Division of Vocational Rehabilitation, Developmental Disabilities Administration, WorkSource, Department of Labor, Cornell University, Rutgers University, Advocates for Human Potential, Technical Assistance Collaborative, Wellpoint, Research and Data Analysis, Oregon Health and Science University, internal HCA partners.

Additional resources

[Reports | Washington State Health Care Authority](#)

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